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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.

		illure to fully complete this fo ding a false statement may re	sult in a fine or prosecution	al STAP	For Office Use Only				
		under the Technical Stand	lards and Safety Act	TSE D	make Group				
Lice	nce Number	0032354001-C		OVASS					
Chec	k applicable type of	propane operations.		_ III I	MAY 2 6 2011 M.J.				
	✓ Cylinder	Motor Fill	Filling Plant Card/Keylox	*					
Subr	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 Sta	andards and Safety Act,				
Pro	Company Name	and Handling Regulat	ion.						
A	1	HEASLIP LTD.			Ontario Corporation No., if applicable 000075751				
-	I	different from above)			000075751				
		N 000000000€							
	Telephone No.	Fax No.	E-mail						
	905-779-3	905-779-3856	guyh@wjheaslip.com						
В	Street No. 1030	Street Name / 911 Number /	Address, if applicable HALDIMAND ROAD 20						
	Town / City or Tov	vnship / County		Province	Postal Code				
		HAGERSVILLE		ONTARIO	NOA 1H0				
		if different from above.							
C	Street No.	Street Name / 911 Number	Address, if applicable		1				
	Town / City or Tow	nshin / County		Province	D. 1.10. 1				
		instruction in the second of t		Flovince	Postal Code				
Ini	ormation on C Location of facili	ontainer Refill Centre or F	illing Plant						
D	Street No.	Street Name / 911 Number /	Address, if applicable	Nearest Major Intersection					
0	1030	HALDIMAND	ROAD 20	HALDIMAND	ROAD 20 and HIGHWAY 3				
	Town / City or Tow	nship / County		Province	Postal Code				
		HAGERSVILL	E	ONTARIO	N0A 1H0				
	Name of Licence Ho	ldo.							
1	Name of Licence no				1				
L	W. J. HEASLIP LTD.								
- 1	Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). ROT type GUY HEASLIP								
L	Municipality (or municipalities if the facility or its hazard distance touches multiple borders)								
	HALDIMAND COUNTY								
	n/	EDIMPHIAD COOKIT							
					1				

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.

		Date (dd-mm-yyyy)
EASLIP LTD.		18-04-2011
the	Kuulla M	
GUY HEASLIP	May Scall	
	he	he /www.lo. ly



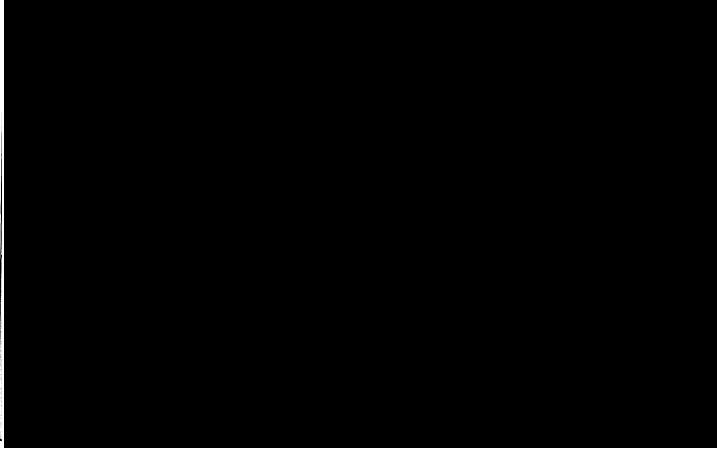
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Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act

Propane Storage and Handling Regulation

SECTION A: GENERAL INFORMATION (cont'd) Indicate the year the facility was established. Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. 1983 Identify the psig rating and serial number for each fixed propane storage tank on site. PSIG Serial Number Tank1: 250 psig 9D0-7482-2 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: 1000 uswg Portable: 535.2 uswg Mobile: ___



Name of person completing this form (please print)	Official Title	
GUY HEASLIP	CHIEF FINANCIAL	OFFICER
Signature JULY FLAULY ES 09195 (11/10) Page 201 15	Telephone No. 905-779-3467	Date (dd-mm-yyyy) 18-04-2011



