



Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
3300 Bloor Street West
Toronto Ontario MBX 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 000159082

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.

A Company Name FREEMONT LANDSCAPING INC. Ontario Corporation No., if applicable _____

Operator Name (if different from above) FREEMONT LANDSCAPING INC.

Telephone No. (905) 676-9106 Fax No. (905) 676-9187 E-mail jeff@freemont.ca

B Street No. 2366 Street Name / 911 Number / Address, if applicable ANSON DRIVE

Town / City or Township / County MISSISSAUGA Province ONTARIO Postal Code L5S 1G2

C Mailing address if different from above.

Street No. 2366 Street Name / 911 Number / Address, if applicable ANSON DRIVE

Town / City or Township / County MISSISSAUGA Province ONTARIO Postal Code L5S 1G2

D Information on Container Refill Centre or Filling Plant

Location of facility.

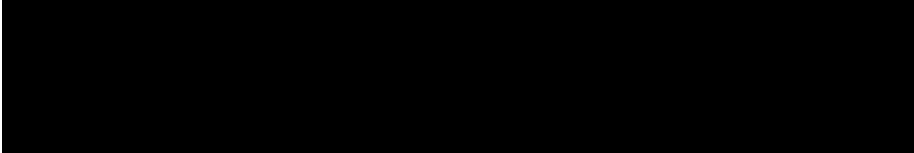
Street No. 2366 Street Name / 911 Number / Address, if applicable ANSON DRIVE Nearest Major Intersection ANSON DRIVE AND TORBRAM ROAD

Town / City or Township / County MISSISSAUGA Province ONTARIO Postal Code L5S 1G2

Name of Licence Holder FREEMONT LANDSCAPING INC.

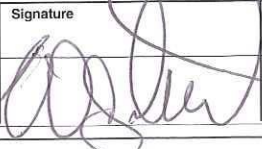
Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT) WILLIAM INCH ROT type PTI 100-02 (77971)

Municipality (or municipalities if the facility or its hazard distance touches multiple borders) MISSISSAUGA

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.

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Print name	Signature	Date (dd-mm-yyyy)
Name of Licence Holder <u>WILLIAM INCH</u>		<u>07/12/11</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training <u>WILLIAM INCH</u>		



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SECTION A: GENERAL INFORMATION (cont'd)

Indicate the year the facility was established.

