



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: 0034052001-C

Check applicable type of propane operations:  
 Cylinder     Motor Fill     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: Praxair Distribution Inc.    Ontario Corporation No., if applicable: [Redacted]

Operator Name (if different from above): [Redacted]

Telephone No.: 519-451-7830    Fax No.: 519-452-1498    E-mail: [Redacted]

Street No.: 1910    Street Name / 911 Number / Address, if applicable: Oxford St. E.

Town / City or Township / County: London    Province: Ontario    Postal Code: N5V 2Z8

Mailing address if different from above:

Street No.: 180    Street Name / 911 Number / Address, if applicable: Webster Rd.

Town / City or Township / County: Kitchener    Province: Ontario    Postal Code: N2C 2E6

Information on Container Refill Centre or Filling Plant

Location of facility:

Street No.: 1910    Street Name / 911 Number / Address, if applicable: Oxford St. E.    Nearest Major Intersection: Clarke & Oxford St.

Town / City or Township / County: London    Province: Ontario    Postal Code: N5V 2Z8

Name of Licence Holder: Praxair Distribution Inc.

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT): Duane Pike    ROT type: Filling propane cylinders, PPO-3

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

Hours of operation: [Redacted]



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.

Name of Licence Holder: Praxair Distribution Inc.	Signature: [Signature]	Date (dd-mm-yyyy): 31/10/2011
Name of Senior Management person as defined in the Regulation holding the Record of Training: Duane Pike	Signature: [Signature]	Date (dd-mm-yyyy): 31/10/2011

Q



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

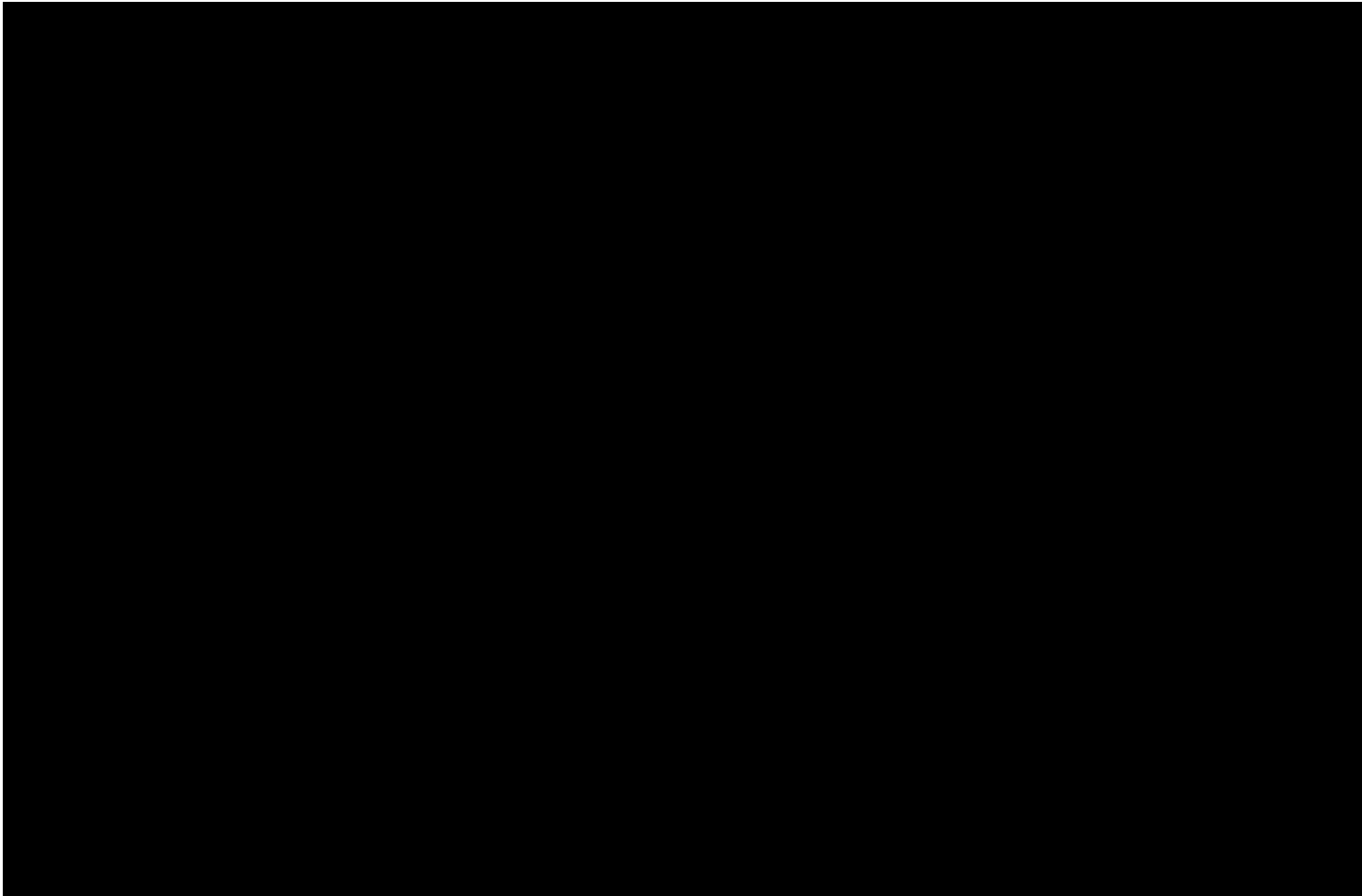
Indicate the year the facility was established. Approx 1972      Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. 2001

