TSSA Safety Authority www.tssa.org

Technical 14th Floor - Centre Tower 3300 Bloor Street West Toronto Ontario M8X 2X4 Fax: 416.231.4903 Customer Service: 1.877.682.8772

Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act Propane Storage and Handling Regulation

This Level 1 RSMP applies to:

• a facility with a total propane storage capacity of 5,000 USWG or less; or

• a facility with a fixed propane storage capacity of exactly 5,000 USWG and no more than 500 USWG of portable propane storage capacity on site.

	Making	e to fully complete this form a false statement may resul under the <i>Technical Standal</i>	t in a fine or prosecution				
	nce Number 0076	500.5-4 may 6 may					
Check	applicable type of prop	pane operations.					
	✓ Cylinder	Motor Fill	Filling Plant Card/Keylock				
Subm	it along with this comple	eted application a Facility Site Pla	nn and a Map of the Surrounding Area.				
		SEC	TION A: GENERAL INF	ORMATION			
		oplies to TSSA for a r	eview for an RSMP under O	ntario's Technical Standard	ls and Safety Act,		
	Company Name			Ontario	Corporation No., if applicable		
A	Red Eagle Trailer P	ark Inc					
	Operator Name (if diffe	rent from above)					
	Telephone No.	Fax No.	, E-mail		ï		
	(613) 337-5587	(613) 337-5587	relax@campredeagle.ca				
В	Street No.	Street Name / 911 Number / A Wollaston Lake Road	ddress, if applicable				
	Town / City or Townsh	nip / County		Province	Postal Code		
	Coe Hill			Ontario	KOL 1PO		
	Mailing address if	different from above.			100		
C	Street No.	Street Name / 911 Number /	Address, if applicable		1		
0		PO Box 119					
	Town / City or Townshi	p / County		Province	Postal Code		
	Coe Hill			Ontario	K0L1P0		
In		tainer Refill Centre or Fil	ling Plant				
	Location of facility. Street No.	Street Name / 911 Number / F	address if applicable	Nearest Major Intersection			
D	289		address, ii applicable	Wollaston Lake Road and Beach	a Line		
		Wollaston Lake Rd					
	Town / City or Townshi	ip / County		Province	Postal Code		
	Coe Hill			Ontario	K0L1P0		
=	Name of Licence Holder		W-174-114E-1				
					ſ		
	Red Eagle Trailer Park Inc						
	Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT).						
	Chris Challinor PPO-3						
	Municipality (or municipalities if the facility or its hazard distance touches multiple borders)						
	Wollaston Township						
	Hours of operation.						

This document is valid until the next licence renewal date. You are required by law to notify TSSA of any change of information.

Declaration: I am aware that it is an offence to give false information in this document and
I hereby declare that the information I have given here is true and complete.

Print name	Signature	Date (dd-mm-yyyy)
Name of Licence Holder Red Eagle Trailer Park Inc.		The control of the co
Name of Senior Management person as defined in the	0/0/	11 -18/12/2011
Regulation holding the Record of Training Chris Challinor	The Me	X X 3/10/3011

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Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act Propane Storage and Handling Regulation

SECTION A: GENERAL INFORMATION (cont'd)						
ndicate the year the facility was established. Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. N/A						
Identify the psig rat	ting and serial number for ea	ch fixed propane storage tank on s	te.			
Tank1:	PSIG 250	Serial Number 6SF005599				
Tank2:						
Tank3:						
each type (fixed, p	ortable, and mobile) and the	capacity of each tank/vessel, on a				
Fixed: 1	000 USWG	Portable: N/A	Mobile: N/A			



Name of person completing this form (please print) Chris Challinor	Official Title Owner Operator		
Signature Chall	Telephone No. (613) 337-5587	Date (dd-mm-yyyy) 28/10/2011	

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Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act Propane Storage and Handling Regulation