July 1983

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

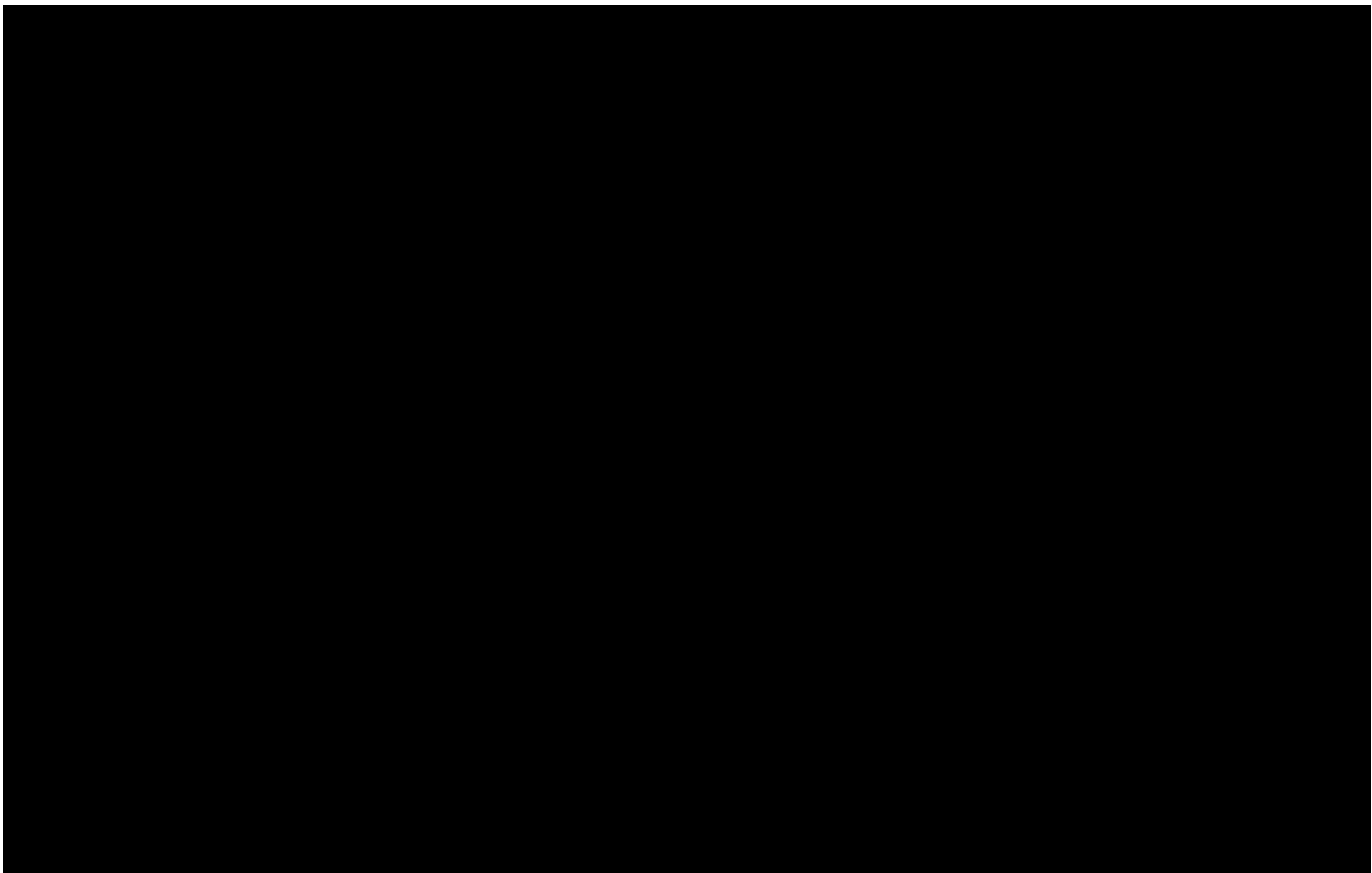
No Known Modifications

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

	PSIG	Serial Number
Tank1:	250	5.795245
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: 2000 uswg Portable: 9.62 uswg Mobile: 0



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Name of person completing this form (please print) DAVID BAXTER		Official Title FACILITY SUPERVISOR	
Signature 		Telephone No. 905-676-9106	Date (dd-mm-yyyy) 14/07/11



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SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

Name of Propane Supplier(s) EDPRO ENERGY GROUP INC.		For Office Use - Party No.	
Street No. 520	Street Name / 911 Number / Address, if applicable SOVEREIGN ROAD		
Town / City or Township / Country LONDON		Province ONTARIO	Postal Code N5V 4K4
Telephone No. (519) 690-0000	Fax No. (519) 690-1948	Contact Name JOE ERSKINE	
E-mail jerskine@edproenergy.com			

Name of Propane Transporter. If same as above, please check box. <input checked="" type="checkbox"/>		For Office Use - Party No.	
EDPRO ENERGY GROUP INC.			
Street No. 520	Street Name / 911 Number / Address, if applicable SOVEREIGN ROAD		
Town / City or Township / Country LONDON		Province ONTARIO	Postal Code N5V 4K4
Telephone No. (519) 690-0000	Fax No. (519) 690-1948	Contact Name JOE ERSKINE	
E-mail jerskine@edproenergy.com			

Off-site Cylinder and/or Mobile Storage NONE	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.

Above ground Gasoline Storage (2) x 2270 litre maximum capacity, Above ground Diesel Fuel Storage (1) 2270 litre and (1) 2000 litre maximum capacity,

Above ground Waste Oil Storage 1362 maximum capacity. Inside storage includes (12) 205L drums of motor oil, (4) 205L drums of washer fluid/glycol,

(2) 55 kg drums of grease, welding oxygen and acetylene cylinders stored in dedicated cages. Consumer quantities of items such as spray paint, cleaners.