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

	PSIG	Serial Number
Tank1:	<u>250</u>	<u>61P1750-121</u>
Tank2:	_____	_____
Tank3:	_____	_____

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: 1750      Portable: 2913      Mobile: 0



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Name of person completing this form (please print) Rick Szczesny		Official Title Distribution Supervisor	
Signature 		Telephone No. 519-748-3289	Date (dd-mm-yyyy) 31/10/2011



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

Activity Information

Name of Propane Supplier(s) Dowler Karn Propane			For Office Use - Party No.	
Street No. 43841	Street Name / 911 Number / Address, if applicable Talbot Line RR#3			
Town / City or Township / Country St. Thomas			Province Ontario	Postal Code N5P 3S7
Telephone No. 519-631-3810	Fax No. 519-631-4755	Contact Name Ralph Harvey		
E-mail ralphharvey@dowlerkarn.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			
Town / City or Township / Country			Province	Postal Code
Telephone No.	Fax No.	Contact Name		
E-mail				

Off-site Cylinder and/or Mobile Storage Not Applicable		Capacity stored off-site, in USWG	For Office Use - Party No.	
Street No.	Street Name / 911 Number / Address, if applicable			
Town / City or Township / Country			Province	Postal Code
Telephone No.	Fax No.	Contact Name		

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

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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.

The largest vessel is a 1750 USWG propane tank. Several liquid containers that hold liquid oxygen, liquid nitrogen, liquid argon. There are also several compressed gas cylinders that contain oxygen, acetylene, nitrogen as well as several non-flammable welding gas mixtures.

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

Dry chemical class ABC fire extinguishers. There are 14 extinguishers on site. Each delivery truck is equipped with one.

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.

The building is equipped with smoke detectors that alarm people to smoke or a fire. There is also a security system present that notifies the facility about a unauthorized entry. The propane system is equipped with a emergency stop switch that shuts off the electrical power to the propane pump. The main shutoff valve is controlled by a fusible link that would melt during fire and close the main valve for the liquid withdrawal system.

Maintenance and testing schedule for fire protection controls and devices.

Fire extinguishers are inspected each month by the branch manager. Fire extinguishers are inspected annually by a approved inspection vendor.

Emergency shut-off on the propane system are tested quarterly for operation by the branch manager. The entire propane system is inspected annually by a licensed TSSA contractor. All testing reminders are controlled by in house reminder program. ACMS.

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

**1. Contacts for Emergency Response**

<b>1. Facility Contact Personnel - Key Contact</b>		<b>5. Facility 24-Hour Contact Person</b>	
Name Charlie Shearer	For Office Use - Party No.	Name Bill Walker	For Office Use - Party No.
Official Title Branch Safety Co-ordinator		Official Title Operations Manager	
Telephone No. 519-451-7930	Fax No. 519-452-1496	Cell No. 519-220-9019	Fax No. 519-452-1496
E-mail charlies_shearer@praxair.com		E-mail bill_walker@praxair.com	
Role and responsibilities in emergency Evacuation of Staff		Role and responsibilities in emergency Site contact in an event of a emergency	
<b>2. Facility Contact Personnel - Alternate Contact</b>		<b>6. Name of Facility Manager</b>	
Name Mel Hopper	For Office Use - Party No.	Name Bill Walker	For Office Use - Party No.
Official Title Branch Safety Co-ordinator		Official Title Operations Manager	
Telephone No. 519-451-7930	Fax No. 519-452-1496	Telephone No. 519-893-6221	Fax No. 519-893-5979
E-mail mel_hopper@praxair.com		E-mail bill_walker@praxair.com	
Role and responsibilities in emergency Evacuation of staff		Role and responsibilities in emergency Assist with evacuation	
<b>3. Local Fire Services - Key Contact</b>		<b>7. Propane Supplier Key Contact Person</b>	
Name John Kobarda	For Office Use - Party No.	Name Ralph Harvey	For Office Use - Party No.
Official Title Fire Chief		Official Title Propane Manager	
Telephone No. 519-661-2500 ext 5620	Fax No. 519-661-8419	Telephone No. 519-631-3810	Fax No. 519-631-4755
E-mail jkobarda@london.ca		E-mail ralphharvey@dowlerkarn.com	
Role and responsibilities in emergency Director of Fire Services		Role and responsibilities in emergency Offer assistance	
<b>4. Local Fire Services - Alternate Contact</b>		<b>8. Municipal Contact</b>	
Name Wendy Cowdry	For Office Use - Party No.	Name John Kobarda	For Office Use - Party No.
Official Title Chief Fire Prevention Officer		Official Title Fire Chief	
Telephone No. 519-661-2500 ext 5222	Fax No. 519-661-9419	Telephone No. 519-661-2500 ext 5620	Fax No. 519-661-8419
E-mail wcowdry@london.ca		E-mail jkobarda@london.ca	
Role and responsibilities in emergency Investigation and assistance		Municipality City of London	

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

2. Additional Safety Measures

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

1. Public Address system. P.A. Used to alert inside and outside staff of an on-site emergency and the need to evacuate the facility. Every phone is capable of activating the P.A. system. Operating instructions; Press Page, Both, All or Feature, 60, Both.