SECTION A:	GENERAL	INFORMATION	(cont'd)
	Activity Info	ormation	

Name of Propane Supplier(s) Kelly's Fuel Street No. Street Name / 911 Number / Address, if applicable 174 Hastings St. PO Box #119 Postal Code Province Town / City or Township / Country KOL 1CO Ontairo Bancroft Contact Name Telephone No. Fax No. (613) 323-2294 (613) 323-1570 Roger Kellar E-mail rkellar@kellys.com Name of Propane Transporter. If same as above, please check box. Street Name / 911 Number / Address, if applicable Street No. Postal Code Town / City or Township / Country Province Contact Name Telephone No. Fax No. E-mail For Office Use - Party No. Capacity stored off-site, in USWG Off-site Cylinder and/or Mobile Storage N/A Street Name / 911 Number / Address, if applicable Street No. Postal Code Province Town / City or Township / Country Contact Name Telephone No. Fax No.

Note: Customer storage is not considered off-site storage.

Name of person completing this form (please print) Chris Challinor	Official Title Owner Operator	
Signature Chill	Telephone No. (613) 337-5587	Date (dd-mm-yyyy) 28/10/201/



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Fax: 416.231.4903 Customer Service: 1.877.682.8772 Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act Propane Storage and Handling Regulation

SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN

The licence holder will complete Section B in consultation with the local Fire Services.

Description of the maximum volume, types and storage location of other hazardous materials on site, if any. 3 420Lbs. Tanks at house for heating
All other buildings and sites may have Propane Cylinders (20,30 and 100 lbs.) for BBQ, cooking and heating purposes
up to a max of 200lbs. per site.
Description of fire and emergency equipment indicated on facility site map. 5 No Smoking Signs
1 Fire Extinguishers
Emergency stop button
2 No Ignition Signs
List of fire protection controls (e.g., fire detection systems, fire notification systems, alarm systems, automatic shut off devices, fusible links, etc.)
and describe their function, use and operation. Fusible link is on cable that opens main valve. In the event of a fire the fusible link will melt and the valve will close automatically. ISC - The internal safety control (ISC) valve will close if flow exceeds designed flow rate of 50 gpm.
150 - The internal safety control (100) valve will close it have exceeded addigned not valve of early
Maintenance and testing schedule for fire protection controls and devices. Kelly's Fuel yearly inspection
Daily inspection done by staff
Annual third party inspection on fire extinguishers

Name of person completing this form (please print) Chris Challinor	Official Title Owner Operator		
Signature Chy Chy L	Telephone No. (613) 337-5587	Date (dd-mm-yyyy) 28/10/20//	



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Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act

Propane Storage and Handling Regulation

SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)

