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

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		m may result in rejection. sult in a fine or prosecution lards and Safety Act			
Licer	nce Number 0076	404599-C				
Check	applicable type of prop	pane operations.				
	✓ Cylinder	Motor Fill		ard/Keylock		
Subm	it along with this comple	eted application a Facility Site	Plan and a Map of the Surrounding	g Area.	J	
		SE	CTION A: GENERA	L INFORMA	ATION	
		oplies to TSSA for a	review for an RSMP u	nder Ontario's	s Technical Standard	s and Safety Act,
	Company Name				Ontario	Corporation No., if applicable
A	Orville Mays ESS)				107370	5
	Operator Name (if different May's Motors Inc.	erent from above)			<i>(A)</i>	
	Telephone No.	Fax No.	, E-mail			30
	613-392-3150	613-392-6245	maymotors@hotmail.com			
В	Street No.	Street Name / 911 Number Old HWY 2	/ Address, if applicable			
	Town / City or Townsl	hip / County		Provin	ce	Postal Code
	Trenton			On		K8V 5P5
	Mailing address if	different from above.				
C	Street No.	Street Name / 911 Number	r / Address, if applicable			
	422B	HWY 2 STN Main			2007	Postal Code
	Town / City or Townsh Trenton	ip / County		Provii	nce	K8V 5P5
In	100000000000000000000000000000000000000	tainer Refill Centre or I	Filling Plant			
111	Location of facility.	tamer nemi centre or i	ining rion.			
D	Street No.	Street Name / 911 Number	/ Address, if applicable	1	est Major Intersection	
U	422 B	Old HWY 2		Old H	WY 2 & Quinte View Road	
	Town / City or Townsh	nip / County		Provin	ice	Postal Code
	Trenton			On		K8V 5P5
	Name of Licence Holde	er				7
	Orville Mays ESS)	and the second lives				
	Name of a Senior Mar	nagement person as defined ir	the regulation holding the Record	d of Training (ROT).	The second second	
	Rodney D. A. May				PTI 100	1-8 (PP0-3)
	Municipality (or municipalities if the facility or its hazard distance touches multiple borders)					
	City of Quinte West				00000	
	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

Printname	Signature	Date (dd-mm-yyyy)
Name of Licence Holder Orville Mays ESS0		
Name of Senior Management person as defined in the Regulation holding the Record of Training Rodney D. A. May	Before	11-09-2011





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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)					
Indicate the year the facility was established. 1958	Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. 1984				
Identify the psig rating and serial number for each PSIG Tank1: 250 Tank2: Tank3:	Serial Number 20J82-79				
Enter capacity of propane in USWG, fixed, porta	able, and mobile, and provide detailed inventory that includes the number of tank/vessel for				
	capacity of each tank/vessel, on a separate document.				
	Portable: 458.5 Mobile: 0				

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) Rodney D. A. May	Official Title Partner/Manager		
Signature / /	Telephone No.	Date (dd-mm-yyyy)	
To the	613-392-3150		

FS 09195 (11/10) Page 2 of 15



Name of person completing this form (please print)

Rodney D. A. May

FS 09195 (11/10) Page 10 of 15

Signature

14th Floor - Centre Tower 3300 Bloor Street West Standards and Toronto Ontario M8X2X4
Safety Authority 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 RESPO		
	6. Building and Site Security and Procedures	an no ootv	noos.
		Yes	No
1.	Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)?	\checkmark	
2.	Is there adequate night lighting at the site?		E l
3.	Are procedures in place that ensure access routes, aisles, storage area, filling areas and the grounds are kept clear from unwanted materials?	\checkmark	
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?	\checkmark	
5.	Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders?	\checkmark	
6.	Are weighing systems validated for accuracy?	1	
7.	Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)?	and the same of th	\checkmark
8.	Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves) $ \frac{1}{2} \left(\frac{1}{2} \right) = \frac{1}{2} \left(\frac{1}{2} \right) \left(\frac{1}{2} \right$	\checkmark	
9.	Is the schedule of maintenance and testing activities retained on site?	1	
	7. Water Supply	6	
The	propane licence holder should work with the local fire department to determine water bly 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?		\checkmark
2.	Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location?	\checkmark	A
3.	What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only)	135.9 m fi	re hydrant
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)	Bayof Qui	nte 419.4m
	Declaration: I am aware that it is an offence to give false information I hereby declare that the information I have given here is true a	in this doc	eument and e

Official Title

Partner/Manager

Telephone No.