2. Verbal notification. Used to alert inside and outside staff of an on-site emergency and the need to evacuate the facility.

General Emergency Information

Escape route and assembly area. Plan a route away from the fire, vapour cloud or explosion

Proceed to nearest exit

Assembly area: Front parking lot.

Electrical disconnects for entire building are located in electrical room in warehouse.

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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) 20/06/2011	Print Name of Training Provider: Praxair Distribution, Location Emergency Response Plan. 3.1.01
	Print Name of Instructor: Bill Walker
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) 20/06/2011	Print Name of Training Provider: Praxair Distribution, Location Emergency Response Plan. 3.1.01
	Print Name of Instructor: Bill Walker
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) 20/06/2011	Print Name of Training Provider: Praxair Distribution, Location Emergency Response Plan. 3.1.01
	Print Name of Instructor: Bill Walker
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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**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) 20/05/2012	Print Name of Training Provider: Praxair Distribution. Location Emergency Response Plan. 3.1.01
	Print Name of Instructor: Bill Walker
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 Emergency Management Procedures provided to staff.**

Target Date (dd-mm-yyyy) 20/05/2012	Print Name of Training Provider: Praxair Distribution. Location Emergency Response Plan. 3.1.01
	Print Name of Instructor: Bill Walker
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) 20/05/2012	Print Name of Training Provider: Praxair Distribution. Location Emergency Response Plan. 3.1.01
	Print Name of Instructor: Bill Walker
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:

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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).  
Key or alternate contacts give warnings to staff by using the emergency communication tools. The warning is given when an on-site emergency occurs that could impact the safety of employees or visitors to the site.

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).

Escape route and assembly area. Plan a route away from the fire, vapour cloud or explosion

Proceed to nearest exit

Assembly area Front parking lot.

Key or alternate contacts coordinate all actions.

**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).

An immediate call is placed to 911 Emergency Services by any Praxair staff. At assembly area a head count is taken and then it is determined if a call has been placed to 911 Emergency Services.

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

All contact information for key and alternate contacts has been provided to Fire Services.

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

All information will be communicated through London Incident Command.

An annual review of the Location Emergency Response Plan is completed each year. The plan instructs the reviewer to forward updated information to

Fire Services.

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

1 hour

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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"/>

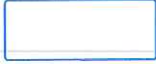
**7. Water Supply**

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 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 mtrs _____	
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)	50 mtrs _____	

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 **SR705100.pdf**  
523K [View](#) [Download](#)



**Dayle\_Fletcher@praxair.com**

10:51 AM (3 hours ago) ★

to mjohnson, me, Ann-Marie

Items as requested.

1. Application.

2. The entire Level 1 including page 11 was sent to London Fire Services on Dec 6/2011. They have not responded.

Dayle

Propane Licensing  
<[propane@tssa.org](mailto:propane@tssa.org)>  
Sent by: [mjohnson@tssa.org](mailto:mjohnson@tssa.org)

To [Dayle\\_Fletcher@praxair.com](mailto:Dayle_Fletcher@praxair.com)  
cc Ann-Marie Barker <[abarker@tssa.org](mailto:abarker@tssa.org)>  
Subject Re: London RSMP Signed pages

02/07/2012 10:09 AM



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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?

Yes

No



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

Fire services comments, if any:

**To be completed by the Licence Holder**

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

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

(dd-mm-yyyy)

**LOCAL FIRE SERVICES**

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

Print name	Signature	Date (dd-mm-yyyy)
Local Fire Services Name	[Redacted Signature]	

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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) 31/10/11	Capacity of single largest propane storage vessel (USWG) 1750 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: <u>254 ft</u>	Right side property line: <u>94 ft</u>
Rear: <u>70 ft</u>	Left side property line: <u>114 ft</u>
GPS coordinates of single largest vessel: <u>Lat. 43.017148 Long. -81.180848</u>	

