



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*

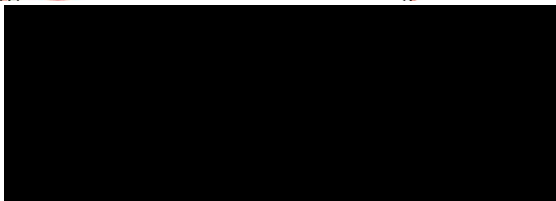
Licence Number 000155722

Check applicable type of propane operations.

Cylinder Motor Fill Filling Plant Card/Keylock

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

For Office Use Only
Intake Group



SECTION A: GENERAL INFORMATION

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

A Company Name 1557051 Ontario Inc. Ontario Corporation No., if applicable same

Operator Name (if different from above) Harvinder Kaleka

Telephone No. 613-968-8727 Fax No. same E-mail kalekaa007hotmail.com

B Street No. 1156A Street Name / 911 Number / Address, if applicable HWY 37 North

Town / City or Township / County Corbyville Province Ontario Postal Code K0K 1V0

Mailing address if different from above.

C 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

D Location of facility.

Street No. 1156A Street Name / 911 Number / Address, if applicable HWY 37 North Nearest Major Intersection HWY 37 & Harmony Road

Town / City or Township / County Corbyville Province On Postal Code K0K 1V0

Name of Licence Holder Harvinder Kaleka

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). Harvinder Kaleka ROT type PTI 100-8

Municipality (or municipalities if the facility or its hazard distance touches multiple borders) City Of Belleville

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 Name of Licence Holder <u>Harvinder Kaleka</u>	Signature 	Date (dd-mm-yyyy) <u>15/04/11</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training <u>Harvinder Kaleka</u>		

Instance 6448 4410

[*]

Indicate the year the facility was established. March 11, 2004	Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. September 2, 2009
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Identify the psig rating and serial number for each fixed propane storage tank on site.

	PSIG	Serial Number
Tank1:	250	519-91
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 USWG Portable: 100 USWG
98.6 Mobile: _____

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) HARVINDER KALEKA	Official Title OWNER	
Signature 	Telephone No. 613-968-8727	Date (dd-mm-yyyy) 24-05-2012



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

Name of Propane Supplier(s) Superior Propane		For Office Use	
Street No. 686A	Street Name / 911 Number / Address, if applicable Dundas Street West		
Town / City or Township / Country Belleville		Province Ontario	Postal Code K8N 4Z2
Telephone No. 613-962-9151	Fax No. 613-962-6117	Contact Name Jeff Easton	
E-mail eastonj@superiorpropane.com		www.superiorpropane.com	

Name of Propane Transporter. If same as above, please check box. <input checked="" type="checkbox"/>		For Office Use	
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			

Off-site Cylinder and/or Mobile Storage		Capacity stored off-site, in USWG	For Office Use - Party No.
Street No.	Street Name / 911 Number / Address, if applicable		
Town / City or Township / Country		Province	Postal Code
Telephone No.	Fax No.	Contact Name	

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

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Name of person completing this form (please print) Harvinder Kaleka		Official Title Owner/Operator	
Signature 	Telephone No. 613-986-8727	Date (dd-mm-yyyy) 15/04/11	



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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.

1 x 35,000 USWG Under Ground - Regular Gasoline

1 x 25,000 USWG Under Ground - Diesel

1 x 10,000 USWG Under Ground - Regular Gasoline

1 x 10,000 USWG Under Ground - Premium Gasoline

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

5 - Fire Extinguishers located through out the facility

Belleville Fire Department 1/2 KM from this location (Located west of HWY 37 on Harmony Road)

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- Automatic Shutoff devices- Equipped with Internal Safety Valve (ISC) Excess Flows, Fusible links, Back Checks.

2- Fire Extinguishers 20 BC (Move fire extinguisher out of propane dispensing cabinet and move by diesel dispensing pump)

3- Emergency Shutoffs (Electrical) installed @ Propane Dispenser & Fuse Panel (Identified)

Maintenance and testing schedule for fire protection controls and devices.


