# Technical Standards and Safety Author www.issa.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 lixed propane storage capacity of exactly 5,000 USWG and no more than 500 USWG of portable propane storage capacity on site.

A The Pit Stop in Ear Falls  Operator Name (if different from above) The Pit Stop  Telephone No. Fax No E-mail 807-222-3273 807-222-2254 hooter21@hotmail.com  B Street Name /911 Number / Address, if applicable 46 Hwy 105  Town / City or Township / County Province Postal Code Ear Falls On Province Postal Code  Ear Falls On Province Postal Code  Town / City or Township / County Province On Pov 1TO  Mailing address if different from above.  C Street No. Street Name / 911 Number / Address, if applicable  Town / City or Township / County Province On Postal Code On Province Postal Code On Pov 1TO  Name of City or Township / County Province Postal Code On Pov 1TO  Name of Licence Holder The Pit Stop in Ear Falls Name of a Senior Managament person as defined in the regulation holding the Record of Training (ROT). ROT type	SECTION A: GENERAL INFORMATION  SECTION A: GENERAL INFORMATION  The Undersigned applies to TSSA for a review for an RSMP under Ontario's Technical Standards and Safety Act, Propane Storage and Handling Regulation.  Company Name  A The Prt Stop in Ear Falls  Operator Name (if different from above)  The Pit Stop in Ear Falls  Operator Name (if different from above)  The Pit Stop in Ear Falls  Operator Name (if different from above)  Town / City or Township / County  Ear Falls  Mailing address if different from above.  Street Name / 911 Number / Address, if applicable  Town / City or Township / County  Fostal Code  Town / City or Township / County  Fostal Code  Town / City or Township / County  Fostal Code  Town / City or Township / County  Fostal Code  Town / City or Township / County  Fostal Code  Town / City or Township / County  Fostal Code  Town / City or Township / County  Fostal Code  Town / City or Township / County  Fostal Code  Town / City or Township / County  Fostal Code  Town / City or Township / County  Fostal Code  Fostal Code  Province  On  Nearest Mappiratoresection  Howy 105 & Aspen Street  Town / City or Township / County  Fostal Code  Fostal Code  Fostal Code  Pov 1 To  Name of Ucence Holder  The Pit Stop in Ear Falls  Name of a Senior Managament person as defined in the regulation holding the Record of Training (ROT).  ROT type  Kevin Kathool  Municipality (or municipalities if the facility or its hazarud distance touches multiple borders)	SECTION A: GENERAL INFORMATION  The Undersigned applies to TSSA for a review for an RSMP under Ontario's Technical Standards and Safety Ac Propane Storage and Handling Regulation.  Company Name  Anti-Pit Sing  Coperator Name (if different from above)  The Pit Sing in Ear Falls  Coperator Name (if different from above)  The Pit Sing in Ear Falls  Coperator Name (if different from above)  The Pit Sing in Ear Falls  Coperator Name (if different from above)  The Pit Sing in Ear Falls  Coperator Name (if different from above)  The Pit Sing in Ear Falls  Coperator Name (if different from above)  The Pit Sing in Ear Falls  Coperator Name (if different from above)  Town / City or Township / County  Ear Falls  Con  Pov 1 TO  Information on Container Refill Centre or Filling Plant  Location of facility.  Street Name / 911 Number / Address, if applicable  Town / City or Township / County  Province  Province  Province  Province  Province  Province  Province  Postal Code  Province  Province  Province  Postal Code  Province  Province  Province  Province  Province  Postal Code  Province  Province  Province  Postal Code  Province  Pro	cence Number	0076371129-C			
