



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 site

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

Licence Number 0078565183-C

Check applicable type of propane operations:

Cylinder Motor Fuel Filling Plant Card/Keylock

Submit along with this completed 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 Costco Wholesale (Canada) Ltd Ontario Corporation No. , if applicable

A Operator Name (if different from above)
Darren Pudrycki (Agent/Warehouse Manager)

Telephone No 1-800-463-3783 Fax No N/A E-mail service@costco.ca

B Street No 415 Street Name / 911 Number / Address, if applicable West Hunt Club Road

Town / City or Township / County Ottawa Province Ontario Postal Code K2E 1C5

Mailing address if different from above.

C Street No _____ Street Name / 911 Number / Address, if applicable _____

Town / City or Township / County _____ Province _____ Postal Code _____

Information on Container Refill Centre or Filling Plant

Location of facility

D Street No 1900 Street Name / 911 Number / Address, if applicable Cyrville Rd. Nearest Major Intersection Innes Rd & Cyrville Rd

Town / City or Township / County Gloucester Province Ontario Postal Code K1B 1A6

Name of Licence Holder Darren Pudrycki on behalf of Costco Wholesale (Canada) Ltd

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT) Robert Moyer ROT type 100-08-77282

Municipality (or municipalities if the facility or its hazard distance touches multiple borders)
City of Ottawa

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.

Print name	Signature	Date (dd-mm-yyyy)
Name of Licence Holder <u>Darren Pudrycki on behalf of Costco Wholesale (Canada) Ltd</u>		<u>12/2/11</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training <u>Robert Moyer</u>		



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SECTION A: GENERAL INFORMATION (cont'd)

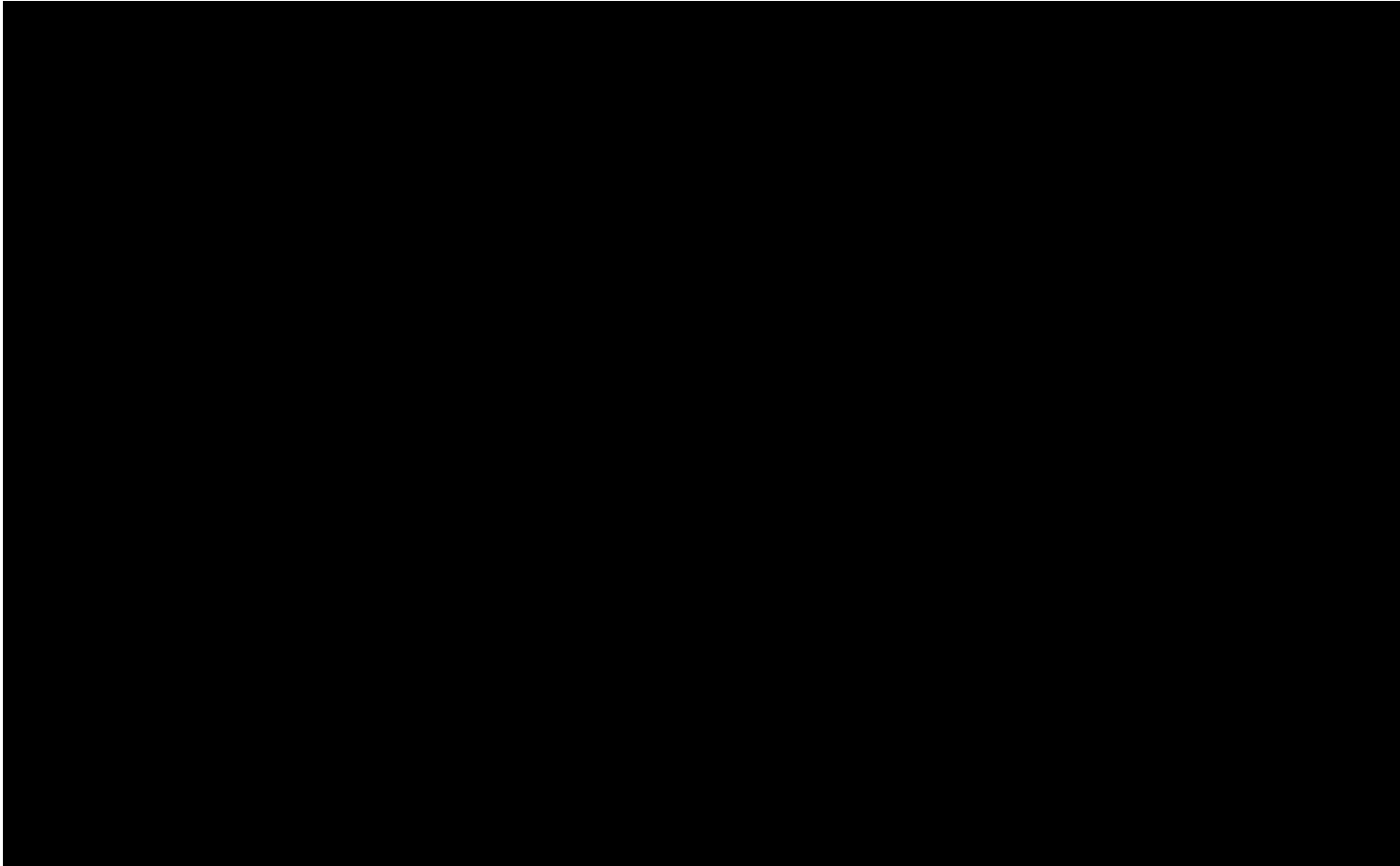
Indicate the year the facility was established. Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment.
2000 None

