## Technical Standards and Safety Authority 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 fixed propane storage capacity of exactly 5,000 USWG and no more than 500
USWG of portable propane storage capacity on site.

		ailure to fully complete this fo king a false statement may re under the <i>Technical Stand</i>	sult in a fine or prosecution				
_icer	nce Number	000076649306					
Check	applicable type of	of propane operations.					
	✓ Cylinder	Motor Fill	Filling Plant Card	/Keylock			
Subm	it along with this o	ompleted application a Facility Site	Plan and a Map of the Surrounding A				
		SE	CTION A: GENERAL	INFORMATION			
The	Undersigne	d applies to TSSA for a	review for an RSMP un	der Ontario's Technical	Standards and Safety Act,		
		e and Handling Regula			STANDARDS & SAFETY		
	Company Name				Onfailo Corporation No. if applicable		
A		OMOTIVE INC.					
	Operator Name (	if different from above)			AUG 1 0 2011		
	Telephone No.	Fax No.	, E-mail		7.00 . 0 2011		
	905-793-4035	905-793-1609	tkamzol@matcor-matsu.cor	m			
В	Street No.	Street Name / 911 Number	/ Address, if applicable				
	1620	Steeles Ave. East					
	Town / City or To	ownship / County		Province	Postal Code		
	Brampton			Ontario	L6T 1A5		
_	Mailing addre Street No.	ss if different from above.  Street Name / 911 Numbe	r / Address, if applicable				
	Town / City or To	wnship / County		Province	Postal Code		
Inf		Container Refill Centre or I	Filling Plant		· ·		
	Location of fac Street No.	ility, Street Name / 911 Number	/ Address if applicable	Nearest Major Intersection			
D	1620	Steeles Ave. East	/ Address, it applicable	SAEDLOS E	Dixie Rd		
Į.	San waste as	Take ve		Province	Postal Code		
	Town / City or To	wnsnip / County		Ontario	L6T 1A5		
	Brampton			Ontano			
	Name of Licence I	Holder					
	Matcor Automo	tive Inc.					
L	Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT).						
1	BERNIE BRUNINO 400-04 ROT # 97488						
	Municipality (or municipalities if the facility or its hazard distance touches multiple borders)						
- li	BRAMPTON						
	Hours of operatio	n.					

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

26-07-2011
XII
26-07-2011
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#### Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act Propane Storage and Handling Regulation

#### SECTION A: GENERAL INFORMATION (cont'd)

Indicate the year the facility was established.  APRIL 3, 2000	Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment.  RE-LICENSED AUG 19,2008 - CORRECTION IN UWSG VOLUME - RENEWED MUNICIPAL APPROV
Identify the psig rating and serial number for each	th fixed propane storage tank on site.
PSIG	Serial Number
Tank1: 250 PSIG	SERIAL # 5592554
Tank3:	
	0.00
	able, and mobile, and provide detailed inventory that includes the number of tank/vessel for
	capacity of each tank/vessel, on a separate document.
Fixed: 2000 USWG	Portable: 32 X 33# CYLINDERS Mobile:
	=308'

Name of person completing this form (please print)	Official Title		
TONY KAMZOL	HEALTH & SAFETY MANAGER		
Signature	Telephone No. 905-793-4035 X 308	Date (dd-mm-yyyy) 26-07-2011	

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

#### SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

Name of Propar	ne Supplie	r(s)					
CALEDON PROPA	ANE INC.						
Street No.	Street Name / 911 Number / Address, if applicable						
1	BETOMA	COURT					
Town / City or T BOLTON	ownship /	Country			Province ONTARIO		Postal Code L7E 5T3
Telephone No.	1	Fax No.	Contact N	ame			
905-857-1448		905-857-8491	HUGH SUTI	HERLAND			
E-mail							
HUGHJR@CALE	DONPROP	ANE.COM					
				48-2-25			
Name of Propan	e Transpo	rter. If same as abo	ove, please check be	ox. 🗸			
Street No.	Street Na	ame / 911 Number / A	ddress, if applicable				
Town / City or To	Town / City or Township / Country  Province  Postal Code						
Telephone No.		Fax No.	Contact Na	ame		1	
E-mail	•						
Off-site Cylinder	and/or M	obile Storage		Capacity stored off-site,	in USWG	For Office Use - F	arty No.
	NO OFF SITE STORAGE						
Street No.	Street Na	me / 911 Number / Ad	ddress, if applicable				
Town / City or To	ownship / (	Country			Province		Postal Code
Telephone No.	[	Fax No.	Contact Na	ame			
Note: Customer st	orage is no	ot 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) TONY KAMZOL	Official Title Corporate Health and Safety M.	Official Title Corporate Health and Safety Manager		
Signature Adam Tol	Telephone No. 905-793-4035 X 308	Date (dd-mm-yyyy) 26-07-2011		

