



Technical Standards and Safety Authority
 345 Carlingview Drive
 Toronto, Ontario M9W 6N9
 Tel: 416.734.3300
 Fax: 416.231.4078
 Customer Service: 1.877.682.8772
 propane@tssa.org
 www.tssa.org

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.

<p style="text-align: center; font-size: small;">Failure to fully complete this form may result in rejection. Making a false statement may result in a fine or prosecution under the <i>Technical Standards and Safety Act</i></p> <p>Licence Number: [REDACTED]</p> <p>Check applicable type of propane operations.</p> <p> <input checked="" type="checkbox"/> Cylinder <input type="checkbox"/> Motor Fill <input type="checkbox"/> Filling Plant <input type="checkbox"/> Card/Keylock </p> <p style="font-size: x-small;">Submit along with this completed application a Facility Site Plan and a Map of the Surrounding Area.</p>	<p style="text-align: center; font-weight: bold;">For Office Use Only</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div>
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SECTION A: GENERAL INFORMATION

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

Company Name A Thousand Island campground Incorporated.	Corporation No. 001381377
Operator Name (if different from above) 1000 Islands ivy tea KOA	
Telephone No. 6136592817	Fax No. n/a
E-mail 1000koa85@gmail.com	
B Street No. Street Name / 911 Number / Address, if applicable 514 1000 islands parkway	
Town / City or Township / County Province Postal Code Lansdowne ontario K0E 1L0	
Mailing address if different from above.	
C Street No. Street Name / 911 Number / Address, if applicable Town / City or Township / County Province Postal Code	
D Information on Container Refill Centre or Filling Plant	
Location of facility.	
Street No.	Street Name / 911 Number / Address, if applicable
Nearest Major Intersection	
Town / City or Township / County Province Postal Code	
Name of Licence Holder Dongjun Lee	
Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). Fraser Cross	
ROT type 100-08	
Municipality (or municipalities if the facility or its hazard distance touches multiple borders) Leeds and the Thousand Islands	
Hours of operation.	

This document is valid until the next licence renewal date. You are required by law to notify TSSA of any change of information.
 Declaration: I am aware that it is an offence to give false information in this document and I hereby declare that the information I have given here is true and complete.

Printname Name of Licence Holder: Dongjun Lee	Signature 	Date (dd-mm-yyyy) 19-12-2019
Name of Senior Management person as defined in the Regulation holding the Record of Training: Fraser Cross	Date (dd-mm-yyyy) 19-12-2019	



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SECTION A: GENERAL INFORMATION (cont'd)

Indicate the year the facility was established. _____ Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. _____

Identify the psig rating and serial number for each fixed propane storage tank on site.

	PSIG	Serial Number
Tank1:	250@125	900-170
Tank2:	250@125	00719852
Tank3:	250@125	57-2

Enter capacity of propane in USWG, fixed, portable, and mobile, and provide detailed inventory that includes the number of tank/vessel for each type (fixed, portable, and mobile) and the capacity of each tank/vessel, on a separate document.

Fixed: 2000uswg Portable: 822uswg Mobile: n/a

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Name of person completing this form (please print) dongjun lee		Official Title co-owner	
Signature 		Telephone No. 6136592817	Date (dd-mmm-yyyy) 19-12-2018



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

Name of Propane Supplier(s) W.O. Stinson Fuels			For Office Use - Party No.	
Street No. 4726	Street Name / 911 Number / Address, if applicable bank street		Province ontario	Postal Code k1t 3w7
Town / City or Township / Country ottawa				
Telephone No. 6138227400	Fax No. 6138226305	Contact Name Brad Fisher		
E-mail pfinniss@wostinson.com				

Name of Propane Transporter. If same as above, please check box. <input checked="" type="checkbox"/>			For Office Use - Party No.	
Street No.	Street Name / 911 Number / Address, if applicable		Province	Postal Code
Town / City or Township / Country				
Telephone No.	Fax No.	Contact Name		
E-mail				

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

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

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Signature 	Telephone No. 6136592817	



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SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN

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

Description of the maximum volume, types and storage location of other hazardous materials on site, if any.

Qty1- double wall 1345 Ltre steel circular diesel fuel tank

Qty1- double wall 455 Ltre steel circular unleaded Gas tank

Bottle tanks over 420 meters from propane tanks

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

ABC fire extinguishers

3 -5lb located at main building

1 20lb located at main propane tank

1 5lb located at Kabins

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.

