



Technical Standards and Safety Authority  
www.tssa.org

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

Failure to fully complete this form may result in rejection.  
Making a false statement may result in a fine or prosecution under the *Technical Standards and Safety Act*

Licence Number: 000076642233

Check applicable type of propane operations:

Cylinder     Motor Fill     Filling Plant     Card/Keylock

Submit along with this completed application a Facility Site Plan and a Map of the Surrounding Area



**SECTION A: GENERAL INFORMATION**

The Undersigned applies to TSSA for a review for an RSMP under Ontario's *Technical Standards and Safety Act*, Propane Storage and Handling Regulation.

**A** Company Name: Canadian Tire Corporation Ltd. Ontario Corporation No., if applicable: \_\_\_\_\_

Operator Name (if different from above): Cathy Joss - Agent

Telephone No: (416) 544-7608    Fax No: (416) 544-6163    E-mail: john.lastoria@cantire.com

**B** Street No: 1280    Street Name / 911 Number / Address, if applicable: Yonge Street, 17th Floor

Town / City or Township / County: Toronto    Province: Ontario    Postal Code: M4P 2V8

Mailing address if different from above:

**C** Street No: \_\_\_\_\_    Street Name / 911 Number / Address, if applicable: PO Box 770, Station K (Account #34421)

Town / City or Township / County: Toronto    Province: Ontario    Postal Code: M4P 3J5

**Information on Container Refill Centre or Filling Plant**

**D** Location of facility:

Street No: 377    Street Name / 911 Number / Address, if applicable: Kent Street West    Nearest Major Intersection: St. Joseph Road and Kent Street

Town / City or Township / County: Lindsay    Province: Ontario    Postal Code: K9V 2Z7

Name of Licence Holder: John Lastoria on behalf of Canadian Tire Corporation

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT): Glenn Butt    ROT type: 100-08

Municipality (or municipalities if the facility or its hazard distance touches multiple borders): Kawartha Lakes

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.

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Name of Licence Holder	John Lastoria	Signature	Date (dd-mm-yyyy)
Name of Senior Management person as defined in the Regulation holding the Record of Training	Glenn Butt		12-10-2011



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**SECTION A: GENERAL INFORMATION (cont'd)**

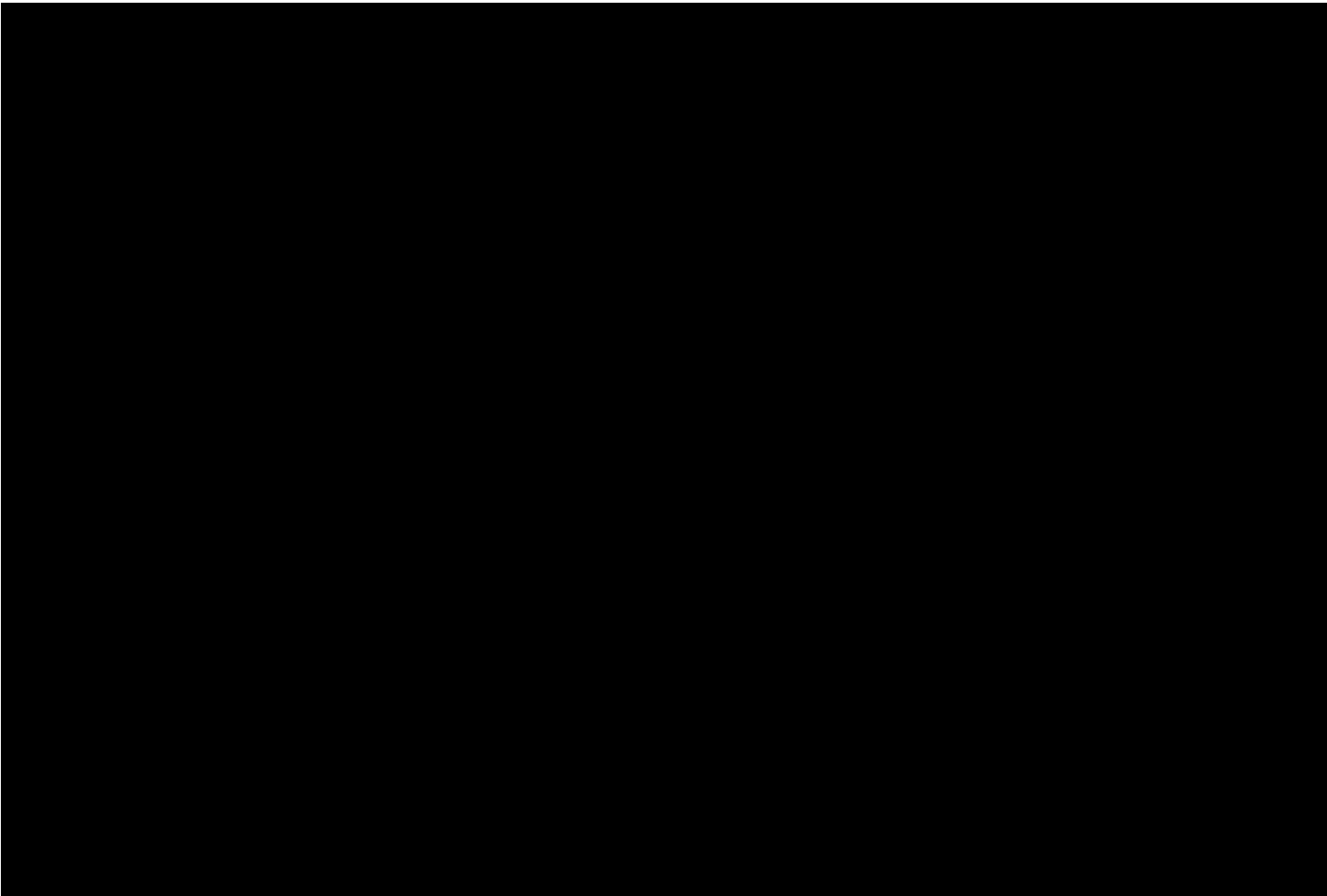
Indicate the year the facility was established.      Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment.  
2005      None since open