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The Pit Stop  Tetephona No. Fax No. E-mail  807-222-3273 807-222-2254 hooter21@hotmail.com  B Street Name / 911 Number / Address, if applicable  46 Hyy 105  Town / City or Township / County Province Postal Code  Ear Falls On POV 1TO  Mailing address if different from above.  C Street No. Street Name / 911 Number / Address, if applicable  Same  Town / City or Township / County Province Postal Code  On Pov 1TO  Information on Container Refill Centre or Filling Plant  Location of facility.  Street Name / 911 Number / Address, if applicable  Nearest Mojor Intersection  Hwy 105 & Aspen Street  Town / City or Township / County Province Postal Code  Ear Falls On Pov 1TO  Name of Usence Holder  The Pit Stop in Ear Falls  Name of a Senior Management person as defined in the regulation holding the Record of Training (BOT).  ROT type  Kevin Kathool PTI 100-1 Cert# 56063 (PP0-3  Municipality (or municipalities if the facility or its hazard distance touches multiple borders)	The Pit Stop  Telephone No. Fax No E-mail  B07-222-3273 B07-222-2264 hooter2 tighotmail.com  B Street No. Street Name / 911 Number / Address, if applicable  48 Hoy 105  Town / City or Township / County Province Postal Code  Ear Falls On Pov 1TO  Mailing address if different from above.  Street Name / 911 Number / Address, if applicable  Same  Town / City or Township / County Province Postal Code  Information on Container Refull Centre or Filling Plant  Location of facility.  Street No. Street Name / 911 Number / Address, if applicable  Nearest Major Infersection  Hwy 105 & Aspen Street  Town / City or Township / County Province Postal Code  Town / City or Township / County Province Postal Code  Town / City or Township / County Province Postal Code  Town / City or Township / County Province Postal Code  Ear Falls On POV 1TO  Name of Ucence Holder  The Pit Stop in Ear Falls  Name of a Senior Managament person as defined in the regulation holding the Record of Training (ROT). ROT type  Kevin Kathool PTI 100-1 Centre 56063 (PPO-3)  Municipality (or municipalities if the facility or its hazard distance touches multiple borders)  Township of Ear Falls	The Pit Stop  Telephone No.   Fax No   B07-222-3273   B07-222-3254   hooter24@hotmail.com    B Street No.   Street Name / 911 Number / Address, if applicable					
Telephone No. 807-222-3273 807-222-2264 hoterail.com  B Streat No. Streat Name /911 Number / Address, if applicable	Telephone No. 807-222-3273 807-222-2264 hoster21@hetmail.com  Street Name / 911 Number / Address, if applicable   Province   Postal Code   Pov 1TO    Town / City or Township / County   Province   Postal Code   Pov 1TO    Mailing address if different from above.  Street Name / 911 Number / Address, if applicable   Province   Postal Code   Pov 1TO    Mailing address if different from above.  Street Name / 911 Number / Address, if applicable   Province   Postal Code   Pov 1TO    Information on Container Refill Centre or Filling Plant   Location of facility.  Street Name / 911 Number / Address, if applicable   Nearest Major Intersection   Postal Code   Pov 1TO    Information on Container Refill Centre or Filling Plant   Location of facility.  Street No.   Street Name / 911 Number / Address, if applicable   Nearest Major Intersection   Postal Code   Pov 1TO    Information on Container Refill Centre or Filling Plant   Nearest Major Intersection   Postal Code   Pov 1TO    Information on Container Refill Centre or Filling Plant   Nearest Major Intersection   Postal Code   Pov 1TO    Information of Container Refill Centre or Filling Plant   Nearest Major Intersection   Postal Code   Pov 1TO    Name of Licence Holder   Postal Code   Pov 1TO   Pov 1TO    Name of Licence Holder   Postal Centre or Filling Record of Training (ROT).   