



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 site.

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: 0035139001-C

Check applicable type of propane operations.

Cylinder     Motor Fill     Filling Plant     Card/Key/lock

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.

Company Name: Sure/Arc Welding Supply    Ontario Corporation No., if applicable: \_\_\_\_\_

Operator Name (if different from above): \_\_\_\_\_

Telephone No.: 519-455-4420    Fax No.: 519-455-2890    E-mail: \_\_\_\_\_

Street No.: 402    Street Name / 911 Number / Address, if applicable: Neptune Cr

Town / City or Township / County: London    Province: Ontario    Postal Code: N6M-1A1

Mailing address if different from above:

Street No.: \_\_\_\_\_    Street Name / 911 Number / Address, if applicable: \_\_\_\_\_

Town / City or Township / County: \_\_\_\_\_    Province: \_\_\_\_\_    Postal Code: \_\_\_\_\_

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

Location of facility:

Street No.: 402    Street Name / 911 Number / Address, if applicable: Neptune Cr    Nearest Major Intersection: Veterans Memorial Parkway and Tartan Dr

Town / City or Township / County: London    Province: Ontario    Postal Code: N6M-1A1

Name of Licence Holder: Sure/Arc Welding Supply

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT): Morry Huber    ROT type: PPO-3

Municipality (or municipalities if the facility or its hazard distance touches multiple borders): City of London

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: Sure/Arc Welding		8/03/2012
Name of Senior Management person as defined in the Regulation holding the Record of Training: Morry Huber		



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

Indicate the year the facility was established. 1987  
Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. None have taken placed

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

	PSIG	Serial Number
Tank 1:	250	5.563174
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      Portable: 533      Mobile: None

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Name of person completing this form (please print) Mony Huber	Official Title Senior Management Person	
Signature 	Telephone No. 519-455-4420	Date (dd-mm-yyyy) 29/3/2012



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**Technical Standards and Safety Act**  
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**SECTION A: GENERAL INFORMATION (cont'd)**

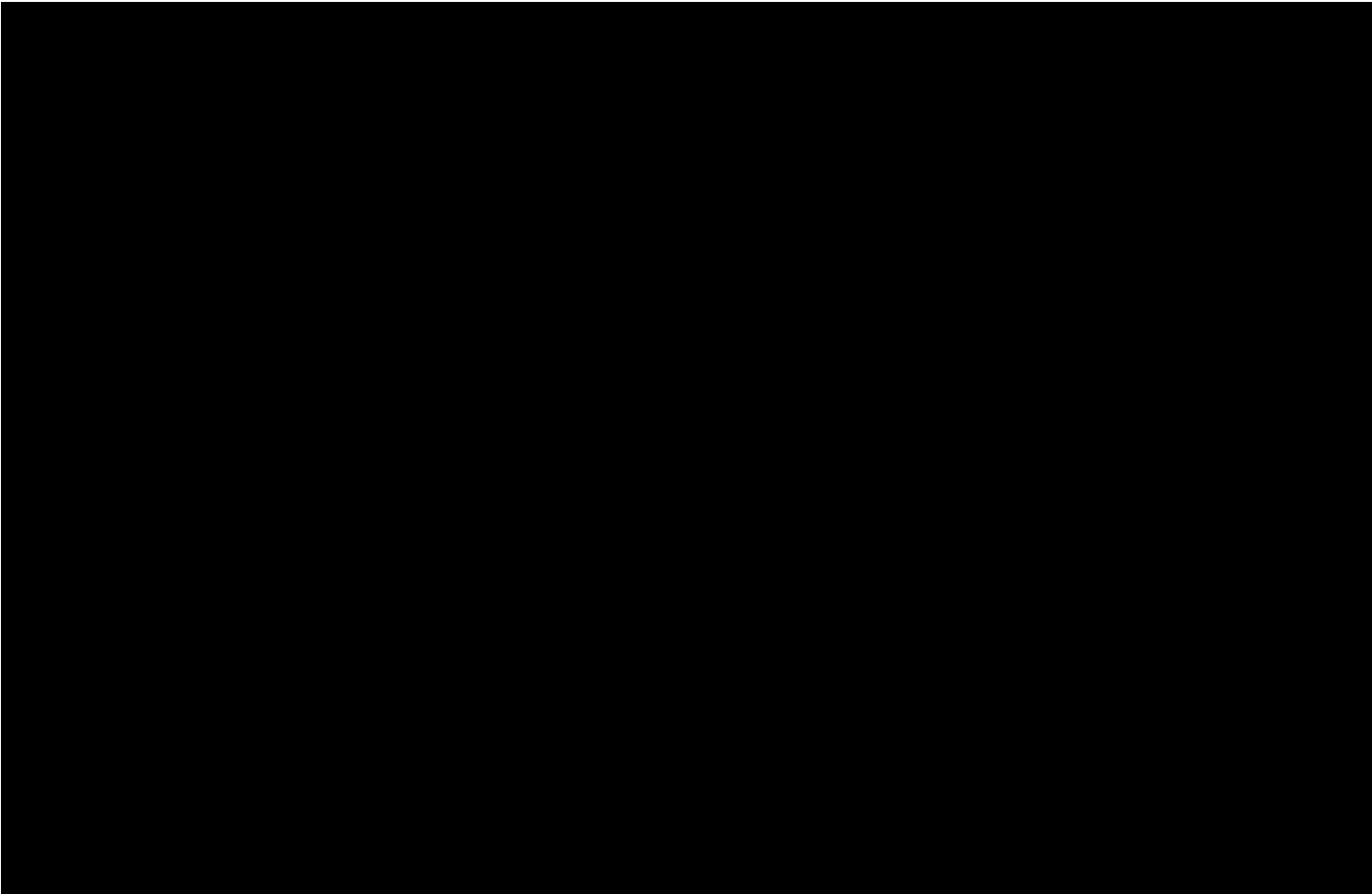
Indicate the year the facility was established. 1987      Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. None have taken placed