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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

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.  NO OTHER HAZARDOUS MATERIALS ON SITE
Note: High pressure cylinders inside building stored in proper storage location chained upright
Description of fire and emergency equipment indicated on facility site map.
Fire extinguisher - see site map - Appendix A
MSDS Box - Material Safety Data Sheets located east wall opposite location of bulk propane tank
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.
DEAD MAN SWITCH
FUSIBLE LINK AS PER CODE
10BC Fire Extinguisher at dispenser - checked by operator(s) at station each usage and inspected by Caledon Propane each delivery and monthly
Maintenance and testing schedule for fire protection controls and devices.  Quick visual inspection upon each delivery by Caledon Propane Inc.
Monthly Inspection summary by Caledon Propane
Monthly plant inspection by Matcor Automotive JHSC
Annual inspection documented by Caledon Propane Inc. G2 Fitter

Name of person completing this form (please print) Tony Kamzol	Official Title Corporate Health and Safety Manager	
Signature Alaroled	Telephone No. 905-793-4035 ext. 308	Date (dd-mm-yyyy) 26-07-2011



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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 Bernie Brunino  For Office Use - Party No.		Name John Day			
Official Title VP Corporate Human Resources			Official Title Plant Manager		
Telephone No.   Fax No.   905-793-4035   905-793-1609			Cell No. Fax No. 416-919-7495 905-793-1609		
E-mail bbrunino@matcor-matsu.com			E-mail jday@matcor-matsu.com		
Role and responsibilities in emergence	у		Role and responsibilities in emergency		
Chief Coordinator			Safety Committee Member Coordinato	ır	
2. Facility Contact Personnel - Al	ternate Con	tact	6. Name of Facility Manager		
Name Dan Singh	F	For Office Use - Party No.	Name John Day	For Office Use - Party No.	
Official Title Maintenance Team Leader			Official Title Plant Manager		
Telephone No. 905-793-40345	Fax No. 905-793-16	609	Telephone No. 905-793-4035 905-793-1609		
E-mail dsingh@matcor-matsu.com	•		E-mail iday@matcor-matsu.com		
Role and responsibilities in emergence	у		Role and responsibilities in emergency		
Electrical / Maintenance			Safety Committee Member Coordinato	or .	
3. Local Fire Services - Key Conta	ct		7. Propane Supplier Key Contact I		
Name Brian Maltby	F	or Office Use - Party No.	Name Hugh Sutherland	For Office Use - Party No.	
Official Title Chief Fire Official	2		Official Title Vice-President		
Telephone No. 905-874-2721	Fax No. 905-874-27	35	Telephone No. 905-857-1448 Fax No. 905-857-8491		
E-mail brian.maltby@brampton.ca			E-mail hughjr@caledonpropane.com		
Role and responsibilities in emergence	у		Role and responsibilities in emergency		
Chief Fire Official Contact Person			Emergency Response Caledon Propane Inc.		
4. Local Fire Services - Alternate C	Contact		8. Municipal Contact	<b>等的用题</b> 第3	
Name For Office Use - Party No. Matt Pegg		Name Rose Bruno			
Official Title Deputy Fire Chief			Official Title Zoning Planner		
Telephone No. Fax No. 905-874-2722 905-874-2727		Telephone No. Fax No. 905-874-2491 905-874-2499			
E-mail matt.pegg@brampton.ca			E-mail		
Role and responsibilities in emergency			Municipality		
Contact Person			City of Brampton		