1. Contacts for Emergency Response

1. Facility Contact Personnel - I	Key Contact		5. Facility 24-Hour Contact	t Person	J
Name Chris Challinor		r Office Use - Party No.	Name Chris Challinor		For Office Use - Party No.
Official Title Owner Operator			Official Title Owner Operator		
Telephone No. (613) 337-5587	Fax No. (613) 337-558	37	Cell No. (613) 334-2744	Fax No. (613) 337-558	7
E-mail relax@campredeagle.ca			E-mail relax@campredeagle.ca		
Role and responsibilities in emerge	ency		Role and responsibilities in e	emergency	
First Responder - See Schedule 1			First Responder - See Schedu	ule 1	
2. Facility Contact Personnel -	Alternate Conta	act	6. Name of Facility Manage	er	
Name Karen Challinor	Fo	or Office Use - Party No.	Name Chris Challinor		For Office Use - Party No.
Official Title			Official Title Owner Operator		
Owner Operator Telephone No.	Fax No.		Telephone No.	Fax No.	
(613) 334-2995	(613) 337-55	87	(613) 337-5587 E-mail	(613) 337-558	7
E-mail relax@campredeagle.ca			relax@campredeagle.ca		
Role and responsibilities in emerge	ency		Role and responsibilities in e	emergency	
Alternate First Responder - See Schedule 1		First Responder - See Schedule 1			
3. Local Fire Services - Key Co	ntact		7. Propane Supplier Key C	ontact Person	
3. Local File Services - Rey So	illact)			
Name	The second secon	or Office Use - Party No.	Name Kevin Dupuis		For Office Use - Party No.
Name Sarah McIntee Official Title	The second secon	or Office Use - Party No.	Name	E-mail kdupuis@kell	**************************************
Name Sarah McIntee Official Title Fire Chief Telephone No.	Fo	or Office Use - Party No.	Name Kevin Dupuis Official Title		
Name Sarah McIntee Official Title Fire Chief	E-mail Fax No.	or Office Use - Party No.	Name Kevin Dupuis Official Title General Manager Telephone No.	kdupuis@kell Fax No. (705) 745-362 emergency	ysfuel.com
Name Sarah McIntee Official Title Fire Chief Telephone No. (613) 337-8569 Role and responsibilities in emerge	E-mail Fax No. ency	or Office Use - Party No.	Name Kevin Dupuis Official Title General Manager Telephone No. (705) 745-4629 Role and responsibilities in 6	kdupuis@kell Fax No. (705) 745-362 emergency ERAP into place if needed	ysfuel.com
Name Sarah McIntee Official Title Fire Chief Telephone No. (613) 337-8569 Role and responsibilities in emerg Coordinate Emergency Response Fire Services Address	E-mail Fax No. ency	or Office Use - Party No.	Name Kevin Dupuis Official Title General Manager Telephone No. (705) 745-4629 Role and responsibilities in e Provide site information and put	kdupuis@kell Fax No. (705) 745-362 emergency ERAP into place if needed	ysfuel.com
Name Sarah McIntee Official Title Fire Chief Telephone No. (613) 337-8569 Role and responsibilities in emergicoordinate Emergency Response Fire Services Address 2283 County Road 620 Coe Hill Ontar 4. Local Fire Services - Alternat Name	E-mail Fax No. ency rio K0L 1P0 te Contact	or Office Use - Party No.	Name Kevin Dupuis Official Title General Manager Telephone No. (705) 745-4629 Role and responsibilities in e Provide site information and put Propane Supplier Address 2085 Whittington Drive Peterb	kdupuis@kell Fax No. (705) 745-362 emergency ERAP into place if needed	ysfuel.com
Name Sarah McIntee Official Title Fire Chief Telephone No. (613) 337-8569 Role and responsibilities in emergicoordinate Emergency Response Fire Services Address 2283 County Road 620 Coe Hill Ontar 4. Local Fire Services - Alternat Name Dave Jackson Official Title	E-mail Fax No. ency rio K0L 1P0 te Contact		Name Kevin Dupuis Official Title General Manager Telephone No. (705) 745-4629 Role and responsibilities in e Provide site information and put Propane Supplier Address 2085 Whittington Drive Peterb 8. Municipal Contact Name	kdupuis@kell Fax No. (705) 745-362 emergency ERAP into place if needed	ysfuel.com
Name Sarah McIntee Official Title Fire Chief Telephone No. (613) 337-8569 Role and responsibilities in emergicoordinate Emergency Response Fire Services Address 2283 County Road 620 Coe Hill Ontar 4. Local Fire Services - Alternat Name Dave Jackson Official Title Deputy Chief Telephone No.	E-mail Fax No. ency rio K0L 1P0 te Contact		Name Kevin Dupuis Official Title General Manager Telephone No. (705) 745-4629 Role and responsibilities in e Provide site information and put Propane Supplier Address 2085 Whittington Drive Peterb 8. Municipal Contact Name Christina FitzSimons Official Title	kdupuis@kell Fax No. (705) 745-362 emergency ERAP into place if needed	ysfuel.com 2 d For Office Use - Party No.
Name Sarah McIntee Official Title Fire Chief Telephone No. (613) 337-8569 Role and responsibilities in emergicoordinate Emergency Response Fire Services Address 2283 County Road 620 Coe Hill Ontar 4. Local Fire Services - Alternat Name Dave Jackson Official Title Deputy Chief	E-mail Fax No. ency rio KOL 1P0 te Contact E-mail Fax No. ency		Name Kevin Dupuis Official Title General Manager Telephone No. (705) 745-4629 Role and responsibilities in e Provide site information and put Propane Supplier Address 2085 Whittington Drive Peterb 8. Municipal Contact Name Christina FitzSimons Official Title CAO Telephone No.	kdupuis@kell Fax No. (705) 745-362 emergency ERAP into place if needed	ysfuel.com 2 d For Office Use - Party No
Name Sarah McIntee Official Title Fire Chief Telephone No. (613) 337-8569 Role and responsibilities in emerg. Coordinate Emergency Response Fire Services Address 2283 County Road 620 Coe Hill Ontar 4. Local Fire Services - Alternat Name Dave Jackson Official Title Deputy Chief Telephone No. (613) 337-5747 Role and responsibilities in emerg.	E-mail Fax No. ency rio KOL 1P0 te Contact E-mail Fax No. ency		Name Kevin Dupuis Official Title General Manager Telephone No. (705) 745-4629 Role and responsibilities in e Provide site information and put Propane Supplier Address 2085 Whittington Drive Petert 8. Municipal Contact Name Christina FitzSimons Official Title CAO Telephone No. (613) 337-5731 E-mail	kdupuis@kell Fax No. (705) 745-362 emergency ERAP into place if needed corough Ontario K9J 6X4	ysfuel.com 2 d For Office Use - Party No