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

	PSIG	Serial Number
Tank 1:	250 PSIG	5.563342
Tank 2:	_____	_____
Tank 3:	_____	_____

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: 2000 USWG Portable: 418 USWG Mobile: 0



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Name of person completing this form (please print) Darren Pudrycki		Official Title Warehouse Manager
Signature <i>Darren Pudrycki</i>		Telephone No. 613-748-9966
		Date (dd-mm-yyyy) 09/12/2011



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

Name of Propane Supplier(s)			
Superior Propane - Ontario Regional Operations Centre			
Street No.	Street Name / 911 Number / Address, if applicable		
251	Woodlawn Road West, Unit 217		
Town / City or Township / Country		Province	Postal Code
Guelph		Ontario	N1H 8J1
Telephone No.	Fax No.	Contact Name	
1-877-873-7467	519-836-7766	Mike Mullins	
E-mail			
mullinsm@superiorpropane.com			

Name of Propane Transporter. If same as above, please check box. <input type="checkbox"/>			
Superior Propane - Ottawa			
Street No.	Street Name / 911 Number / Address, if applicable		
63	Roydon Place		
Town / City or Township / Country		Province	Postal Code
Ottawa		On	K2E 1A3
Telephone No.	Fax No.	Contact Name	
613-314-8003	613-727-1316	Heather Ross	
E-mail			
rossh@superiorpropane.com			

Off-site Cylinder and/or Mobile Storage	Capacity stored off-site, in USWG	For Office Use - Party No.
None		
Street No.	Street Name / 911 Number / Address, if applicable	
Town / City or Township / Country		Postal Code
Telephone No.	Fax No.	Contact Name

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

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

Name of person completing this form (please print)	Official Title	
Darren Pudrycki	Warehouse Manager	
Signature	Telephone No.	Date (dd-mm-yyyy)
	613-748-9966	09/12/2011



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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.

None

underground waste oil

3000L tank oil -> engine oil.

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

1. Fire Extinguisher - Type ABC - located outside by propane scale and in the tire shop.

2. Emergency stop push button - mounted on a post near the propane tank.

SIDE OF BUILDING BESIDE GARAGE

DOOR.

List of fire protection controls (e.g., fire detection systems, fire notification systems, alarm systems, automatic shut off devices, fusible links, etc.) and describe their function, use and operation.

1. Fusible link on ISC valve - isolation valve between the tank and the downstream propane dispensing equipment.

2. Emergency stop push button - mounted on a post near the propane tank. This shuts down the pump and closes a solenoid valve upstream of hoses.

3. Power supply breaker inside the building. This cuts all power to the propane system - shuts down pump; closes solenoid valve.

4. Shut offs-a) at the station located under the tank b) switch in filling station inside the "pacman" on the left c) stop button outside the 4th bay outside garage

Maintenance and testing schedule for fire protection controls and devices.

Maintenance and testing is undertaken by Superior Propane according to Superior Propane's Maintenance Standard. Schedule for key equipment is:

1. Pumps (Pump every 3 months; Pump Motor: check belts monthly; grease motor every 6 months); 2. ISC Valves (test for closure every 6 months)

3. Fusible links - inspected every 6 months; 4. Storage tank Relief Valves - inspect every 2 years; replacement schedule as per provincial regulations.