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

	PSIG	Serial Number
Tank1:	<u>250</u>	<u>5.563174</u>
Tank2:	_____	_____
Tank3:	_____	_____

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      Portable: 533      Mobile: None



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Name of person completing this form (please print) <u>Morry Huber</u>	Official Title <u>Senior Management Person</u>
Signature 	Telephone No. <u>519-455-4420</u> Date (dd-mm-yyyy) <u>8/03/2012</u>





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

<b>Name of Propane Supplier(s)</b> Superior Propane			
Street No. 7652	Street Name / 911 Number / Address, if applicable Queensline, Hwy, 2, West		
Town / City or Township / Country Chatham		Province Ontario	Postal Code N7M 5J5
Telephone No. 519-354-2267	Fax No. 519-351-6660	Contact Name Richard Button	
E-mail Richard_Button@superiorpropane.com			

<b>Name of Propane Transporter.</b> If same as above, please check box. <input type="checkbox"/>		For Office Use - Party No.	
Not Applicable			
Street No.	Street Name / 911 Number / Address, if applicable		
Town / City or Township / Country		Province	Postal Code
Telephone No.	Fax No.	Contact Name	
E-mail			

<b>Off-site Cylinder and/or Mobile Storage</b>		Capacity stored off-site, in USWG	For Office Use - Party No.
Not applicable			
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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Name of person completing this form (please print) Morry Huber	Official Title Senior Management Person
Signature 	Telephone No. 519-455-4420
	Date (dd-mm-yyyy) 8/03/2012



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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.

The largest vessel is a 2000 USWG propane tank. Several liquid containers that hold liquid oxygen, liquid nitrogen, liquid argon. There are also several compressed gas cylinders that contain oxygen, acetylene, nitrogen as well as several non-flammable welding gas mixtures. There is also a Liquid CO2 tank at the facility.

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

Dry chemical class ABC fire extinguishers. There are 6 extinguishers on site. Each delivery truck is equipped with one.

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.