Pesticides: (6) 20L cases Fiesta weed killer PCP# 29535, (2) 20L cases Ecoclear herbicide PCP# 25528, (2) 20L cases Glyphos Herbicide PCP# 24359

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

Fire extinguisher - Identified on site plan

Emergency shut-off - Identified on site plan

Municipal fire hydrant - Identified on site plan

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) valve activator lever - cabinet cannot be closed if open

Fusible link on each end of cable holding open ISC valve causes liquid outlet to automatically close, in the event of fire

Normally closed solenoid valves on automotive fill meter before hose closes by emergency shut-off or closed when not in use

Normally closed solenoid valves on cylinder fill before hose closes by emergency shut-off or closed when not in use

Maintenance and testing schedule for fire protection controls and devices.

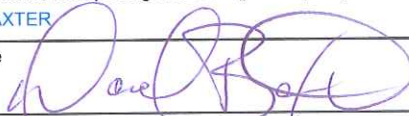
Fire extinguisher is inspected by outside company annually

Fire extinguisher inspected in-house monthly

Comprehensive dispenser inspection conducted annually by G2-LP certificate holder or higher

Facility inspection by TSSA completed annually

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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 JEFF DEABAITUA	For Office Use - Party No.	Name DAVID BAXTER	For Office Use - Party No.
Official Title OPERATIONS MANAGER		Official Title FACILITY SUPERVISOR	
Telephone No. 905-676-9106	Fax No. 905-676-9187	Cell No. 647-272-8270	Fax No. 905-676-9187
E-mail jeff@freemont.ca		E-mail dave@freemont.ca	
Role and responsibilities in emergency Represent licence holder/operator on interaction with authorities. Ensure regulations are met. Oversee evacuation plan w/ designate meeting area.		Role and responsibilities in emergency Site liaison on enacting internal & external emergency procedures. Communicate with emergency responders, supplier & subcontractors. Evacuation protocols.	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name LARRY SIMMONS	For Office Use - Party No.	Name JEFF DEABAITUA	For Office Use - Party No.
Official Title GENERAL MANAGER		Official Title OPERATIONS MANAGER	
Telephone No. 905-676-9106	Fax No. 905-676-9187	Telephone No. 905-676-9106	Fax No. 905-676-9187
E-mail larry@freemont.ca		E-mail jeff@freemont.ca	
Role and responsibilities in emergency Facility 24 Hr Contact in other unavailable		Role and responsibilities in emergency Ensure approved procedures are followed. Ensure internal emergency procedure are current and employees aware. Evacuation protocols.	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name JOHN McDOUGALL	For Office Use - Party No.	Name JOE ERSKINE	For Office Use - Party No.
Official Title FIRE CHIEF		Official Title CEO	
Telephone No. 905-615-3750	Fax No. 905-896-4579	Telephone No. (519) 690-0000	Fax No. (519) 690-1948
E-mail john.mcdougall@mississauga.ca		E-mail jerskine@edproenergy.com	
Role and responsibilities in emergency Coordination of municipal fire services, liaison with property owner, administrator of fire services and advisor to municipal council		Role and responsibilities in emergency Technical assistance; dispatch of service technician and specialized equipment Activate Emergency Response Assistance Plan by LPGERC	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name GREG LAING	For Office Use - Party No.	Name Barbara Leckey	For Office Use - Party No.
Official Title DEPUTY CHIEF		Official Title Zoning Administrator	
Telephone No. (905) 615-3754	Fax No. (905) 896-3373	Telephone No. 905-896-5511	Fax No. 905-615-4081
E-mail greg.laing@mississauga.ca		E-mail	
Role and responsibilities in emergency Coordination of municipal fire services, liaison with property owner, administrator of fire services and advisor to municipal council		Municipality City of Mississauga	

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	Date (dd-mn-yyyy) 15/07/11



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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.