613-392-3150

Date (dd-mm-yyyy)



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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

Portable Storage Additional Information Sheet

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9	0	0
# 100	29.5	0. 3	0 88.5
# 40	11.75	0	0
# 33.3	9.62	0	0
# 30	8.8	0 3	0 90.0
# 20	5.8	0 pag	0 2800
#10	2.9	0	0
#5	1.5	0	0

Tanks Stored On-site Not Connected for Use

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	A
THE PERSON NAMED AND PROPERTY OF THE PERSON	

Total Cylinder Capacity	0 458.5
Total Tank Capacity	2000 USWG Propane refill tank
Total Portable Capacity	0

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) Rodney D. A. May	Official Title Partner/Manager	The state of the s		
Signature	Telephone No. 613-392-3150	Date (dd-mm-yyyy)		



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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	A:	GENERAL	INFORMATION	(cont'd)
---------	----	---------	-------------	----------

	Activity Information					
Name of Propan	e Supplie	er(s)				
Superior Propane -	Regional	Operation Centre				
Street No.	Street Name / 911 Number / Address, if applicable					
251	Woodland	d Road East Unit 217				
Town / City or To	ownship /	Country		Province		Postal Code
Guelph		()		On		N1H 8J1
Telephone No.		Fax No.	Contact Name			
877-873-7467		519-836-7766	Mike Mullins			
E-mail						
mullinsm@superio	rpropane.	com				
					En Office Hos	Dody No.
Name of Propan	e Transpo	orter. If same as above, ple	ase check box.		For Office Use -	Party No.
Superior Propane						
Street No.		ame / 911 Number / Address,	if applicable			
686A	Dundas S	Street West				
Town / City or To	ownship /	Country		Province		Postal Code
Bellville			- manual and a second a second and a second	On		K8N 1Z2
Telephone No.		Fax No.	Contact Name			
905-516-2301		519-836-7766	Jeff Easton			
E-mail						
eastonj@superiorp	propane					
					For Office Use -	Porty No.
Off-site Cylinder	and/or I	Mobile Storage	Capacity stored off-site	e, in USWG	For Office Ose -	raity No.
None						
Street No.	Street No. Street Name / 911 Number / Address, if applicable					
Town / City or T	ownship /	Country		Province		Postal Code
			1			
Telephone No.		Fax No.	Contact Name			
Note: Customer s	torage is i	not considered off-site storag	e.			

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) Rodney D. A. May	Official Title Partner/Manager		
Signature	Telephone No. 613-392-3150	Date (dd-mm-yyyy) //- 69-20//	

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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

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. Regular Gasoline 50000 ltrs, Premium Gasoline 25000, Diesel 50000 ltrs, Dyed Diesel 10000 ltrs, all underground tanks
Dyed Diesel 10000 ltrs, Used oil storage tank 1,000 ltrs, Bulk Oil tank 1000 ltrs
2- acetalene welding gas cylinders, 2-oxygen welding gas cylinders, 10- automotive Batteries wet, 40- Used Automotive batteries wet
Description of fire and emergency equipment indicated on facility site map. ABC Fire extinguisher
1- 1 - ABC fire extinguisher located at the Propane Dispenser.
2- 1- ABC fire extinguisher located @ filling Koisk
3- ABC fire extinguisher located throughout the facility & at the gasoline & Diesel pumps
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- Fusible link on ISC - isolation valve between the tank and the downstream propane dispensing equipment.
2 -Power supply breaker inside the main building. This cuts all power to the propane system - shuts down pump; closes solenoid valve.
3. Power supply breaker inside the main building. This cuts all power to the propane system - shuts down pump; closes solenoid valve.
4- Counter force alarm system
Maintenance and testing schedule for fire protection controls and devices. Maintenance and testing is undertaken by Superior Propane according to Superior 's Maintenance Standards. Schedule for key equipment is:

- 1- Pumps (pumps every 3 months; pump motor: check belts monthly; grease pump every 6 months).
- 2- ISC valve (test for closure every 6 months.
- 3- Storage tank Relief Valves inspected every 2 years; replacement schedule as per provincial regulations.