ROT type   Revin Kathool   Pov 1 To   Pov 1	Telephone No. 807-222-3273 807-222-284 hooter21@hotmail.com  Street No. Street Name / 911 Number / Address, if applicable   Hwy 105   Province   Postal Code   PoV 1TO    Mailing address if different from above.  Street No. Street Name / 911 Number / Address, if applicable   Province   PoV 1TO    Mailing address if different from above.  Street No. Street Name / 911 Number / Address, if applicable   Province   Pov 1TO    Information on Container Refill Centre or Filling Plant   Location of facility. Street Name / 911 Number / Address, it applicable   Nearest Major Inforsection   Nearest Major Inforsection   Hwy 105 & Aspen Street    Town / City or Township / County   Province   Postal Code   Pov 1TO    Name of Licence Holder   The Pit Stop in Ear Fells   On   POV 1TO    Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). ROT type   Kevin Kathoot   PTI 100-1 Cent# 56063 (PPO Municipality (or municipalities if the facility or its hazard distance touches multiple borders)   Township of Ear Falls   PTI 100-1 Cent# 56063 (PPO Municipality (or municipalities if the facility or its hazard distance touches multiple borders)   Township of Ear Falls   Township of Ear Falls	A STATE OF THE PARTY OF THE PAR	(if different from above)			
807-222-3273 807-222-2264 hooter21@hotmail.com  Street Name / 911 Number / Address, if applicable   Hvvy 105   Province   Postal Code   P0V 1T0    Ear Fails   On   P0V 1T0   Province   Postal Code   P0V 1T0    Mailing address if different from above.   Street Name / 911 Number / Address, if applicable   Same   Province   Province   Postal Code   P0V 1T0    Town / City or Township / County   Province   Province   Postal Code   P0V 1T0    Information on Container Refill Centre or Filling Plant   Location of facility.   Street Name / 911 Number / Address, if applicable   Nearest Major Intersection   Hvvy 105   Aspen Street    Town / City or Township / County   Province   Postal Code   P0V 1T0    Name of Usence Holder   The Pit Stop in Ear Falls   On   P0V 1T0    Name of Usence Holder   The Pit Stop in Ear Falls   Name of a Senior Managament person as defined in the regulation holding the Record of Training (ROT).   ROT type   Kevin Kathool   PTI 100-1 Cert# 56063 (PP0-3   Municipality for municipalities if the facility or its hazard distance touches multiple borders)	B StreetNo. Street Name / 911 Number / Address, if applicable    Flow / City or Township / County   Province   Postal Code	B Streat No. Street Name / 911 Number / Address, if applicable  Hwy 105  Town / City or Township / County Province Postal Code Ear Falls On POV 1TO  Mailing address if different from above.  Street Name / 911 Number / Address, if applicable  Same  Town / City or Township / County Province Postal Code On PoV 1TO  Information on Container Refill Centre or Filling Plant Location of facility.  Street Name / 911 Number / Address, if applicable  Nearest Major Infersection Hwy 105 & Aspen Street  Town / City or Township / County Province Postal Code On Pov 1TO  Name of Licence Holder The Pit Stop in Ear Falls  Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT).  ROT type Kevin Kahool PTI 100-1 Cert# 56063 (PPO Municipalaty (or municipalatives if the facility or its hazard distance touches multiple borders)  Township of Ear Falls		Cou Ma	E-mail		
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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.