Everyday procedures in place by staff

Fire Extinguishers are checked daily by staff, annually by Hasting Fire Equipment (documentation for daily inspection) (Daily inspection not happening)

Also Supplier Annual inspection & Visual inspection by Bulk Driver @ time of delivery (Superior Propane)

TSSA audits - (facility inspection) (Facility inspection documentation to be readily on file on site)

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Signature 	Telephone No. 613-968-8727	Date (dd-mm-yyyy) 15/04/11



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

1. Contacts for Emergency Response

1. Facility Contact Personnel - Key Contact		5. Facility 24-Hour Contact Person	
Name Harvinder Kaleka	For Office Use - Party No.	Name Harvinder Kaleka	For Office Use - Party No.
Official Title Owner / Operator		Official Title Owner / Operator	
Telephone No. 613-968-8727	Fax No. same	Cell No.	Fax No. same
E-mail kalekaa007@hotmail.com		E-mail kalekaa007@hotmail.com	
Role and responsibilities in emergency To take charge incase of emergency, train new staff of Emergency Action Plan (EAP)		Role and responsibilities in emergency To take charge incase of emergency, train new staff of Emergency Action Plan (EAP)	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name Sharanjeet Khroud	For Office Use - Party No.	Name Same as above	For Office Use - Party No.
Official Title Partner		Official Title	
Telephone No. 613-968-8727	Fax No. same	Telephone No.	Fax No.
E-mail		E-mail	
Role and responsibilities in emergency To take charge of incase of emergency, if Harvinder Kaleka is not present, and to follow up with Harvinder a.s.a.p.		Role and responsibilities in emergency	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name Scott Bush	For Office Use - Party No.	Name Jeff Easton	For Office Use - Party No.
Official Title Fire Prevention Officer		Official Title Field Supervisor of Operations	
Telephone No. 613-962-2010	Fax No.	Telephone No. 613-62-9151 or 9153	Fax No. 613-962-6117
E-mail sbush@city.belleville.on.ca		E-mail eastonj@superiorpropane.com	
Role and responsibilities in emergency To be familiar with Emergency Action Plan (EAP) & familiar with the facility & Fire inspection of facility and record findings		Role and responsibilities in emergency To take all action to remedy any emergency, advise , and send in staff to render a safe facility and possible ERAP procedure if required	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name Bruce Greatrix	For Office Use - Party No.	Name Julie Oram	For Office Use - Party No.
Official Title Deputy Fire Cheif		Official Title City Clerk	
Telephone No. 613-962-2010	Fax No.	Telephone No. 613-967-3271	Fax No.
E-mail bgreatrix@city.belleville.on.ca		E-mail	
Role and responsibilities in emergency To do Fire inspections through out the year and report and finding to the owner, and responsible to make sure any corrections are completed		Municipality City of Belleville, Ontario	

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Name of person completing this form (please print) Havinder Kaleka	Official Title Owner/Operator
Signature 	Telephone No. 613-986-8727
	Date (dd-mm-yyyy) 15/04/11



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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.

See - Emergency Action Plan (EAP) (attached)

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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)	Print Name of Training Provider: Haslings Fire Equipment
	Print Name of Instructor: John Cleary
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)	Print Name of Training Provider: Harvinder Kalaria (Owner / Operator) (self training operation)
	Print Name of Instructor: same as above
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)	Print Name of Training Provider: FSN Training & Development Inc
	Print Name of Instructor: Leo Aikenbrack (T11)
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) Harvinder Kalaria	Official Title Owner/Operator
Signature 	Telephone No. 613-968-8727
	Date (dd-mm-yyyy) 15/04/11



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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)	Print Name of Training Provider: Hastings Fire Protection
15-08-2011	Print Name of Instructor: Staff of Hastings Fire Protection (Havinder Kaleka to call for training on fire extinguisher)
Target Date (dd-mm-yyyy)	Print Name of Training Provider: Superior Propane (Havinder Kaleka to call for any up graded training on dispenser)
15-08-2011	Print Name of Instructor: Jeff Easton (Field Operation Supervisor)
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)	Print Name of Training Provider: Harvinder Kaleka (Owner / Operator)
15-08-2011	Print Name of Instructor: same as above
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)	Print Name of Training Provider: FSN Training & Development Inc.
n/a	Print Name of Instructor: Leo Alkenbrack (T111) (Havinder Kaleka to call for any further training ROT's)
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)	Official Title	
Harvinder Kaleka	Owner/Operator	
Signature	Telephone No.	Date (dd-mm-yyyy)
	613-968-8727	15/04/11



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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).
Havinder Kaleka or his partner (Sharanjeet Khroud) minor emergency call Superior Propane or render if safe to do so by Havinder and notify supplier.

