# Technical Standards and Safety Authority www.tssa.org

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

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

This Level 1 RSMP applies to: a facility with a total propane storage capacity of 5,000 USWG or less; or

a facility with a fixed propane storage capacity of exactly 5,000 USWG and no more than 500 USWG of portable propane storage capacity on eith

Failure to fully complete this form may result in rejection.
Making a false statement may result in a line or prosecution under the \*Technical Standards and Safety Act\*

Licence Number | N/A - New Facility |
Check applicable type of propane operations.

| Oyfinder | V Motor Fill | Filting Plant | Card Keylock |
Submit along with this correlated application a Facility Site Plan and a Map of the Surrounding Area.

#### SECTION A: GENERAL INFORMATION The Undersigned applies to TSSA for a review for an RSMP under Ontario's Technical Standards and Safety Act, Propane Storage and Handling Regulation. Company Name Ontario Corporation No., if applicable Canpar Transport LP Operator Name (if different from above) Canpar - Concord Terminal Telephone No. E-mail 416-869-0317 416-869-3846 rweicht@canpar.com Street No. Street Name / 911 Number / Address, if applicable 201 Westcreek Blvd, Town / City or Township / County Province Postal Code Brampton L6T 5T7 Ontario Mailing address if different from above. Street No Streat Name / 911 Number / Address, if applicable C 205 New Toronto Street Town / City or Township / County Province Postal Code Toronto Ontario M8V 0A1168 Information on Container Refill Centre or Filling Plant Location of facility. Street No. Street Name / 911 Number / Address, if applicable D Nearest Major Intersection 473 Basaltic Road Keele St and Rutherford Rd Town / City or Township / County Province Postal Code City of Vaughan L4K 4W8 Ontado Name of Licence Holder Canpar Transport LP Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). ROT type Roland Weicht 400-04 and 100-02 Municipality (or municipalities if the facility or its hazard distance touches multiple borders) City of Vaughan Hours of operation.

This document is valid until the next licence renewal date. You are required by law to notify TSSA of any change of information.

Declaration: I am aware that it is an offence to give false information this document and

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

Printname
Signature

Date (dd-fm
Name of Licence Holder Canpar Transport LP

Name of Senior Management person as defined in the Regulation holding the Record of Training Reland Weicht



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

| SE   | CTION A: GENERAL IN                 | IFORMATION (cont'd)  |
|--|-------------------------------------|--|
| ndicate the year the facility was established.<br>N/A - Not Yet Built                            | Indicate the year of any significan | nt modifications, as defined in s.1, O.Reg 211/01, since establishmen            |
| dentify the psig rating and serial number for ea   | ch fixed propane storage tank on s  | site.  |
| PSIG<br>Tank 1: 250  | Serial Number<br>839-98             |  |
| Tank2:   |                                     |  |
| Tank3:   |                                     |  |
| Enter capacity of propane in USWG, fixed, por<br>each type (fixed, portable, and mobile) and the |                                     | ailed inventory that includes the number of tank/vessel for a separate document. |
| Fixed: 2,000 USWG  | Portable: 0 USWG                    | Mobile: 0 USWG   |

| Name of person completing this form (please print) Roland Weicht | Official Title<br>Regional Manager |                                 |
|--|------------------------------------|---------------------------------|
| Signature (  | Telephone No.<br>416-869-0317      | Date (dd/mm-yyyy)  A / Wy / 13, |