Printname	Signature	Date (dd-mm-yyyy)
Name of Licence Holder The Pit Stop in Ear Falls		
Name of Senior Management person as defined in the Regulation holding the Record of Training Kevin Kahoot	Mult	18/04/2012



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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.  None
Identify the psig rating and serial number for ea	ach fixed propane storage tank on site.
PSIG	Serial Number
Tank 1: 250	W28U01681
Tank2:	
Tank3:	
Enter capacity of propage in USWG, fixed, por	rtable, and mobile, and provide detailed inventory that includes the number of tank/vessel for
each type (fixed nortable, and mobile) and the	e capacity of each tank/vessel, on a separate document.
	Portable: 141.2 Mobile: 0
Fixed: 2000 USWG	Portable: 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)	Official Title	The state of the s
Kevin Kahoot	Owner	
Signature	Telephone No.	Date (dd-gim-yyyy)
ILILIX	807-222-3273	18/04/2012
50 00405 (4440) Dece 0 -1 45		

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14th Floor - Centre Tower Standards and 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

### OFFICE AL INFORMATION /-

		SECTION		RAL INFORMATION ity Information	DN (contid	)	
		***************************************					
Name of Propar	ne Supplie	er(s)				For Office Use - F	arty No.
Superior Propane	- Prairie R	egional Operation Centre	6				
Street No.	Street N	ame / 911 Number / Address, i	f applicable				
140	Bannatyr	ne Ave.			<del>/</del>		
Town / City or T Winnipeg	Township /	Country		1	Province MB		Postal Code R3P 1C2
Telephone No.		Fax No.	Contact Na	me			
877-873-7467		519-836-7766	Bruce Johnson	on			
E-mail							
johnsonb@superi	orpropane.	com					
Name of Proper	no Tranca	orter. If same as above, ple	gen chook ha	, I		For Office Use -	Party No.
Superior Propane		orter. Il same as above, pie	ase check bo	^. LJ			
Street No.		lame / 911 Number / Address,	if applicable	The second secon			
30	Kieth Ave						
Town / City or T Dryden	Township /	Country			Province On		Postal Code P8N 2Z4
Telephone No. 807-628-6393		Fax No. 807-939-2825	Contact Na Phil Eddy	me			
E-mail eddyp@superiorp	10000000000						
eddyp@sapenorp	лорапе.со						
Off-site Cylinde	r and/or l	Mobile Storage		Capacity stored off-site	, in USWG	For Office Use -	Party No.
None			_				
Street No.	Street N	ame / 911 Number / Address,	if applicable			1	
Town / City or T	rownship /	Country			Province		Postal Code
Telephone No.		Fax No.	Contact Na	me			,
Note: Customer s	torage is	not considered off-site storage	ρ.		la constitución de la constituci		
Trotal Gastarrian s	rerage to t	not consider to our one storage	ha e				
			2742 W	g grade seren		w 2	
		Declaration: I am aware tha	at it is an offe	ence to give false inforr	nation in this	document an	d

I hereby declare that the information I have given here is true and complete.

Name of person completing this form (please print)	Official Title	
Kevin Kahoot	Owner	
Signature // // // // // Signature	Telephone No. 807-222-3273	Date (dd-mm-yyyy) / 8/04/2012



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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.  Reg Gasoline - 20,000 litre storage, - underground tanks (Refer to site map)
Super Gasoline 20,000 litre storage - underground tank (Refer to site map)
Diesel - 10,000 litre storage, - underground tank (Refer to site map)
Description of fire and emergency equipment indicated on facility site map.  A-B-C Fire Extinguishers.
1-Located @ propane refill centre
1 @ all fuel pump
3 inside building
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. Emergency Shut Off - at propane tank. This shuts down the pump and closes a solenoid valve upstream of hoses.
3. Power supply breaker panel inside the gas bar building. This cuts all power to the propone system - shuts down pump, closes solenoid valve.
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) Kevin Kahoot	Official Title Owner	
Signature // // //	Telephone No. 807-222-3273	Date (dd-mm-yyyy) / 18/04/2012

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

1. Facility Contact Personnel - Key	Contact	5. Facility 24-Hour Contact Person			
Name Kevin Kahoot	For Office Use - Party	No. Name Kevin Kahoot For Office Use - Party No.			
Official Title Owner		Official Title Owner			
	Fax No. 807-222-2264	Cell No. 807-727-0365 866-816-8548 Fax No. 807-222-2264			
E-mail hooter21@hotmail.com		E-mail hooter21@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 - Alte	rnate Contact	6. Name of Facility Manager			
Name Giselle Kahoot	For Office Use - Party	No. Name For Office Use - Party No. Kevin Kahoot			
Official Title Owner		Official Title Owner			
Telephone No. 807-222-3273 866-816-8548	Fax No. 807-222-2264	Telephone No. 807-222-3273 866-816-8548 Fax No. 807-222-2264			
E-mail hooter21@hotmail.com		E-mail hooter21@hotmail.com			
Role and responsibilities in emergency		Role and responsibilities in emergency			
Co-ordinate site response plan (ERP)		Co-ordinate site response plan (ERP)			
3. Local Fire Services - Key Contac	1	7. Propane Supplier Key Contact Person			
Name Gary Gazankas	For Office Use - Party	No. Name For Office Use - Party No Superior Propane Hot Line			
Official Title Fire Chief		Official Title			
Telephone No. 807-222-3732	Fax No. 807-222-3376	Telephone No. 877-873-7467 Fax No. N/A			
E-mail ggazankas@ear-falls.com		E-mail			
Role and responsibilities in emergency		Role and responsibilities in emergency			
Coordiante Emergency Response / advis	se on Fire Service	Identify and dispatch Superior Propane and or LPERGC emergency response			
Response. Liaise with police services.		personal as required			
4. Local Fire Services - Alternate Co	ontact	8. Municipal Contact			
Name None	For Office Use - Part	No. Name Kimberiy Balance			
Official Title		Official Title Clerk Treasurer Administrator			
Telephone No.	Fax No.	Telephone No.			
E-mail		E-mail kbalance@ear-falls.com			
Role and responsibilities in emergency		Municipality			
Coordinate Emergency Response / adivse on Fire Response when key contact is not available and liaise with police services.		y Township of Ear Falls			