- Limited Scope of Filling: Only non-retail vehicle filling is done

[Large empty area with horizontal dashed lines for writing additional safety measures.]

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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) 04/07/2011	Print Name of Training Provider: EDPRO ENERGY GROUP
	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:

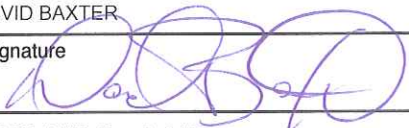
Training on the facility's Emergency Management Procedures provided to staff.

Training Date (dd-mm-yyyy) 04/07/2011	Print Name of Training Provider: EDPRO ENERGY GROUP
	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 provided to certificate holders / persons with Records of Training.

Training Date (dd-mm-yyyy) 03-05-2010	Print Name of Training Provider: PROPANE TRAINING INSTITUTE
	Print Name of Instructor: REG ADAMSON
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) 04/07/2012	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:

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

Target Date (dd-mm-yyyy) 04/07/2012	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 provided to certificate holders / persons with Records of Training.

Target Date (dd-mm-yyyy) 03-05-2013	Print Name of Training Provider: PROPANE TRAINING INSTITUTE
	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:

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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).

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 will immediately vacate the building and premises to evacuation point (indicated on site plan)

and await direction from 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).

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

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

Locks to be cut on North gates for fire department access

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

Emergency 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.

Facility 24 Hour Contact would be able to respond to site in 5 minutes

Facility Manager would be able to respond to site in 45 minutes

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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 type="checkbox"/>	<input checked="" type="checkbox"/>
5. Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Are weighing systems validated for accuracy?	<input type="checkbox"/>	<input checked="" 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)	<u>47m</u>	
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)	<u>N/A</u>	

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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	Yes	No
Has the local fire service had an opportunity to review the Emergency Response and Preparedness Plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If not, please explain (e.g., no fire services).		
Fire services comments, if any:		
Comments on Emergency Response and Preparedness Plan are provided in attached document completed and signed by Mississauga Fire Department.		
To be completed by the Licence Holder		
In response to the above comments, the following action(s) is required:		
i) All pages signed ii) schedule is included on page 4 last section, + in operators manual section 5 iii) updated pg 5 s1 with evacuation responsibilities.		
iv) fire dept contacts updated v) dates on req for RSMP app; fully details of training available if requested vi) procedures address (cut locks and enter)		
vii) procedures call for inspection at each use viii) no procedures in place as no cylinder filling at this site ix) included		
The licence holder will respond to the Local Fire Services comments by: July 15, 2011		
(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 Gino Nucifora - Fire Prevention and Life Safety		July 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) 04-04-2011	Capacity of single largest propane storage vessel (USWG) 2000 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: 47m	Right side property line: 56m
Rear: 57m	Left side property line: 32m
GPS coordinates of single largest vessel: 43°41'39.42"N, 79°39'36.62"W	

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Name of person completing this form (please print) DAVID BAXTER	Official Title FACILITY SUPERVISOR
Signature 	Telephone No. 905-676-9106
	Date (dd-mm-yyyy) 14/07/11