Identify the psig rating and serial number for each fixed propane storage tank on site.

	PSIG	Serial Number
Tank 1:	250 PSIG	429-04
Tank 2:	_____	_____
Tank 3:	_____	_____

Enter capacity of propane in USWG, fixed, portable, and mobile, and provide detailed inventory that includes the number of tank/vessel for each type (fixed, portable, and mobile) and the capacity of each tank/vessel, on a separate document.

Fixed: 2000 USWG      Portable: 278.4 USWG      Mobile: 0



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Name of person completing this form (please print)	Official Title	
John Lastoria	E H & S Specialist	
Signature	Telephone No.	Date (dd-mm-yyyy)
	416-544-7608	12-10-2011



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**SECTION A: GENERAL INFORMATION (cont'd)**

Activity Information

Name of Propane Supplier(s) Superior Propane - Ontario Regional Operations Centre		For Office Use - Party No.	
Street No. 251	Street Name / 911 Number / Address, if applicable Woodlawn Road West, Unit 217		
Town / City or Township / Country Guelph		Province Ontario	Postal Code N1H 8J1
Telephone No. 1-877-873-7467	Fax No. 519-836-7766	Contact Name Mike Mullins	
E-mail mullinsm@superiorpropane.com			

Name of Propane Transporter. If same as above, please check box. <input type="checkbox"/>		For Office Use - Party No.	
Superior Propane - Fenelon Falls			
Street No. 7	Street Name / 911 Number / Address, if applicable Superior Road		
Town / City or Township / Country Fenelon Falls		Province Ontario	Postal Code K0M 1N0
Telephone No. (705) 927-2234	Fax No. N/A	Contact Name Mark Wakeford	
E-mail wakeform@superiorpropane.com			

Off-site Cylinder and/or Mobile Storage None	Capacity stored off-site, in USWG	For Office Use - Party No.	
Street No. / Street Name / 911 Number / Address, if applicable			
Town / City or Township / Country		Province	Postal Code
Telephone No.	Fax No.	Contact Name	

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

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**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.

Gasoline - The site has underground tanks with a total capacity of 90,800 litres. They are located to the south side of the gasoline dispensers.

An MSDS for regular unleaded gasoline is provided herein. MSDS for premium gasoline and diesel are similar and not included.

Description of fire and emergency equipment indicated on facility site map.