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

Propane Storage and Handling Regulation

SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

<u> </u>			***************************************		T	
Name of Propane					For Office Use	- Party No.
SPARLING'S PROPANE COMPANY LTD.						
1	Street Name / 911 Number / Add	dress, if applicable				
183	INDUSTRIAL E	BLVD				
Town / City or Tov	wnship / Country ST. GEORGE			Province C	ONTARIO	Postal Code NOE 1N0
Telephone No.	Fax No.	Contact Name				
1-866-517-1	714 519-448-3450	TIN	// WOLFE			
E-mail tew@sp	arlings.com					
Name of Propane	Transporter. If same as abov	e, please check box. 🗸			For Office Use	- Party No.
Street No.	Street Name / 911 Number / Add	lress, if applicable				
Town / City or Tow	mship / Country			Province	-	Postal Code
elephone No.	Fax No.	Contact Name				<u> </u>
E-mail						
	nd/or Mobile Storage		ity stored off-site,	in USWG	For Office Use -	Party No.
Street No. S	Street Name / 911 Number / Addr	ess, if applicable	-	<u> </u>		
Town / City or Towr	nship / Country			Province		Postal Code
Felephone No.	Fax No.	Contact Name				L
ote: Customer stora	ge is not considered off-site st	orage.				
	Declaration: I am aware	e that it is an offence to g	ive false informa	ition in this d	ocument and	
	Thereby declare	that the information I ha	ve given here is	true and com	plete.	
	oleting this form (please print) GUY HEASLIP		Official Ti		ANCIAL OFFIC	CER
ignature			Talasta	- N-		T
ignature		1	Telephor	e No.		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 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. Other hazardous materials stored on site include gasoline, diesel fuel and dyed diesel fuel. All three are stored in above ground storage tanks (2200 litre
each tank) located 23 metres from the propane tank. The fuel is utilized for private use only. Small quantities of gasoline and diesel fuel are kept in portable
containers in boxes located outside of each repair shop. Oxygen and acetylene cylinders are kept in a cage outside the small motor repair shop 25 metres
from the propane tank. Typically 3 of each gas is kept and used by the mechanics in both repair shops.
Description of fire and emergency equipment indicated on facility site map. One 20BC fire extinguisher is kept at the dispenser. There are an additional 14 fire extinguishers located on site throughout the buildings. An emergency
cut-off (ECO) switch located on a post at the dispenser that terminates power to the propane pump and solenoid valve on the liquid propane line.
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 ISC valve at the tank liquid outlet is equipped with a fusible link, which when exposed to excessive heat will melt allowing the ISC to close.
The ISC valve remains closed when the dispenser is not in use. Due to the physical layout, when the cabinet door is closed the ISC is also shut off.
The ECO switch is located adjacent to the dispenser. When activated, power is terminated to the propane pump and the solenoid valve in the liquid propane
line. The main breaker is located in the hydro panel inside the side door of the main store which is adjacent to the dispenser.
Maintenance and testing schedule for fire protection controls and devices. The annual maintenance and dispenser inspection is performed by Sparling's Propane. The license holder performs daily recorded visual inspections of the equipment and area. Any deficiencies found are reported to Sparling's Propane for repair immediately. The license holder maintains a record of
monthly testing of the ISC valve and the ECO operation. The fire extinguishers are maintained in accordance with applicable Provincial and Municipal
Regulations.