Name of person completing this form (please print)	Official Title	
Kevin Kahoot	Owner	
Signature	Telephone No. 807-222-3273	Date (dd-mm-yyyy) / 18/04/2012



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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.
E-stop located @ the dispenser area to cut the electrical in the event of an emergency, shutting the power of to the solenoid stopping the flow of propane.
E-stup totaled (gittle dispersion area to cut the discussion in the event of an energetisy), entangled pro-

Name of person completing this form (please print)	Official Title	
Kevin Kahoot	Owner	
Signature ( )	Telephone No.	Date (dd-mm-yyyy)/
lell to	807-222-3273	18/04/2012



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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	ponse 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	ovided to certificate holders / persons with Records of Training.				
Training Date (dd-mm-yyyy)	Print Name of Training Provider: Superior Propane Please Note - a ROT is valid for 3 years				
09-12-2011	Print Name of Instructor: Sales department				
Training Date (dd-mm-yyyy)	Print Name of Training Provider:				
	Print Name of Instructor:				
Training Date (dd-mm-yyyy)	Print Name of Training Provider:				
9 <del>5</del> 8 9556	Print Name of Instructor:				

Name of person completing this form (please print)	Official Title	Official Title		
Kevin Kahoot	Owner			
Signature	Telephone No. 807-222-3273	Date (dd-mm-yyyy) 18/04/2012		



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

4. Emergency Training Plan for Coming Year

Training on Emergency Re	sponse Plan and Procedures provided to facility key contacts	
Target Date (dd-mm-yyyy)	Print Name of Training Provider: Superior Propane or Alternal	e Please note: Canadian Propane Gas Association
Q2-2012	Print Name of Instructor: to be arranged	has currently developed the course PTI 911-02
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	content and it and its provider is available to be
	Print Name of Instructor:	taught in the first quarter of this 2012.
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	
Q2-2012	Print Name of Instructor: to be arranged	
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	
On-site specific training pr	ovided to certificate holders / persons with Records of Training	J.
Target Date (dd-mm-yyyy)	Print Name of Training Provider: Superior Propane	Please Note - a ROT is valid for 3 years
Q4-2012	Print Name of Instructor: Sales department	Note: To call training provider if any training is require
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	in 2012
	Print Name of Instructor:	
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	

Name of person completing this form (please print)	Official Title	
Kevin Kahoot	Owner	_
Signature // // /	Telephone No:	Date (dd-mm-yyyy)
ILILA	807-222-3273	1421/8/2012



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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). The operator or Alternate will contact emergency services by calling 911 and will provide warnings outlined in the attached: "Propane Emergency Respo	nse
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	d
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.	ed
by cutting electrical power may be required. Note a specific muster point is not advisable, since a propane plume can blow in any direction.	
Actions will be taken by an on duty ROT person(s)	
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 c	allis
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 controls.	mal/
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, nearb	
	,
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 BLEVE sooner than a full tank if there is a fire impingement on the tank).	
This information will be provided to the authorities by Kevin Kahoot or alternate.	
The state will it had a the facility lines a special to the site	
How long will it take the facility liaison person to respond to the site.  Key Contact: -1-2 minutes to arrive at the facility in the event of an emergency (lives on site)	