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

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

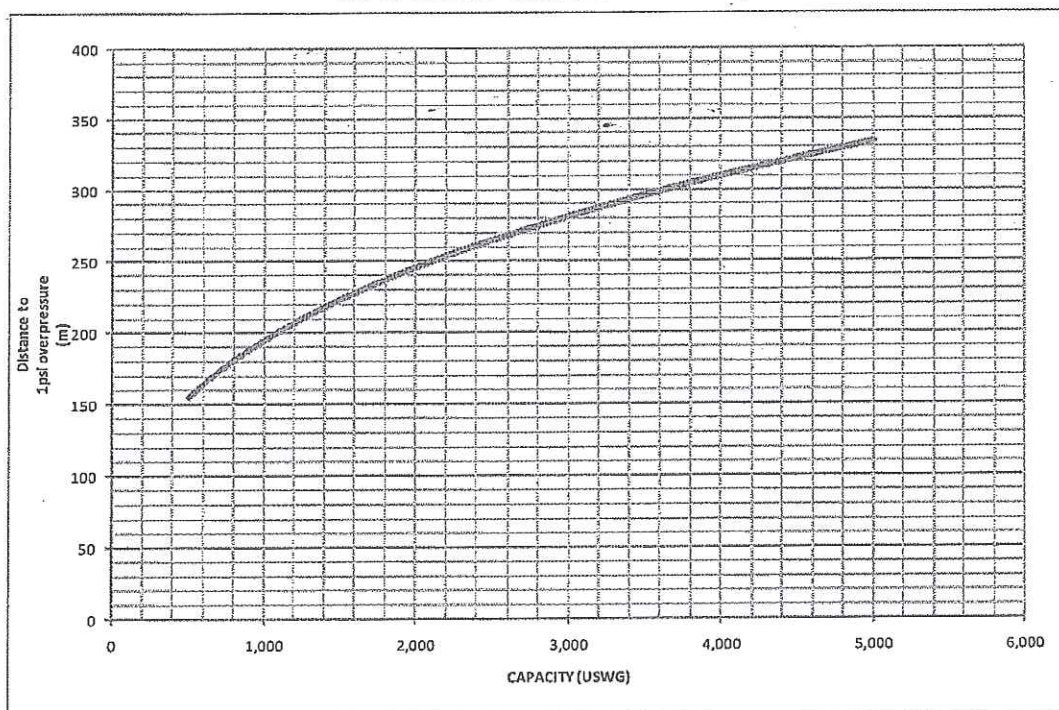
Table 1: Distance Table

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)



**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) Rick Szczesny		Official Title Distribution Supervisor	
Signature 		Telephone No. 519-748-3289	Date (dd-mm-yyyy) 31/10/2011



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

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: Kleen Air Systems Address: 1940 Oxford St. E City: London Province Ontario Postal Code N5V 2Z8		X			85 m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m

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

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Signature 	Telephone No. 519-748-3289
	Date (dd-mm-yyyy) 31/10/2011



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**Technical Standards and Safety Act**  
**Propane Storage and Handling Regulation**

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

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

**Portable Storage Additional Information Sheet**

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9		
# 100	29.5	16	472
# 40	11.75		
# 33.3	9.62	156	1500.72
# 30	8.8		
# 20	5.8		
# 10	2.9		
# 5	1.5		
<b>Total Cylinder Capacity</b>			

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

Tank Size In USWG	Quantity	Total Volume in USWG
<b>Total Tank Capacity</b>		

<b>Total Cylinder Capacity</b>	1972.72
<b>Total Tank Capacity</b>	1750
<b>Total Portable Capacity</b>	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) Rick Szczesny	Official Title Distribution Supervisor	
Signature 	Telephone No. 519-748-3289	Date (dd-mm-yyyy) 31/10/2011



# Risk and Safety Management Plan

## PUBLIC RECEPTORS WITHIN HAZARD DISTANCE

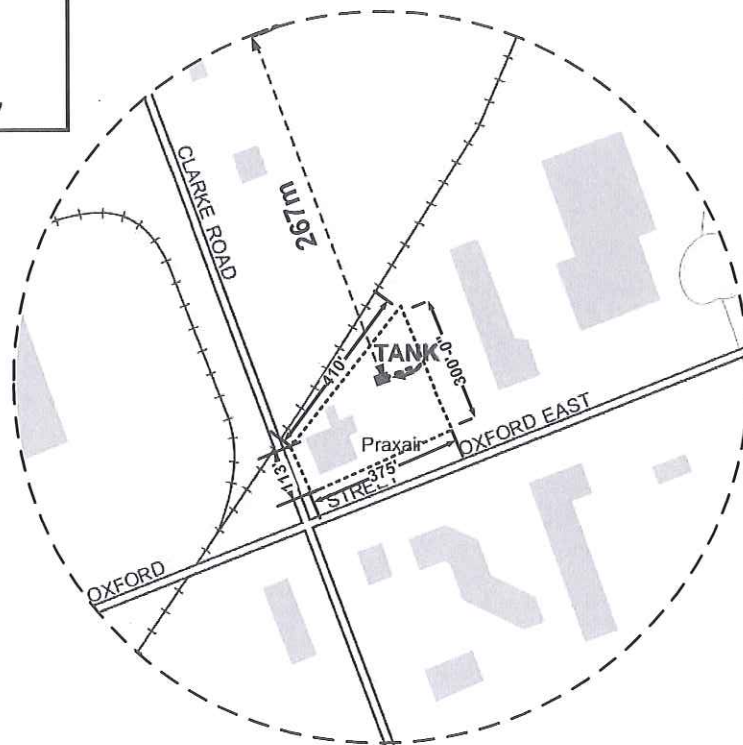
City of London

Scale: 1:4 850

**London City Hall**

300 Dufferin Avenue  
London, On  
N6A 4L9

**Cathy Saunders**  
519-661-2500 ext. 4937



TANK LATITUDE 43,017148°  
TANK LONGITUDE -81,180848°



**LEGEND**

- Industrial Building
- Residential
- Road
- Railway
- 5000 m<sup>2</sup> Threshold