Main lodge and home have fire security maintained alarm systems.

Main lodge tank has fusible link at source feed.

Maintenance and testing schedule for fire protection controls and devices.

All fire extinguishers and alarm systems are annually inspected by 3rd party certified inspectors.

Fire extinguishers inspected visually monthly by owners.

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Name of person completing this form (please print)		Official Title	
dongjun lee		co-owner	
Signature		Telephone No.	Date (dd-mmm-yyyy)
		6136592817	18-12-2018



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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 dongjun lee	For Office Use - Party No.	Name dongjun lee	For Office Use - Party No.
Official Title co-owner		Official Title co-owner	
Telephone No. 403-929-1366	Fax No.	Cell No. 403-929-1366	Fax No.
E-mail 1000koa85@gmail.com		E-mail 1000koa85@gmail.com	
Role and responsibilities in emergency strategic overseer/ point of contract		Role and responsibilities in emergency strategic overseer/ point of contract	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name jinwoo lee	For Office Use - Party No.	Name Ryan bateson	For Office Use - Party No.
Official Title co-owner		Official Title manager	
Telephone No. 403-892-7395	Fax No.	Telephone No. 613-331-3375	Fax No.
E-mail ejnu1x@gmail.com		E-mail ryan.bateson@hotmail.com	
Role and responsibilities in emergency strategic overseer/ point of contract		Role and responsibilities in emergency managing staffs and guests	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name Alex bennet	For Office Use - Party No.	Name Brad Fisher	For Office Use - Party No.
Official Title chief fire prevention officer	E-mail	Official Title	E-mail bfisher@wostinson.com
Telephone No. 613-928-3303	Fax No.	Telephone No. 613-240-81	Fax No. 613-822-6305
Role and responsibilities in emergency		Role and responsibilities in emergency propane supplier contact person	
Fire Services Address Township of Leeds and the Thousand Islands 1233 Prince St. P.O. Box 280 Lan		Propane Supplier Address 4728 bank street ottawa, on k1t 3w7	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name rick lawson	For Office Use - Party No.	Name amanda wemer-mackeler	For Office Use - Party No.
Official Title fire chief	E-mail	Official Title planning technician	
Telephone No. 613-659-2415 ext. 222	Fax No.	Telephone No. 613-659-2415 ext.203	Fax No.
Role and responsibilities in emergency		E-mail amanda@townshipleeds.on.ca	
Fire Services Address Leeds and 1000 Islands Fire Department, 1233 Prince Street, Lansdowne,		Municipality Name and Address Township of leeds and the thousand islands	

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Name of person completing this form (please print) dongjun lee	Official Title co-owner
Signature 	Telephone No. 6136592817
	Date (dd-mmm-yyyy) 28-12-2018



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

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

Training on Emergency Response Plan and Procedures provided to facility key contacts.

Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

Training on the facility's Emergency Management Procedures provided to staff.

Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

On-site specific training provided to certificate holders / persons with Records of Training.

Training Date (dd-mmm-yyyy)	Print Name of Training Provider: FSN
09-08-2018	Print Name of Instructor: Don Cowan
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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dongjun Lee	co- owner	
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	6136592817	28-12-2018



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

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

5. Emergency Response Communications Plan

Warnings and Actions

Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate).
 ERAP will be initiated by owner/first responder to notify employees, contact authorities through 911 and any surrounding businesses and/or homes as indicate

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).
 As indicated in ERAP, owner/first responder will contact employees through 2 way radio and verbal communicate to initiate evacuation procedures and meet at grouping area for roll call (empty field- north east corner)

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 permitted initial 911 call, with owner/ first responder to complete necessary contact to TSSA, Environment Canada and recall to 911 to update if emergency could effect propane cylinders.

Describe provisions for fire department entry when there are no operations or staffing at the propane site.
 ERAP and initiate plan. During open season, staff on site 24 hours a day/7 days a week.

Describe how the licence holder will ensure continual flow of updated information to authorities.
 Minimum annual review of procedures to ensure changes are made as required and on site inspections.

How long will it take the facility liaison person to respond to the site.
 Owner/ first responder lives on-site. If away, secondary responder on site 24/7.

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SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)
 The licence holder will complete Section B in consultation with the local Fire Services.