1. Fires Extinguisher Locations: a) Inside gas bar building b) On columns by gasoline dispensers c) At the bulk propane tank filling station
2. Emergency stop push button - by propane tank. This shuts down the pump and closes a solenoid valve upstream of hoses.
3. Power supply breaker inside the gas bar building. This cuts all power to the propane system - shuts down pump; closes solenoid valve.

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.

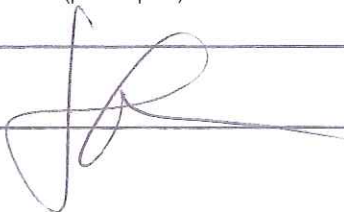
1. Emergency stop push button. This shuts down the pump and closes a solenoid valve upstream of hoses.
2. Fusible link on ISC valve - isolation valve between the tank and the downstream propane dispensing equipment.
3. Power supply breaker inside the gas bar building. This cuts all power to the propane system - shuts down pump; closes solenoid valve
4. ISC valve interlock bar (interlocked with cabinet door) - ISC valve closes when door is closed.

Maintenance and testing schedule for fire protection controls and devices.

Maintenance and testing is undertaken by Superior Propane according to Superior Propane's Maintenance Standard. Schedule for key equipment is:

1. Pumps (Pump every 3 months; Pump Motor: check belts monthly; grease motor every 6 months); 2. ISC Valves (test for closure every 6 months)
3. Fusible links - inspected every 6 months; 4. Storage tank Relief Valves - inspect every 2 years; replacement schedule as per provincial regulations.
5. Fire extinguishers maintained by Canadian Tire in accordance with Ontario fire regulations. Maintenance records are kept for 5 years.

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

1. Contacts for Emergency Response

<b>1. Facility Contact Personnel - Key Contact</b>		<b>5. Facility 24-Hour Contact Person</b>	
Name Cathy Joss	For Office Use - Party No.	Name Cathy Joss	For Office Use - Party No.
Official Title Agent		Official Title Agent	
Telephone No. (705) 324-4595	Fax No. (705) 324-4596	Cell No. (705) 328-5541	Fax No. (705) 324-4596
E-mail 1743.lindsay@ctcpagent.ca		E-mail 1743.lindsay@ctcpagent.ca	
Role and responsibilities in emergency Coordinate site response		Role and responsibilities in emergency Coordinate site response	
<b>2. Facility Contact Personnel - Alternate Contact</b>		<b>6. Name of Facility Manager</b>	
Name Caroline Fredette	For Office Use - Party No.	Name Cathy Joss	For Office Use - Party No.
Official Title Regional Business Manager		Official Title Agent	
Telephone No. (416) 201-1709	Fax No. (416) 536-8893	Telephone No. (705) 328-5541	Fax No. (705) 324-4596
E-mail caroline.fredette@cantire.com		E-mail 1743.lindsay@ctcpagent.ca	
Role and responsibilities in emergency Coordinate site response if agent is unavailable		Role and responsibilities in emergency Coordinate site response	
<b>3. Local Fire Services - Key Contact</b>		<b>7. Propane Supplier Key Contact Person</b>	
Name Mark Pankhurst	For Office Use - Party No.	Name Superior Propane Hotline	For Office Use - Party No.
Official Title Fire Chief, City of Kawartha Lakes	E-mail mpankhurst@city.kawarthalakes.o	Official Title	E-mail
Telephone No. 705-324-5731 Ext. 520	Fax No. Fax 705-878-3463	Telephone No. 1-877-873-7467	Fax No.
Role and responsibilities in emergency Coordinate/advise on Fire Service response and liaise with police and CTC contact.		Role and responsibilities in emergency Identify and dispatch Superior Propane and or LPERGC emergency response personnel as required.	
Fire Services Address City of Kawartha Lakes Fire Services, P.O. Box 9000, Lindsay, ON K9V 5R8		Propane Supplier Address 251 Woodlawn Road West, Unit 217, Guelph, ON	
<b>4. Local Fire Services - Alternate Contact</b>		<b>8. Municipal Contact</b>	
Name Mike Hannon	For Office Use - Party No.	Name Diane McFarlane	For Office Use - Party No.
Official Title Fire Prevention Officer	E-mail mhannon@city.kawarthalakes.on.c	Official Title Land Management Co-ordinator	
Telephone No. 705-324-5731 Ext. 545	Fax No. Fax 705-878-3463	Telephone No. 705-324-9411 x 1261	Fax No. 705-340-5961
Role and responsibilities in emergency Alternate - Coordinate/advise on Fire Service response and liaise with police and CTC contact.		E-mail dmcfarlane@city.kawarthalakes.on.ca	
Fire Services Address City of Kawartha Lakes, P.O. Box 9000, Lindsay, ON K9V 5R8		Municipality Name and Address City of Kawartha Lakes 26 Francis St., P.O. Box 9000 Lindsay, ON K9V 5R8	