5. Fire extinguishers maintained by Costco in accordance with Ontario fire regulations. Maintenance records are kept for 5 years.

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Name of person completing this form (please print) Darren Pudrycki		Official Title Warehouse Manager	
Signature <i>Darren Pudrycki</i>		Telephone No. 613-748-9966	Date (dd-mm-yyyy) 09/12/2011



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

1. Contacts for Emergency Response

1. Facility Contact Personnel - Key Contact

Name Bruno Monderie	For Office Use - Party No.
Official Title Tire Centre Manager	
Telephone No. 613-748-9966	Fax No. 614-748-1029
E-mail w511tsm@costco.com	
Role and responsibilities in emergency Coordinate site response	

5. Facility 24-Hour Contact Person

Name Jeff Hill	For Office Use - Party No.
Official Title Asst Warehouse Manager	
Cell No. 613-762-8936	Fax No. 613-748-1029
E-mail w511mgr2@costco.com	
Role and responsibilities in emergency Coordinate site response	

2. Facility Contact Personnel - Alternate Contact

Name Jeff Hill	For Office Use - Party No.
Official Title Asst Warehouse Manager	
Telephone No. 613-748-9966	Fax No. 613-748-1029
E-mail w511mgr2@costco.com	
Role and responsibilities in emergency Coordinate site response if agent unavailable.	

6. Name of Facility Manager

Name Darren Pudrycki	For Office Use - Party No.
Official Title Warehouse Manager	
Telephone No. 613-748-9966	Fax No. 613-748-1029
E-mail w511mgr@costco.com	
Role and responsibilities in emergency Coordinate site response	

3. Local Fire Services - Key Contact

Name John deHooge	For Office Use - Party No.
Official Title Fire Chief	
Telephone No. 613-580-2424 ext 29411	Fax No.
E-mail john.deHooge@ottawa.ca	
Role and responsibilities in emergency Coordinate/advise on Fire Service response. Liaise with police.	

7. Propane Supplier Key Contact Person

Name * <i>Hooper Ross</i>	For Office Use - Party No.
Official Title * <i>Manager</i>	
Telephone No. 1-877-873-7467	Fax No.
E-mail	
Role and responsibilities in emergency Identify and dispatch Superior Propane and or LPERGC emergency response personnel as required.	

4. Local Fire Services - Alternate Contact

Name Steve Armstrong	For Office Use - Party No.
Official Title Division Chief of Fire Prevention	
Telephone No. 613-580-2424 ext 33430	Fax No. 613-580-2864
E-mail allen.karkkainen@ottawa.ca	
Role and responsibilities in emergency Alternate - Coordinate/advise on Fire Service Response. Liaise with police.	

8. Municipal Contact

Name M. Rick O'Connor	For Office Use - Party No.
Official Title City Clerk	
Telephone No. 613-580-2424 ext 21215	Fax No.
E-mail mrick.occonnor@ottawa.ca	
Municipality Ottawa	

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Name of person completing this form (please print) Darren Pudrycki	Official Title Warehouse Manager
Signature <i>Darren Pudrycki</i>	Telephone No. 613-748-9966
	Date (dd-mm-yyyy) <i>09/12/2011</i>



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2. Additional Safety Measures

Describe any other measures in place at the facility that exceed the minimum Code and Standards requirements.

Emergency Shut Off push button to shut down pump and close solenoid valve upstream of dispensing hoses.

Fire Suppression System - (fire sprinkler system) inside Costco building.

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Name of person completing this form (please print) Darren Pudrycki		Official Title Warehouse Manager
Signature <i>Darren Pudrycki</i>	Telephone No. 613-748-9966	Date (dd-mm-yyyy) 09/12/2011



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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-mm-yyyy) 2010	Print Name of Training Provider: Costco- Standard Costco Safety Training
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Training Date (dd-mm-yyyy) 2010	Print Name of Training Provider: Costco- Standard Costco Safety Training
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Training Date (dd-mm-yyyy) As Required	Print Name of Training Provider: FSN Training or Other	Please Note - a ROT is valid for 3 years
	Print Name of Instructor: to be arranged as required	
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:	

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Name of person completing this form (please print) Darren Pudrycki	Official Title Warehouse Manager
Signature 	Telephone No. 613-748-9966
	Date (dd-mm-yyyy) 09/12/2011