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) Rodney D. A. May	Official Title Partner/Manager		
Signature R. Laos	Telephone No. 613-392-3150	Date (dd-mm-yyyy) 11-09-2011	

FS 09195 (11/10) Page 4 of 15



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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

Facility Contact Personnel - Key Contact		5. Facility 24-Hour Contact Person			
Name Rodney D A. May	For Office Use - Party No.	Name Phillip May	For Office Use - Party No.		
Official Title Partner/Manager		Official Title Partner/Manager			
Telephone No. Fax No. 613-392-3930 613-392-6245		Cell No. Fax No. 613-922-2028 613-392-6245			
E-mail maysmotors@hotmail.com		E-mail maysmotors@hotmail.com			
Role and responsibilities in emergency		Role and responsibilities in emergency			
Co-ordinate site response plan (ERP)		Co-ordinate site response plan (ERP)			
2. Facility Contact Personnel - Alternate Co	ntact	6. Name of Facility Manager			
Name Phillip May	For Office Use - Party No.	Name Rodney D A. May	For Office Use - Party No.		
Official Title Partner/Manager		Official Title Partner/Manager			
Telephone No. 613-922-2028 Fax No. 613-392-6	S245	Telephone No. Fax No. 613-392-3930 613-392-6245			
E-mail .		E-mail			
maysmotors@hotmail.com		Role and responsibilities in emergency	maysmotors@hotmail.com		
Role and responsibilities in emergency		Co-ordinate site response plan (ERP)			
Co-ordinate site response plan (ERP)		Co-diamate site response plan (E.W.)			
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person			
Name John Whelan	For Office Use - Party No.	Name Superior Propane (Hot Line)	For Office Use - Party No.		
Official Title Fire Chief		Official Title			
Telephone No. 613-3922811 x7479 613-965-6	133	Telephone No. 877-873-7467 Fax No. N/A	Secretary polytics		
E-mail johnw@@qunitewest.ca		E-mail n/a			
Role and responsibilities in emergency		Role and responsibilities in emergency			
Coordinate emergency response / advise on Fire S	Service Response. Liaise	Identify and dispatch Superior Propane and or LPGERC emergency response			
with police.		personal as required			
4. Local Fire Services - Alternate Contact		8. Municipal Contact			
Name Greg King	For Office Use - Party No.	Name Donna Lee Craig			
Official Title Senior Fire Prevention Officer		Official Title City Clerk			
Telephone No. Fax No. 613-392-2841 x 7464 Fax No.	133	Telephone No. Fax No. 613-392-2841 x 4445 613-392-013	31		
E-mail gregk@quintewest.ca		E-mail donnaleec@quintewest.ca			
Role and responsibilities in emergency		Municipality			
Coordinate emergency response when key contact is not available and		City of Quinte West			
Liaise with police services.					

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) Rodney D. A. May	Official Title Partner/Manager	The state of the s	
Signature Clar	Telephone No. 613-392-3150	Date (dd-mm-yyyy) 11 -0 9 -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.
None

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) Rodney D. A. May	Official Title Partner/Manager	
Signature	Telephone No. 613-392-3150	Date (dd-mm-yyyy) 11-09-2011

FS 09195 (11/10) Page 6 of 15



14th Floor - Centre Tower 3300 Bloor Street West Safety Authority
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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:
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:
Training on the facility's Em	ergency 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 pro	vided to certificate holders / persons with Records of Training.
Training Date (dd-mm-yyyy)	Print Name of Training Provider: OPA Please Note - a ROT is valid for 3 years
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:

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	
Rodney D. A. May	Partner/Manager	
Signature	Telephone No. 613-392-3150	Date (dd-mm-yyyy) 11-09-2011

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14th Floor - Centre Tower 3300 Bloor Street West Safety Authority
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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)

4. Emergency Training Plan for Coming Year

Training on Emergency Re	esponse Plan and Procedures provided to facility key contacts.	
Target Date (dd-mm-yyyy)	Print Name of Training Provider: Superior Propane or Alternate	Please note: Canadian Propane Gas Association
Q4-2011	Print Name of Instructor: to be arranged	is currently developing the course
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	content and it and its provider should be available to
	Print Name of Instructor:	teach in the fourth quarter of this year.
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: Key Contact to train staff	
Q4-2011	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:	
a	Print Name of Instructor:	
On-site specific training pro	ovided to certificate holders / persons with Records of Training.	
Target Date (dd-mm-yyyy)	Print Name of Training Provider: FSN Training & Development In	nc Please note - a ROT is valid for 3 years
17-09-2011	Print Name of Instructor: Leo Alkenbrack cert.# T111	Owner to call if more training is required in 2011
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	Official Title	
Rodney D. A. May	Partner/Manager	Partner/Manager	
Signature	Telephone No.	Date (dd-mm-yyyy)	
Duff	613-392-3150	11-09-2011	

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14th Floor - Centre Tower 3300 Bloor Street West Safety Authority 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 at	nd Actions
-------------	------------

Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate). The operator or Alternate will contact emergency services by calling 911 and will provide warnings outlined in the attached: "Propane Emergency Response Procedures" placard (to be posted on site and part of the 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 owner /operator or alternate should first follow the actions in the ERP provided herein. Stage evacuation, if the release of propane cannot be stopped by cutting electrical power may be required. Note a specific muster point is not advisable, since a propane plume can blow in any direction.

Communication with Emergency Response Authorities

Actions will be taken by an on duty ROT person(s)

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. a ROT person will be on duty and be in the propane tank area. This person will be able to visually ascertain any abnormal/ accident event and implement the appropriate emergency response actions. When the system is not in operation, the ISC valve (main isolation valve) is closed, and the propane system is unattended. Any accident 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.

The fire access routes 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 (a) how to shut the system down and (b) the fill level in the tank (if known)

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

This information will be provided to the authorities by site Rodney D. A. May or alternate.

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

It would take one of the contacts 5 minutes to arrive at the facility in the event of an emergency, lives on site

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	
Rodney D. A. May	Partner/Manager	
Signature	Telephone No.	Date (dd-mm-yyyy)
Delace	613-392-3150	11-09-2011

FS 09195 (11/10) Page 9 of 15

Date (dd-mm-yyyy)

11-09-2011

Telephone No.

613-392-3150



Signature

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

613-392-6245

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 Yes No To be completed by the Local Fire Services Has the local fire service had an opportunity to review the Emergency Response and Preparedness Plan? If not, please explain (e.g., no fire services). sent to Sandra Parks on Oct 27, 2011 al 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. Date (dd-mm-yyyy) 27/10/2011 Local Fire Services Name - approved sufect to owner addressing comments
noted on aforementaried email to the satisf
of the Quinte wood fire Operationed.

All Oct 27, 2001 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. Official Title Name of person completing this form (please print) Partner/Manager Rodney D. A. May



Technical www.tssa.org

14th Floor - Centre Tower Standards and 3300 Bloor Street West Safety Authority
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)

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 R If not, please explain (e.g., no fire services).	Yes esponse and Preparedness Plan?	No 🗀
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)	
	(ии-піп-уууу)	
LOCAL FIRE	SERVICES	
The undersigned has reviewed Section B of the Risk and Safety M	lanagement Plan Fire Services.	
Print name	Signature	Date (dd-mm-yyyy)
Local Fire Services Name		

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) Rodney D. A. May	Official Title Partner/Manager	
Signature Rifa-	Telephone No. 613-392-3150	Date (dd-mm-yyyy) //-09-20//