Name of person completing this form (please print) Tony Kamzol	Official Title Corporate Health and Safety Ma	Official Title Corporate Health and Safety Manager		
Signature Alamiel	Telephone No. 905-793-4035 ext. 308	Date (dd-mm-yyyy) 26-07-2011		



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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.
As per 1991 - Initial Installation
A remote Emergency Stop was added on the building wall 23 feet from the dispenser
A Dead-man Switch to restrict the dispensing if the dispenser is unattended
Copy of work on file

Name of person completing this form (please print)  Tony Kamzol	Official Title Corporate Health and Safety Manager		
Signature Alam Col	Telephone No. 905-793-4035 ext. 308	Date (dd-mm-yyyy) 26-07-2011	

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

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

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

Training on Emergency Res	sponse Plan and Procedures provided to facility key contacts.		
Training Date (dd-mm-yyyy)	Print Name of Training Provider: Tony Kamzol (Annual Prevention Awareness Training)		
14-02-2011	Print Name of Instructor: Tony Kamzol		
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: Tony Kamzol (Annual Prevention Awareness Training)		
21-02-2011	Print Name of Instructor: Tony Kamzol		
Training Date (dd-mm-yyyy)	Print Name of Training Provider: Tony Kamzol (Annual Prevention Awareness Training)		
12-04-2011	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: Hugh Sutherland (ROT Propane Certification)		
11-02-2011	Print Name of Instructor: Hugh Sutherland		
Training Date (dd-mm-yyyy)	Print Name of Training Provider: Amy Hertog (Standard Renewal First Aid & CPR with AED)		
16-06-2011	Print Name of Instructor: Amy Hertog		
Training Date (dd-mm-yyyy)	Print Name of Training Provider:		
	Print Name of Instructor:		

Name of person completing this form (please print)	Official Title	
Tony Kamzol	Corporate Health and Safety Ma	nager
Signature	Telephone No.	Date (dd-mm-yyyy)
1 / Seconcer	905-793-4035 ext. 308	26-07-2011



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

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

4. Emergency Training Plan for Coming Year

Training on Emergency Re	esponse Plan and Procedures provided to facility key contacts.		
Target Date (dd-mm-yyyy)	Print Name of Training Provider: Tony Kamzol (Annual Prevention Awareness Training)		
30-11-2011	Print Name of Instructor: Tony Kamzol		
Target Date (dd-mm-yyyy)	Print Name of Training Provider:		
	Print Name of Instructor:		
Target Date (dd-mm-yyyy)	Print Name of Training Provider:		
<u> </u>	Print Name of Instructor:		
Training on the facility's Er	mergency Management Procedures provided to staff.		
Target Date (dd-mm-yyyy)	Print Name of Training Provider: Tony Kamzol (Annual Prevention Awareness Training)		
31-12-2011	Print Name of Instructor: Tony Kamzol		
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.		
Target Date (dd-mm-yyyy)	Print Name of Training Provider: Hugh Sutherland (ROT Propane Re-certification)		
31-08-2011	Print Name of Instructor: Hugh Sutherland		
Target Date (dd-mm-yyyy)	Print Name of Training Provider:		
	Print Name of Instructor:		
Target Date (dd-mm-yyyy)	Print Name of Training Provider:		
	Print Name of Instructor:		

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

Name of person completing this form (please print)	Official Title	
Tony Kamzol	Corporate Health and Safety Manager	
Signature ///	Telephone No.	Date (dd-mm-yyyy)
by HEXCHANTOR	905-793-4035 ext. 308	26-07-2011

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**Warnings and Actions** 

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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

Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate).