KennKart Digital Mapping ©2010

Nominal Water Capacity (USWG)	Distance to Endpoint (m)
500	168
1000	211
<b>2000</b>	<b>267</b>
7000	400
10 000	456
30 000	658
90 000	949

**Praxair Canada Inc.**  
1910 Oxford Street East, London, Ontario, Canada, N5V 2Z8

Date : 10/28/2011

**INVENTORY :**

**TANKS:** (MAX full tank) = 6 625 liters

1750 GALLONS X 1 = 6 625 liters

**PIPING:** (Distance X area) = 17,8 liters

21.1FT X (R)(0.75IN/12)2π + 79.3FT X (R)(0.46IN/12)2π  
= 0.063cubic feet = 17.8 liters

**Pallet storage:** (16 pallets) X 688liters = 11 008 liters

8 pallet racks+ 4pallet racks + 4 pallet racks = 16  
16 X 688 liters (181.75USG)= 11 008 liters ( 3635 USG)

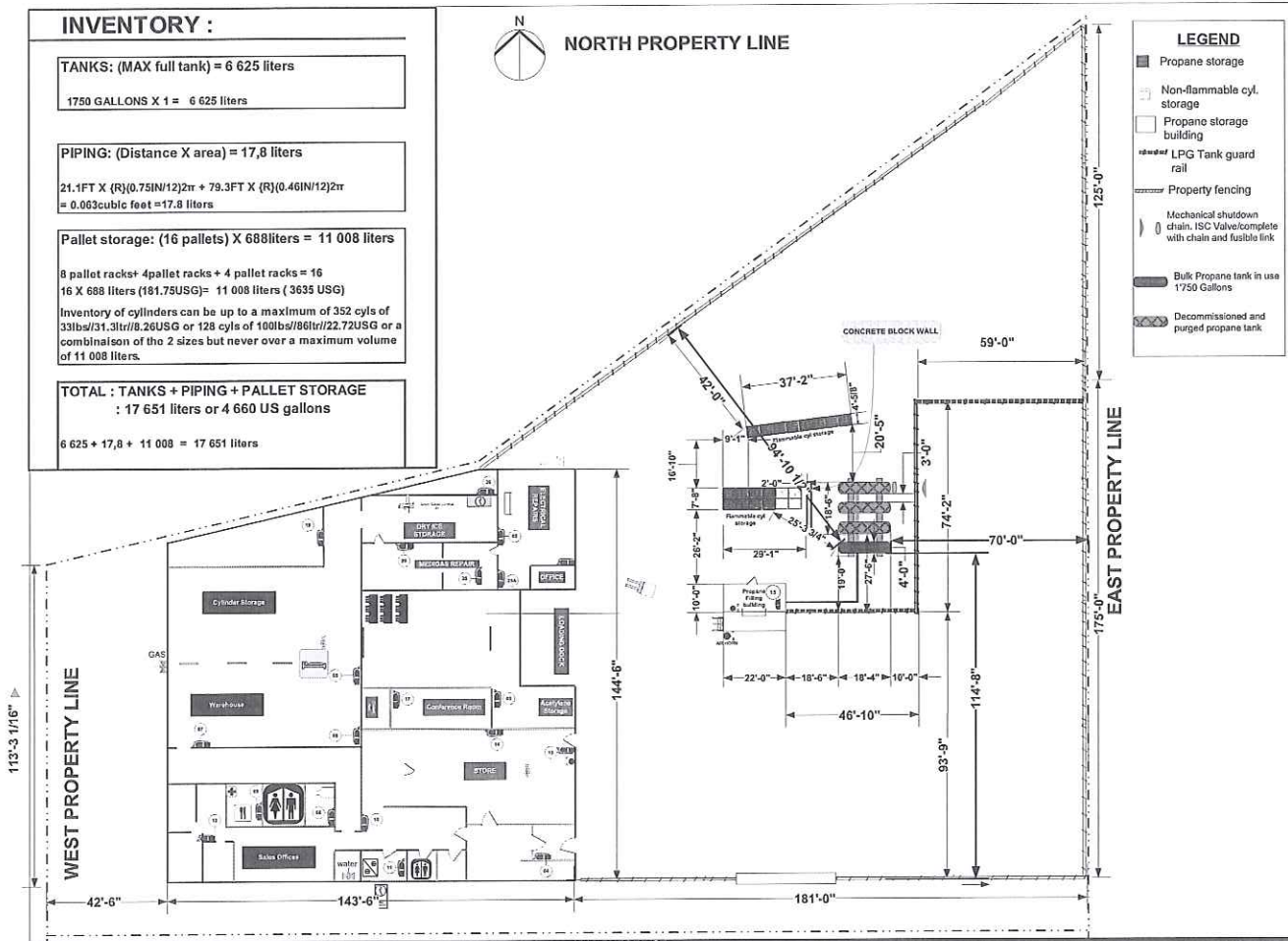
Inventory of cylinders can be up to a maximum of 352 cyls of 33lbs/31.3ltr/8.26USG or 128 cyls of 100lbs/86ltr/22.72USG or a combination of the 2 sizes but never over a maximum volume of 11 008 liters.