The building is equipped with smoke detectors that alarm people to smoke or a fire. There is also a security system present that notifies the facility about a unauthorized entry. The propane system is equipped with a emergency stop switch that shuts off the electrical power to the propane pump. The main shutoff valve is controlled by a fusible link that would melt during fire and close the main valve for the liquid withdrawal system.

Maintenance and testing schedule for fire protection controls and devices.

Fire extinguishers are inspected each month by the branch manager. Fire extinguishers are inspected annually by a approved inspection vendor.

Emergency shut-off on the propane system are tested quarterly for operation by the branch manager. The entire propane system is inspected annually by a licensed TSSA contractor. All testing reminders are controlled by in house reminder program.

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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 Morry Huber	For Office Use - Party No.	Name Morry Huber	For Office Use - Party No.
Official Title President		Official Title President	
Telephone No. 519-455-4420	Fax No. 519-455-2890	Cell No. 519-630-0566	Fax No. Not Applicable
E-mail sure.arc1@bellnet.ca		E-mail mhuber@rogers.blackberry.net	
Role and responsibilities in emergency Evacuation of on-site staff		Role and responsibilities in emergency Evacuation of on-site staff	
<b>2. Facility Contact Personnel - Alternate Contact</b>		<b>6. Name of Facility Manager</b>	
Name John Scruton	For Office Use - Party No.	Name Morry Huber	For Office Use - Party No.
Official Title Manager		Official Title President	
Telephone No. 519-455-4420	Fax No. 519-455-2890	Telephone No. 519-455-4420	Fax No. 519-455-2890
E-mail sure.arc1@bellnet.ca		E-mail sure.arc1@bellnet.ca	
Role and responsibilities in emergency Evacuation of on-site staff		Role and responsibilities in emergency Evacuation of on-site staff	
<b>3. Local Fire Services - Key Contact</b>		<b>7. Propane Supplier Key Contact Person</b>	
Name John Kobarda	For Office Use - Party No.	Name Richard Button	For Office Use - Party No.
Official Title Fire Chief	E-mail jkobarda@london.ca	Official Title Market Manager	E-mail Richard_Button@superiorpropane.com
Telephone No. 519-661-2500 ext 5620	Fax No. 519-661-8419	Telephone No. 519-354-2267	Fax No. 519-351-6660
Role and responsibilities in emergency Director of Fire Services		Role and responsibilities in emergency Assistance and product knowledge	
Fire Services Address 400 Horton St East. London Ont.		Propane Supplier Address 7652 Queensline, Hwy 2 West	
<b>4. Local Fire Services - Alternate Contact</b>		<b>8. Municipal Contact</b>	
Name Wendy Cowdry	For Office Use - Party No.	Name John Kobarda	
Official Title Chief Fire Prevention Officer	E-mail	Official Title Fire Chief	
Telephone No. 519-661-2500 ext 5222	Fax No. 519-661-9419	Telephone No. 519-661-2500 ext 5620	Fax No. 519-661-8419
Role and responsibilities in emergency Investigation and assistance		E-mail jkobarda@london.ca	
Fire Services Address 400 Horton St. East London Ont.		Municipality Name and Address City of London	

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Name of person completing this form (please print) Morry Huber	Official Title Senior Management Person
Signature 	Telephone No. 519-455-4420
	Date (dd-mm-yyyy) 08/03/2012



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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 communication tools used at the facility

1. Air horn. Used to alert inside and outside staff of an on-site emergency and the need to evacuate the facility.

2. Public Address system. P.A. Used to alert inside and outside staff of an on-site emergency and the need to evacuate the facility.

3. Verbal notification. Used to alert inside and outside staff of an on-site emergency and the need to evacuate the facility.

General Emergency Information

Call 911

Escape route and assembly area. Plan a route away from the fire, vapour cloud or explosion

Proceed to nearest exit

Assembly area #1; Southeast corner of parking lot as close as possible to roadway.

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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) 3-5-2011	Print Name of Training Provider: <u>Emergency Response Plan</u>
	Print Name of Instructor: <u>Morry Huber</u>
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 Emergency Management Procedures provided to staff.

