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 f	or moveragely in relection		For Office Use Only
	Making a false statement may r	esult in a fine or prosecution		For Office use Offiy
	under the Technical Stat	ndards and Safety Act		
Licence Num	ber 0032208001-C			
Check applicable	type of propane operations.			
 [] a	A STATE OF THE PROPERTY OF THE PARTY OF THE	Filling Plant Card	Keylock	
-	n this completed application a Facility Sit	50	53	
	S	ECTION A: GENERAL	INFORMATION	
-				
Company	Name			Ontario Corporation No., if applicable
A Country	Gardens RV Park Ltd			1445006
Operator	Name (il different from above)			
Telephone 519-696		E-mail info@cgrvpark.ca]
B Street No.	Street Name / 911 Numb		1	· · · · · · · · · · · · · · · · · · ·
1335	Witmer Rd			
Town / Ci	ty or Township / County		Province	Postal Code
Petersbi	ırg		Ontario	NOB 2H0
Mailing	address if different from above.			
C Street No.	Street Name / 911 Numb	er / Address, If applicable		
Town ICS	y or Township / County		Province	Postal Code
l	y or Township r County			
Informatio	n on Container Refill Centre o	Filling Plant		
Location Street No.	of facility. Street Name / 911 Numb	er / Address, if applicable	Nearest Major Inters	ection
D 1335	Witmer Rd	377704.455, 11.455, 11.455	Witmer Rd and Que	
1000000	The state of the s		Province	Postal Code
1	y or Township / County		Ontario	NOB 2H0
Petersbu	ng			
NameofLi	cence Holder			S W
Country (Gardens Campground Ltd.			
Name of a	Senior Management person as defined	in the regulation holding the Record o	(Training (ROT).	ROT type
Peter Bir	ngeman			Recreational Vehicle Technician 2
Municipal	ity (or municipalities if the facility or its h	nazard distance touches multiple bord	ers)	
Wilmot To	ownship	*		
-			*	
Hours of o	peration.			
	×			

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) 14-12-2011
Name of Licence Holder Peter Bingeman	12/3	
lame of Senior Management person as defined in the tegulation holding the Record of Training Peter Bingeman	3-3-	14-12-2011



Technical Standards and Safety Authority Fax: 416.231.4903 www.fssa.org

14th Floor - Centre Tower 3300 Bloor Street West Toronto Ontario M8X2X4 Customer Service: 1.877.682.8772 Level 1 Risk and Safety Management Plan (RSMP)

I Safety Act Regulation

SECTION A: GENERAL INFORMATION (cont'd)

Indicate the year the facility was established.	Indicate the year of any significar 2002, tank was downsized to a 5	nt modifications, as defined in s.1, O.Beg 211/01; since	e establishment.
Identify the psig rating and serial number for e	ach fixed propane storage tank on s	site. HECEIVE	:D Tes
PSIG Tank1: 250	Serial Number 1495-8		12
Tank2:			
Enter capacity of propane in USWG, fixed, po each type (fixed, portable, <mark>and mobil</mark> e) and th		ailed inventory that includes the number of tank/ver a separate document.	ssel for
Fixed: 500uswg	Portable: 944.5	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	
Peter Bingeman	President	
Signature 3.	Telephone No. 519-498-6948	Date (dd-mm-yyyy) 14-12-2011



p.2



Technical Standards and Safety Authority Fax 2000 Street West Toronto Ontario M8X 2X4 Fax: 416.231.4903 Customer Service: 1.877.682.8772

	SEC	CTION A: GENERAL INF ActivityInformat		
Name of Prop	ane Supplier(s)			
Street No. 7022	Street Name / 911 Number / . Wellington Rd 124	Address, if applicable	•	2.00
Town / City or Guelph	Township / Country		Province Ontario	Postal Code NOB 2H0
Telephone No. 1-877-873-7467	Fax No.	Contact Name		
E-mail	4	•		
Street No.	Street Name / 911 Number / /	· · · · · · · · · · · · · · · · · · ·		Eartha Park II.
Town / City or	Township / Country		Province	Postal Code
Telephone No.	Fax No.	Contact Name		3
E-mail				
Off-site Cylinde	er and/or Mobile Storage	Capacity sto	ored off-site, in USWG For Offi	ice Use - Party No.
Street No.	Street Name / 911 Number / A	ddress, if applicable		
Town / City or 1	Fownship / Country	****	Province	Postal Code
Telephone No.	Fax No.	Contact Name	•	