See ERP - see attached - First responder on smell of gas leakage will follow emergency procedure 'Responding to Propane Emergencies - Propane
Safety for 1st Responders'
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).
In the event - protocol followed as per ERP / contact 911 - Brampton Fire and Emergency Services is contacted; building is evacuated with employees
locating in designated meeting area in accordance to our Emergency Response and Preparedness Plan standard 5.5 attached
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).
See ERP - standard 5.5, clauses 2.0 to 5.0 attached
Describe provisions for fire department entry when there are no operations or staffing at the propane site.
Plant 24 - hour operation
Describe how the licence holder will ensure continual flow of updated information to authorities.
See ERP - Audited by BSI - for conformance to ISO 14001
On site - communication
Plant 24 - hour operation
How long will it take the facility liaison person to respond to the site.  Caledon Propane - 24 hour / Emergency Response  Tel: 905-857-1448 (24hrs)
John Day - 24 hour / Emergency Response Tel:416-919-7495 Cell
John Day - 24 hour / Emergency Response Tel:416-919-7495 Cell

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) Tony Kamzol	Official Title Corporate Health and Safety Manager	
Signature	Telephone No. 905-793-4035 ext. 308	Date (dd-mm-yyyy) 26-07-2011

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

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

The licence holder will complete Section B in consultation with the local Fire Services. 6. Building and Site Security and Procedures Yes No Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)? Is there adequate night lighting at the site? 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? 7. Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)? Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves) Is the schedule of maintenance and testing activities retained on site? 7. Water Supply The propane licence holder should work with the local fire department to determine water supply capabilities that are available based on the propane facility's location. Yes No Is a pressurized water system available at the propane facility site? 1. Can the municipal fire department pump 375 GPM (1420 LPM) of water at this 2. location? 3. What is the unobstructed distance to the closest water supply that could be used for 82 m firefighting activities? (distance in metres only) What is the unobstructed distance to the closest approved water supply with year N/A round access if there are no hydrants? (distance in metres only)

> 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) Tony Kamzol	Official Title Corporate Health and Safety Manager	
Signature	Telephone No. 905-793-4035 ext. 308	Date (dd-mm-yyyy) 26-07-2011

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

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

The licence holder will complete Section B in consultation with the local Fire Services. 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 F  If not, please explain (e.g., no fire services).	Yes Response and Preparedness Plan?	No
Fire services comments, if any:  PLEASE SEE ATTACHED "FIRE S	ERVICE INFORMATION FORM	REDIEW
AND COMMENTS FOR LEVEL 1	RSMP" DOTED JULY 29,	2011.
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)	
		ü
LOCAL FIRI	ESERVICES	
The undersigned has reviewed Section B of the Risk and Safety M	lanagement Plan Fire Services.	
Local Fire Services Name  Print name  RIAN MALTEM	Signature Grady	Date (dd-mm-yyyy) 29-07. 2011
	U	

, ,	Official Title Corporate Health and Safety Manager	
Signature	Telephone No. 905-793-4035 ext. 308	Date (dd-mm-yyyy) 26-07-2011



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

#### **SECTION C: SUBMISSIONS**

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

#### Facility Site Plan.

The licence holder will submit a copy of the original facility site plan updated with the following information:

- 1. The storage location of fixed, portable, and mobile vessels.
- 2. The maximum volume, types and storage location of hazardous materials.
- 3. Location of permanent structures on site.
- 4. Access and egress points and location of barriers.
- 5. Location of fire and emergency equipment (e.g., sprinkler systems, extinguishers, suppression systems) on site and location of fire hydrant or water supply where available.
- 6. Location of emergency shut off/shut down switches/valves.

#### Map of Surrounding Area.

The licence holder will submit a scaled aerial map of the surrounding area showing the following information:

- 7. The capacity and placement of the single largest propane storage vessel, including its setback from the front, rear and side property lines.
- 8. GPS co-ordinates of the single largest vessel.
- 9. Visual indication of the single largest fixed vessel and a circle made using the distance in Table 1 as the radius from the single largest fixed vessel.
- 10. Clear indication of the municipality or municipalities present within the circle.
- 11. Visual indication of property line information.
- 12. The location and name of roads within or abutting the site.
- 13. Key note to the drawing indicating the facility's municipal address, municipal lot number(s) and concession lines as applicable, and the date the map was prepared.
- 14. Address and contact information for each municipality (municipal clerk or secretary-treasurers of planning board). (Refer to page 5.)
- 15. Complete "Required Mapping Information from Updated Site Plan" in table below .