Training Date (dd-mm-yyyy) 3-5-2011	Print Name of Training Provider: <u>Emergency Response Plan</u>
	Print Name of Instructor: <u>Morry Huber</u>
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) 3-5-2011	Print Name of Training Provider: <u>Emergency Response Plan</u>
	Print Name of Instructor: <u>Morry Huber</u>
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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Name of person completing this form (please print) <u>Morry Huber</u>	Official Title <u>Senior Management Person</u>
Signature 	Telephone No. <u>519-455-4420</u>
	Date (dd-mm-yyyy) <u>08/03/2012</u>





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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) 4-30-2012	Print Name of Training Provider: <u>Emergency Response Plan</u>
	Print Name of Instructor: <u>Morry Huber</u>
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:

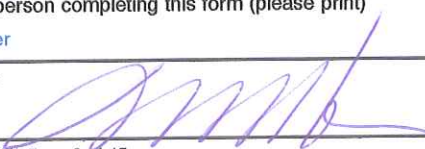
Training on the facility's Emergency Management Procedures provided to staff.

Target Date (dd-mm-yyyy) 4-30-2012	Print Name of Training Provider: <u>Emergency Response Plan</u>
	Print Name of Instructor: <u>Morry Huber</u>
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) 4-30-2012	Print Name of Training Provider: <u>Emergency Response Plan</u>
	Print Name of Instructor: <u>Morry Huber</u>
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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Name of person completing this form (please print) <u>Morry Huber</u>	Official Title <u>Senior Management Person</u>
Signature 	Telephone No. <u>519-455-4420</u>
	Date (dd-mm-yyyy) <u>08/03/2012</u>



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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).  
Key or alternate contacts give warnings to staff by using the emergency communication tools. The warning is given when an on-site emergency occurs that could impact the safety of employees or visitors to the site.

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).

Escape route and assembly area. Plan a route away from the fire, vapour cloud or explosion

Proceed to nearest exit

Assembly area #1; Southeast corner of parking lot as close as possible to roadway.

Key or alternate contacts coordinate all actions.

**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).

All contact information for key and alternate contacts has been provided to Fire Services.

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

All information will be communicated through London Incident Command.

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

An annual review of the Location Emergency Response Plan is completed each year. The plan instructs the reviewer to forward updated information to Fire Services.

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

10 - 15 minutes.

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Signature 	Telephone No. 519-455-4420	Date (dd-mm-yyyy) 08/03/2012





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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 checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input 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 type="checkbox"/>	<input checked="" 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)	<u>150 metres</u>	
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)	<u>150 metres</u>	

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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
<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

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Fire services comments, if any:

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**To be completed by the Licence Holder**

In response to the above comments, the following action(s) is required:

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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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Signature 	Telephone No. 519-455-4420	Date (dd-mm-yyyy) 08/03/2012



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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) 7-11-2011	Capacity of single largest propane storage vessel (USWG) 2000
Tank setback coordinates. Indicate placement on the map.	
Front: <u>68 m</u>	Right side property line: <u>3.5 m</u>
Rear: <u>13 m</u>	Left side property line: <u>37 m</u>
GPS coordinates of single largest vessel: <u>Lat. 42.99 Long -81.14</u>	

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Name of person completing this form (please print) Morry Huber	Official Title Senior Management Person	
Signature 	Telephone No. 519-455-4420	Date (dd-mm-yyyy) 08/03/2012



Technical Standards and Safety Authority  
www.issa.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