If it is a major emergency Harvinder or Sharanjeet will call immediately 911 and shut down all power and internal safeties if safe to do so.

If not safe to shut down safely, will evacuate and call 911. In case of an emergency Havinder Kaleka or his Partner (Sharanjeet Khroud) will also notify Harmony Public School (613)962-7867 or (613)962-7560, Honeywell House 1212 Hwy 37 (613)967-0444 Resid. - Roxanne Trumble-Elliston (613)848-5314

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).
Havinder Kaleka will take action or Sharanjeet Khroud) partner will call 911 if it is a major emergency, and meet at the furthest northern location of property on the north side of the store

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).
Havinder Kaleka or Sharanjeet Khroud will follow the Emergency Action Plan (EAP)

Describe provisions for fire department entry when there are no operations or staffing at the propane site.
All entries (2) to property are clear at all times for emergency personal
This is reviewed with the Belleville Fire Department on their inspections through out the year

Describe how the licence holder will ensure continual flow of updated information to authorities.
Havinder Kaleka or Sharanjeet Khroud will ensure all updated information will be passed to authorities within 7 days of any changes

How long will it take the facility liaison person to respond to the site.
The owner or partner is always available to respond within minutes of an emergency. (Facility Liaison person lives in residential unit attached to commercial building). (If this changes inform authorities within 7 days)

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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 type="checkbox"/>	<input checked="" type="checkbox"/> <i>PC</i>
3. What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only)	1300 metres	
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)	1300 metres	

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

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

8. Licence holder and local Fire Services Review

To be completed by the Local Fire Services

Has the local fire service had an opportunity to review the Emergency Response and Preparedness Plan?

Yes

No

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

Fire services comments, if any:

Rheume M. Chaput (Director-Belleville Fire and Emergency Services) and Rural Fire Prevention Officer (Belleville Fire and Emergency Services) have reviewed this document and added comments in each section as applicable. The document was updated by Leo Alkenbrack FSN Training & Development Inc.

To be completed by the Licence Holder

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

The licence holder will respond to the Local Fire Services comments by: _____ (dd-mm-yyyy)

LOCAL FIRE SERVICES

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

Print name	Signature	Date (dd-mm-yyyy)
Local Fire Services Name Reaume M. Chaput		03-MAY-2011

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Name of person completing this form (please print) Harvinder Kaleka	Official Title Owner/Operator	Date (dd-mm-yyyy)
Signature 	Telephone No. 813-968-8727	15/04/11



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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) 14/04/2011	Capacity of single largest propane storage vessel (USWG) 2000 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: 21.34 m	Right side property line: 4.29 m
Rear: 31.80 m	Left side property line: 64.72 m
GPS coordinates of single largest vessel: N 44 14' 32.26 - W77 22' 50.75	

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SECTION C: SUBMISSIONS (cont'd)