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

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) Peter Bingeman	Official Title President	
Signature	Telephone No.	Date (dd-mm-yyyy)
020136	519-498-6948	14-12-2011

FS 09195 (05/11) Page 3 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

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. Diesel Fuel - 700L. Stored in above ground tank 28 m away
Unleaded Gas - up to 100L stored in plastic gas tanks stored inside a shed 28m away.
Description of fire and emergency equipment indicated on facility site map. Fire Extinguisher located inside the propane filling station and inside the 2 closest buildings.
Fire Extinguisher located made the property many
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. Two emergency shut off devices which are used to turn power off to the tank are located inside the controlled area. The second shut off is located at the
power poll that supplies power to the propane compound. The outside emergency shut off is clearly marked as the emergency shut off switch. Fusible link
is located on the bottom of the tank. In case of fire the link is severed thus shutting off valve located inside the tank.
Maintenance and testing schedule for fire protection controls and devices. Fire extinguishers are inspected by staff monthly and inspected annually by our fire equipment suppliers. The automatic shut off valves are inspected
annually. The fusible link is visually inspected monthly.

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) Peter Bingeman	i Official Title President	
Signature	Telephone No.	Date (dd-mm-yyyy)
Signature	519-498-6948	14-12-2011

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14th Floor - Centre Tower | Technical | Standards and | Safety Authority | www.tssa.org | ww

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 Cont	act Person	
Name Peter Bingeman		For Office Use - Party No.	Name For Off Peter Bingeman		For Office Use - Party No.
Official Title President			Official Title President		
Telephone No. Fax No. 519-498-6948 519-696-3790		Cell No. Fax No. 519-498-6948 519-696-3790		90	
E-mail info@cgrvpark.ca			E-mail info@cgrypark.ca		
Role and responsibilities in eme	ergency		Role and responsibilities in		
Initiate emergency calls, and advi	ise applicable part	es of emergency	Initiate emergency calls, and	d advise applicable partie	s of emergency
2. Facility Contact Personnel	- Alternate Cor	stact	6. Name of Facility Mana	ger	
Name Alan Bingeman		For Office Use - Party No.	Name Alan Bingeman		For Office Use - Party No.
Official Title			Official Title Manager		
Manager Telephone No.	Fax No.		Telephone No.	Fax No.	10
519-575-6948 E-mail	519-696-3	790	519-575-6948 519-696-3790 E-mail		10
E-Categoria		Santa S	Role and responsibilities in	a emargency	
Role and responsibilities in eme Initiate emergency calls, and advi		es of emergency			s locate and advise key
initiate emergency calls, and advi	ise applicable parti	es of emergency	Initiale emergency cails, and advise applicable parties, locate and advise key contact		
3. Local Fire Services - Key (Contact		7. Propane Supplier Key	Contact Person	
Name Dale Mayhew		For Office Use - Party No.	Name Superior Propane		For Office Use - Party No.
Official Title Fire Prevention Officer	E-mail dale.mayh	ew@wilmot.ca	Official Title Sales and Service	E-mail	
Telephone No. 519-634-8444 ex248	Fax No. 519-634-56		Telephone No. 1-877-873-7467	Fax No.	
Role and responsibilities in emer Respond to calls. Baden Fire Depart	rgency		Role and responsibilities in emergency Work with local fire services when requested		
Fire Services Address 60 Snyder's Road West, Baden, ON	I, N0B 1G0		Propane Supplier Address		
4. Local Fire Services - Altern	nate Contact)	8. Municipal Contact)
Name Dispatch Centre For Office Use - Party No.		Name Dale Mayhew			
Official Title	E-mail	*	Official Title Fire Prevention Officer		
Telephone No.	Fax No.		Telephone No. Fax No. 519-634-8444 ex248 519-634-5660		0
Role and responsibilities in emergency			E-mail		-
	Contact fire chiefs designated alternates		dale.mayhew@wilmot.ca		
	nates	90	date.mayhew@wilmot.ca		
			Municipality Name and Add Wilmot Towship, 60 Snyders F		Taxano

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	
Peter Bingeman	President	
Signature	Telephone No.	Date (dd-mm-yyyy)
125/82	519-498-6948	14-12-2011

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

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

2. Additional Safety Measures

Describe any other measures in place at the facility that exceed the minimum Code and Standards requirements.	
The minimum available water supply can be exceeded with the presence of 3 ponds and a creek that runs through the campground.	
There is also a pool that operates for part of the year that can be used.	
	1)4