Name of person completing this form (please print)	Official Title		
Chris Challinor	Owner Operator		
Signature	Telephone No.	Date (dd-mm-yyyy)	
Oh the Ola	(613) 337-5587	28/10/2011	



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Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act Propane Storage and Handling Regulation

SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)

2. Additional Safety Measures

Describe any other measures in place at the facility that exceed the minimum Code and Standards requirements. Video Surveillance
CO Detector
Fire Alarm all linked with Alarm Force
Motion Lights
E-Stop
Directions for evacuation to emergency muster area will be delivered by blow horn to all campers within the park.

Name of person completing this form (please print) Chris Challinor	Official Title Owner Operator		
Signature Challer	Telephone No. (613) 337-5587	Date (dd-mm-yyyy) 28/10/2011	



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Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act

Propane Storage and Handling Regulation

SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)

3. Record of Emergency Training Provided - For most recent 12-month period.

Training on Emergency Res	sponse Plan and Procedures provided to facility key contacts.
Training Date (dd-mm-yyyy)	Print Name of Training Provider: Beatty Petroleum Consulting Inc.
23-09-2011	Print Name of Instructor: Lisa Bremer
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training on the facility's Em	ergency Management Procedures provided to staff.
Training Date (dd-mm-yyyy)	Print Name of Training Provider: Beatty Petroleum Consulting Inc.
23-09-2011	Print Name of Instructor: Lisa Bremer
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
On-site specific training pro	ovided to certificate holders / persons with Records of Training.
Training Date (dd-mm-yyyy)	Print Name of Training Provider: Beatty Petroleum Consulting Inc.
23-09-2011	Print Name of Instructor: Lisa Bremer
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

Name of person completing this form (please print)	Official Title	
Chris Challinor	Owner Operator	
Signature Claud	Telephone No. (613) 337-5587	Date (dd-mm-yyyy) 28/10/2011



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SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)