Name of person completing this form (please print)		Official Title	Official Title		
L	GUY HEASLIP	CHIEF FINANCIAL (OFFICER		
Signature		Telephone No.	Date (dd-mm-yyyy)		
	usu Helvhil	905-779-3467	18-04-2011		
FS 09195 (11/10) Page 4 of 15	1009 11-10gi				



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

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

1. Contacts for Emergency Response

1. Facility Contact Personnel - Ke	y Contact	5. Facility 24-Hour Contact Person		
Name GUY HEASLIP	For Office Use - Party No.	Name For Office Use - Party No.		
Official Title CHIEF FINANCIAL OF	FFICER	Official Title CHIEF FINANCIAL OFFICER		
Telephone No. 905-779-3467	Fax No. 905-779-3856		No. 905-779-3856	
E-mail guyh@wjheaslip.com	Cell # 905-512-6744	E-mail guyh@wjheaslip.com		
Role and responsibilities in emergence	•	Role and responsibilities in emergency		
Assist emergency services as required	1	Assist emergency services as required		
2. Facility Contact Personnel - A	Iternate Contact	6. Name of Facility Manager		
Name ROB HEASLIP	For Office Use - Party No.	Name GUY HEASLIP	For Office Use - Party No.	
Official Title PRESIDENT		Official Title CHIEF FINANCIAL OFFICER		
Telephone No. 905-779-3467	Fax No. 905-779-3856		No. 905-779-3856	
E-mail robh@wjheaslip.com	Cell # 905-541-4551	E-mail guyh@wiheaslip.com	Cell # 905-512-6744	
Role and responsibilities in emergence	су	Role and responsibilities in emergency		
Assist emergency services as required		Assist emergency services as required		
Local Fire Services - Key Conta	ici .	7. Propane Supplier Key Contact Person		
Name ROB GRIMWOOD	For Office Use - Party No.	Name TIM WOLFE	For Office Use - Party No.	
Official Title FIRE CHIEF		Official Title REGIONAL MANAGER	A CONTRACTOR OF THE PROPERTY O	
Telephone No. 905-318-0159 ext 229	Fax No. 905-701-0200	Telephone No. 1-866-517-1714 Fax	No. 519-448-3450	
E-mail rgrimwood@haldimandcoun	ity.on.ca	E-mail tew@sparlings.com		
Role and responsibilities in emergence	у	Role and responsibilities in emergency		
Manage emergency response		Key Contact to activate Sparling's Propane ERAP # 2-0220		
4. Local Fire Services - Alternate C	Contact	8 Municipal Contact		
Name ALAN GEE	For Office Use - Party No.	Name ROB GRIMWOOD	For Office Use - Party No.	
Official Title FIRE PREVENTION OFFICE	≣R	Official Title FIRE CHIEF		
Telephone No. 905-318-0159 ext 242	Fax No. 905-701-0200	Telephone No. Fax 905-318-0159 ext 229	No. 905-701-0200	
E-mail agee@haldimandcounty	.on.ca	E-mail rgrimwood@haldimandcounty.on.ca		
Role and responsibilities in emergence	у	Municipality		
Assist with management of emergency	response	Haldimand County		

lame of person completing this form (please print)	Official Title
GUY HEASLIP	CHIEF FINANCIAL OFFICER
Signature	Telephone No. Date (dd-mm-yyyy)
MILL Henry	905-779-3467 18-04-2011



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 3300 Bloor Street West

 Safety Authority
 Toronto Ontario M8X 2X4

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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. There are fourteen (14) additional fire extinguishers available at the facility, ranging in rating from 1A 10BC to 6A 80BC.
The facility is located in a rural area, with no hydrant presence. There is a cistern under the building 40 feet by 80 feet by 6 feet deep that is naturally filled
with water that could be used by fire services. Access to the cistern is through grated openings across the front of the main store.
A sign is affixed to the dispenser identifying Sparling's Propane as the fuel supplier as well as posting the Sparling's 24/7 emergency response
phone number (1-866-517-1714).
The dispenser cabinet remains closed except when being used thereby closing the ISC valve by way of a lever extension that prohibits the cabinet door
from being shut if the ISC valve is in the open position. The cabinet door is locked when the facility is closed.
Visual inspections are performed and recorded by the operator on days of operation.
Monthly inspections of the fire extinguisher and testing of the ECO switch and ISC valve are performed and recorded by the operator.