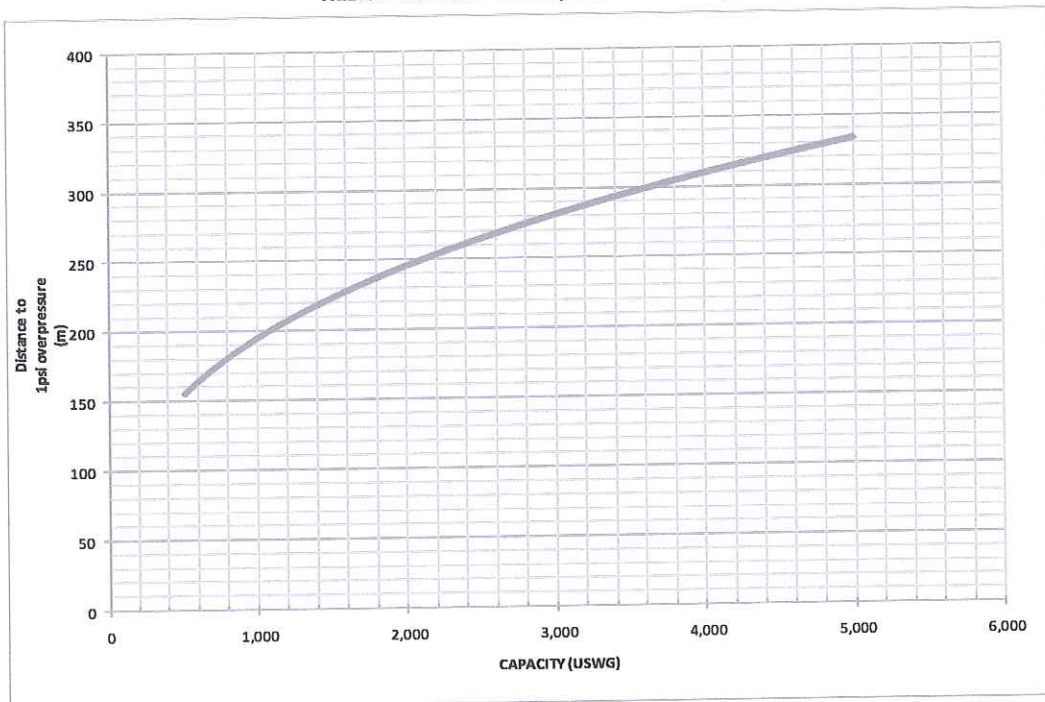
**Table 1: Distance Table**

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>Global Waste Management</u> Address: <u>396 Neptune Cr</u> City: <u>London</u> Province <u>Ontario</u> Postal Code <u>NGM 1A1</u>			X		<u>37</u> m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. [Redacted]		X			<u>89</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m

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

**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) <u>Morry Huber</u>	Official Title <u>Senior Management Person</u>
Signature 	Telephone No. <u>519-455-4420</u>
	Date (dd-mm-yyyy) <u>08/03/2012</u>



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**WORKSHEET**

**Portable Storage Additional Information Worksheet**

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9	0	0
# 100	29.5	5	148
# 40	11.75	0	0
# 33.3	9.62	40	385
# 30	8.8	0	0
# 20	5.8	0	0
# 10	2.9	0	0
# 5	1.5	0	0
<b>Total Cylinder Capacity</b>			<b>533</b>

**Tanks Stored On-site Not Connected for Use**

Tank Size In USWG	Quantity	Total Volume in USWG
0	0	0
<b>Total Tank Capacity</b>		<b>0</b>

<b>Total Cylinder Capacity</b>	<b>533</b>
<b>Total Tank Capacity</b>	<b>0</b>
<b>Total Portable Capacity</b> (Total Cylinder Capacity + Total Tank Capacity)	<b>533</b>