#### Required Mapping Information from Updated Site Plan

Date Map Prepared (dd-r 08-04-2011	nm-yyyy)	Capacity of single largest propane 2000 USWG	storagevessel (USWG)
Tank setback coordinates.		nt on the map.	
Front:	71 m	Right side property line:	29.48 m
Rear:	245.26 m	Left side property line:	109.63 m
GPS coordinates of single	largest vessel:	Lt 43 41 51 .91N / Lon 79 41 59.18 W	

Name of person completing this form (please print)	Official Title	
Tony Kamzol	Corporate Health and Safety Ma	nager
Signature	Telephone No. 905-793-4034 ext. 308	Date (dd-mm-yyyy) 26-07-2011



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

Propane Storage and Handling Regulation

#### SECTION C: SUBMISSIONS (cont'd)

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

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:

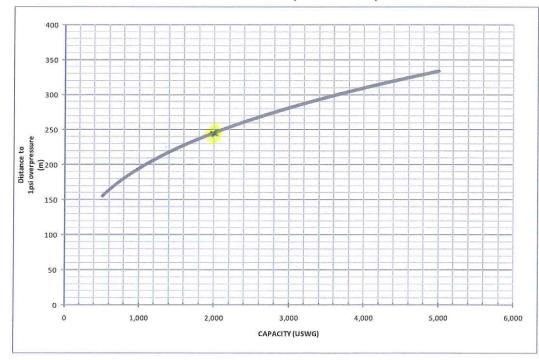
Density of Propane is 0.5033 kg per litre @ 15 C

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)



Name of person completing this form (please print)  Tony Kamzol	Official Title Corporate Health and Safety Manager		
Signature Den to 9	Telephone No. 905-793-4035 ext. 308	Date (dd-mm-yyyy) 26-07-2011	



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

#### SECTION C: SUBMISSIONS (cont'd)

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

As an accompaniment to the Map of Surrounding Area, provide the following information about buildings and features present within the circle in Table 2. Table 2: Buildings and Features

	Buildings and Features Present within the Circle on the Map of the Surrounding Area  AND Name and Address of Closest Building or Feature				* Number of Buildings and Features (mark with an "X")			Distance from Tank to Closest Building or		
	AND Name and	Address	or Closest Bt	inding or realure		0	1	2-10	11+	Feature
Industrial Name:	buildings or parks or golf courses Air Liquide  1700 Steeles Avenue East	(East	side)		(A)			2		46.7 m
City:		Province	ON	Postal Code L	6T 1A6					
Resident	ial building units specifically permane	ent single f	amily dwellings	, condominiums, and ap	partments.					
Name: Address							1			150.89 m
City:										
Name:	cial building units specifically retail, ru Industrial Mall (South side of Steel			theatres, and sporting of	omplexes. (C)					
Address: City:		Province	ON	Postal Code _			1			
Commerc	cial building units – continuous occup Industrial Mall (South side of Steel			impgrounds, and resorts.	(D)					146.0
Address:	22 Strathearn Avenue			NO. 1000 CON CONT. DOTO, NO. 1000 CONT. DOTO, NO. 1			1			m
City:		_ Province	ON	Postal Code						
	institutions specifically hospitals, sch- s, and prisons. William Osler Health Centre (Bram			g and retirement homes	, mental health		1			6568.0 m
Address:	2100 Bovaird Drive East						1			
City:		_ Province	ON	Postal Code						
Emergeno	cy responders specifically fire stations Brampton Fire Services	, ambulanc	e stations, and	police stations.						1205.02
Address:	280 Bramalea Road, Station 202									1395.62 m
City:	Brampton	Province	ON	Postal Code _						

<sup>\*</sup> 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)	Official Title	
Tony Kamzol	$\sim$ $\sim$ $\sim$ $\sim$	Corporate Health and Safety Mana	ager
Signature	7/2/2	Telephone No.	Date (dd-mm-yyyy)
1	TS PROLET 8109	905-793-4035 ext. 308	26-07-2011