6. Building and Site Security and Procedures

- | | Yes | No |
|---|-------------------------------------|--------------------------|
| 1. Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Is there adequate night lighting at the site? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Are procedures in place that ensure access routes, aisles, storage area, filling areas and the grounds are kept clear from unwanted materials? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Are there procedures that capture and record the daily inspection of hoses and inspection requirements for filling systems and mechanical devices used in the transfer of propane? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Are weighing systems validated for accuracy? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8. Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 9. Is the schedule of maintenance and testing activities retained on site? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

7. Water Supply

The propane licence holder should work with the local fire department to determine water supply capabilities that are available based on the propane facility's location.

- | | Yes | No |
|---|-------------------------------------|-------------------------------------|
| 1. Is a pressurized water system available at the propane facility site? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only) | 20m | _____ |
| 4. What is the unobstructed distance to the closest approved water supply with year round access if there are no hydrants? (distance in metres only) | 600m | _____ |

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SECTION C: SUBMISSIONS

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

Facility Site Plan.

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

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

Map of Surrounding Area.

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

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

Required Mapping Information from Updated Site Plan

Date map prepared (dd-mmm-yyyy) 28-12-2018	Capacity of single largest propane storage vessel (USWG) 1000uswg
Tank setback coordinates. Indicate placement on the map.	
Front: 480 metres	Right side property line: 268 metres
Rear: 540 metres	Left side property line: 146 metres
GPS coordinates of single largest vessel: 44 21'53.34N 76 1'25.12w	

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SECTION C: SUBMISSIONS (cont'd)

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

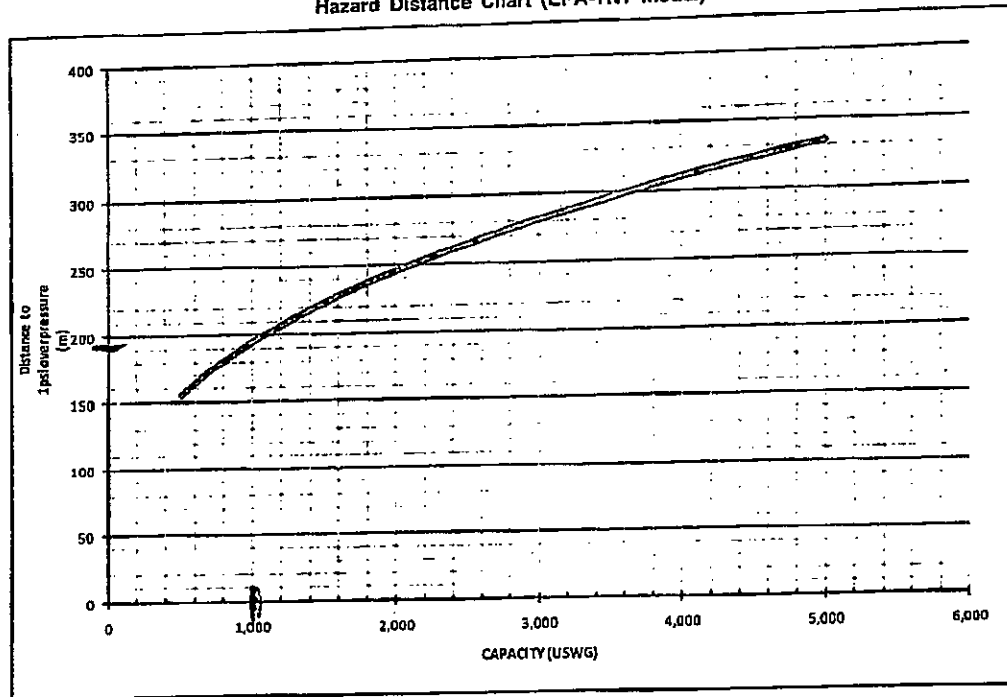
Table 1: Distance Table

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

Formula: $D = 16.94 \times (1.524 \times C)^{1/3}$
 D = Distance to overpressure of 1 psi (meters)
 C = Tank Total Capacity in USWG

Parameters: Density of Propane is 0.5033 kg per litre @ 15 C
 Assume all vessels are 80% full
 1 gallon [US, liquid] = 0.003785411784 cubic meter
 1 cubic metre = 264.17 USWG

Hazard Distance Chart (EPA-TNT model)





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SECTION C: SUBMISSIONS (cont'd)