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

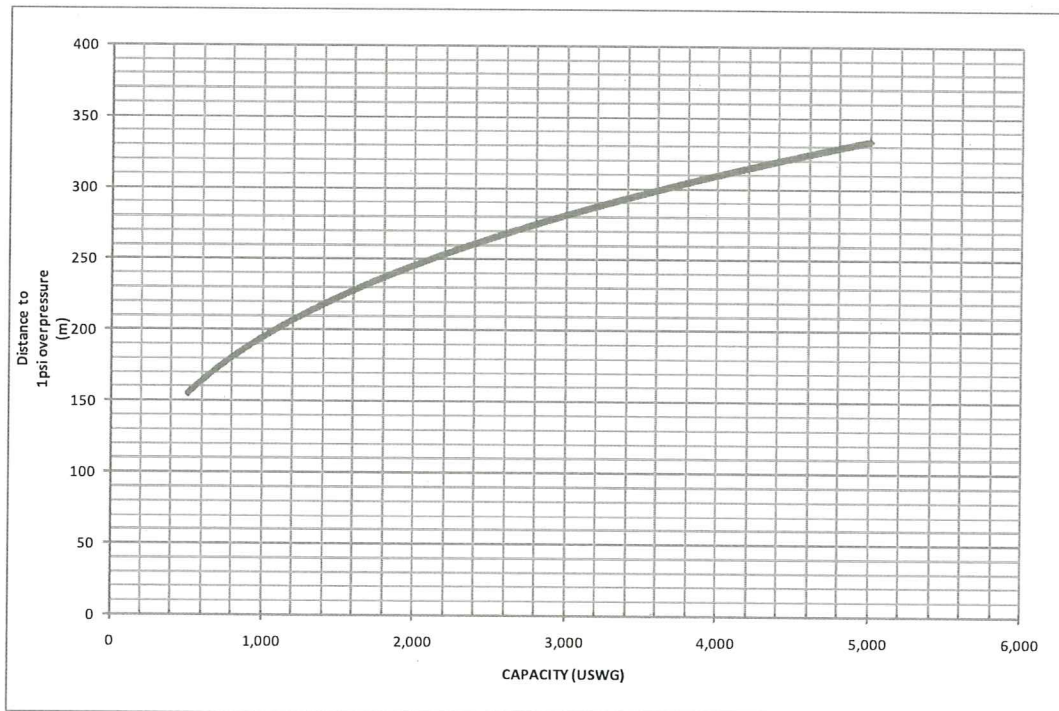
Table 1: Distance Table

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: C1 Highway Industrial Address: Con 4 Lot 11 part 1 & part 2 City: Corbyville Province On Postal Code K0K 1V0			x		81.6 m
Residential buildings Name: [REDACTED] Address: [REDACTED] City: [REDACTED]				x	62.34 m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: C1 Highway Industrial (Chip Truck) Address: 9 Ritz Road City: Corbyville Province On Postal Code K0K 1V0		x			10.91 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) Harvinder Kaleka	Official Title Owner/Operator