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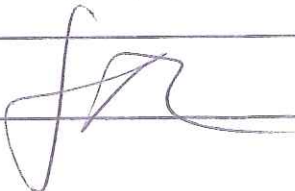
**SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)**

2. Additional Safety Measures

Describe any other measures in place at the facility that exceed the minimum Code and Standards requirements.  
Emergency Shut Off push button to shut down pump and close solenoid valve upstream of dispensing hoses.

[Lined area for describing additional safety measures]

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

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

Training on Emergency Response Plan and Procedures provided to facility key contacts.

Training Date (dd-mm-yyyy) N/A	Print Name of Training Provider: None	Please Note - the industry did not have a course
	Print Name of Instructor:	in place last year. They are currently developing a
Training Date (dd-mm-yyyy)	Print Name of Training Provider:	a training course that is scheduled to be available
	Print Name of Instructor:	in the fourth quarter of this year
Training Date (dd-mm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	

Training on the facility's Emergency Management Procedures provided to staff.

Training Date (dd-mm-yyyy)	Print Name of Training Provider: None
	Print Name of Instructor:
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 provided to certificate holders / persons with Records of Training.

Training Date (dd-mm-yyyy) TBA as required	Print Name of Training Provider: Superior Propane, FSN Training or Other	Please Note - a ROT is valid for 3 years
	Print Name of Instructor: to be arranged as required	
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:	

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

4. Emergency Training Plan for Coming Year

Training on Emergency Response Plan and Procedures provided to facility key contacts.

Target Date (dd-mm-yyyy) Q4 2011	Print Name of Training Provider: Superior Propane, PTI, FSN, or Alternate Print Name of Instructor: to be arranged	Please Note - the course content is currently being developed and should be available for teaching in the fourth quarter of this year
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 Emergency Management Procedures provided to staff.

Target Date (dd-mm-yyyy) Q4 2011	Print Name of Training Provider: Key site contact to train staff Print Name of Instructor: to be arranged
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 provided to certificate holders / persons with Records of Training.

Target Date (dd-mm-yyyy) 00-06-2011	Print Name of Training Provider: FSN Training trained Cathy Joss Print Name of Instructor: unknown
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:

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**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).

The agent/operator or alternate (both ROT staff) will contact emergency services by calling 911 and will provide warnings as outlined in the attached Propane Emergency Response Procedures placard (to be posted at site and be part of employee training). If it is safe to do so, this could involve advising neighbors to evacuate. The owner/operator may also contact Superior Propane via the emergency number identified in the ERP.

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).

The agent/operator or alternate should first follow the actions in the ERP's provided herein. Staged evacuation, if the release of propane cannot be stopped by cutting electrical power, may be required. The initial muster location will be in front of the Zellers sign, at least 90m from the site and away from a dispersing propane cloud. Subsequent evacuation instructions potentially up to the Hazard Distance to be provided by municipal emergency responders. Residences and businesses beyond the site boundary to be notified by municipal emergency responders.

**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).

When the system is operational, site staff will be on duty and be in the propane tank area. The Key Contact or alternate will be implementing ER actions and notifications, including notifying emergency responders. Calling 911 will occur immediately after any attempts to shut down the system.

When the system is not in operation, the ISC valve (main isolation valve) is closed, and the propane system is unattended, but is shutdown.

Any accidents involving the propane tank during such times will require the intervention of random, nearby individuals.

Describe provisions for fire department entry when there are no operations or staffing at the propane site.

The propane tank system is located in a wide open area that is easily accessible from Kent Street (Hwy 7)

The access routes for fire trucks are identified in the attached site plan.

Describe how the licence holder will ensure continual flow of updated information to authorities.

The critical information required from the license holder is information on how to shut the system down and the fill level in the tank (if known).

This will be provided by agent - Cathy Joss, verbally if on-site, or by cell phone during off hours.