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

Propane Storage and Handling Regulation

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-r 11-09-2011	red (dd-mm-yyyy) Capacity of single largest propane st 2000 USWG		storagevessel (USWG)	
Tank setback coordinates. Front:	Indicate placemen	nt on the map.	Right side property line:	4.5 m
	407.2 m		Left side property line:	78.9 m
GPS coordinates of single	largest vessel:	44.6686 -77.31	260	

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) Rodney D. A. May	Official Title Partner/Manager	
Signature	Telephone No. 613-392-3150	Date (dd-mm-yyyy) //-09-2011



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 ActPropane 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:

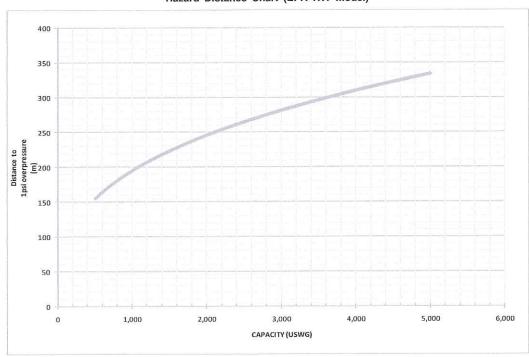
Density of Propane is 0.5033 kg per litre @ 15 C

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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Signature	Telephone No. 613-392-3150	Date (dd-mm-yyyy) // - 0 9 - 30 //



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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

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

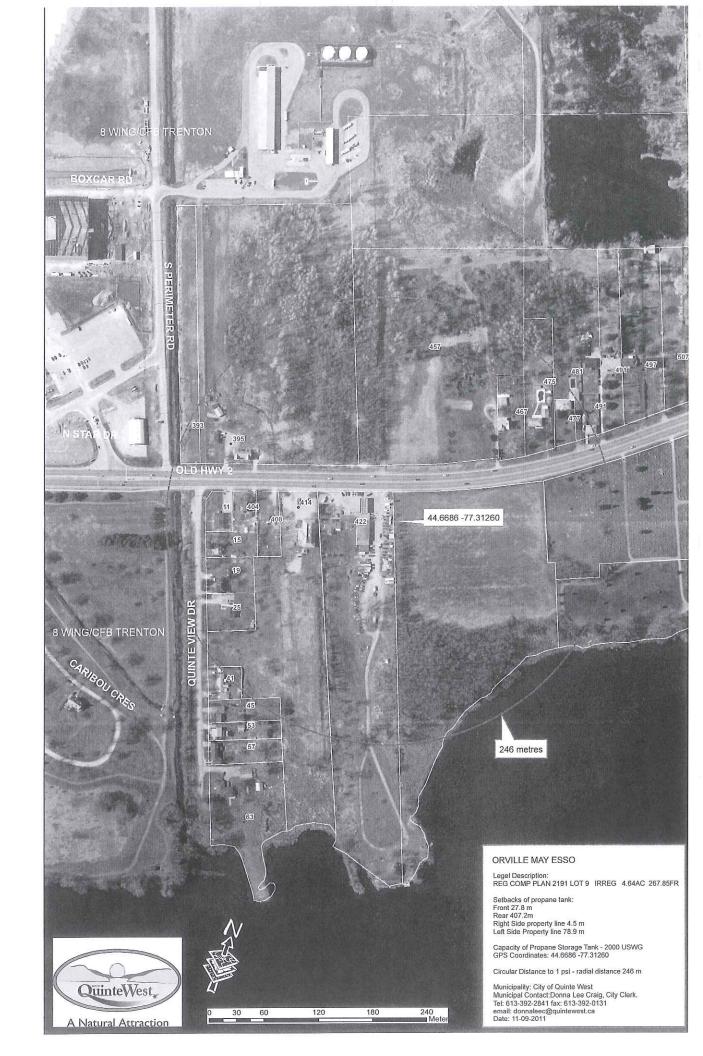
Buildings and Features Present within the Circle on the Map of the Surrounding Area AND Name and Address of Closest Building or Feature	* Number of Buildings and Features (mark with an "X")			Distance from Tank to Closest Building or	
AND Name and Address of Closest building of Feature	0	1	2-10	11+	Feature
Industrial buildings or parks or golf courses Name: None Address: Province Postal Code	x				<u> </u>
Residential building units specifically permanent single family dwellings, condominiums, and apartments.				х	<u>54.5</u> _ m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: Pizza Hutt Address: 414 Old HWY 2 Trenton Province On Postal Code K8V 5P5		X			<u>135.9</u> m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: None Address: Province Postal Code	x				0m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: Address: City: Province Postal Code	X				0 m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: Address: City: Province Postal Code	X				0 m