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

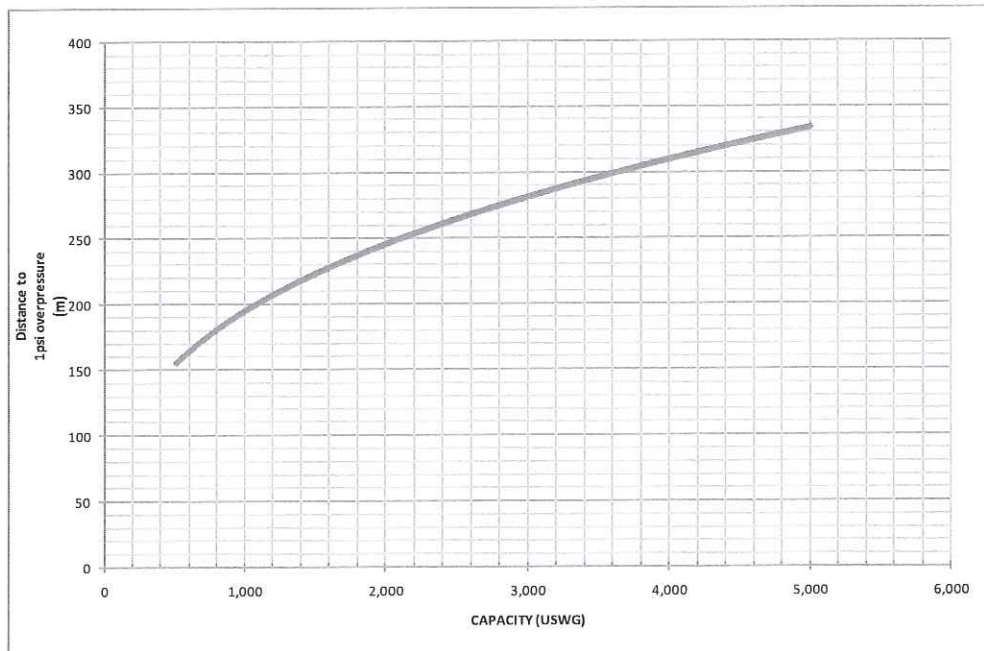
Table 1: Distance Table

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.

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SECTION C: SUBMISSIONS (cont'd)
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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>Action Scaffold Services</u> Address: <u>7151 Fir Tree Drive</u> City: <u>Mississauga</u> Province <u>Ontario</u> Postal Code <u>L5S 1G4</u>				x	<u>50</u> 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: <u>Goulash Bistro</u> Address: <u>7111 Fir Tree Drive #2</u> City: <u>Mississauga</u> Province <u>Ontario</u> Postal Code <u>L5S 1G4</u>		x			<u>117</u> 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. <u>905-676-9106</u> Date (dd-mm-yyyy) <u>14/07/11</u>



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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	1	9.62
# 30	8.8	0	0
# 20	5.8	0	0
# 10	2.9	0	0
# 5	1.5	0	0
Total Cylinder Capacity 9.62 uswg			