Fill level is relevant from a time-to-BLEVE perspective (a near empty tank will BLEVE sooner than a full tank if there is fire impingement on the tank).

How long will it take the facility liaison person to respond to the site.

It would take the 24 hour contact, Cathy Joss, approximately 20 minutes to arrive on-site after having received the emergency call.

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**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
1. Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Is there adequate night lighting at the site?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Are procedures in place that ensure access routes, aisles, storage area, filling areas and the grounds are kept clear from unwanted materials?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. 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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Are weighing systems validated for accuracy?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Is the schedule of maintenance and testing activities retained on site?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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.

	Yes	No
1. Is a pressurized water system available at the propane facility site?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only)	16 m	
4. What is the unobstructed distance to the closest approved water supply with year round access if there are no hydrants? ( distance in metres only)	N/A	

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**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 Response and Preparedness Plan?

Yes

No

If not, please explain (e.g., no fire services).

Fire services comments, if any:

**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: \_\_\_\_\_ (dd-mm-yyyy)

**LOCAL FIRE SERVICES**

The undersigned has reviewed Section B of the Risk and Safety Management Plan Fire Services.

Print name	Signature	Date (dd-mm-yyyy)
Local Fire Services Name		

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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.
2. The maximum volume, types and storage location of hazardous materials.
3. Location of permanent structures on site.
4. 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.
6. 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.
8. GPS co-ordinates of the single largest vessel.
9. 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.
12. 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-mm-yyyy) 27-09-2011	Capacity of single largest propane storage vessel (USWG) 2000 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: <u>67 m North</u>	Right side property line: <u>33 m West</u>
Rear: <u>100 m South</u>	Left side property line: <u>133 m East</u>
GPS coordinates of single largest vessel: <u>Lat. 44.35 Long. -78.76126</u>	

**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) John Lastoria	Official Title E H & S Specialist
Signature 	Telephone No. <u>416-544-7608</u> Date (dd-mm-yyyy) <u>12-10-2011</u>



Technical Standards and Safety Authority  
www.tssa.org

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

**SECTION C: SUBMISSIONS (cont'd)**

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

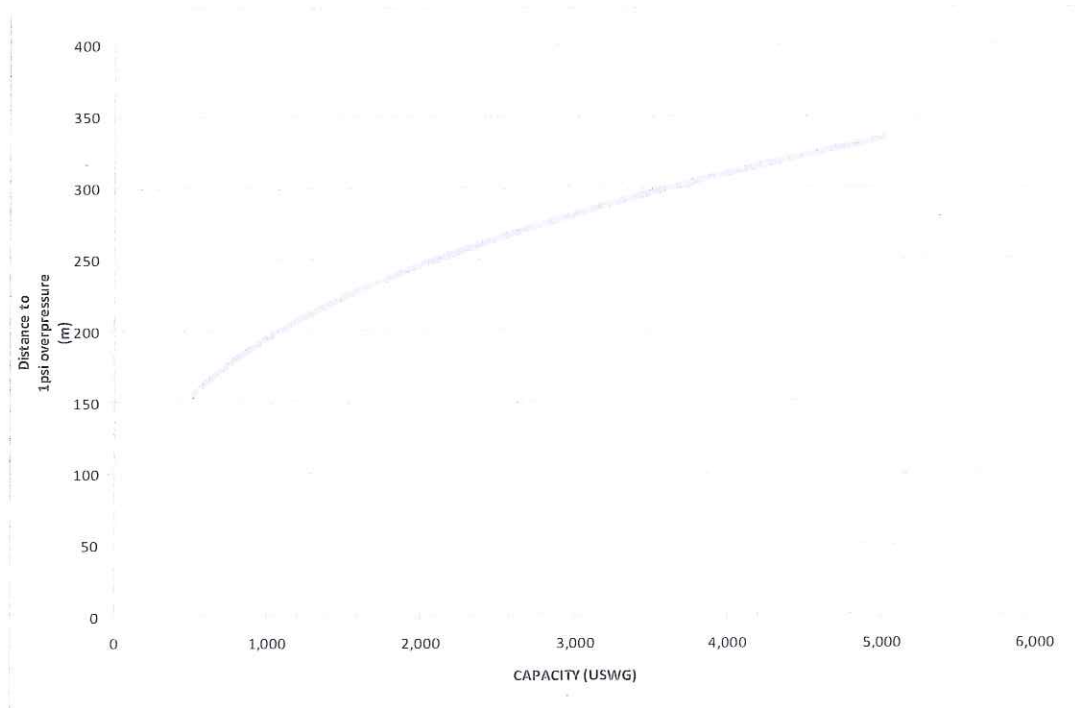
Table 1: Distance Table

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)