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

4. Emergency Training Plan for Coming Year

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

Target Date (dd-mm-yyyy) 2011	Print Name of Training Provider: Costco- Standard Costco Safety Training	
	Print Name of Instructor:	
Target Date (dd-mm-yyyy) 1Q 2012	Print Name of Training Provider: Superior Propane or Other	Please Note - the course content is
	Print Name of Instructor: TBA	being developed and should be available for
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	teaching in the fourth quarter of this year
	Print Name of Instructor:	

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

Target Date (dd-mm-yyyy) 1Q 2012	Print Name of Training Provider: Key Site Contact to train Staff
	Print Name of Instructor: to be arranged
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Target Date (dd-mm-yyyy) 01-18-2012	Print Name of Training Provider: FSN Training	Please Note - a ROT is valid for 3 years
	Print Name of Instructor: Moe Bourcier	
Target Date (dd-mm-yyyy) TBA as required	Print Name of Training Provider: FSN Training or Other	
	Print Name of Instructor: to be arranged as required	
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	

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Name of person completing this form (please print) Darren Pudrycki	Official Title Warehouse Manager
Signature 	Telephone No. 613-748-9966
	Date (dd-mm-yyyy) 09/12/2011



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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).

The owner/operator or alternate (both ROT staff) will contact emergency services by calling 911 and will provide warnings as outlined in the attached Propane Emergency Response Procedures (to be posted at site and be part of employee training). If it is safe to do so, this could involve advising neighbors to evacuate. The owner/operator may also contact Superior Propane via the emergency number identified in the ERP.

Describe what action is to be taken and by whom when a warning is issued (including details of a meeting place in a safe identified area and activating the evacuation plan, if necessary).

The owner/operator or alternate should first follow the actions in the ERP's provided herein. Staged evacuation, if the release of propane cannot be stopped by cutting electrical power may be required. The muster location will be at the property entrance at Cyrville Road (near the United Furniture sign) away from the site and away from a dispersing propane cloud. Subsequent evacuation instructions potentially up to the Hazard Distance to be provided by municipal emergency responders. Residences and businesses beyond the site boundary to be notified by municipal emergency responders.

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).

When the system is operational, site staff will be on duty and be in the propane tank area. The Key Contact or alternate will be implementing ER actions and notifications, including notifying emergency responders. Calling 911 will occur immediately after any attempts to shut down the system.

When the system is not in operation, the ISC valve (main isolation valve) is closed, and the propane system is unattended, but is shutdown. Any accidents involving the propane tank during such times will require the intervention of random, nearby individuals.

Describe provisions for fire department entry when there are no operations or staffing at the propane site.

The propane tank system is located in a wide open area that is easily accessible via Innes Road and Cyrville Road. These fire access routes are identified in the attached site plan.

Describe how the licence holder will ensure continual flow of updated information to authorities.

The critical information required from the license holder is information on how to shut the system down and the fill level in the tank (if known). This will be provided by Jeff Hill, verbally if on-site, or by cell phone during off-hours. Fill level is relevant from a time-to-BLEVE perspective (a near empty tank will BLEVE sooner than a full tank if there is fire impingement on the tank).

How long will it take the facility liaison person to respond to the site.

It would take the 24-hr contact, Jeff Hill, approximately 1/2 hour to arrive on-site, after having received the emergency call.

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Name of person completing this form (please print) Darren Pudrycki	Official Title Warehouse Manager
Signature 	Telephone No. 613-748-9966
	Date (dd-mm-yyyy) 09/12/2011



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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)? <i>Cabinet locked when not in operation</i>	<input checked="" type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input 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)	50 m	
4. What is the unobstructed distance to the closest approved water supply with year round access if there are no hydrants? (distance in metres only)	N/A	

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Name of person completing this form (please print) Darren Pudrych	Official Title Warehouse Manager	
Signature <i>Darren Pudrych</i>	Telephone No. 613-748-9966	Date (dd-mm-yyyy) 09/12/2011



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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.
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 Response and Preparedness Plan?

If not, please explain (e.g., no fire services).