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) Peter Bingeman	Official Title President	
Signature	Telephone No.	Date (dd-mm-yyyy)
3	519-498-6948	14-12-2011

FS 09195 (05/11) Page 6 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)
------------	------------------	-----	---------------------	----------	------	----------

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: FSN
05-05-2011	Print Name of Instructor: Michael Farah
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider;
400	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: Country Gardens RV Park
01-05-2011 (done annually)	Print Name of Instructor: Laura Bingeman and Peter Bingeman
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
On-site specific training pro-	vided to certificate holders / persons with Records of Training.
Training Date (dd-mm-yyyy)	Print Name of Training Provider: FSN
05-05-2011	Print Name of Instructor: Michael Farah
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Name of person completing this form (please print)	Official Title	
Peter Bingeman	President	
Signature	Telephone No.	Date (dd-mm-yyyy)
3.	519-498-6948	14-12-2011

FS 09195 (05/11) Page 7 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)

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: Country Gardens
01-05-2012	Print Name of Instructor: Peter Bingeman
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training on the facility's En	nergency Management Procedures provided to staff.
Target Date (dd-mm-yyyy)	Print Name of Training Provider: Country Gardens
01-05-2012	Print Name of Instructor: Peter Bingeman
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 pro	ovided to certificate holders / persons with Records of Training.
Target Date (dd-mm-yyyy)	Print Name of Training Provider: Country Gardens
01-05-2012	Print Name of Instructor: Peter Bingeman
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Farget 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	
Peler Bingeman	President	
Signature 3	Telephone No. 519-498-6948	Date (dd-mm-yyyy) 14-12-2011

Country Gardens



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

p.8

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). Either the president, or inhis absence the manager or employee shall contact emergency services (call 911 dispatch) to inform in the event of an
emergency. This person would inform anyone within the general area (including neighbours) of the incident and that emergency services are on their way
and to commence evacuation to a safe area.
Describe what action is to be taken and by whom when a warning is issued (including details of a meeting place in a safe identified area and
activating the evacuation plan, if necessary). The president, manager or employee shall ensure that the facility is properly evacuated and persons are guided to a designated safe area located at one of
two locations. At the baseball diamond back stop which will accommodate the west end of the campground, or the swimming pool area which will accommodate
the east end of the park.
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). The president, manager or employee shall call emergency services IMMEDIATELY upon discovery of any hazard that may result in a dangerous
situation by telephone or a cellular device.
Describe provisions for fire department entry when there are no operations or staffing at the propane site. If there is no one present at the gate, emergency response is able to break the gate to gain entry into the campground. The clearly marked emergency
shut-off switch will turn off power to refilling station and the compound may be easily accessed with use of a lock-disabling tool which all emergency
services are equipped with.
Describe how the licence holder will ensure continual flow of updated information to authorities. In the event of a change, updates on the filing station infrastructure will be submitted to the local authorities immediately by means of telephone, fax or
e-mail.
How long will it take the facility liaison person to respond to the site. Owner/Manager will respond within 5 minutes

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) Peter Bingeman	Official Title President			
Signature 3	Telephone No. 519-498-6948	Date (dd-mm-yyyy) 14-12-2011		

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Customer Service: 1.877.682.8772

2012 Application for Renewal of Level 1 Propane Licence **Technical Standards and Safety Act** Propane Storage and Handling Regulation

EMERGENCY AND PREPAREDNESS RE	SPONSE PLAN (cont'a)
-------------------------------	---------------	---------

The licence holder will complete the Emergency and Preparedness Response Plan in consultation with the local Fire Services. Building and Site Security and Procedures Yes No Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)? Is there adequate night lighting at the site? 2. 3. Are procedures in place that ensure access routes, aisles, storage area, filling areas 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? 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 50m firefighting activities? (distance in metres only) What is the unobstructed distance to the closest approved water supply with year 50m round access if there are no hydrants? (distance in metres only)

You are required by law to notify TSSA of any change of information contained in the Risk and Safety Management Plan within 15 days.