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

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

Buildings and Features Present within the Circle on the Map of the Surrounding Area AND Name and Address of Closest Building or Feature	* Number of Buildings and Features (mark with an "X")				Distance from Tank to Closest Building or Feature
	0	1	2-10	11+	
Industrial buildings or parks or golf courses Name: _____ Address: _____ Province _____ Postal Code _____ City: _____					_____ m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. [Redacted]		X			103 m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: _____ Address: _____ Province _____ Postal Code _____ City: _____					_____ m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: Ivy Lea KOA campground Address: 514- 1000 islands Parkway City: Lansdowne Province Ontario Postal Code K0E 1L0			X		23 m
Sensitive Institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: _____ Address: _____ Province _____ Postal Code _____ City: _____					_____ m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: _____ Address: _____ Province _____ Postal Code _____ City: _____					_____ m

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

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WORKSHEET

Portable Storage Additional Information Worksheet

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9	6	744
# 100	29.5		
# 40	11.75		
# 33.3	9.62		
# 30	8.8		
# 20	5.8	10	58
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity			822

Tanks Stored On-site Not Connected for Use

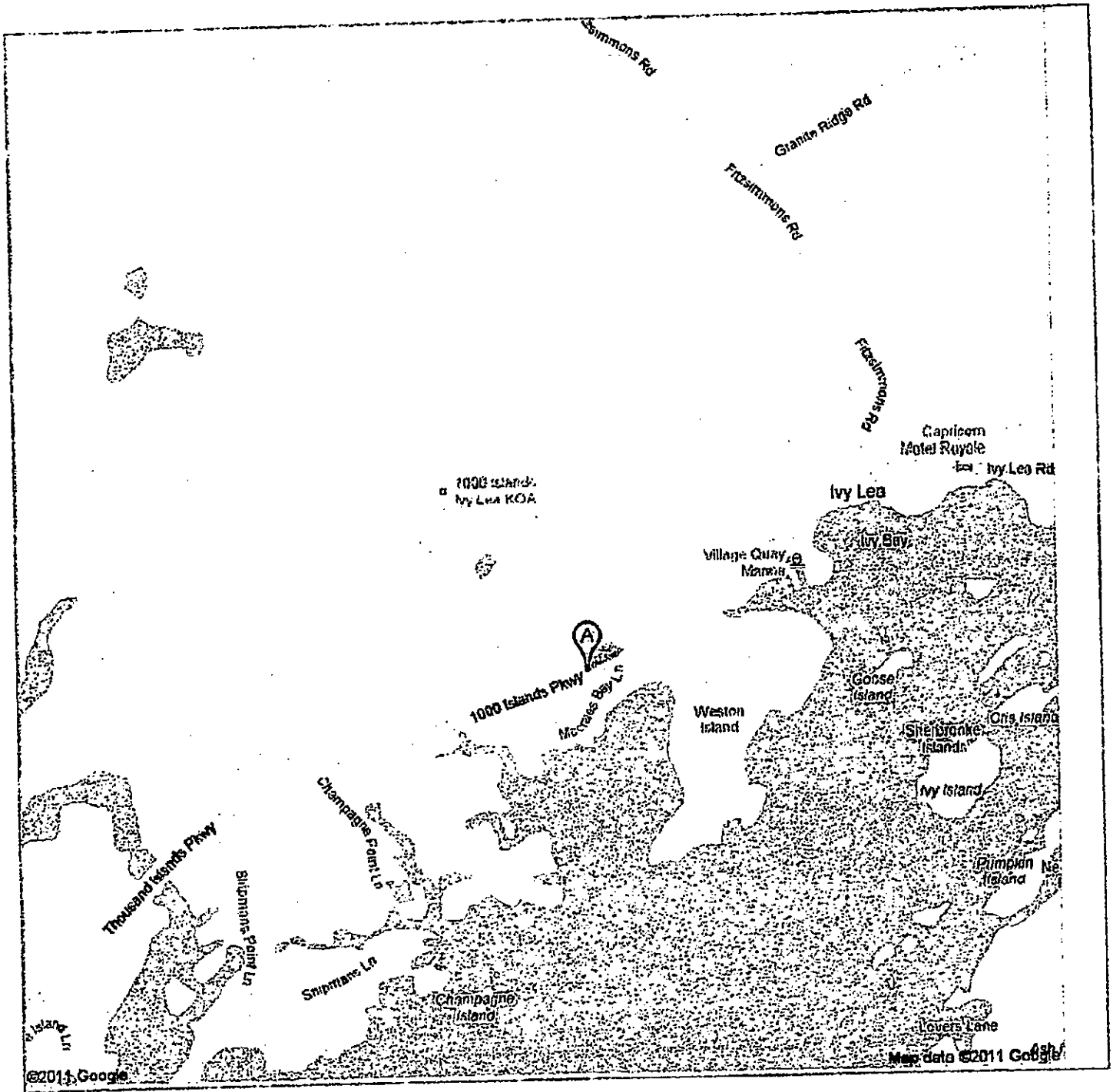
Tank Size In USWG	Quantity	Total Volume in USWG
n/a		
Total Tank Capacity		