**TOTAL : TANKS + PIPING + PALLET STORAGE**  
: 17 651 liters or 4 660 US gallons

6 625 + 17,8 + 11 008 = 17 651 liters



**NORTH PROPERTY LINE**



**LEGEND**

- Propane storage
- Non-flammable cyl. storage
- Propane storage building
- LPG Tank guard rail
- Property fencing
- Mechanical shutdown chain, ISC Valve/complete with chain and fusible link
- Bulk Propane tank in use 1750 Gallons
- Decommissioned and purged propane tank

**SOUTH PROPERTY LINE**

<b>PRAXAIR FACILITY LAYOUT LONDON ONTARIO</b>	<b>PRAXAIR BUSINESS CONFIDENTIAL</b> <small>PRAXAIR TECHNOLOGY CENTER - TORRANCE, NEW YORK</small>	MODEL NAME STDPF01	DRAWN BY MP	CHECKED --	SITE IDENTIFICATION --	
	TYPE OF PLANT PROPANE FILLING FACILITY	REVIEWED --	APPROVED --	PROJECT NUMBER		
	TITLE FACILITY LAYOUT PRAXAIR LONDON, ONTARIO 1910 OXFORD ST., NSA 418	SCALE NONE	DATE 10-28-2011	SHEET F01	TOTAL 2	ALTERATION K
	DRAWING NUMBER M-LONDON10282011-L8	SIZE B				

**INVENTORY :**

**TANKS: (MAX full tank) = 6 625 liters**

1750 GALLONS X 1 = 6 625 liters

**PIPING: (Distance X area) = 17,8 liters**

21.1FT X (R)(0.75IN/12)2π + 79.3FT X (R)(0.46IN/12)2π  
= 0.063cubic feet = 17.8 liters

**Pallet storage: (16 pallets) X 688liters = 11 008 liters**

8 pallet racks+ 4pallet racks + 4 pallet racks = 16  
16 X 688 liters (161.75USG)= 11 008 liters ( 3635 USG)

Inventory of cylinders can be up to a maximum of 352 cysls of 33lbs/31.3ltr/8.26USG or 128 cysls of 100lbs/86ltr/22.72USG or a combination of the 2 sizes but never over a maximum volume of 11 008 liters.