4. Emergency Training Plan for Coming Year

Training on Emergency Re	sponse Plan and Procedures provided to facility key contacts.
Target Date (dd-mm-yyyy)	Print Name of Training Provider: Red Eagle Trailer Park Inc
01-05-2012	Print Name of Instructor: Karen Challinor
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training on the facility's En	nergency Management Procedures provided to staff.
Target Date (dd-mm-yyyy)	Print Name of Training Provider: Red Eagle Trailer Park Inc
01-05-2012	Print Name of Instructor: Karen Challinor
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
On-site specific training pr	ovided to certificate holders / persons with Records of Training.
Target Date (dd-mm-yyyy)	Print Name of Training Provider: Red Eagle Trailer Park Inc
01-05-2012	Print Name of Instructor: Karen Challinor
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

Declaration: I am aware that it is an offence to give false information in this document and I hereby declare that the information I have given here is true and complete.

Name of person completing this form (please print)	Official Title	
Chris Challinor	Owner Operator	
Signature	Telephone No.	Date (dd-mm-yyyy)
Ch. Ch. 1	(613) 337-5587	28/10/2011

FS 09195 (05/11) Page 8 of 15



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Fax: 416.231.4903 Customer Service: 1.877.682.8772 Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act Propane Storage and Handling Regulation

SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)

The licence holder will complete Section B in consultation with the local Fire Services.

5. Emergency Response Communications Plan

Warnings and Actions
Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate). See Schedule 1
Describe what action is to be taken and by whom when a warning is issued (including details of a meeting place in a safe identified area and
activating the evacuation plan, if necessary).
See Schedule 1
Communication with Emergency Response Authorities
Describe when and how the licence holder will give early warning to emergency response authorities (including a process to ensure that a call is
placed to 911).
See Schedule 1
Describe provisions for fire department entry when there are no operations or staffing at the propane site.
Trucks can drive through lift gate
Bolt cutters will be used to cut the padlock
Describe how the licence holder will ensure continual flow of updated information to authorities. See Schedule 1
It is taken the facility licinary person to reappoint to the site.
How long will it take the facility liaison person to respond to the site. Chris Challinor lives on site.
Karen Challinor lives on site.

Name of person completing this form (please print) Chris Challinor	Official Title Owner Operator	
Signature Ch. Ch.	Telephone No. (613) 337-5587	Date (dd-mm-yyyy) 28/(3/301/



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Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act Propane Storage and Handling Regulation

SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)

The licence holder will complete Section B in consultation with the local Fire Services. 6. Building and Site Security and Procedures Yes No Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)? 2. Is there adequate night lighting at the site? Are procedures in place that ensure access routes, aisles, storage area, filling areas 3 and the grounds are kept clear from unwanted materials? Are there procedures that capture and record the daily inspection of hoses and inspection requirements for filling systems and mechanical devices used in the transfer of propane? Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders? Are weighing systems validated for accuracy? Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)? Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves) Is the schedule of maintenance and testing activities retained on site? 7. Water Supply The propane licence holder should work with the local fire department to determine water supply capabilities that are available based on the propane facility's location. No Yes Is a pressurized water system available at the propane facility site? Can the municipal fire department pump 375 GPM (1420 LPM) of water at this 2. location? What is the unobstructed distance to the closest water supply that could be used for 67m firefighting activities? (distance in metres only) What is the unobstructed distance to the closest approved water supply with year 67m round access if there are no hydrants? (distance in metres only)

Name of person completing this form (please print) Chris Challinor	Official Title Owner Operator	
Signature Chilly	Telephone No. (613) 337-5587	Date (dd-mm-yyyy) 28/13/2011



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Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act Propane Storage and Handling Regulation

SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)

The licence holder will complete Section B in consultation with the local Fire Services.