Name of person completing this form (please print)	Official Title	
GUY H	EASLIP	CHIEF FINANCIAL	OFFICER
Signature	1 //	Telephone No.	Date (dd-mm-yyyy)
	IU Hall	905-779-3467	18-04-2011
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Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act

Propane Storage and Handling Regulation

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

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

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. raining Date (dd-mm-yyyy) Print Name of Training Provider: W.J. Heaslip Ltd. Print Name of Instructor: Guy Heaslip Training Date (dd-mm-yyyy) Print Name of Training Provider: Print Name of Instructor:	Training on Emergency Re	sponse Plan and Procedures provided to facility key contacts.			
Training Date (dd-mm-yyyy) Print Name of Training Provider: Print Name of Instructor: Print Name of Instructor: Print Name of Instructor: Training Date (dd-mm-yyyy) Print Name of Instructor: Training Date (dd-mm-yyyy) Print Name of Instructor: Guy Heaslip Ltd. Print Name of Instructor: Print Name of Instructor: Print Name of Instructor: Guy Heaslip Print Name of Instructor: Training Date (dd-mm-yyyy) Print Name of Instructor: Training Date (dd-mm-yyyy) Print Name of Instructor: Print Name of Instructor: Guy Heaslip Ltd. Print Name of Instructor: Guy Heaslip Print Name of Instructor: Guy Heaslip Print Name of Instructor: Print Name of Training Provider: Print Name of Instructor: Print Name of Training Provider: Print Name of Training Provider:	Training Date (dd-mm-yyyy)	Print Name of Training Provider: W.J. Heaslip Ltd.			
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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: W.J. Heaslip Ltd. Print Name of Instructor: Guy Heaslip Print Name of Instructor: Print Name of Instructor: Print Name of Training Provider: Print Name of Instructor: Print Name of Instructor: Print Name of Training Provider: Print Name of Instructor: Print Name of Instructor: Print Name of Training Provider: W.J. Heaslip Ltd. Print Name of Training Provider: W.J. Heaslip Ltd. Print Name of Instructor: Guy Heaslip Print Name of Instructor: Guy Heaslip Print Name of Training Provider: Print Name of Instructor: Guy Heaslip Print Name of Instructor: Guy Heaslip Print Name of Instructor:	Training Date (dd-mm-yyyy)	Print Name of Training Provider:			
Training on the facility's Emergency Management Procedures provided to staff. Training Date (dd-mm-yyyy) June 7, 2010 Print Name of Training Provider: W.J. Heaslip Ltd. Print Name of Instructor: Guy Heaslip Print Name of Instructor: Print Name of Instructor: Guy Heaslip Ltd. Print Name of Instructor: Guy Heaslip Ltd. Print Name of Instructor: Guy Heaslip Print Name of Instructor:		Print Name of Instructor:			
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June 7, 2010 Print Name of Instructor: Guy Heaslip Training Date (dd-mm-yyyy) Print Name of Training Provider: Print Name of Instructor: Training Date (dd-mm-yyyy) Print Name of Training Provider:	On-site specific training pro	vided to certificate holders / persons with Records of Training.			
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Print Name of Instructor: Training Date (dd-mm-yyyy) Print Name of Training Provider:	June 7, 2010	Print Name of Instructor: Guy Heaslip			
Training Date (dd-mm-yyyy) Print Name of Training Provider:	Training Date (dd-mm-yyyy)	Print Name of Training Provider:			
		Print Name of Instructor:			
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	
GUY HEASLIP	CHIEF FINANCIAL OFFIC	CER
Signature	Telephone No.	Date (dd-mm-yyyy)
Chly Hearted	905-779-3467	18-04-2011

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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)