Total Cylinder Capacity	822
Total Tank Capacity	
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	822

514 1000 Islands Pkwy, Leeds and the Thousand Islands, ON K0E 1L0 - Google Maps

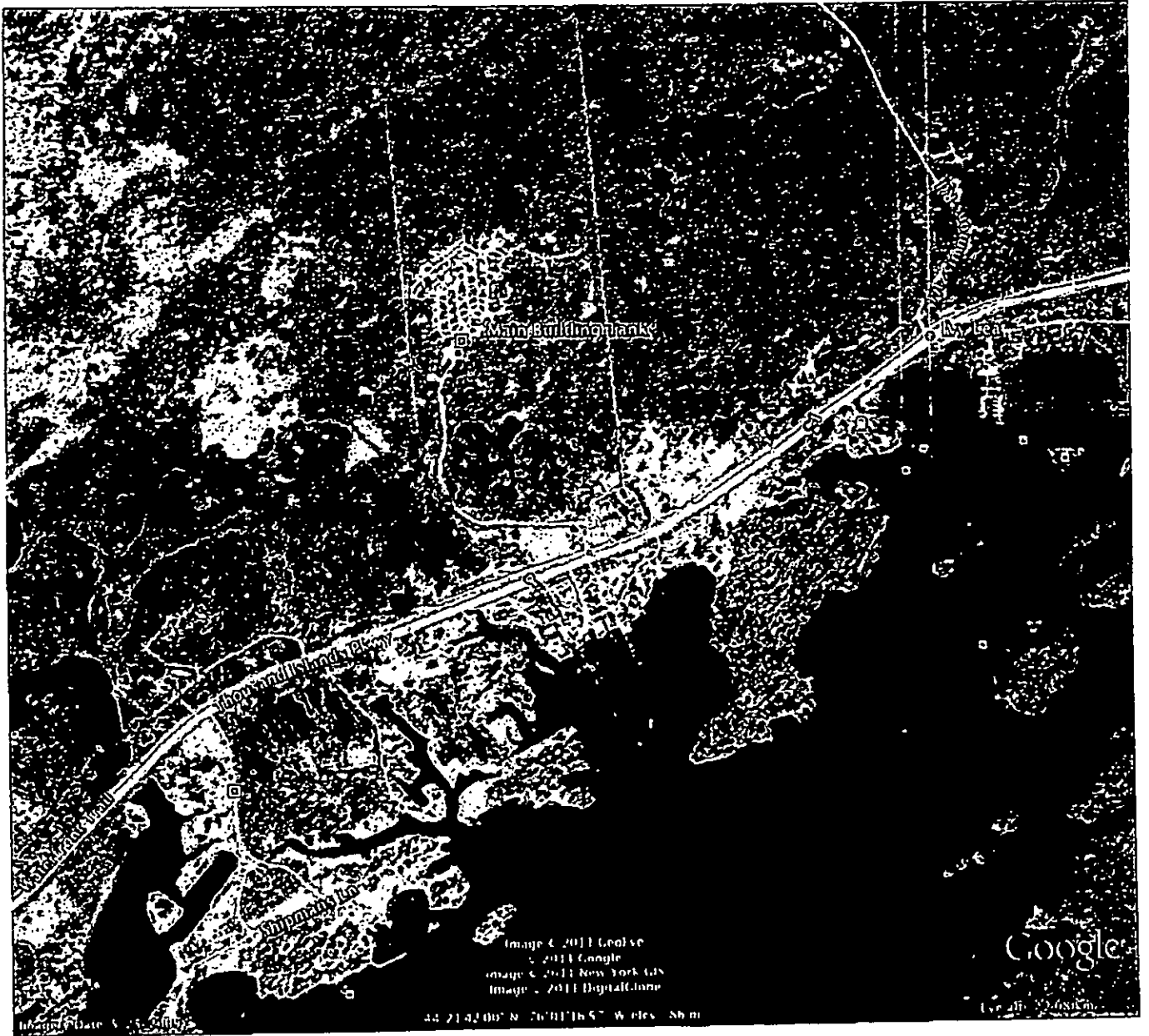


Address 514 1000 Islands Pkwy
Leeds and the Thousand Islands,