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14th Floor - Centre Tower 3300 Bloor Street West Safety Authority
Fax: 416.231.4903

Customer Service: 1.877.682.8772

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

#### SECTION 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		
# 100	29.5		
# 40	11.75		
# 33.3	9.62	32	308 uswg
# 30	8.8		
# 20	5.8		
# 10	2.9		
# 5	1.5		

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

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

Total Cylinder Capacity	308 uswg
Total Tank Capacity	2000 uswg
Total Portable Capacity	0

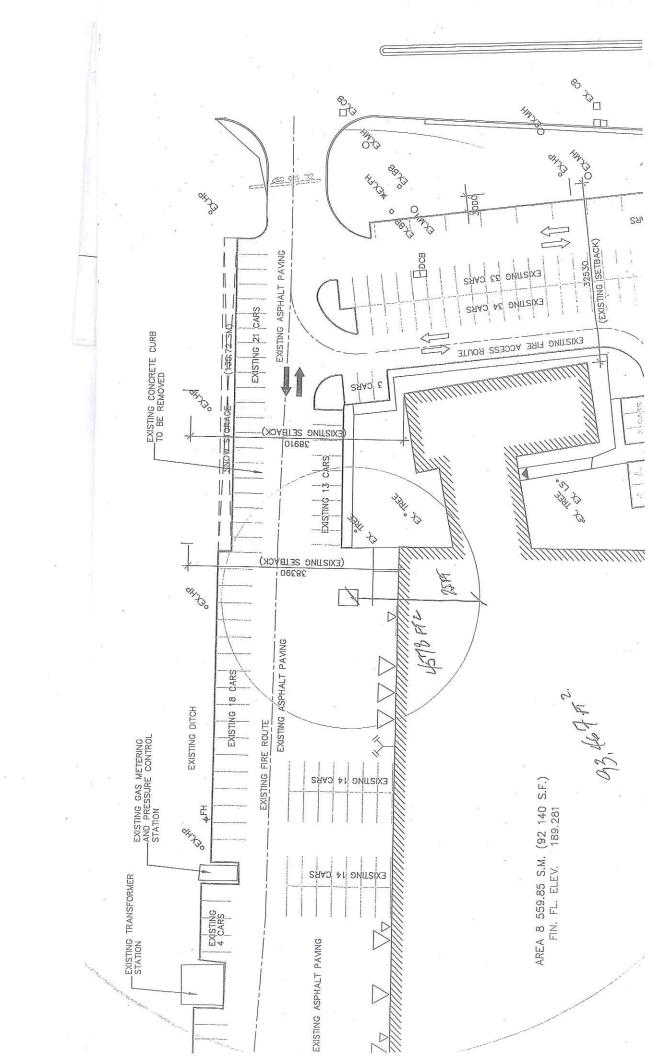
Declaration: I am aware that it is an offence to give false information in this document and I hereby declare that the information I have given here is true and complete.