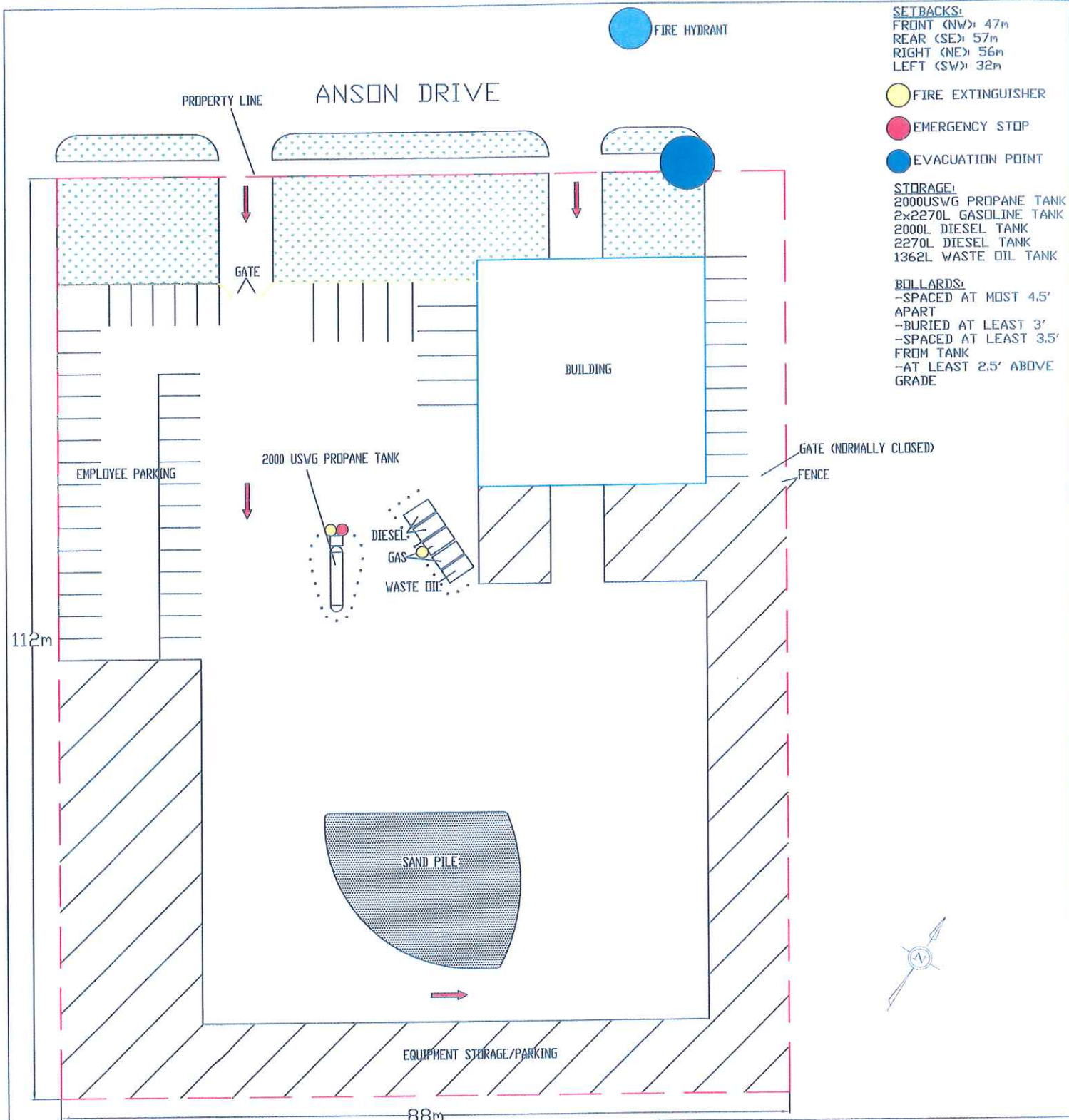
Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
NONE	0	
Total Tank Capacity 0		

Total Cylinder Capacity	9.62 uswg
Total Tank Capacity	0
Total Portable Capacity	9.62 uswg

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Signature 	Telephone No. 905-676-9106	Date (dd-mm-yyyy) 14/07/11



NOTE:
 THIS DRAWING GOVERNS OVER ANY CUSTOMER SPECIFICATIONS.

THE INFORMATION CONTAINED HEREIN IS PROPRIETARY TO SLEEGERS ENGINEERED PRODUCTS INC. AND SHALL NOT BE REPRODUCED OR DISCLOSED IN WHOLE OR IN PART, NOR USED FOR ANY REASON WHATSOEVER INCLUDING RESEARCH, DEVELOPMENT, DESIGN, AND MANUFACTURE, EXCEPT WHEN SUCH USER POSSESSES DIRECT, WRITTEN AUTHORIZATION FROM SLEEGERS ENGINEERED PRODUCTS INC.

PROPRIETARY NOTICE

SLEEGERS ENGINEERED PRODUCTS INC.

CUSTOMER EDPRO ENERGY GROUP INC.