ON K0E 1L0



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Map data ©2011 Google



Main Building Bank

Shipyard

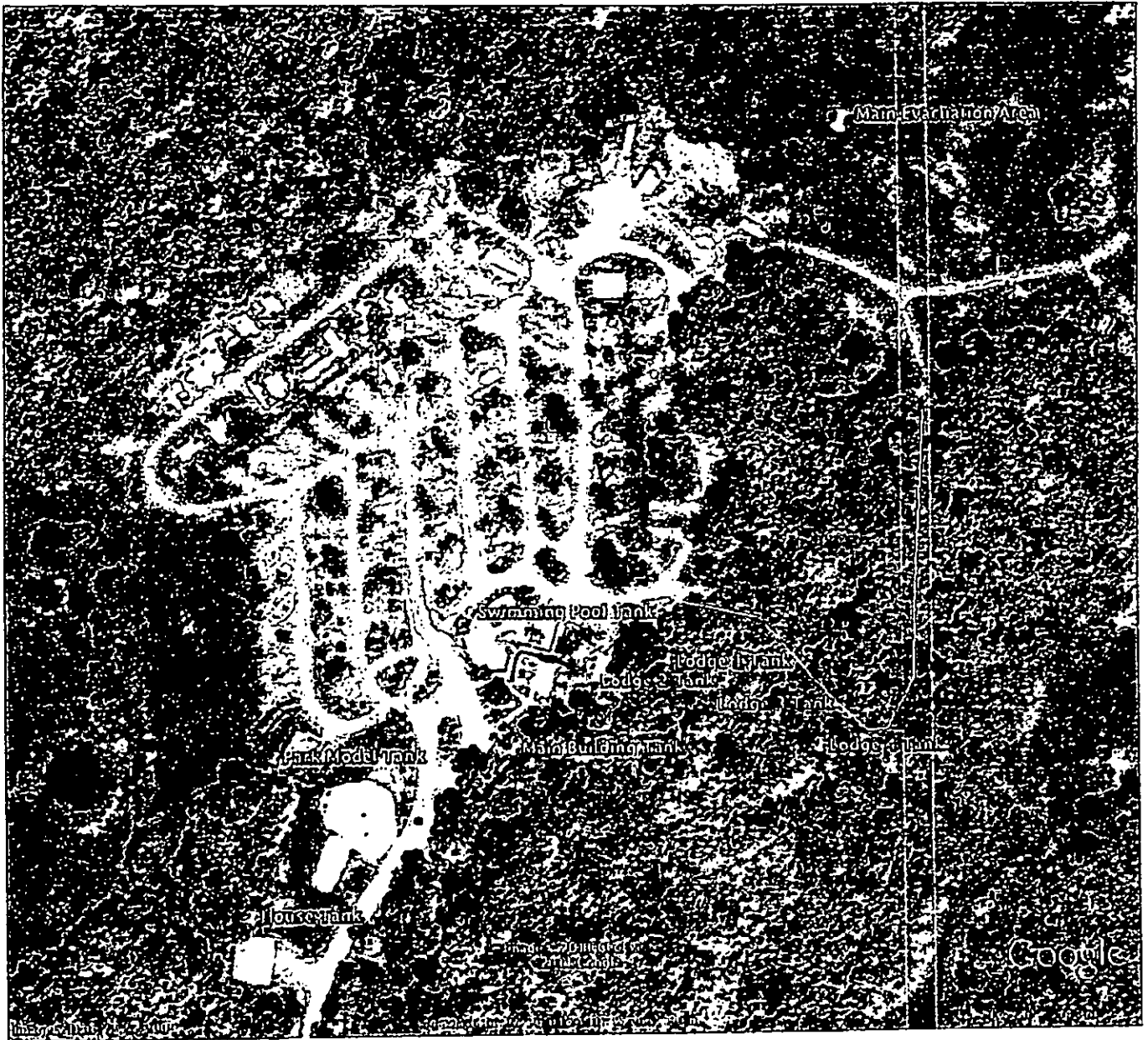
Shipyard 2

Google

Image © 2011 Google
© 2011 Google
Image © 2011 New York GIS
Image © 2011 DigitalGlobe