8. Licence holder and local Fire Services Review			
To be completed by the Local Fire Services Has the local fire service had an opportunity to review the Emergency Re If not, please explain (e.g., no fire services).	-	ves No	
Fire services comments, if any: See attached fire commen	ts		
To be completed by the Licence Holder In response to the above comments, the following action(s) is required:			
The licence holder will respond to the Local Fire Services comments by	DY:(dd-mm-	уууу)	
LOCAL FIRE	SERVICES		
The undersigned has reviewed Section B of the Risk and Safety Ma	anagement Plan Fire Services.		
Print name Local Fire Services Name Sovah MCIntee	Signature Sarah MMD	Date (dd-mm-yyyy) 28-10-201/	

Name of person completing this form (please print) Chris Challinor	Official Title Owner Operator	
Signature Challe	Telephone No. (613) 337-5587	Date (dd-mm-yyyy) 28/10/2011



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SECTION C: SUBMISSIONS

Applicant must include a Facility Site Plan and Map of Surrounding Area

Facility Site Plan.

The licence holder will submit a copy of the original facility site plan updated with the following information:

- 1. The storage location of fixed, portable, and mobile vessels.
- The maximum volume, types and storage location of hazardous materials.
- 3. Location of permanent structures on site.
- Access and egress points and location of barriers.
- 5. Location of fire and emergency equipment (e.g., sprinkler systems, extinguishers, suppression systems) on site and location of fire hydrant or water supply where available.
- Location of emergency shut off/shut down switches/valves.

Map of Surrounding Area.

The licence holder will submit a scaled aerial map of the surrounding area showing the following information:

- 7. The capacity and placement of the single largest propane storage vessel, including its setback from the front, rear and side property lines.
- GPS co-ordinates of the single largest vessel.
- Visual indication of the single largest fixed vessel and a circle made using the distance in Table 1 as the radius from the single largest fixed vessel.
- 10. Clear indication of the municipality or municipalities present within the circle.
- 11. Visual indication of property line information.
- The location and name of roads within or abutting the site.
- 13. Key note to the drawing indicating the facility's municipal address, municipal lot number(s) and concession lines as applicable, and the date the map was prepared.
- 14. Address and contact information for each municipality (municipal clerk or secretary-treasurers of planning board). (Refer to page 5.)
- 15. Complete "Required Mapping Information from Updated Site Plan" in table below .

Required Mapping Information from Updated Site Plan

Date Map Prepared (dd-r 27-09-2011	nm-yyyy)	Capacity of single largest propane 1000USWG	storagev	vessel (USWG)
Tank setback coordinates. Front: Rear:		the map. Right side property line: Left side property line:	120' 1030'	36.57 m 313.94 m
GPS coordinates of single	largest vessel: 44°5	51`03.47"N 77°49`37.05"W		

I hereby declare that the informati	ion i nave given here is true and complet	.01
Name of person completing this form (please print)	Official Title Owner Operator	
Chris Challinor Signature	Telephone No. (613) 337-5587	Date (dd-mm-yyyy)

SECTION C: SUBMISSIONS (cont'd)

Applicant must include a Facility Site Plan and Map of Surrounding Area

Table 1: Distance Table

Water Capacity (litres)	Nominal Water Capacity (USWG)	Distance to 1 psi overpressure (m)
1,890	500	155
3,780	1,000	195
4,920	1,300	213
6,620	1,750	235
7,130	1,885	241
7,560	2,000	246
18,900	5,000	333

Formula:

 $D=16.94 \times (1.524 \times C)^{1/3}$

D = Distance to overpressure of 1 psi (meters)

C= Tank Total Capacity in USWG

Parameters:

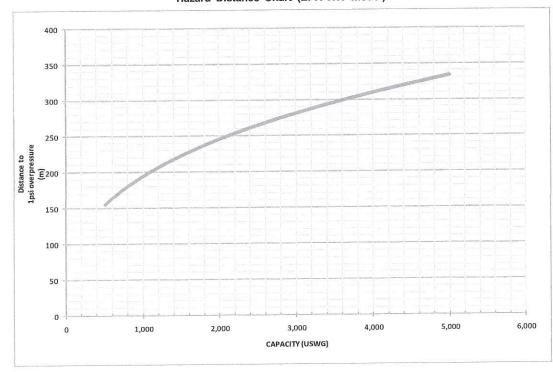
Density of Propane is 0.5033 kg per litre @ 15 C