Name of person completing this form (please print) Kevin Kahoot	Official Title Owner		
Signature / LLLA	Telephone No. 807-222-3273	Date (dd-mm-yyyy) 18/04/2012	



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

#### DEDNIEGO DECDONCE DI ANI (a

	SECTION B: EMERGENCY AND PREPAREDNESS RESP The licence holder will complete Section B in consultation with the lo 6. Building and Site Security and Procedures			ci .
8		Yes	No	
1.	Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)?	1		
2.	Is there adequate night lighting at the site?	1		
3.	Are procedures in place that ensure access routes, aisles, storage area, filling areas and the grounds are kept clear from unwanted materials?	1		
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?	<b>✓</b>		
7	Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)?	<b>✓</b>		
8,	Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves)	1		
9.	Is the schedule of maintenance and testing activities retained on site?	<b>✓</b>		
	7. Water Supply			
NHI-COLLEGE				
	propane licence holder should work with the local fire department to determine water ply 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?	<b>√</b>		
3.	What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only)	150 m fir	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)	N/A		
	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 and complete.

Name of person completing this form (please print)	Official Title	
Kevin Kahoot C	Owner	
	Telephone No. 807-222-3273	Date (dd-mm-yyyy)/ 18/04/2012



14th Floor - Centre Tower 3300 Bloor Street West Toronto Ontario M8X 2X4 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.

8. Licence holder and local Fire Services Heview					
To be completed by the Local Fire Services Has the local fire service had an opportunity to review the Emergency Re 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:					
LOCAL FIRE SERVICES  The undersigned has reviewed Section B of the Risk and Safety Management Plan Fire Services.					
Print name Local Fire Services Name	Signature	Date (dd-mm-yyyy)			

Name of person completing this form (please print) Kevin Kahoot	Official Title Owner		
Signature ///	Telephone No. 807-222-3273	Date (dd-mm-yyyy)/ 18/04/2012	



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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.
- 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.
- 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.
- 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) 09-04-2012			Capacity of single largest propane storagevessel (USWG) 2000 USWG		
Tank setback coordinates.	Indicate placeme 35.9 m	ent on the map.	Right side property line:	35.2 m	
10 10 10 10 10 10 10 10 10 10 10 10 10 1	196.4 m		Left side property line:	90.5 m	
GPS coordinates of single	largest vessel:	50.640004 -93	23792		

Name of person completing this form (please print) Kevin Kahoot	Official Title Owner		
Signature // // // // // Signature	Telephone No. 807-222-3273	Date (dd-mm-yyyy) 18/04/2012	

### 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 x (1.524 x C) 1/3

D = Distance to overpressure of 1 psi (meters)

C= Tank Total Capacity in USWG

Parameters:

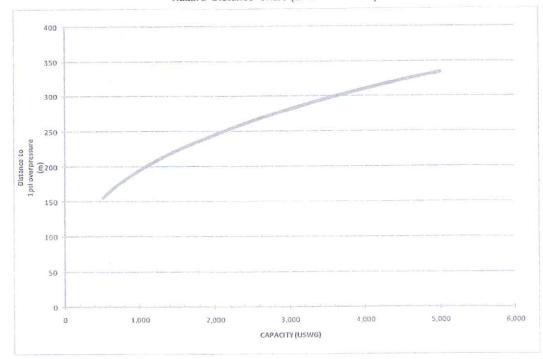
Density of Propane is 0.5033 kg per litre @ 15 C

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)



Name of person completing this form (please print) Kevin Kahoot	Official Title Owner	1 Section Control Control			
Signature LAULT	Telephone No. 807-222-3273	Date (dd-mm-yyyy) / 18/04/2012			