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: W.J. Heaslip Ltd.
June 7, 2011	Print Name of Instructor: Guy Heaslip
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
when the same and sam	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: W.J. Heaslip Ltd.
June 7, 2011	Print Name of Instructor: Guy Heaslip
Target Date (dd-mm-yyyy)	Print Name of Training Provider: W.J. Heaslip Ltd.
As needed (new hires)	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
On-site specific training pro	ovided to certificate holders / persons with Records of Training.
arget Date (dd-mm-yyyy)	Print Name of Training Provider: W.J. Heaslip Ltd.
June 7, 2011	Print Name of Instructor: Guy Heaslip
Target Date (dd-mm-yyyy)	Print Name of Training Provider: W.J. Heaslip Ltd.
As needed (new hires)	Print Name of Instructor: Guy Heaslip
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

Name of person comple	ting this form (please print)	Official Title		
GUY HEASLIP		CHIEF FINANCIAL OFFICER		
Signature	Guy Skays	Telephone No. 905-779-3467	Date (dd-mm-yyyy) 18-04-2011	
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Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act

Propane Storage and Handling Regulation

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

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

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). Also see Emergency Response Procedures (Tab 8)
The facility attendant will notify management in the event of an emergency situation. In the event that the attendant is not present all employees are
trained to report emergency situations to the office. Management will use the paging system to alert employees and customers of the need to evacuate the
premises.
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).
All employees have been trained that when an evacuation order is announced or an evacuation is otherwise necessary, they are to leave the property
immediately and report to the meeting place at the "Stihl" sign at the road. Management is responsible for notifying emergency services. Management will
take a roll call and will confirm emergency services have been notified of the emergency. This information will be passed on to the key contact or emergency
services as required. All customers on the premises will be ordered to evacuate with the employees.

Communication with Emergency Response Authorities	
Describe when and how the licence holder will give early warning to emergency response authorities (including a proce placed to 911).	ess to ensure that a call is
The manager or senior staff are responsible for calling 911 in an emergency.	
Describe provisions for fire department entry when there are no operations or staffing at the propane site.	
The fire services has 24 hour access to the propane dispenser, however the cabinet housing the dispensing equipment is left clos	sed and locked when not
open for business.	
Describe how the licence holder will ensure continual flow of updated information to authorities. Once emergency services have been notified, the key contacts for W.J. Heaslip are to be contacted, if not on site. It is their respor	nsibility to ensure that
information is passed on to the authorities. Until their arrival the on duty manager will provide information to emergency services.	To onsure that
How long will it take the facility liaison person to respond to the site.	
1-2 minutes	

Name of person completing this form (please print) GUY HEASLIP		Official Title CHIEF FINANCIAL OFFICER		
Signature	any Hears	Telephone No. 905-779-3467	Date (dd-mm-yyyy) 18-04-2011	
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Propane Storage and Handling Regulation

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

The licence holder will complete Section B in consultation with the local Fire Services. 6. Building and Site Security and Procedures Yes No Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)? 2. Is there adequate night lighting at the site? Are procedures in place that ensure access routes, aisles, storage area, filling areas 3. and the grounds are kept clear from unwanted materials? Are there procedures that capture and record the daily inspection of hoses and inspection requirements for filling systems and mechanical devices used in the transfer of propane? Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders? Are weighing systems validated for accuracy? Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, 7. purged and other hazardous materials)? Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves) Is the schedule of maintenance and testing activities retained on site? 7. Water Supply The propane licence holder should work with the local fire department to determine water supply capabilities that are available based on the propane facility's location. Yes No Is a pressurized water system available at the propane facility site? Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location? What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only) 9000 Metres-shuttle What is the unobstructed distance to the closest approved water supply with year round access if there are no hydrants? (distance in metres only) 9000 Metres-shuttle 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 **GUY HEASLIP** CHIEF FINANCIAL OFFICER Signature Telephone No. Date (dd-mm-yyyy)

905-779-3467

18-04-2011



Technical Standards and Safety Authority www.tssa.org

14th Floor - Centre Tower 3300 Bloor Street West Toronto Ontarlo 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 B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd) The licence holder will complete Section B in consultation with the least Fire Section B.