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

|                                  | SECT   | TON A: GENERAL INFOI<br>Activity Information |                     | d)                         |
|----------------------------------|--|--|---------------------|----------------------------|
| Name of Propa                    | ne Supplier(s)                               |  |                     | For Office Use - Party No. |
| EDPRO Energy G                   | roup Inc.                                    |  |                     |                            |
| Street No.                       | Street Name / 911 Number / Ad                | dress, if applicable                         |                     |                            |
| 5                                | Cuddy Blvd.                                  |  |                     |                            |
| Town / City or 1<br>London       | Fownship / Country                           |  | Province<br>Ontario | Postal Code<br>N5V 3Y3     |
| Telephone No.                    | Fax No.                                      | Contact Name                                 |                     |                            |
| 519-690-0000                     | 519-690-1948                                 | Joe Erskine                                  |                     |                            |
| E-mail<br>jerskine@edproer       | nergy.com                                    |  |                     |                            |
| Name of Propar<br>EDPRO Energy G | ne Transporter. If same as about             | ve, please check box. 🚺                      |                     | For Office Use - Party No. |
| Street No.<br>5                  | Street Name / 911 Number / Ad<br>Cuddy Blvd. | dress, if applicable                         |                     | 1                          |
| Town / City or T<br>London       | ownship / Country                            |  | Province<br>Ontario | Postal Code<br>N5V 3Y3     |
| Telephone No.<br>519-690-0000    | Fax No.<br>519-690-1948                      | Contact Name<br>Joe Erskine                  |                     |                            |
| E-mail<br>jerskine@edproen       | ergy.com                                     |  |                     |                            |
| Off-site Cylinder                | and/or Mobile Storage                        | Capacity store                               | d off-site, in USWG | For Office Use - Party No. |
| Street No.                       | Street Name / 911 Number / Add               | iress, if applicable                         |                     |                            |
| Town / City or To                | ownship / Country                            |  | Province            | Postal Code                |
| Telephone No.                    | Fax No.                                      | Contact Name                                 | <b>_</b>            | 1                          |
| Note: Customer st                | orage is not considered off-site s           | torage.                                      |                     |                            |

| Name of person completing this form (please print) Roland Weicht | Official Title<br>Regional Manager |                             |
|--|------------------------------------|-----------------------------|
| Signature  | Telephone No.<br>416-869-0317      | Date (dd-mm-yyyy) OZ/O7/12, |
| FS 09195 (11/10) 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.  None; other than consumer quantities of items such as spray paint, cleaners, etc.  |
|---|
| Description of fire and emergency equipment indicated on facility site map.  Fire extinguisher - 20lb A,B,C   |
| Fire Hydrant - City   |
| Emergency shut-off  |
| 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.  Internal Safety Control (ISC) valves are equipped with nitrogen charged actuators |
| Fusible plug on nitrogen holding open ISC valve causes liquid outlet to automatically close in event of fire  |
| Normally closed solenoid valves on automotive fill meter before hose closes by emergency shut-off or when not in use  |
| Maintenance and testing schedule for fire protection controls and devices. Fire extinguisher is inspected by outside company annualy  |
| Fire extinguisher inspected in-house monthly  |
| Comprehensive dispenser inspection conducted annually by G2-LP certificate holder or higher   |
| Facility inspection by TSSA completed annually  |

| Name of person completing this form (please print) Roland Weicht | Official Title<br>Regional Manager |                              |
|--|------------------------------------|------------------------------|
| Signature  | Telephone No.<br>416-869-0317      | Date (dd-thm-yyyy)  OU/O1/13 |