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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 Name: Address: City:	buildings or parks or golf courses The Pit Stop in Ear Falls  46 Hwy 105  Ear Falls  Province On Postal Code POV 1TO			x		54 m
Resident	iet building units specifically permanent single family dwellings, condominiums, and apartments,				×	150m
Commerci Name: Address City:	cial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes.  HWY 105 Bar & Grill  44 HWY 105  Ear Falls  Province  ON  Postal Code  POV 1T0			X		37.8 m
Commer Name: Address City:	cial building units – continuous occupancy specifically hotels, campgrounds, and resorts.  Hwy 105 Hotel  44 HWY 105  Ear Falls  Province  On  Postal Code  POV 1TO		х			_37;8_ m
institutio Name:	e institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health ns, and prisons.  None  Province Postal Gode	x				m
Name:	ncy responders specifically fire stations, ambulance stations, and police stations.  Ambulance Service  25 Spruce Street  Ear Falls  Province  On  Postal Code PoV 1T0		x			m

Official Title Owner			
Telephone No. 807-222-3273	Date (dd-mm-yyyy)/ /8/04/7612		
	Owner Telephone No.		

<sup>\*</sup> For multi-unit buildings, count each unit as "1".



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## SECTION C: SUBMISSIONS (cont'd)

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

#### Portable Storage Additional Information Sheet

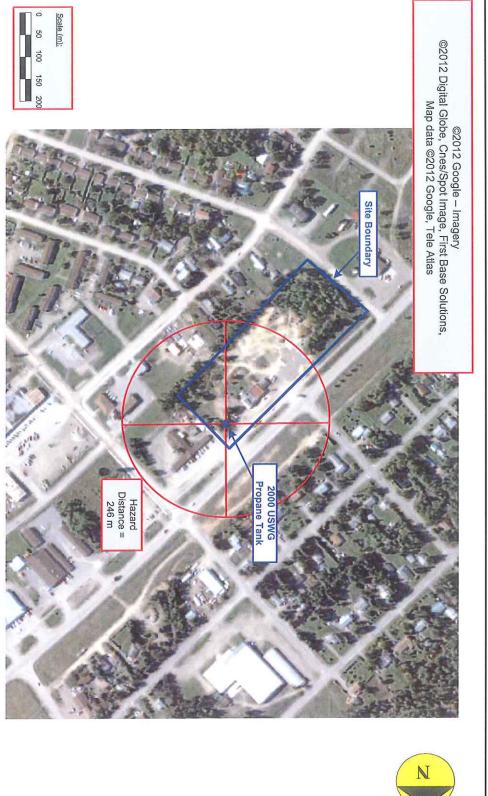
Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9	0	0
# 100	29.5	4	118 USWG
# 40	11.75	0	0
# 33.3	9.62	0	0
# 30	8.8	0	0
# 20	5.8	4	23.2 USWG
# 10	2.9	0	0
#5	1.5	0	0

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

Tank Size In USWG	Quantity	Total Volume in USWG
0	0	0
Total Tank Capacity 0		

Total Cylinder Capacity	141.2 USWG
Total Tank Capacity	2000 USWG
Total Portable Capacity	141.2

Name of person completing this form (please print) Kevin Kahoot	Official Title Owner					
Signature // // // Signature	Telephone No. 807-222-3273	Date (dd-mm-yyyy) 18/04/2012				



to Site Boundary

North: 35.0 m

South: 196.4 m

East: 35.2 m West: 90.5 m

Kimberly Balance

Denoted by circle centred on tank; radial distance = 246 m

GPS Co-ordinates = 50.640004,-93.23792

Capacity of Propane Storage Tank = 2000 USWG

Municipality (ies) within the 1 psi overpressure circle:

Township of Ear Falls

Clerk/Administrator/Treasurer, Township of Ear Falls 2 Willow Cres., Box 309, Ear Falls, ON P0V 1T0 Tel: 807-222-3624 Fax: 807-222-2384

email: kbalance@ear-falls.com

Map of Surrounding Area

46 HWY 105 N, Ear Falls, ON POV 1TO The Pit Stop in Ear Falls

Legal Description PT RFD 316 DES 23R7591 PART 2 PCL 4512

Drawn by: L. Wills

Date: April 9, 2012