Assume all vessels are 80% full

1 gallon [US, liquid] = 0.003785411784 cubic meter

1 cubic metre = 264.17 USWG

Hazard Distance Chart (EPA-TNT model)





13 Jan 12 05:05p

Technical Standards and Safety Authority Fax: 416.231.4903 www.tssa.org

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Level 1 Risk and Safety Management Plan (RSMP) **Technical Standards and Safety Act** Propane Storage and Handling Regulation

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SECTION C: SUBMISSIONS (cont'd)

Applicant must include a Facility Site Plan and Map of Surrounding Area

As an accompaniment to the Map of Surrounding Area, provide the following information about buildings and features present within the circle in Table 2. Table 2: Buildings and Features

Entransion when the Committee and the Committee	lings and Features Present within the Circle on the Map of the Surrounding Area AND Name and Address of Closest Building or Feature		" Number of Buildings and Features (mark with an "X")			Distance from Tank to Closest Building or
AND Name and Address of Clos	sest Building or reature	0	1	2-10	11+	Feature
Industrial buildings or parks or golf courses Name: N/A Address: Province		×				m
Residential building units specifically permanent single family de	wellings, condominiums, and apartments.			7		m
Commercial building units specifically retail, restaurants, entertain Name: N/A Address: Province		х				m
Commercial building units – continuous occupancy specifically ho Name: N/A Address: City: Province	В.	х				0 m
Sensitive institutions specifically hospitals, schools and day cares institutions, and prisons. Name: N/A Address: Province		×		0.000		m
Emergency responders specifically fire stations, ambulance station Name: Name: N/A Address: Province		х		n		0m

Official Title CONSULTANT	
Telephone No.	Date (dd-mm-yyyy)
519-848-5800	13-01-2012.

^{*} For multi-unit buildings, count each unit as "1".



 Technical
 14th Floor - Centre Tower

 Standards and
 3300 Bloor Street West

 Toronto Ontario M8X 2X4
 Fax: 416.231.4903

 www.tssa.org
 Customer Service: 1.877.682.8772

Level 1 Risk and Safety Management Plan (RSMP)

Technical Standards and Safety Act

Propane Storage and Handling Regulation

WORKSHEET

Portable Storage Additional Information Worksheet

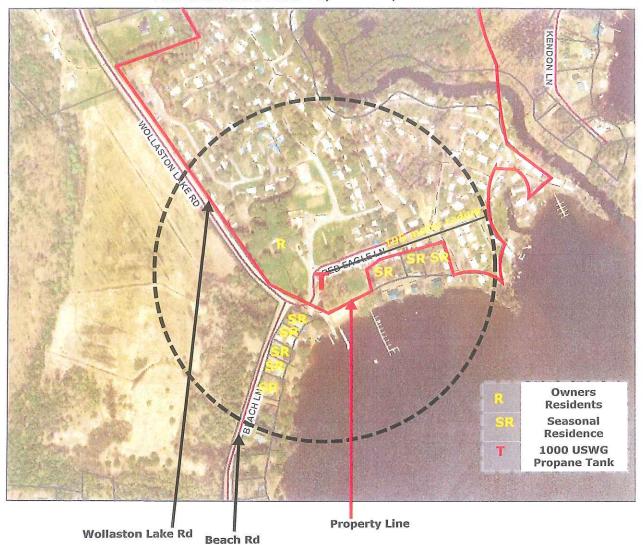
Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9		
# 100	29.5		
# 40	11.75		
# 33.3	9.62		
# 30	8.8		
# 20	5.8		
# 10	2.9		ll l
# 5	1.5		