44° 21' 42.00" N 76° 01' 16.57" W elev. 86 m

Image Date: 5-23-2009



Main Evacuation Area

Swimming Pool Tank

Park Model Tank

Main Building Tank

House Tank

Lodge Tank

Lodge Tank

Lodge Tank

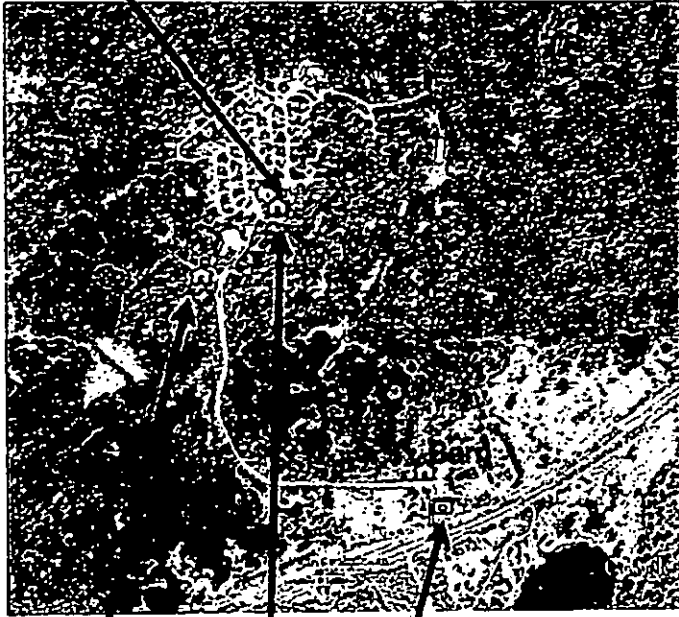
Lodge Tank

Google

ImageSat.com © 2006

**Locations buildings and entrance location
and water access location**

Main KOA Lodge Building



Main Residence

Entrance Gate
Open 24/7 May 1-Oct 15
Gate Code 0911 for all other times

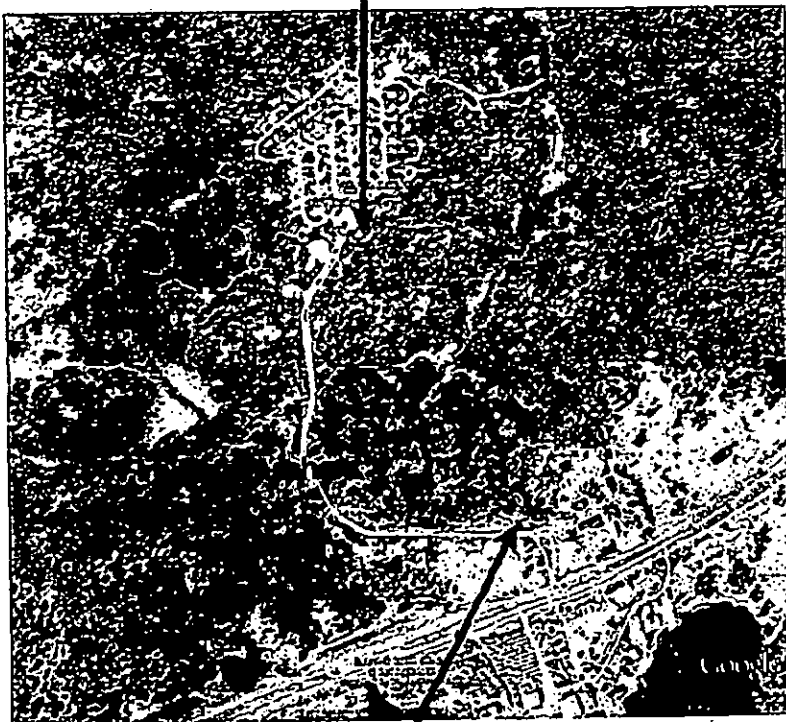
**Swimming Pools hold over 90,000
litres of water**