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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**

Buildings 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 Feature
	0	1	2-10	11+	
Industrial buildings or parks or golf courses Name: <u>None in Hazard Distance</u> Address: _____ City: _____ Province _____ Postal Code _____	X				<u>0</u> m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. [Redacted]	X				<u>0</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>Canadian Tire Store &amp; multiple other retailers - Lindsay Square Mall and Whitney Town Centre</u> Address: _____ City: <u>Lindsay</u> Province <u>ON</u> Postal Code _____				X	<u>80</u> m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: <u>None in Hazard Distance</u> Address: _____ City: _____ Province _____ Postal Code _____	X				<u>0</u> m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: <u>None in Hazard Distance</u> ( <u>Ross Memorial Hospital - 800 m</u> ) Address: _____ City: _____ Province _____ Postal Code _____	X				<u>0</u> m
Emergency responders specifically fire stations, ambulance stations, and police stations Name: <u>None in Hazard Distance</u> Address: _____ City: _____ Province _____ Postal Code _____	X				<u>0</u> m

\* For multi-unit buildings, count each unit as "1".

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Name of person completing this form (please-print) <u>John Lastoria</u>	Official Title <u>E H &amp; S Specialist</u>	
Signature 	Telephone No. <u>416-544-7608</u>	Date (dd-mm-yyyy) <u>12-10-2011</u>



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

**WORKSHEET**

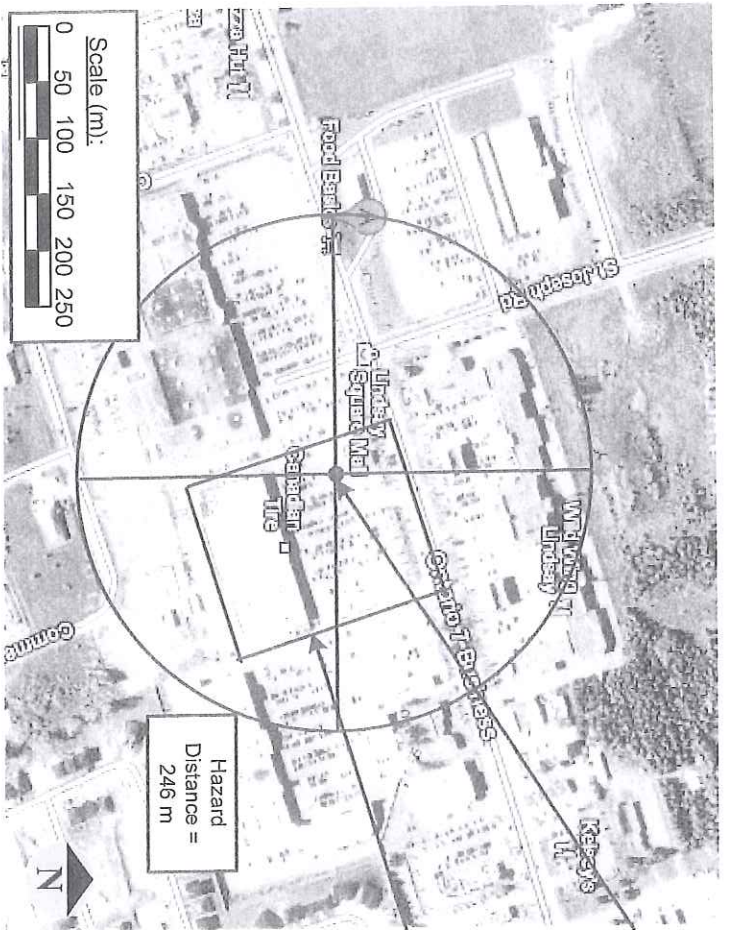
Portable Storage Additional Information Worksheet

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	48	278.4
# 10	2.9		
# 5	1.5		
<b>Total Cylinder Capacity</b>			278.4 USWG

Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
2000 USWG	1	2000 USWG
<b>Total Tank Capacity</b>		2000 USWG