402 NEPTUNE CRS  
LONDON ONT  
N6M 1A1

CITY OF LONDON  
C. SAUNDERS RM 300  
300 DUFFERIN AVE  
LONDON ON N6A 4L9

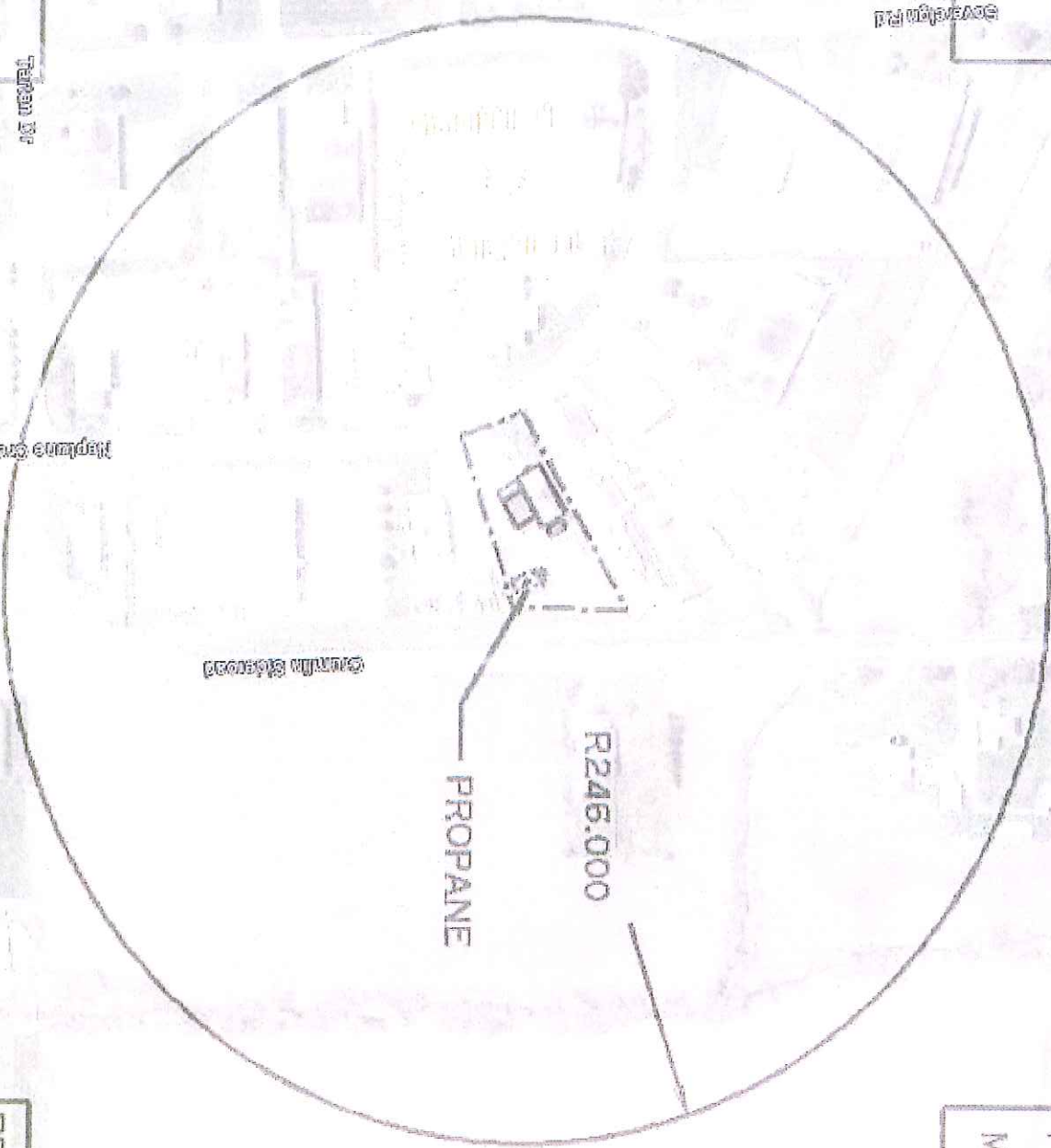
Tel: 519-333-1111

GPS COORDINATES LATITUDE 42.99 LONGITUDE -81.44

Image © 2012 Google

PROpane TANK SIZE  
2000 U.S.W.G.