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 Yes No Has the local fire service had an opportunity to review the Emergency Response and Preparedness Plan? 1 If not, please explain (e.g., no fire services). Fire services comments, if any: FIRE DEPARTMENT CAN ONLY SUPPLY 200 GPM AS PER ACCREDITATION THROUGH FIRE PROTECTION SURVEY SERVICES. 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. Signature Date (dd-mm-yyyy) Rob Frimwood 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) Official Title GUY HEASLIP CHIEF FINANCIAL OFFICER Signature Telephone No. 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

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) April 1, 2011			Capacity of single largest propane storagevessel (USWG) 1000 uswg		
Tank setback coordinates. Front: Rear:	Indicate placement of 12.1 metres 54.25 metres	on the map. Right side property line: Left side property line:	146 metres 66.75 metres		
GPS coordinates of single	largest vessel:	lorth 42.55.626 by West 079.57.303			

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	GUY HEASLIP	CHIEF FINANC	AL OFFICER
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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:

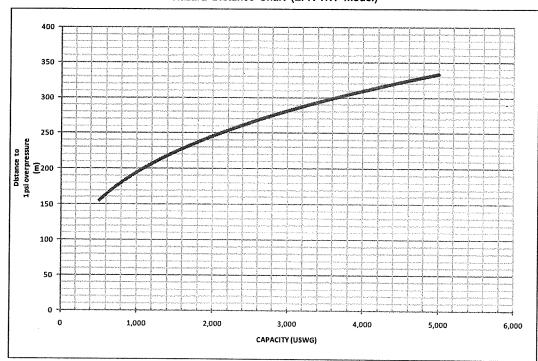
Density of Propane is 0.5033 kg per litre @ 15 C

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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	GUY HEASLIP	CHIEF FINANCIAL OF	FICER
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FS 09195 (11/10) Page 13 of 15	My Herry	905-779-3467	18-04-2011



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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		and F nark w	of Build eatures ith an "	X")	Distance from Tank to Closest Building or
Industrial Name:	buildings or parks or golf courses Armstrong Milling	0	1	2-10	11+	Feature
	4000 Haldissand David Oo		l x			m
Address: City:	Nelles Corners Province Ontario Postal Code NOA 1H0					
Residenti	al building units specifically permanent single family dwellings, condominiums, and apartments.					
					x	<u>67.2</u> m
Commerc	ial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Schweyer Seeds					
	1080 Haldimand Road 20			x		130 m
ity:	Nelles Comers Province Ontario Postal Code NOA 1H0					
Commerci Name:	ial building units continuous occupancy specifically hotels, campgrounds, and resorts.					
		x				m
City:	ProvincePostal Code					
	institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental h	ealth				
Name:		x				m
Address:						
City:	Province Postal Code					
Emergenc	y responders specifically fire stations, ambulance stations, and police stations.					
Name:						
Address:		×				m

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

	more to trae and complete.	
Name of person completing this form (please print)	Official Title	
GUY HEASLIP	CHIEF FINANCIAL OFFICE	≅R
Signature	Telephone No.	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		Western H
# 100	29.5	6	177
# 40	11.75		
# 33.3	9.62	10	96.2
# 30	8.8	10	88
# 20	5.8	30	174
# 10	2.9		
#5	1.5		
l Cylinder Capacity	535.2 uswg	P	