Hazardous Distance Circle
Main Tank 3785 litres
195 mtre setback



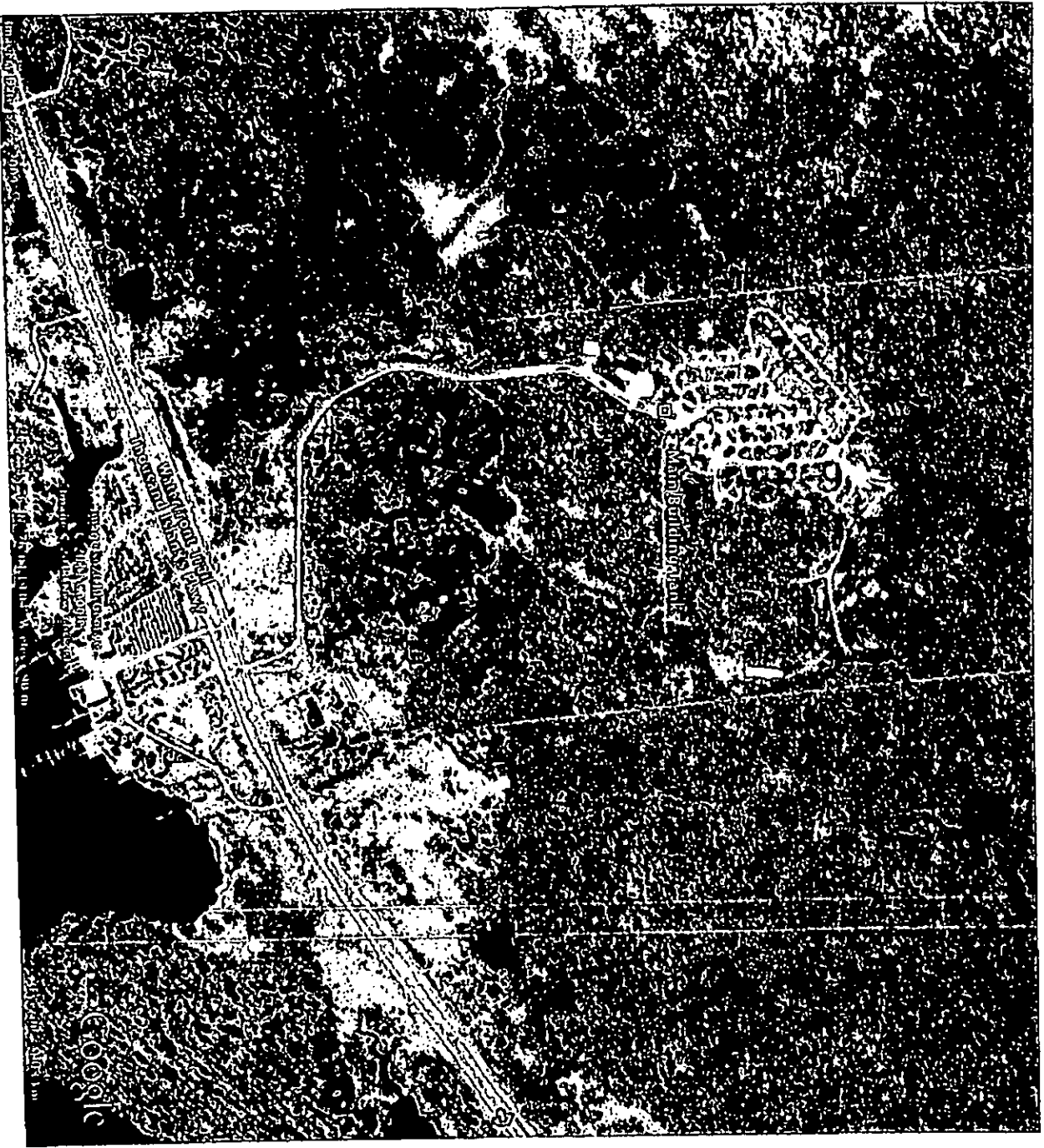
Fire Extinguisher Location and secondary hazardous material locations

Location	Type	Size
Main Propane Tank	ABC	20 lb
Main Lodge	ABC	3 x 5 lb
Kabins	ABC	5 lb



Secondary Hazardous material

Capacity	Fuel	
1345 litres	diesel	
455 litres	unleaded	
Kabins	ABC	



Property lines

Front	Set Back	480 metres
Rear	Set Back	540 metres
Right (East)	Set Back	268 metres
Left (West)	Set Back	146 metres