Yes No

Fire services comments, if any:

** Explain reasons for NO on page 10 of 15*

To be completed by the Licence Holder

In response to the above comments, the following action(s) is required:

The licence holder will respond to the Local Fire Services comments by:

(dd-mm-yyyy)

LOCAL FIRE SERVICES

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

DUNCAU Local Fire Services Name	Print name MENNAUGHTON	Signature 	Date (dd-mm-yyyy) Jan 4 / 2012
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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) Danuta Pudrycki	Official Title Warehouse Manager
Signature 	Telephone No. 613-748-9966
	Date (dd-mm-yyyy) 09/12/2011



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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-mm-yyyy) 04-11-2011	Capacity of single largest propane storage vessel (USWG) 2000 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: 148 m East	Right side property line: 140 m South
Rear: 84 m West	Left side property line: 186 m North 151
GPS coordinates of single largest vessel:	Lat. 48.4775. Long. -81.3391

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Name of person completing this form (please print) Darren Pudryski	Official Title Warehouse Manager
Signature <i>Darren Pudryski</i>	Telephone No. 613-748-9966
	Date (dd-mm-yyyy) 09/12/2011



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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: <u>None in Hazard Distance</u> Address: _____ City: _____ Province _____ Postal Code _____	X				0 m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: <u>None in Hazard Distance</u> Address: _____ City: _____ Province _____ Postal Code _____	X				0 m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>Various Retail and restaurants (Esso; Brick; United Furniture; Lazyboy; Swiss Chalet)</u> Address: <u>Cyrville Road</u> City: <u>Ottawa</u> Province <u>ON</u> Postal Code _____				X	140 m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: <u>Travelodge</u> Address: <u>Innes Road</u> City: <u>Ottawa</u> Province <u>ON</u> Postal Code _____		X			148 80 m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: <u>None in Hazard Distance</u> Address: _____ City: _____ Province _____ Postal Code _____	X				0 m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: <u>None in Hazard Distance</u> Address: _____ City: _____ Province _____ Postal Code _____	X				0 m

* 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) Darren Pudrycki	Official Title Warehouse Manager
Signature <i>Darren Pudrycki</i>	Telephone No. 613-748-9966
	Date (dd-mm-yyyy) 09/12/2011



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

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		
# 30	8.8		
# 20	5.8	72	418 USWG ✓
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity 418 USWG			

Tanks Stored On-site Not Connected for Use

Tank Size in USWG	Quantity	Total Volume in USWG
2000 USWG	1	2000 USWG
Total Tank Capacity 2000 USWG		

Total Cylinder Capacity	418 USWG
Total Tank Capacity	2000 USWG
Total Portable Capacity	0 417.6

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.

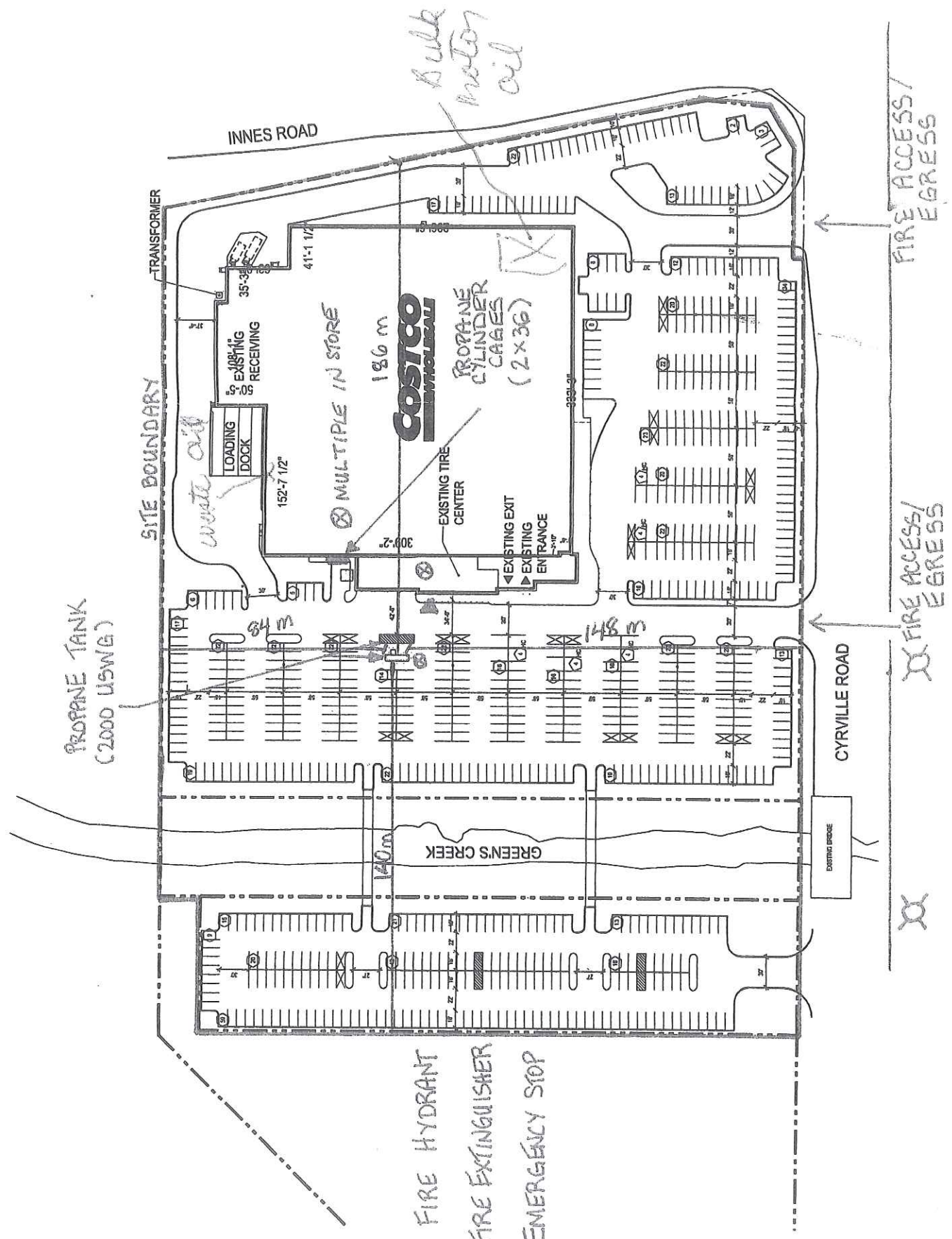
Name of person completing this form (please print) Darren Pudrycki		Official Title Warehouse Manager	
Signature <i>Darren Pudrycki</i>		Telephone No. 613-748-9966	Date (dd-mm-yyyy) 09/12/2011