REFERENCE 2366 ANSON DRIVE, MISSISSAUGA, ONTARIO

TITLE FREEMONT LANDSCAPING DISPENSER SITE PLAN

SCALE- NTS
 DATE- 2011/05/20
 DRW- DA CHKD- JE APP'D- JE

WORK ORDER No.
 JRS11051

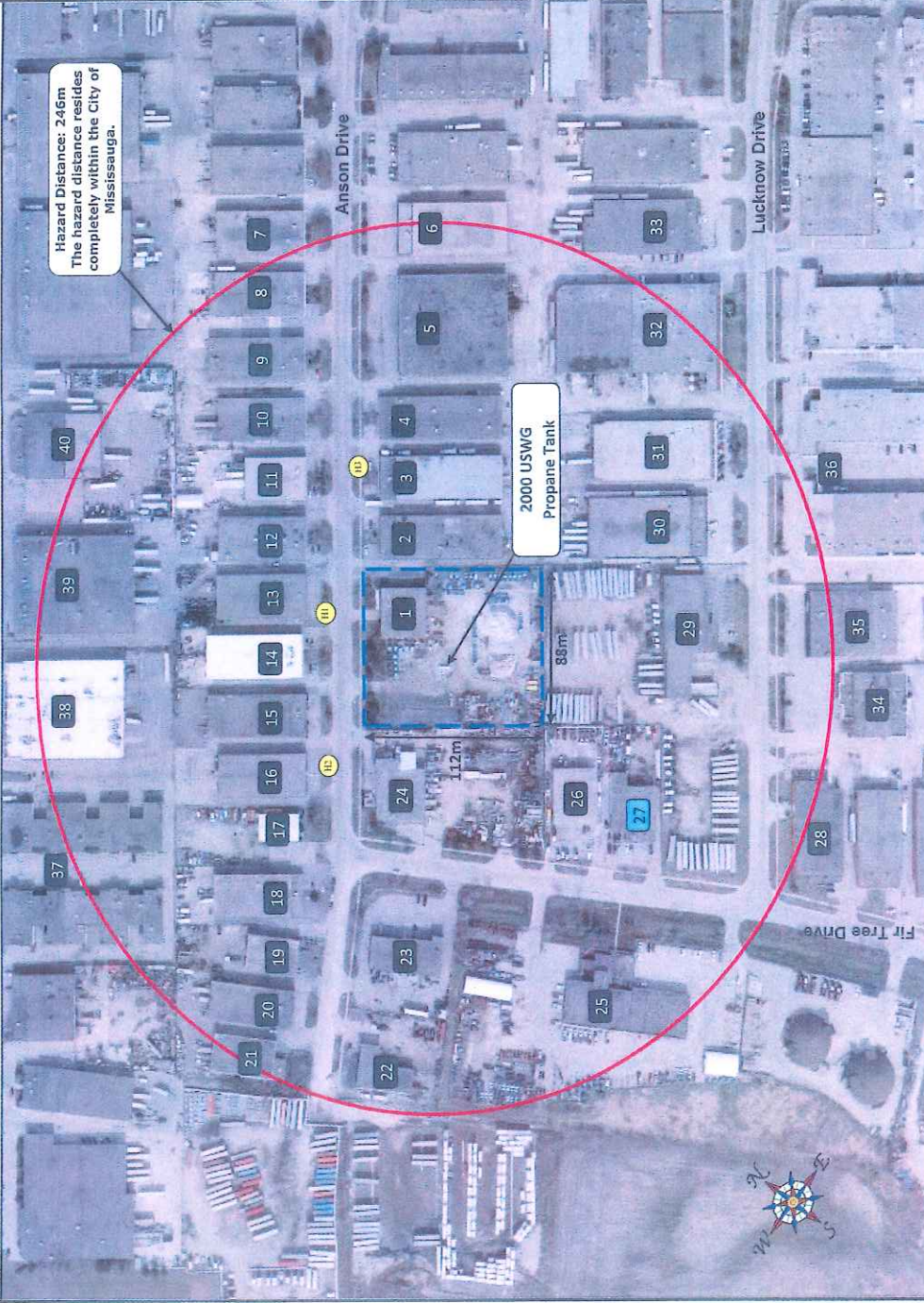
DRAWING No.
 SP FREEMONT R0

No.	DATE	REVISION	BY	APP'D

Freemont Landscaping Incorporated - Map of Surrounding Area

City of Mississauga
 Barbara Leckey, Zoning Administrator
 Planning and Building Department
 Phone: 905-896-5511 Fax: 905-615-4081
 300 City Centre Drive, Mississauga, ON

Freemont Landscaping Incorporated Dispenser
 GPS Coordinates of 2000 USWG Tank: 43°41'39.42"N, 79°39'56.62"W
 Legal Description: PLAN M167 PT BLK N RP 43R4690 PART 1
 Address: 2366 Anson Drive
 Mississauga, Ontario, L5S 1G2