Signature 	Telephone No. 613-968-8727
	Date (dd-mm-yyyy) 15/04/11



Technical Standards and Safety Authority
www.tssa.org

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

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

SECTION C: SUBMISSIONS (cont'd)

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

Portable Storage Additional Information Sheet

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

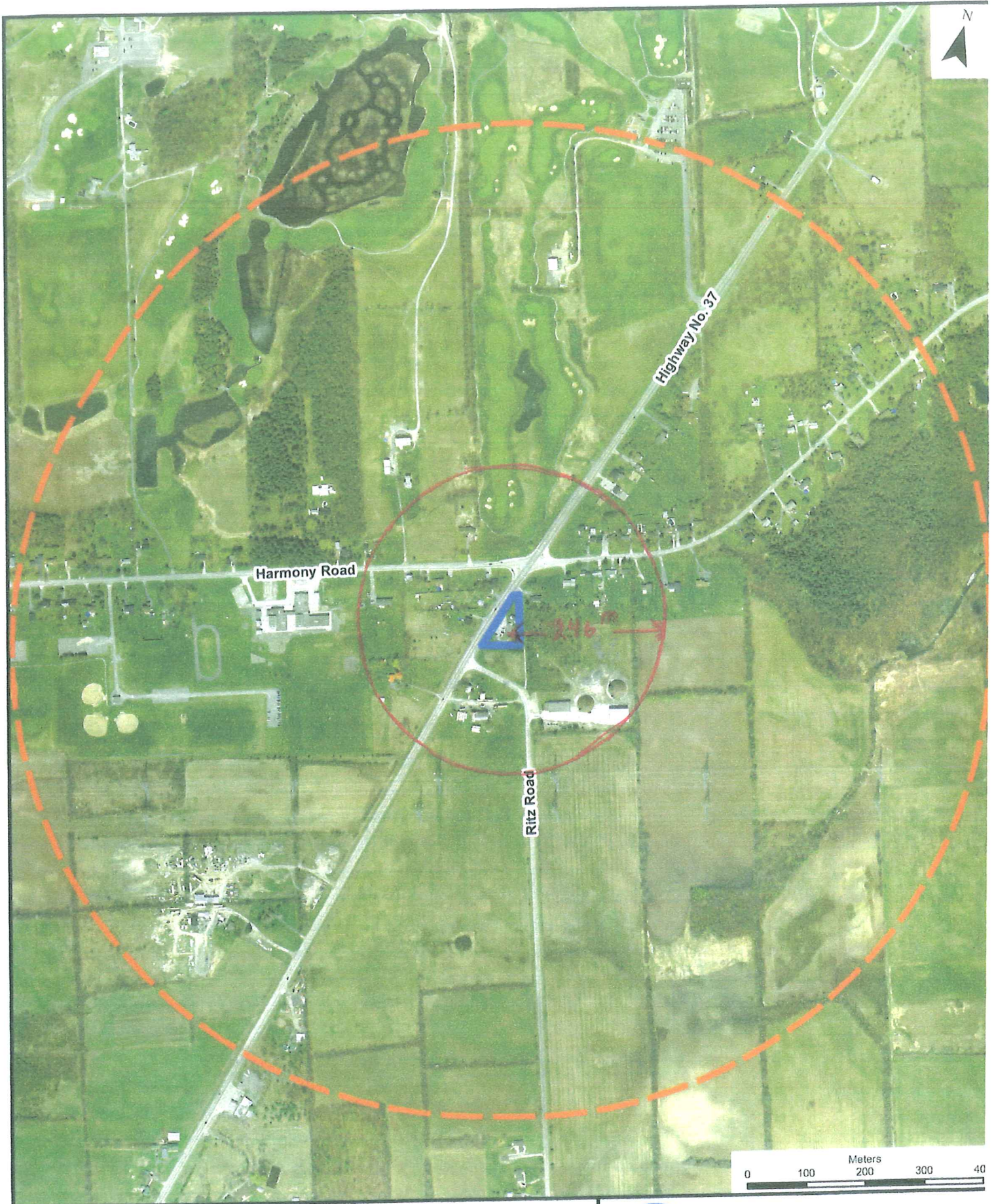
Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume In USWG
20 Pounds	N/A	
5.8 USWG	17	99 USWG
Total Tank Capacity		