**TOTAL : TANKS + PIPING + PALLET STORAGE  
: 17 651 liters or 4 660 US gallons**

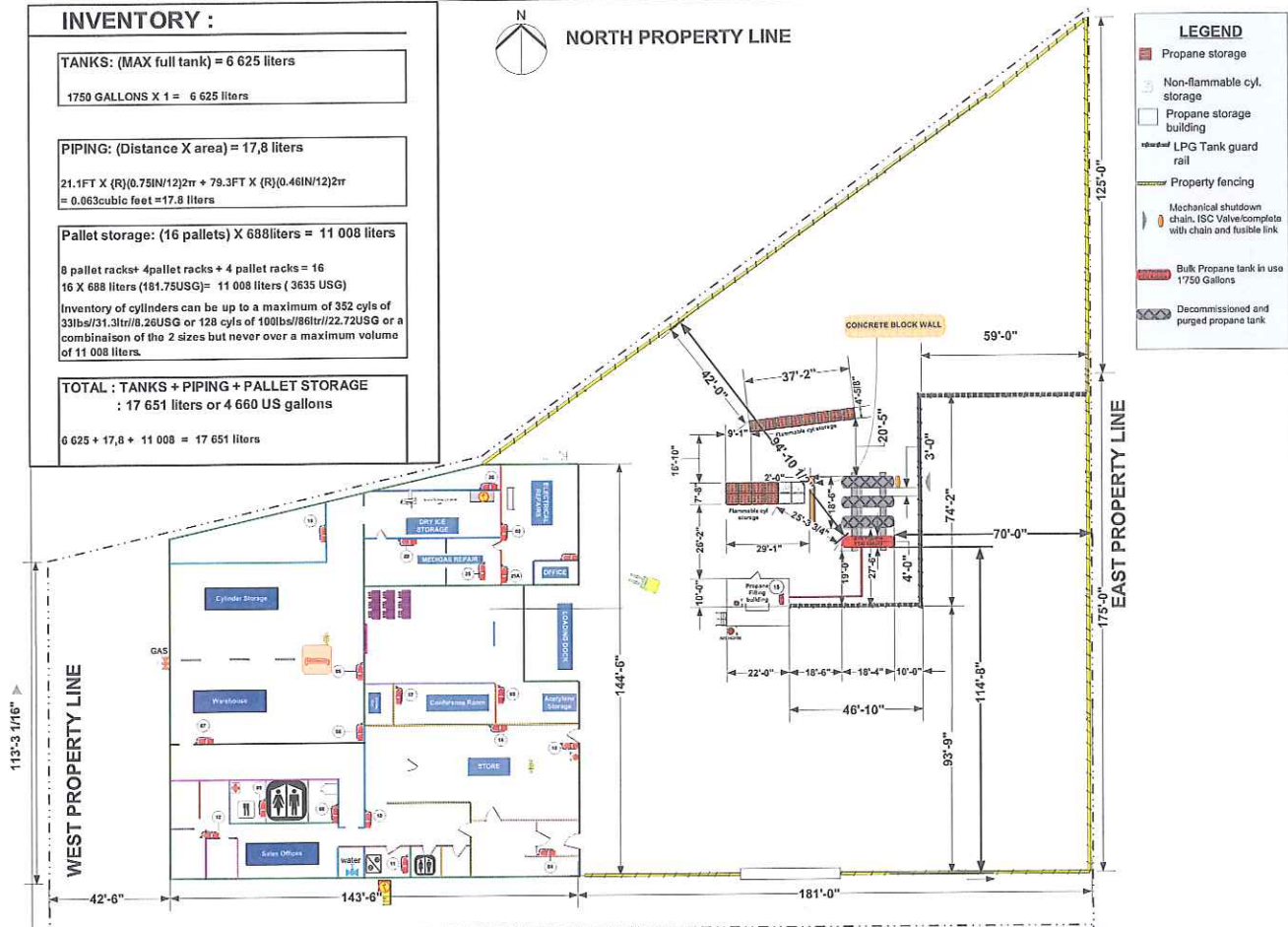
6 625 + 17,8 + 11 008 = 17 651 liters



**NORTH PROPERTY LINE**

**LEGEND**

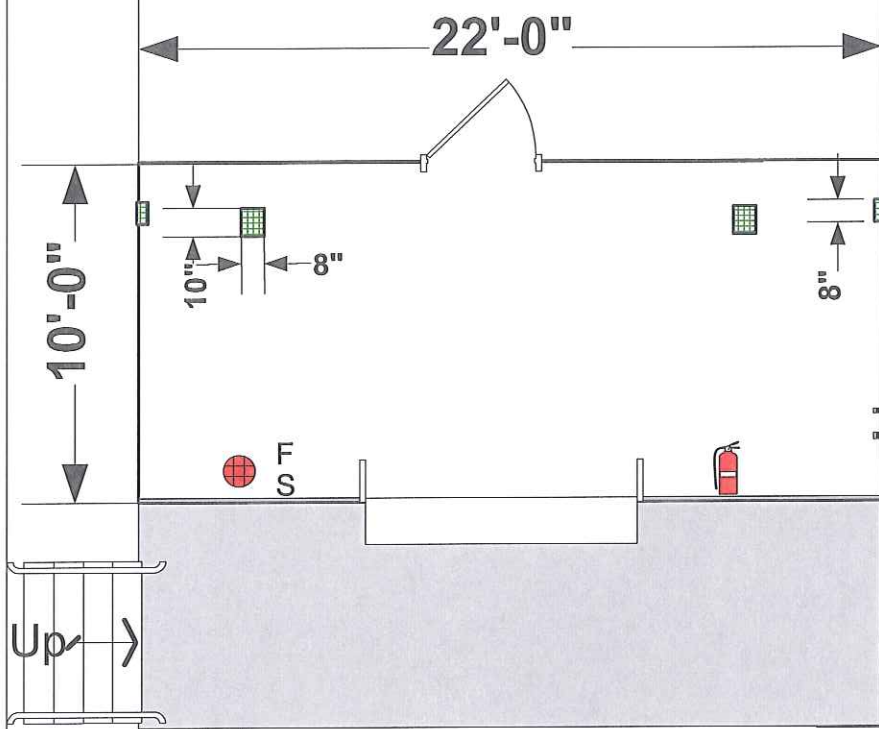
- Propane storage
- Non-flammable cyl. storage
- Propane storage building
- LPG Tank guard rail
- Property fencing
- Mechanical shutdown chain, ISC Valve/complete with chain and fusible link
- Bulk Propane tank in use 1750 Gallons
- Decommissioned and purged propane tank



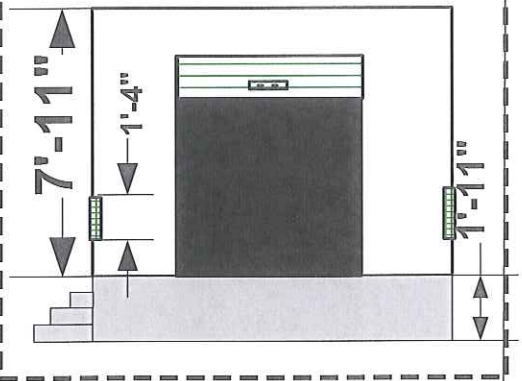
**1810 OXFORD ST  
SOUTH PROPERTY LINE**

<b>PRAXAIR FACILITY LAYOUT LONDON ONTARIO</b> <small>TITLE: FACILITY LAYOUT PRAXAIR LONDON, ONTARIO 1810 OXFORD ST, NISA 416</small>	<b>BUSINESS CONFIDENTIAL</b> <small>PRAXAIR TECHNOLOGY CENTER - TORRANCE, NEW YORK</small>		DRAWN BY: MP CHECKED: -		SITE IDENTIFICATION: -	
	<b>TYPE OF PLANT: PROPANE FILLING FACILITY</b>		REVIEWED: - APPROVED: -		PROJECT NUMBER: -	
	SCALE: NONE		DATE: 10-28-2011		SHEET: F01	
	SIZE: B		DRAWING NUM/BER: M-LONDON10282011-1-L8		TOTAL: 2 ALTERATION: K	