Public Receptors of Note	
1	Freemont Landscaping Inc.
2	A & M Surf Tech Ltd.
3	Batesville Canada
4	Tectran Co.
5	Jeyco Machine Products
6	Multi-Tenant Industrial
7	Hercules Manufacturing
8	Ronnies Generator Systems Ltd.
9	Filtrec Canada
10	Quest Inks & Coatings Ltd.
11	Toronto Concrete Floors Ltd.
12	Esactatherm Ltd.
13	Vacant industrial
14	Multi-Tenant Industrial
15	Multi-Tenant Industrial
16	Multi-Tenant Industrial
17	Peeltown Welding Ltd.
18	Festurline Inc.
19	Peel Scrap Metal Recycling Ltd
20	Vacant industrial
21	Hope Aero Propeller & Components Inc.
22	Industrial
23	Benson Tire
24	Action Scaffold Services
25	Malton Yard: Parks/Works
26	Beacon Signs Inc.
27	Multi-Tenant Commercial
28	Vacant industrial
29	Promorth Transportation
30	Sjodot-Barrett Foods Inc.
31	GTA Tires
32	Sjodot-Barrett Foods Inc.
33	Sjodot-Barrett Foods Inc.
34	Premium Banquet Halls Inc.
35	Blow Mold Tooling Inc.
36	Multi-Tenant Industrial
37	Multi-Tenant industrial
38	Bseneco Packaging
39	BBTA Industries Inc.
40	Action Trailer Sales Inc.
Setbacks	
Front (Northwest):	4.7m
Rear (Southeast):	5.7m
Right (Northeast):	5.6m
Left (Southwest):	3.2m
Fire Hydrants	
H1	82m
H2	93m
H3	129m
Legend	
LDR	Low Density Residential
HDR	High Density Residential
IND	Industrial
LDC	Low Density Commercial
HDC	High Density Commercial
SPB	Sensitive public



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Application for a Review of a Risk and Safety Management Plan (RSMP) for an Existing Propane Facility
Technical Standards and Safety Act
Propane Storage and Handling Regulation

Failure to fully complete this form may result in rejection.
Making a false statement may result in a fine or prosecution.

For Office Use Only

Licence Number

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

A Firm Name: **FREMONT LANDSCAPING INC.** Ontario Corporation No., if applicable: _____
E-mail Address: **jeff@freemont.ca**
Area Code: **905** Telephone No.: **676** - **9106** Contact Person: **JEFF DEABAITUA**

B Mailing Address: Street No.: **2366** Street Name, Lot / Concession No.: **ANSON DRIVE**
Town / City or Township / County: **MISSISSAUGA** Province: **ONTARIO** Postal Code: **L5S** - **1G2**

Information on Container Refill Centre or Filling Plant

Location of premises to be licensed

C Street No.: **2366** Street Name, Lot / Concession No.: **ANSON ROAD**
Town / City or Township / County: **MISSISSAUGA** Province: **ONTARIO** Postal Code: **L5S** - **1G2**

D Supplier: **EDPRO ENERGY GROUP INC.**
Street No.: **520** Street Name, Lot / Concession No.: **SOVEREIGN ROAD**
Town / City or Township / County: **LONDON** Province: **ONTARIO** Postal Code: **N5V** - **4K4**

Licence Number: **000159082**

Total Storage Capacity: **2000**
In U.S. Water Gallons

Persons employed that hold a required certificate or Record of Training.
Add an additional sheet if insufficient space.

Name: **WILLIAM INCH**
DAVID BAXTER

Certificate Number: **77971**
Certificate Number: **77964**

Application is valid for 12 months from date received by TSSA. You are required by law to notify TSSA of any change of information.

I certify that the above information is true.

Print name of Owner/Operator: **WILLIAM INCH**

Position: **PRESIDENT**

Signature: 

Date (mm-dd-yyyy): **07/12/11**