Declaration: I am aware that it is an offence I hereby declare that the information	e to give false information in this doo n I have given here is true and compl	cument and lete.
Print name of person completing this form. Peter Bingeman	Official Title President	
Signature	Telephone No. 519-696-3230	Date (dd-mm-yyyy) 11-10-2012

519-696-3790

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

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				DESDANCE	E-DH W IVI	(anniel)
SECTION B:	EMERGENCY	AND	PREPAREDNESS	HESPONSE	PLAN	(com a)

The licence holder will complete Section B in consultation with the local Fire Services. 8. Licence holder and local Fire Services Review

No To be completed by the Local Fire Services Has the local fire service had an opportunity to review the Emergency Response and Preparedness Plan? If not, please explain (e.g., no fire services). Fire services comments, if any: To be completed by the Licence Holder In response to the above comments, the following action(s) is required: The licence holder will respond to the Local Fire Services comments by: (dd-mm-yyyy)

LOCAL	FIRE	SERV	/ICES
-------	------	------	-------

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

Print name

Local Fire Services Name

Signatu

Date (dd-mm-yyyy)

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) Peter Bingeman	Official Title President		
Signature 27.	Telephone No. 519-498-6948	Date (dd-mm-yyyy) 14-12-2011	

FS 09195 (05/11) Page 11 of 15



Standards and www.lssa.org

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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

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.

Country Gardens

- 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.
- 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:

- The capacity and placement of the single largest propane storage vessel, including its setback from the front, rear and side property lines.
- GPS co-ordinates of the single largest vessel.
- 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
- 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) 15-12-2011		Capacity of single largest propane storagevessel (USWG) 500			
Tank selback coordinates.	Indicate placemen 50m	it on the map.	Right side property line:	420m	
Front: Rear:	115m		Left side property line:	475m	
GPS coordinates of single	largest vessel:	43.382782, -80	.561231		

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) Peter Bingeman	Official Title President		
Signature	Telephone No. , 519-498-6948	Date (dd-mm-yyyy) 14-12-2011	

FS 09195 (05/11) Page 12 of 15



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Technical Standards and Safety Act

Propane Storage and Handling Regulation

SECTION C: SUBMISSIONS (cont'd)

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

Table 1: Dislance Table

a solby	Nominal Water Capacity	Distance to 1 psi overpressure
Water Capacity (litres)	(USWG)	(m)
	500	155
1,890	1,000	195
3,780		213
4,920	1,300	235
6,620	1,750	
7,130	1,885	241
	2,000	246
7,560	5,000	333
18,900	5,000	

Formula:

 $D=16.94 \times (1.524 \times C)^{1/3}$

D = Distance to overpressure of 1 psi (meters)

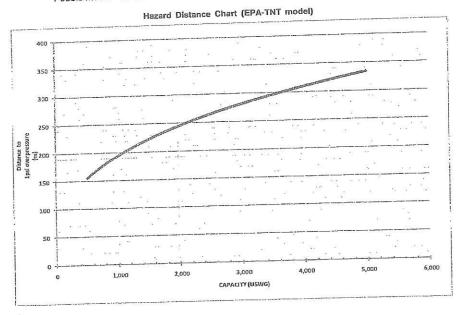
C= Tank Total Capacity in USWG

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





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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			of Build eatures th an "1 2-10		Tank to Closest Building or	
Name:	buildings or parks or golf courses Province Postal Code	x				m	
Residentia Name: Address: City:	al building units specifically germanent single family dwellings condominiums and agartments		x	9		20 rn	
Commerci Name: Address: City:	ial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Rec Hall/ Washroom Building/ Snack Bar 1335 Witmer Rd Peterburg Province Ontario Postal Code NOB 2H0		X			31 m	
Commerci Name: Address: City:	ial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Site 101 1335 Witmer Rd Petersburg Province Ontario Postat Code NOB 2H0				x	12m	
institutions Name:	institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health s, and prisons.	X				m	
Name:	y responders specifically fire stations, ambulance stations, and police stations. Province Postal Code	X				m	

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

Name of person completing this form (please print) Peter Bingeman	Official Title President		
Signature 333	Telephone No. 519-498-6948	Date (dd-mrn-yyyy) 14-12-2011	

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



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

WORKSHEET

Portable Storage Additional Information Worksheet

Cylinder Size Capacity in USWG		Quantity	Total Volume in USWG
# 420	123.9		
# 100	29.5	10	295
# 40	11.75	2	23.5
# 33.3	9.62		
# 30	8.8	20	175
# 20	5.8	50	290
# 10	2.9	1	10
# 5	1.5	100	150

Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
		-
Total Tank Capacity	7,000	
Total Tank Capacity		
otal Cylinder Capacity		
otal Tank Canacity	500	

Total Cylinder Capacity		
Total Tank Capacity	500	
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	v .	