<b>Total Cylinder Capacity</b>	278.4 USWG
<b>Total Tank Capacity</b>	2000 USWG
<b>Total Portable Capacity</b> (Total Cylinder Capacity + Total Tank Capacity)	2278.4 USWG



2000 USWG  
Propane Tank

Site Boundary

Hazard  
Distance =  
246 m



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Map data ©2011 Google, Tele Atlas

<b>Setback Distances to Site Boundary</b>	North: 67 m South: 100 m	East: 133 m West: 33 m
<b>Capacity of Propane Storage Tank</b>	Capacity of Propane Storage Tank = 2000 USWG	
<b>GPS Co-ordinates of Propane Storage Tank</b>	GPS Co-ordinates = 44.350184, -78.76126	
<b>Circular Distance to 1 psi overpressure</b>	Denoted by circle centred on tank; radial distance = 246 m	
<b>Municipality (yes) within the 1 psi overpressure circle:</b>	City of Kawartha Lakes	
<b>Municipal Contact:</b>	<p>Judy Currins City Clerk, City of Kawartha Lakes 26 Francis Street (First Floor of City Hall) Lindsay, ON, K9V 5R8 Tel: 705 324 9411 Ext.: 1295 Fax: 705 324 8110 email: jcurrins@city.kawarthalakes.on.ca</p>	

**Map of Surrounding Area**

Canadian Tire (1743)  
377 Kent Street West, Lindsay, ON K9V 2Z7  
PT E1/2 Lot 20, CON 4 OPS as in  
R369315, Pt 1, 5,6,57R2Z06, Pt 4 57R3491  
EXEPT Pt 2,3,5 EAWARTHA LAKES  
3,PT1,13R12627:Pt L110, CON. 3,

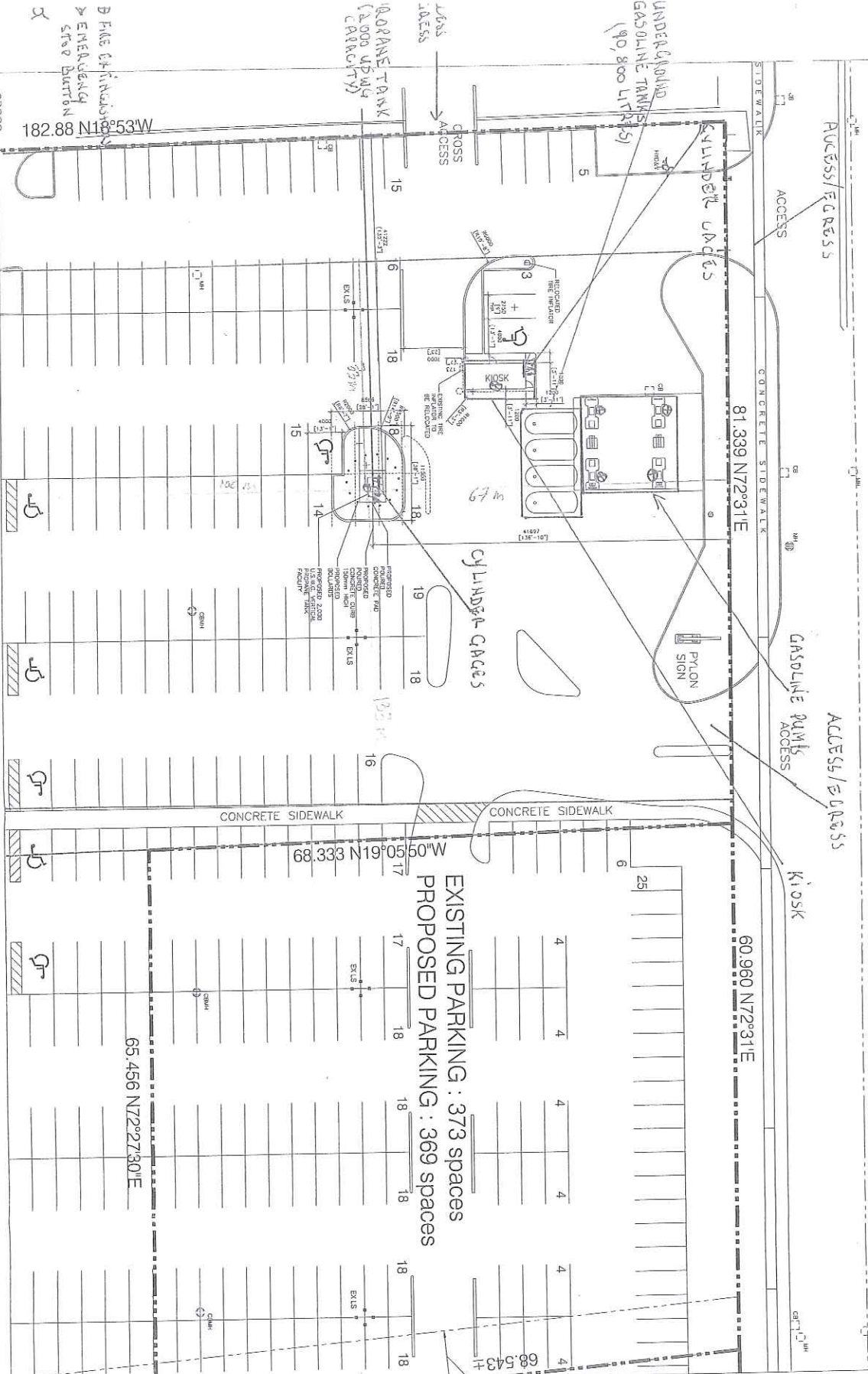
Drawn by: G. Brindisi Date: September 27, 2011