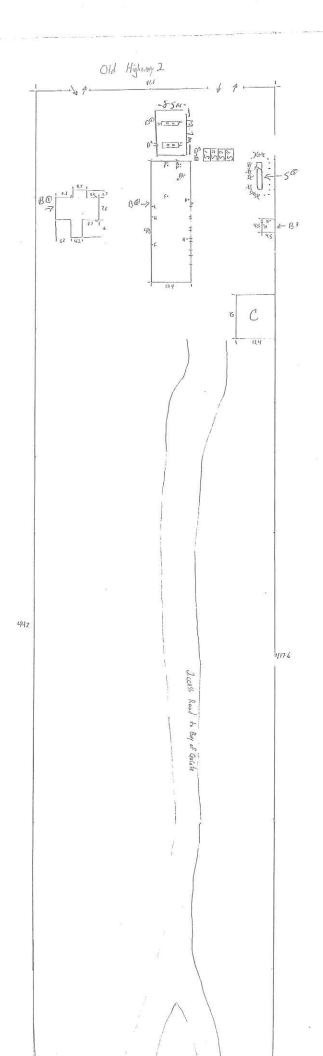
Declaration: I am aware that it is an offence to give false information in this document and I hereby declare that the information I have given here is true and complete.

Name of person completing this form (please print) Rodney D. A. May	Official Title Partner/Manager	
Signature Jo Javo	Telephone No. 613-392-3150	Date (dd-mm-yyyy) 11-09-2011

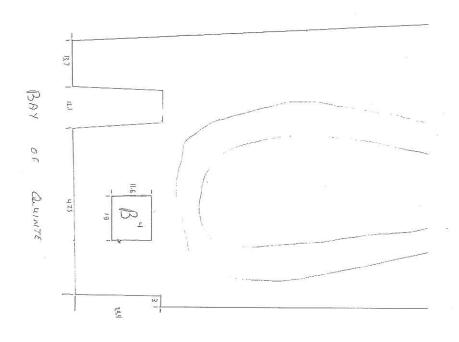
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^{*} For multi-unit buildings, count each unit as "1".





A	Alarm System
F	Fire Extinguisher
FA	First Aid Station
Н	Hazardous Material
K	Kill Switch
P	P. A. System
19	EMERGENCY EGLEST/POM FIRE ACCESS ROUTES MON
5°1 5°2 5°3	LIMPER GROWND STORAGE FOR DESULAR FILE SO.000 FF CA LINDER BROWND STORAGE FOR DIESEK FILE 50,000 FF CAF UN DE PERDUND STORAGE FOR PERDUND STORAGE FOR PERDUND FILE DES. 000 IT CAF FOR PERDUND FILE DES. 000 IT CAF
51	UNDERGE BOUND STOCKE Son Dyed Diesel 13,600 LTCH DISPENSOR. REGLAM, DIESEL, PREMIUM
D^{a} D^{3}	Dispenson-Regalon Diesel Plemian
C	Disponsion: Oyed Diesel Fenced in Compound
131	BUILDING Kesidential
B 2	
1 13	Building STORage Thed
13 4	
<u>S</u> 5	2000 USW & + GUARD POST
X	
	CANOPY Over The PUM 13.7 M × 8.5 M. 5.5 M. Cheallance



Reg Comp Phan 2191 Lot 9

Concession # 1 - ORDIALE MAY
ESSO Date Sept. 11,2011 422A8 Old Highery 2 May's Motors Site Plan