PREPARED  
MARCH 05 2012





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LONDON ONT  
N6M 1A1

GOVERNMENT RD

CITY OF LONDON  
C. SAUNDERS RM 300  
300 DUFFERIN AVE  
LONDON ON N6A 4L9

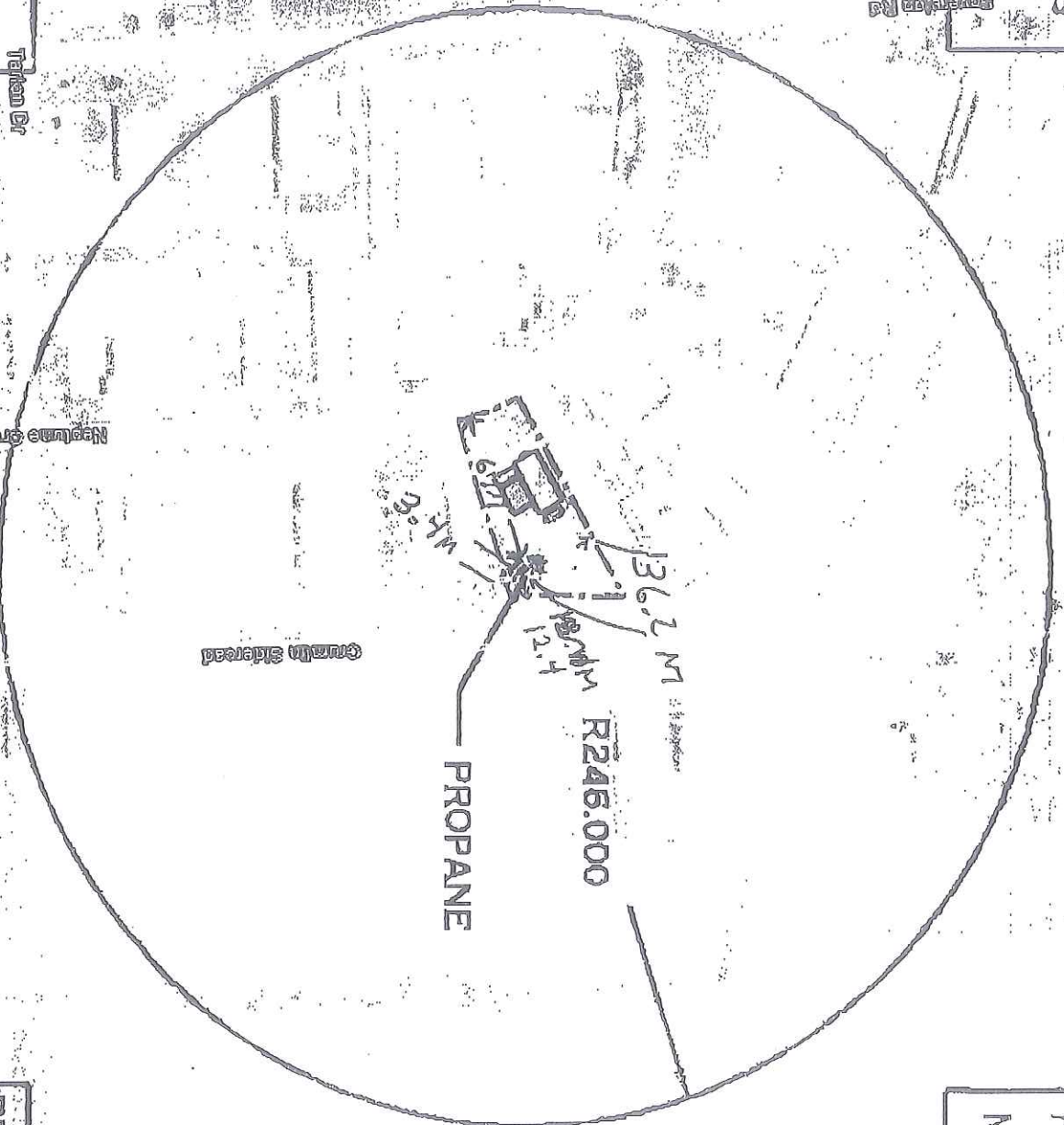
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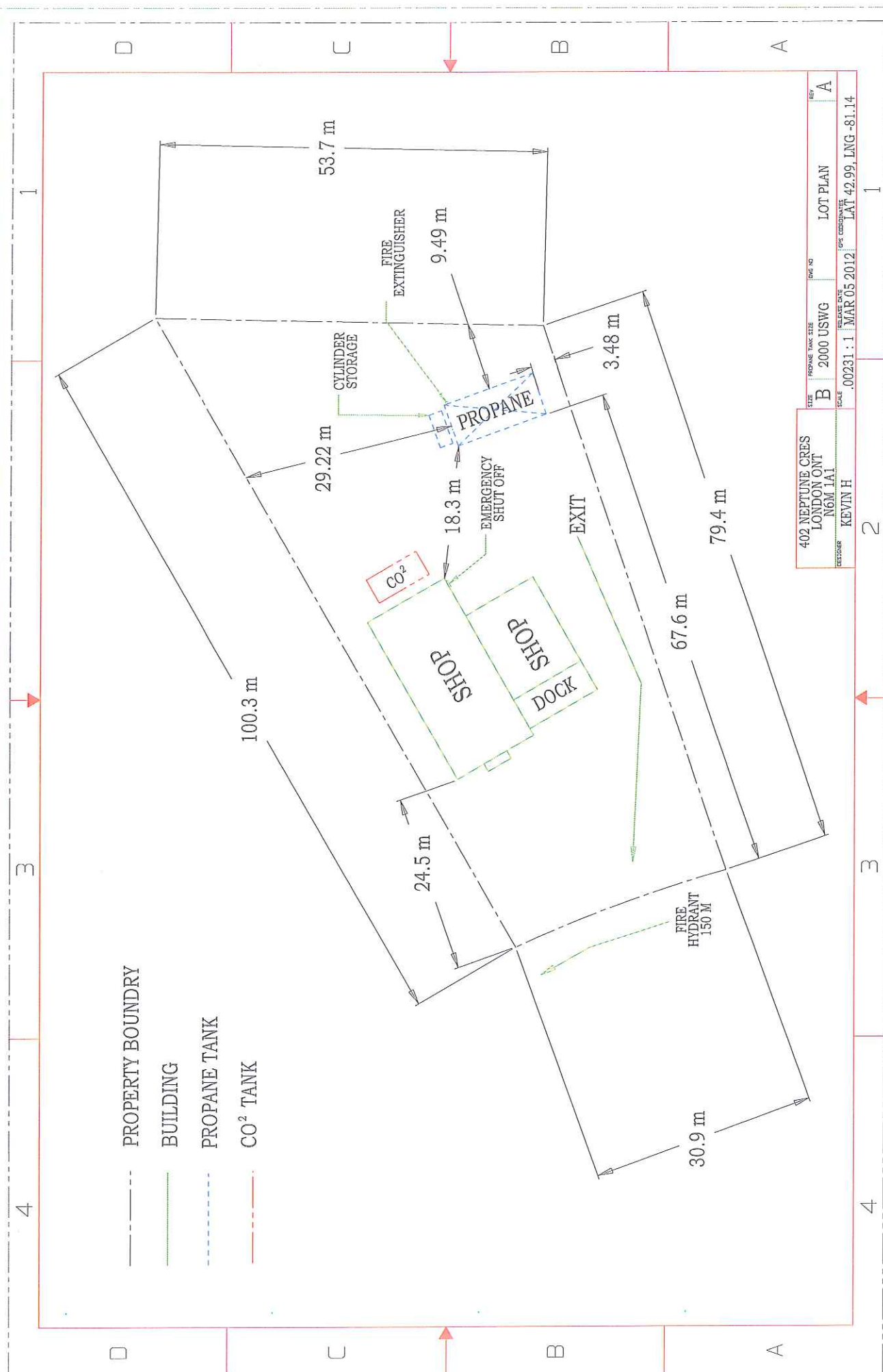
Image courtesy of Upsilon

PREPARED  
MARCH 05 2012

PROpane TANK SIZE  
2000 U.S.W.G.



GeoEye



- PROPERTY BOUNDARY
- BUILDING
- PROPANE TANK
- CO<sub>2</sub> TANK

402 NEPTUNE CRES LONDON ONT N6M 1A1		DATE	PROJ. NAME	DWG. NO.	REV.
DESIGNER: KEVIN H		SCALE: .00231 : 1	RELEASE DATE: MAR 05 2012	2000 USWG	A
				LOT PLAN	
				GPS COORDINATES: LAT 42.99, LNG -81.14	