GAHADIAN TRAIL (743)  
 311 KENT STREET WEST  
 LINDSAY ON K9V 2Z7

KENT STREET (HIGHWAY NO. 7B)

MALL ENTRANCE



ACCESS/EGRESS

GASOLINE PUMP ACCESS

81.339 N72°31'E

60.960 N72°31'E

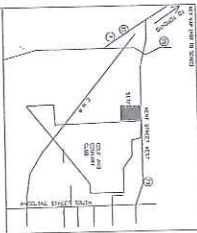
68.333 N19°05'50"W

65.456 N72°27'30"E

EXISTING PARKING : 373 spaces  
 PROPOSED PARKING : 369 spaces

B FINE CHAINSAW  
 > EMERGENCY  
 SITE DIRECTION

# 1743

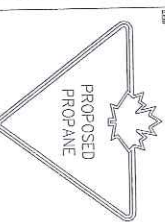


NOTES:

1. INFORMATION FROM THE PLAN OF THE CITY OF LINDSAY, ONTARIO, 2002.
2. THE PLAN IS A PRELIMINARY PLAN AND IS NOT TO BE USED FOR CONSTRUCTION.
3. THE PLAN IS A PRELIMINARY PLAN AND IS NOT TO BE USED FOR CONSTRUCTION.
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9. THE PLAN IS A PRELIMINARY PLAN AND IS NOT TO BE USED FOR CONSTRUCTION.
10. THE PLAN IS A PRELIMINARY PLAN AND IS NOT TO BE USED FOR CONSTRUCTION.

NO.	DESCRIPTION	DATE	BY
1	ISSUED FOR PERMIT	2002	J.F.S.
2	REVISION		
3	REVISION		
4	REVISION		
5	REVISION		
6	REVISION		
7	REVISION		
8	REVISION		
9	REVISION		
10	REVISION		

**Trow Associates Inc.**  
 ENGINEERING ARCHITECTURE INTERIOR DESIGN  
 1000 BAYVIEW AVE. SUITE 1000 SCARBOROUGH, ONTARIO M1B 2Y1  
 TEL: (416) 291-8811 FAX: (416) 291-8812



**GAHADIAN TYPE PETROLEUM**  
 1000 BAYVIEW AVE. SUITE 1000 SCARBOROUGH, ONTARIO M1B 2Y1  
 TEL: (416) 291-8811 FAX: (416) 291-8812

SITE PLAN

PROPOSED PROJECT BY  
**LINDSAY - ONTARIO**

DATE	1:200	DATE	DEC. 2002
SCALE	1/4" = 1'-0"		
PROJECT NO.	17743		
PROJECT NAME	SP-2		

FOR THE CLIENT'S INFORMATION:  
 The Client is advised that the use of this plan is limited to the specific project and site shown hereon. It is not to be used for any other purpose without the written consent of the Engineer. The Client is also advised that the use of this plan is limited to the specific project and site shown hereon. It is not to be used for any other purpose without the written consent of the Engineer.