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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  | on ·                                    |                            |  |
|---|-----------------------|----------------------------|---|---|----------------------------|--|
| Name<br>Roland Weicht   |                       | For Office Use - Party No. | Name<br>Karl Killingbeck  |   | For Office Use - Party No. |  |
| Official Title<br>Regional Manager, Ontario NE  |                       |                            | Official Title<br>Terminal Manager - Concord                                    |   |                            |  |
| Telephone No.<br>416-869-0317   | Fax No.<br>416-869-3  | 846                        | Cell No.<br>416-254-1689  | Fax No.<br>905-303-7696                 |                            |  |
| E-mail<br>rweicht@canpar.com  |                       |                            | E-mail<br>kkillingbeck@canpar.com   |   |                            |  |
| Role and responsibilities in emergency  | /                     |                            | Role and responsibilities in emergen-   | су                                      |                            |  |
| Represent licence holder/operator on in   | teraction wi          | th authorities             | Site liaison for enacting internal and ex                                       | ternal emergency                        | / procedures               |  |
| Ensure regulations are met  |                       |                            | Communication with emergency respo  |   |                            |  |
| 2. Facility Contact Personnel - Alt   | ernate Co             |                            | 6. Name of Facility Manager   |   |                            |  |
| Name<br>Marcel Carter   |                       | For Office Use - Party No. | Name<br>Karl Killingbeck  |   | For Office Use - Party No. |  |
| Official Title<br>Driver Supervisor - Concord   |                       |                            | Official Title<br>Terminal Manager - Concord                                    |   |                            |  |
| Telephone No.<br>416-735-7238   | Fax No.<br>905-303-7  | 696                        | Telephone No.<br>905-303-7725   | Fax No.<br>905-303-7696                 |                            |  |
| E-mail<br>mcarter@canpar.com  |                       |                            | E-mail<br>kkillingbeck@canpar.com   |   |                            |  |
| Role and responsibilities in emergency  |                       |                            | Role and responsibilities in emergency  |   |                            |  |
| Same as Key Contact and/or Facility 24  | Hr Contact            | if other unavailable       |   | Ensure approved procedures are followed |                            |  |
|   |                       |                            | Ensure internal emergency procedures  |   | employees aware            |  |
| 3. Local Fire Services - Key Contac   |                       |                            | 7. Propane Supplier Key Contact F   |   |                            |  |
| Name<br>Larry Bentley   |                       | For Office Use - Party No. | Name<br>Joe Erskine   |   | For Office Use - Party No. |  |
| Official Title<br>Fire Chief - City of Vaughan  |                       |                            | Official Title<br>CEO of EDPRO Energy Group Inc.                                |   |                            |  |
| Telephone No.<br>905-832-8585 Ext 6301  | Fax No.<br>905-832-85 | 93                         | Telephone No.<br>519-690-0000   | Fax No.<br>519-690-1948                 |                            |  |
| E-mail<br>larry.bentley@vaughan.ca  |                       |                            | E-mail<br>jerskine@edproenergy.com  |   |                            |  |
| Role and responsibilities in emergency  |                       |                            | Role and responsibilities in emergence  | у                                       |                            |  |
| Review and provide guidance on fire safe<br>preparedness, Interface for invitation to o |                       |                            | Technical assistance; dispatch of service Activate Emergency Response Assistant |   |                            |  |
| 4. Local Fire Services - Alternate Co   |                       |                            | 8. Municipal Contact  | ioo i ian by Er GE                      |                            |  |
| Name<br>Gary Fraser   |                       | For Office Use - Party No. | Name<br>Leo Grellette   |   | For Office Use - Party No. |  |
| Official Title<br>Deputy Fire Chief   | _                     |                            | Official Title<br>Director of Building Standards - City of N                    | /aughan                                 |                            |  |
|   | Fax No.<br>905-832-85 | 93                         | Telephone No.<br>905-832-8510   | Fax No.<br>905-832-8558                 |                            |  |
| E-mail<br>gary.fraser@vaughan.ca  |                       |                            | E-mail<br>leo.grellette@vaughan.ca  | 000 002 0000                            |                            |  |
| Role and responsibilities in emergency  |                       |                            | Municipality  |   |                            |  |
| Same as Fire Services - Key Contact if of   | lher unavail          | able                       | City of Vaughan   |   |                            |  |
|   |                       |                            | <del></del>   |   |                            |  |

| Name of person completing this form (please print)  Roland Weicht | Official Title<br>Regional Manager |                            |
|---|------------------------------------|----------------------------|
| Signature C. Sush-  | Telephone No.<br>416-869-0317      | Date (dd-mm-yyyy) 02/02/13 |



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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

|                      | are equipped with nitrogen charged actuators with fusible plugs   |          |
|----------------------|---|----------|
|                      | lling: Only Canpar's owned propane fuelted vehicles are filled; no pilot light equipped vehicles (motorhomes, catering trucks) will | i refuel |
| -Power turned off wh |   |          |
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| Name of person com | pleting this form (please print) | Official Title   |                   |
|--------------------|----------------------------------|------------------|-------------------|
| Rofand Weicht      |                                  | Regional Manager |                   |
| Signature          |                                  | Telephone No.    | Date (dd-mm-yyyy) |
| :<br>              | 1 / 1 / A IF                     | 416-869-0317     | 02/01/13.         |