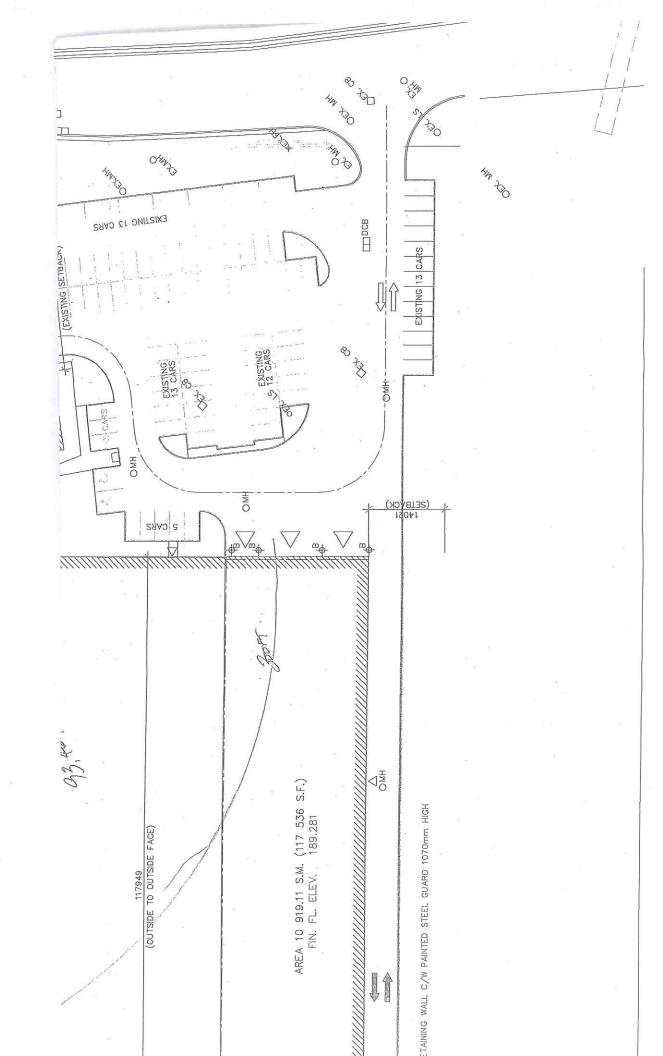
Name of person completing this form Tony Kamzol	(please print)	Official Title Corporate Health and Safety N	Official Title Corporate Health and Safety Manager		
Signature	Remal	Telephone No. 905-793-4035 ext. 308	Date (dd-mm-yyyy) 26-07-2011		

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ENST NOG 51 CARS AREA 7 614.05 S.M. (81, 959 S.F.) FIN. FL. ELEV. 189.281

JINE OF EASEMENT LINE OF EASEMEN 293 6100 EXISTING < OF CREEK BED





MATCOR AUTOMOTIVE Caledon Propane Inc.

Installation as per B149.05 code. 1. Vertical Tank 2000 USWG

2. Located 30 FT from the building3. Located 75 FT from the property line

Protected against vehicular traffic; b) buried more than 36 inches below grade a) will be spaced more than 54 inches apart

c) will be 4 inch tubing filled with concrete
5. Tank is secured to a reinforced concrete pad that;
a) extends at least 1 ft from all sides of the tank and 1 ft above ground level
b) has been designed to have a maximum bearing pressure on the soil

of 2000 lb per ft

3.5 ft 3.5 ft (1 m) 4 in (100 mm)
steel pipe,
30 in (750 mm)
above grade,
54 in (1350 mm)
maximum between
posts. ↑ \1 ft (300 mm) 1 ft (300 mm) (900 mm)

3.5 ft (7 m)

Figure B.2 Installation of a vertical tank

TYPICAL BOLLARD DETAIL Scale: 1:10

: OF EASEMENT

KEY PLAN

TRUE NORTH

CONST. NORTH

No. Date Issued By:

A 12 MAY-00 ISSUED FOR SITE PLAN APPROVAL

B 17-MAY-00 BUILDING PERMIT

C 8-JUN-00 RE-ISSUED FOR SITE PLAN APPROVAL

D 24-AUG-00 RE-ISSUED FOR BUILDING PERMIT

RES

Technical Standards and Safety Authority Fuels Safety Division DRAWING REVIEWED Revisions/Notes: Yes/No Name: MAREK KULIK Signature: And Date: OCI 27 23-AUG-00 DRIVE-IN DOOR REVISED . Dote Revision Contractor must check and verify all dimensions and conditions on the job, and report any discrepancies to the Architect before proceeding with the work. All drawings, prints and specifications are the property of the Architect and must be returned to the Architect at the completion of the work. © ADG Architectural Design Group Inc. 2000 Not to be used for construction unless signed by the Architect: This drawing is to be used for the following purpose: Architectural Design Group Inc. ARCHITECT AND ENGINEERS 40 Winges Road, Unit #8, Woodbridge, Ont. L4L 6B2 Tel.: (905) 850-5006 Fax.: (905) 850-7706 ADDITION TO: MATCOR AUTOMOTIVE INC. PHASE 3 1620 STEELES AVENUE, BRAMPTON Drawing Title SITE PLAN Scole Drawn By: Plot Date: Date Drawing Number

\(\lambda\)

Project Number