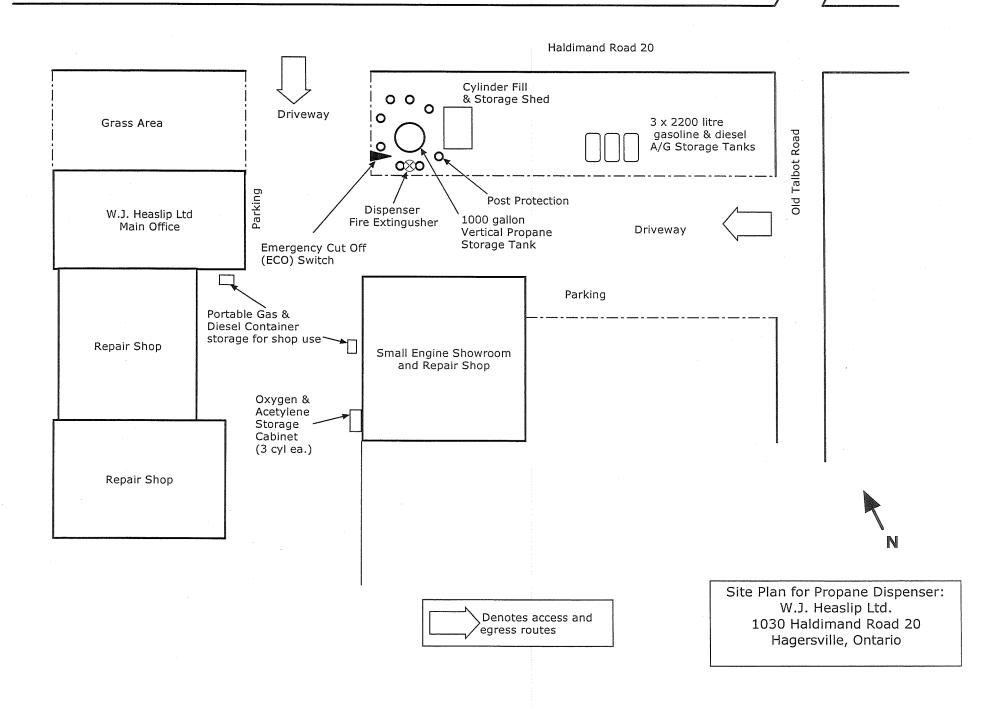
Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
Total Tank Capacity		
Total Cylinder Capacity		535.2
Total Tank Capacity		0
Total Portable Capacity		505.0

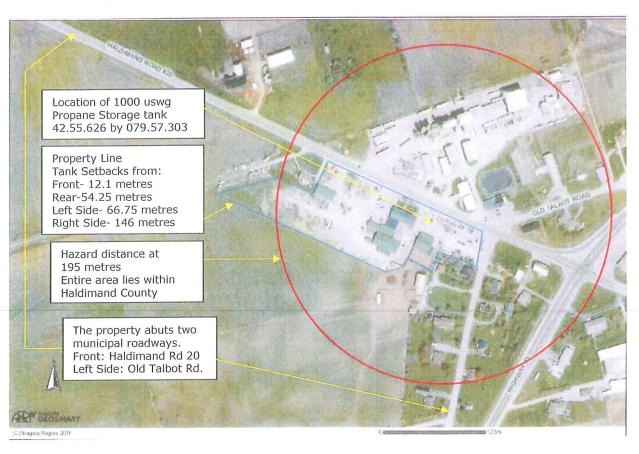
Declaration: I am aware that it is an offence to give false information in this document and I hereby declare that the information I have given here is true and complete.

535.2 uswg

Name of person completing this form (please print) GUY HEASLIP	Official Title CHIEF FINANCIAL OFFICER	
Signature (July Levely) ES 09195 (11/10) Page 15 of 15	Telephone No. 905-779-3467	Date (dd-mm-yyyy) 18-04-2011



AERIAL MAP of W.J. HEASLIP LTD. 1030 HALDIMAND ROAD 20, HAGERSVILLE, ONTARIO



Facility Address:	Legal Description of Property:
1030 Haldimand Road 20, Hagersville, Ontario	RNH Con 9 Pt Lot 2RP 18R1152 parts 1 and
Subsequents de 19	2 and RP18R5998 Part 1, Haldimand
	County
Municipal Contact Information:	Date Map Prepared:
Evelyn Eichenbaum	
Municipal Clerk, Haldimand County	April 1, 2011.
45 Munsee St. N., P.O. Box 400	
Cayuga, Ontario NOA 1E0	
905-318-5932	