Total Cylinder Capacity	N/A	98.6
Total Tank Capacity	N/A	
Total Portable Capacity	N/A	98.6

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) [E] HARVINDER Kaleka	Official Title OWNER
Signature	Telephone No. _____ Date (dd-mm-yyyy) _____



1156 A HWY 37

 1156 A Hwy 37
 800m
 246 m



CITY OF BELLEVILLE
 ENGINEERING & DEVELOPMENT
 SERVICES DEPARTMENT
 April 5th 2011

ROCZ ESSO
 1156A HWY 37 N.
 BELLEVILLE, ON.
 SCALE = 400:1



City of Belleville Safety Division

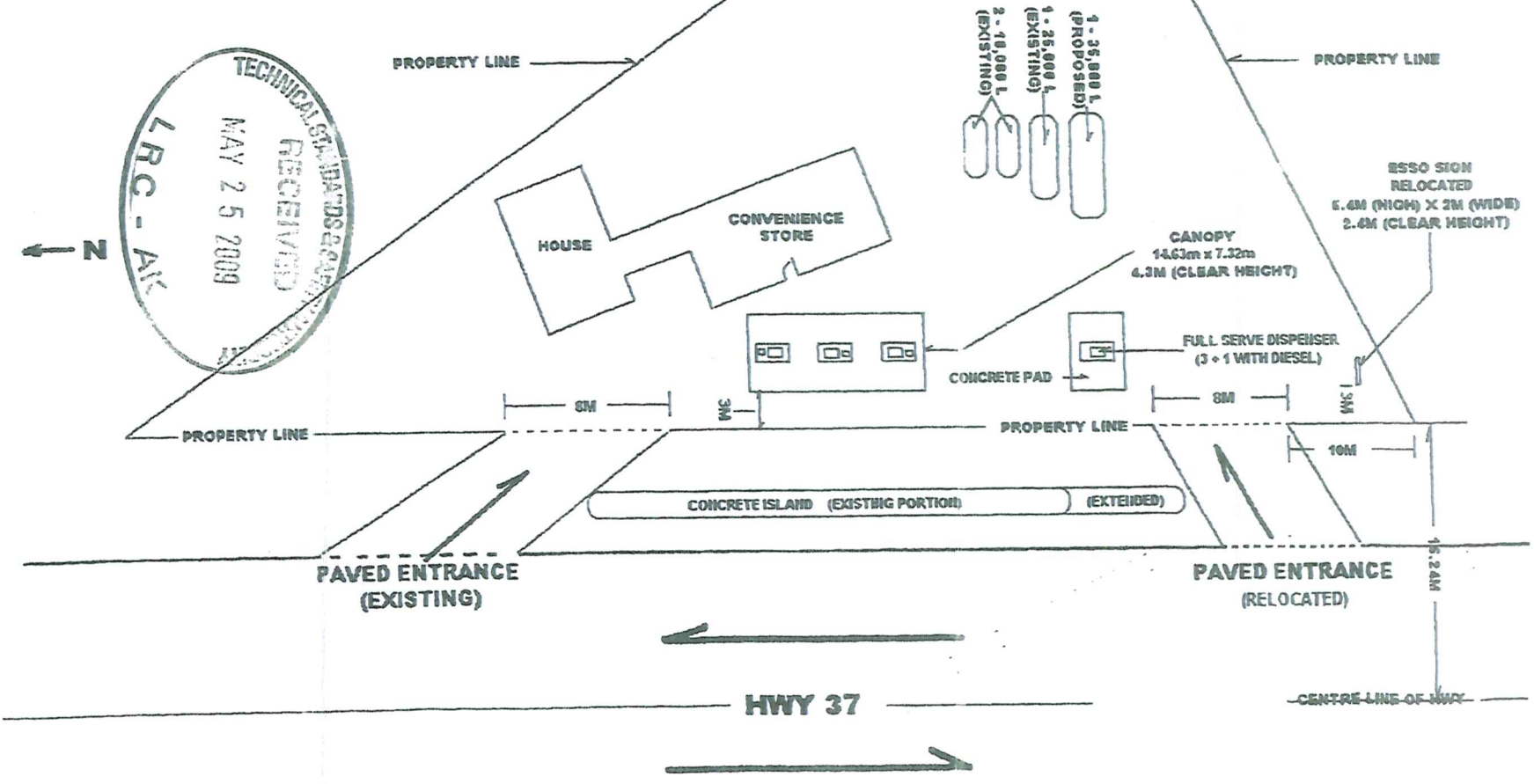
PLANNING REVIEWED

Project / Note: Yes / No

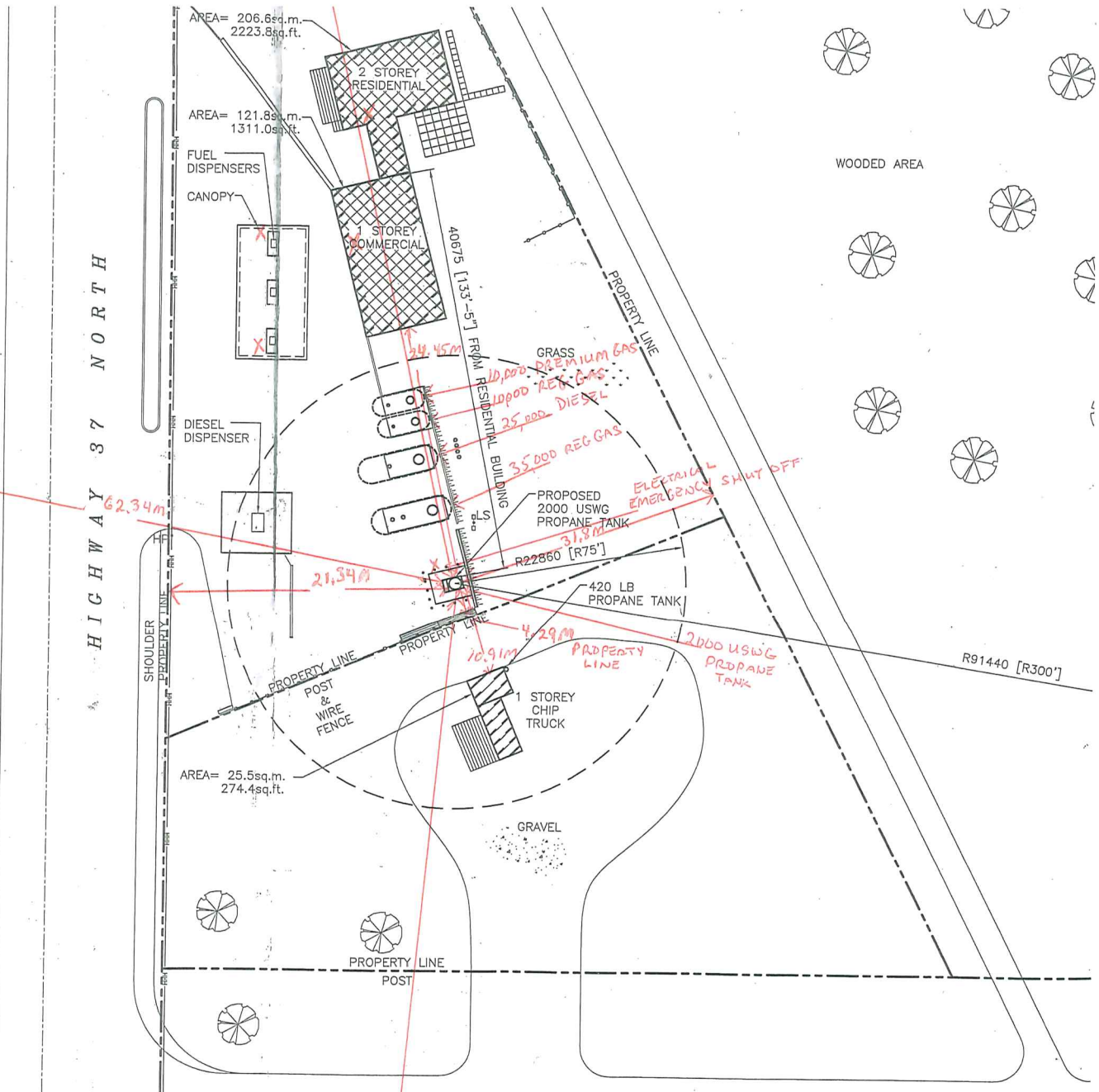
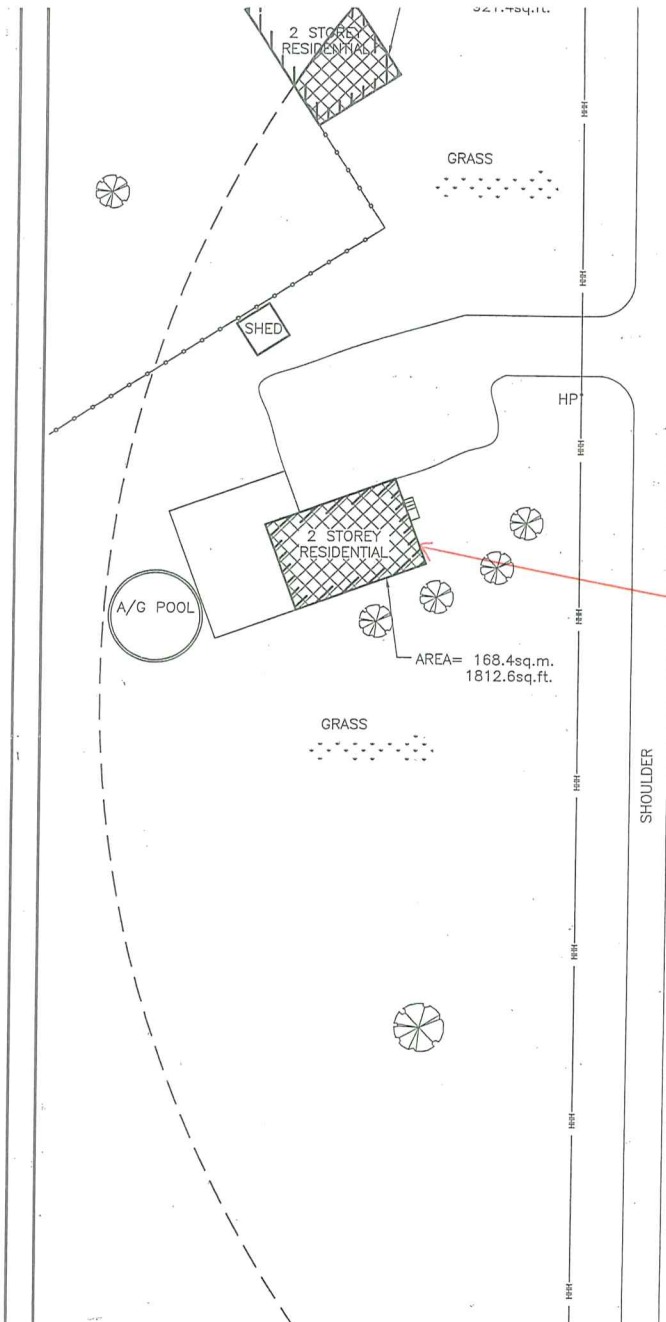
Approved: *Am. M. ...*