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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 Re                       | sponse Plan and Procedures provided to facility key contacts.    |
|--|--|
| Training Date (dd-mm-yyyy)                     | Print Name of Training Provider: EDPRO Energy Group Inc.         |
| Prior to activation                            | Print Name of Instructor: Robert Allen                           |
| 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 En                  | ergency Management Procedures provided to staff.                 |
| Training Date (dd-mm-yyyy) Prior to activation | Print Name of Training Provider: EDPRO Energy Group Inc.         |
|  | Print Name of Instructor; Robert Allen                           |
| 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) Prior to activation | Print Name of Training Provider: EDPRO Energy Group Inc.         |
|  | Print Name of Instructor: Robert Allen                           |
| 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:  |

| Name of person completing this form (please print) | Official Title                |                            |
|--|-------------------------------|----------------------------|
| Roland Weicht                                      | Regional Manager              |                            |
| Signature  | Telephone No.<br>416-869-0317 | Date (dd-mm-yyyy) 02/07/13 |
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## SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)

4. Emergency Training Plan for Coming Year

| Training on Emergency Respo       | nse Plan and Procedures provided to facility key contacts.    |
|-----------------------------------|---|
| Target Date (dd-mm-yyyy)          | Print Name of Training Provider: . EDPRO Energy Group Inc.    |
| To be established apon activation | Print Name of Instructor: Robert Allen                        |
| 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 Emerg  | ency Management Procedures provided to staff.                 |
| Target Date (dd-mm-yyyy)          | Print Name of Training Provider: EDPRO Energy Group Inc.      |
|                                   | Print Name of Instructor: Robert Allen                        |
| 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 provid  | ed to certificate holders / persons with Records of Training. |
| Target Date (dd-mm-yyyy)          | Print Name of Training Provider: EDPRO Energy Group Inc.      |
|                                   | Print Name of Instructor: Robert Allen                        |
| 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:                                     |

| Name of person completing this form (please print) | Official Title   |                   |
|--|------------------|-------------------|
| Roland Weicht                                      | Regional Manager |                   |
| Signature .  |                  | ate (dd-m/n-yyyy) |
| FS 09195 (11/10) Page 8 of 15                      |                  | 1 /               |



Warnings and Actions

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Level 1 Risk and Safety Management Plan (RSMP)

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

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

5. Emergency Response Communications Plan

| Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate).  In the event of a fire/significant propane leak the operator will activate the Emergency Stop control on the dispenser and/or delivery truck. |
|--|
| The operator will contact Fire Services by calling 9-1-1 and initiate facility evacuation  |
| Fire Services will oversee public notification and/or evacuation   |
| Facility Contact will contact Propane Supplier Key Contact who will activate ERAP (if necessary) and report to TSSA through Spills Action Centre   |
| 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 operator, immediately after activating the Emergency Stop control, will orally notify any other employees and visitors on site to evacuate, then call 9-1-1  |
| All employees and visitors (customers) will immediately vacate the building and premises to the boulevard at the front of 473 Basaltic Road.   |
|  |
|  |
| 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).  |
| All employees are instructed to and authorized to activate emergency response authorities by calling 9-1-1 upon occurrence of fire and/or significant leak   |
| Continued flow of information to be provided as it occurs by person of responsibility to the fire services   |
| In the event of an emergency, the terminal manager is required to be on site to provide updated information  |
|  |
| Describe provisions for fire department entry when there are no operations or staffing at the propane site.  |
| Facility and dispenser location is gated when facility is closed. Vaughan Fire Services will be required to cut padlock to access rear of facility.  |
|  |
|  |
| Describe how the licence holder will ensure continual flow of updated information to authorities. Fire Services are formally invited for a full site review on an annual basis with supplementary site access for training or orientation as requested.                        |
| TSSA conducts a comprehensive inspection annually. Site specific emergency procedures are reviewed annually with all employees.  |
|  |
|  |
| How long will it take the facility liaison person to respond to the site.  |
| 24 hour facility contact person would be able to respond to site in approximately 20 - 30 min  |
|  |
|  |
|  |
|  |

| Name of person completing this form (please print) Roland Weicht | Official Title<br>Regional Manager |                              |
|--|------------------------------------|------------------------------|
| Signature L wath   | Telephone No.<br>416-869-0317      | Date (dd-mrg-yyyy) 02/01/13, |