Tanks Stored On-site Not Connected for Use

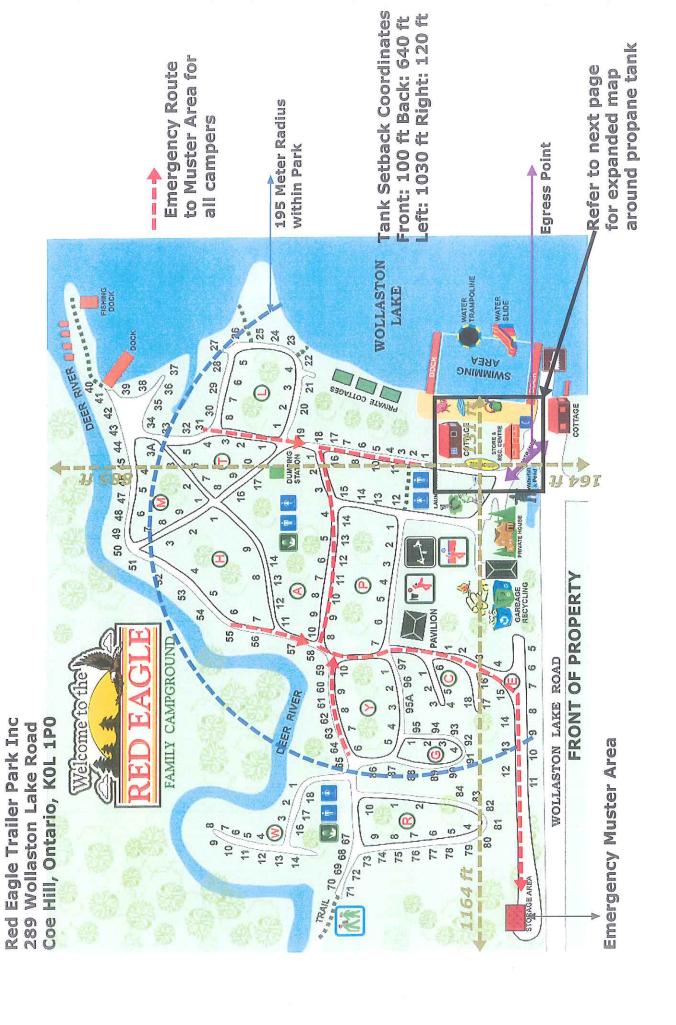
Quantity	Total Volume in USWG
	Quantity

Total Cylinder Capacity	None
Total Tank Capacity	None
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	None

195 Meter Radius Map RED EAGLE TRAILER PARK INC. 289 Wollaston Lake Rd, Coe Hill, Ontario



Location	289 Wollaston Lake Road, Coe Hill, Ontario K0L 1P0
Prepared	27 Sept 2011
Largest Tank	1000 USWG Horizontal Propane Tank
Tank Set Backs	Front = 100' / Back = 640' Left = 1030' / Right = 120'
Radius	195 Metre Radius
GPS Coordinates	44°51`03.47"N 77°49`37.04`"W
Municipality 1	Wollaston Township
CAO	Christine FitzSimons
Address	90 Wollaston Lake Road, Box 99, Coe Hill, Ontario, K0L 1P0
Phone Fax	613-337-5731 613-337-5789
Municipality 2	Hastings County
CAO	Jim Pine
Address	235 Annacle St., P.O. Box 4400, Belleville, Ontario K8N 3A9
Phone Fax	613-966-1319 ext 3204 613-966-2574



Red Eagle Trailer Park Inc. **EXPANDED MAP**

COTTAGE



Cylinder Fill house



Electrical Panel Shut Off

Fire Extinguisher



No Smoking Light Pole



Bollards



1000 USWG Propane Tank E-Stop Button

LAKE

OFFICE

米 VTORE

BEACH AREA



Restricted Gated Entrance

289 Wollaston Lake Road Coe Hill Ontario KOL 1P0

Gravel Driveway

Tank Setback Coordinates

Front: 100' Rear: 640' Left: 1030' Right: 120'



WOLLASTON LAKE ROAD