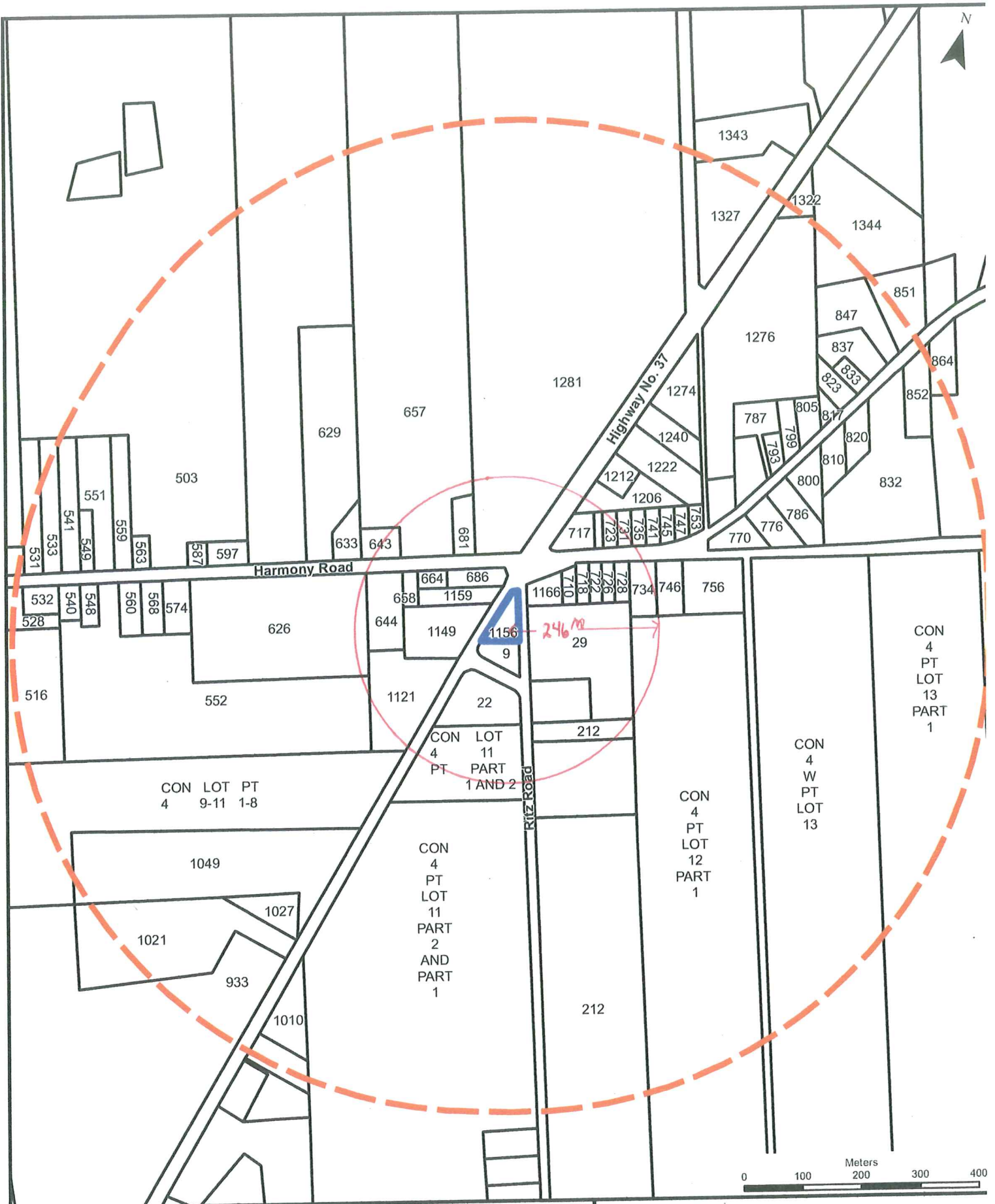
Signature: *C. H. ...*

Date: *Oct 1, 2009*



- 1 - 35,000 L (PROPOSED)
- 1 - 25,000 L (EXISTING)
- 2 - 18,000 L (EXISTING)





1156 A HWY 37 1 246m

 1156 A Hwy 37 800m

Civic Address/
Legal Description



CITY OF BELLEVILLE
ENGINEERING & DEVELOPMENT
SERVICES DEPARTMENT
April 5th 2011