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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? 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? 6. Are weighing systems validated for accuracy? 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 location? What is the unobstructed distance to the closest water supply that could be used for 113m firefighting activities? (distance in metres only) What is the unobstructed distance to the closest approved water supply with year

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.

N/A

| Name of person com<br>Roland Weicht | pleting this form (please print) | Official Title   |                   |
|-------------------------------------|----------------------------------|------------------|-------------------|
|                                     |                                  | Regional Manager |                   |
| Signature                           |                                  | Telephone No.    | Date (dd-mm-yyyy) |
|                                     | 16 Jack                          | 416-869-0317     | 02/02/13          |

round access if there are no hydrants? (distance in metres only)



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

(dd-mm-yyyy)

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

Yes 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: Page #9 Fire department to cut off padlock to access rear of facility, VFRS recommends the use of KNOX BOX key box instead Page #9 continued flow of information to be provided as it occurs by person of responsibility to the fire services. Also in the event of an emergency the Terminal Manager is required to be on site to provide updated information. To be completed by the Licence Holder In response to the above comments, the following action(s) is required: Canpar Concord will install a KNOX BOX as recommended by Vaughan Fire and Rescue Services Persons of responsibility including terminal manager and alternate contact will be made aware of the requirements to be on site in the event of an emergency and to provide any required information to the fire services. The licence holder will respond to the Local Fire Services comments by: 27 - 06 - 2013

|  | LOCAL FIRE SERVICES                       |                   |
|--|---|-------------------|
| The undersigned has reviewed Section B of the Risk a | and Safety Management Plan Fire Services. |                   |
| Print name   | Signature /                               | Date (dd-mm-yyyy) |
| Local Fire Services Name John Caruso                 | ohn Course                                | 27 - 06 - 2013    |

| Name of person cor<br>Roland Weicht | mpleting this form (please print) | Official Title<br>Regional Manager |                              |
|-------------------------------------|-----------------------------------|------------------------------------|------------------------------|
| Signature                           | K. Wank                           | Telephone No. 416-869-0317         | Date (dd-myd-yyyy)  02/01/13 |



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Level 1 Risk and Safety Management Plan (RSMP)

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#### SECTION C: SUBMISSIONS

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

#### Facility Site Plan.

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

- 1. The storage location of fixed, portable, and mobile vessels.
- 2. The maximum volume, types and storage location of hazardous materials.
- 3. Location of permanent structures on site.
- 4. Access and egress points and location of barriers.
- 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:

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

#### Required Mapping Information from Updated Site Plan

| Date Map Prepared (dd-mm-yyyy)<br>30-04-2013 | Capacity of single largest propane storagevessel (USWG) 2000 USWG |      |  |
|--|---|------|--|
| Tank setback coordinates. Indicate placeme   | ent on the map.   |      |  |
| Front: 465'                                  | Right side property line:   | 173' |  |
| Rear: 52'                                    | Left side property line:  | 15'  |  |
| GPS coordinates of single largest vessel:    | 43°49'54.29"N, 79°29'51.53"W                                      |      |  |

| Name of person completing this form (please print) Roland Weicht | Official Title<br>Regional Manager |          |
|--|------------------------------------|----------|
| Signature ( , Waut   | Telephone No.<br>416-869-0317      | 02/37/13 |



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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<br>(litres) | Nominal Water Capacity<br>(USWG) | Distance to 1 psi overpressure<br>(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:

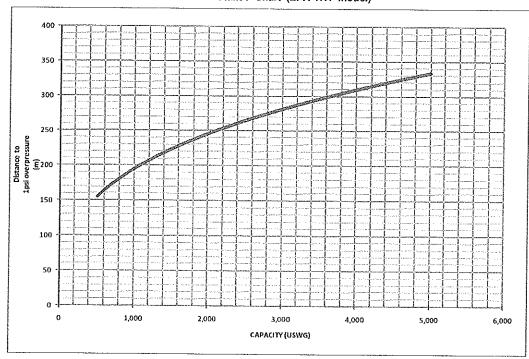
Density of Propane is 0.5033 kg per litre @ 15 C

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)



|                        | Official Title<br>Regional Manager |                            |  |
|------------------------|------------------------------------|----------------------------|--|
| Signature L. Signature | Telephone No.<br>416-869-0317      | Date (dd-mm-yyyy) 02/07/13 |  |



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

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

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

|   | Buildings and Features Present within the Circle on the Map of the Surrounding Area  AND Name and Address of Closest Building or Feature    |   |   | Tank to Closest<br>Building or |          |     |  |  |
|---|---|---|---|--------------------------------|----------|-----|--|--|
| <del>65************************************</del> |   |   |   |                                |          |     |  |  |
| Industrial<br>Name:                               | buildings or parks or golf courses  Bondfield   |   |   |                                |          | 55  |  |  |
| Address:  | 407 Basaltic Road   | Ī |   |                                | x        | m   |  |  |
| City;   | Concord Province Ontario Postal Code L4K 4W8  |   |   |                                | <u> </u> |     |  |  |
| Residenti   | al building units specifically permanent single family dwellings condominiums and anadments   |   |   |                                |          |     |  |  |
|   |   |   |   |                                | х        | m   |  |  |
| Commerc<br>Name:                                  | ial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes.  Multi-Tenant Commercial / Industrial |   |   |                                |          | 00  |  |  |
| Address:  | 400 Spinnaker Way   |   |   | x                              |          | 80m |  |  |
| City:   | Concord Province Ontario Postal Code L4K 5Y9  |   |   |                                |          |     |  |  |
| Commerci<br>Name:                                 | al building units – continuous occupancy specifically hotels, campgrounds, and resorts.<br>N/A  |   |   |                                |          |     |  |  |
| Address:  |   | х |   |                                |          | m   |  |  |
| City:   | Province Postal Code  |   |   |                                |          |     |  |  |
|   | institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health s, and prisons.  N/A                | x |   |                                |          | m   |  |  |
| Address:  |   |   | İ |                                |          |     |  |  |
| City:   | Province Postal Code  |   |   |                                |          |     |  |  |
| Emergenc<br>Name:                                 | y responders specifically fire stations, ambulance stations, and police stations. N/A   |   |   |                                |          |     |  |  |
| Address:  |   | х |   | Ì                              | - 1      | m   |  |  |
| City:   | Province Postal Code  |   |   |                                |          |     |  |  |

| The say to the tribution of the say to the s | indout that e direct tiete is the alto comble | t <del>c</del> ,           |
|--|---|----------------------------|
| Name of person completing this form (please print) Roland Weicht   | Official Title<br>Regional Manager            |                            |
| Signature Aut.   | Telephone No.<br>416-869-0317                 | Date (dd-mm-yyyy) 02/07/13 |
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<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             | 0        | 0                    |
| # 40          | 11,75            | 0        | 0                    |
| # 33.3        | 9.62             | 0        | 0                    |
| # 30          | 8.8              | 0        | 0                    |
| # 20          | 5.8              | 0        | 0                    |
| # 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 |
|-------------------------|----------|----------------------|
| None                    |          | 0                    |
|                         |          |                      |
|                         |          |                      |
|                         |          |                      |
|                         |          |                      |
|                         |          |                      |
|                         |          |                      |
|                         |          |                      |
| Total Tank Capacity     |          |                      |
| Total Cylinder Capacity |          |                      |
|                         | 0        |                      |
| Total Tank Capacity     | 0        |                      |
| 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 (please print)

Roland Weicht

Signature

Telephone No.

Date (dd-mfn-yyyyy)

416-869-0317

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.

Official Title

Regional Manager

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