# Propane Filling Building



## Elevation view



**LEGEND**

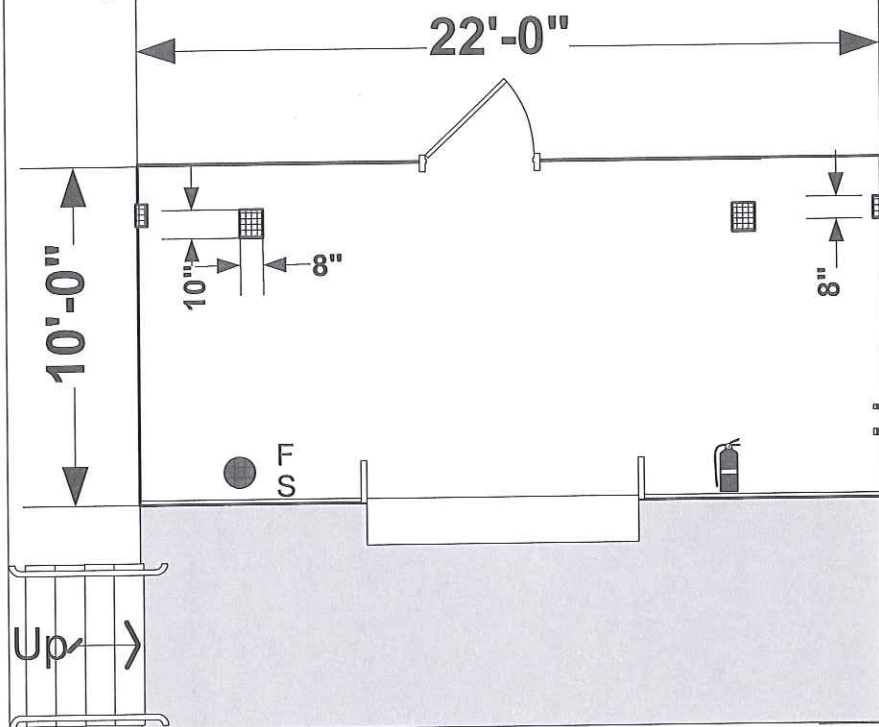
- Propane storage building
- Propane garage door always open during fill operation
- F S Fire Signal
- Vents (2 Floor vents 16" X 8" and 2 Roof vents 10" X 8")

**AIR HORN**

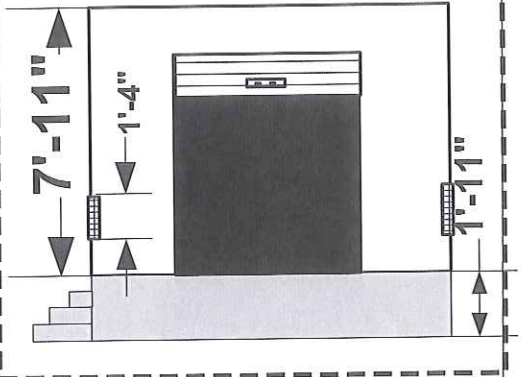
<b>PRAXAIR BUSINESS CONFIDENTIAL</b> PRAXAIR TECHNOLOGY CENTER - TONAWANDA, NEW YORK	
TYPE OF PLANT PROPANE FILLING FACILITY	
TITLE FACILITY LAYOUT PRAXAIR LONDON, ONTARIO 1910 OXFORD ST., N6A 4L6	

MODEL NAME : STDPF01	DRAWN BY MP	CHECKED --	SITE IDENTIFICATION	
	REVIEWED --	APPROVED --	PROJECT NUMBER	
SIZE B	SCALE NONE	DATE 10-28-2011	SHEET F02	TOTAL 2
	DRAWING NUMBER M-LONDON10282011-L8			ALTERATION K





# Propane Filling Building



## Elevation view



## LEGEND

-  Propane storage building
-  Propane garage door always open during fill operation
-  F S Fire Signal
-  Vents (2 Floor vents 16" X 8" and 2 Roof vents 10" X 8")

**AIR HORN**

<b>PRAXAIR BUSINESS CONFIDENTIAL</b> PRAXAIR TECHNOLOGY CENTER - TONAWANDA, NEW YORK	
TYPE OF PLANT PROPANE FILLING FACILITY	
TITLE FACILITY LAYOUT PRAXAIR LONDON, ONTARIO 1910 OXFORD ST., N6A 4L6	

MODEL NAME: STDPF01	DRAWN BY MP	CHECKED --	SITE IDENTIFICATION	
	REVIEWED --	APPROVED --	PROJECT NUMBER	
SCALE NONE	DATE 10-28-2011	SHEET F02	TOTAL 2	
SIZE B	DRAWING NUMBER M-LONDON10282011-L8		ALTERATION K	