PROJECT DAT
 CLIENT: C E E C
 PROJECT ADDRESS: 1 C
 SITE DATA:
 TOTAL SITE AREA:
 INCLUDES:
 DEVELOPED SITE AREA:
 JURISDICTION:
 ZONING:
 SETBACKS:
 BOUNDARIES INFORMATION:

BUILDING DAT
 TOTAL BUILDING INCLUDES:
 WAREHOUSE
 TIRE CENTER

PARKING DAT
 TOTAL EXISTING INCLUDES:
 MAX LEVEL PARKING PROG
 10'-0" WIDE STALLS
 8'-0" WIDE STALLS
 6'-0" WIDE STALLS
 ACCESSIBLE STALLS

NOTES:
 EXISTING CONDITIONS TO E



- ⊗ FIRE HYDRANT
- ⊗ FIRE EXTINGUISHER
- ▲ EMERGENCY STOP

PROJECT DATA

CLIENT: COSTCO WHOLESALE
899 LAKE DRIVE
ISSAQUAH, WA 98027

PROJECT ADDRESS: 1900 CYRVILLE ROAD
GLOUCESTER, ON K1B 1A5

SITE DATA:
TOTAL SITE AREA: 19.24 ACRES (837,981 S.F.)

INCLUDES:
DEVELOPED SITE AREA: ACRES (R.F.)

JURISDICTION: CITY OF OTTAWA

ZONING: MP (E6)

SETBACKS:
FRONT: TBD
SIDE: TBD
REAR: TBD

BOUNDARIES INFORMATION:
THIS PLAN HAS BEEN PREPARED BY MITCHELL C SMITH ARCHITECTS USING A PLAN PREPARED BY J AND B ENGINEERING INC. DATED OCTOBER 21, 2004.

BUILDING DATA:

TOTAL BUILDING AREA: 122,174 S.F.

INCLUDES:
WHOLESALE TIRE CENTER: 116,000 S.F.
ELECT. S.F.

PARKING DATA:

TOTAL EXISTING PARKING: 748 STALLS

INCLUDES:
LAND LEVEL PARKING PROVIDED:
8 STALLS
8 STALLS
80' WIDE STALLS
80' WIDE STALLS
80' WIDE STALLS
ACCESSIBLE STALLS

SCALE = 1:2000



COSTCO WHOLESALE
GLOUCESTER, ON #511
1900 CYRVILLE ROAD
GLOUCESTER, ON K1B 1A5

MITCHELL C SMITH
404 WESTWINDING | SUITE 200
MILWAUKEE, WI 53212
TEL: 414.224.1111 | WWW.MCSMITH.COM

