



Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
3300 Bloor Street West
Toronto Ontario M8X 2X4
Fax: 416.231.4078
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

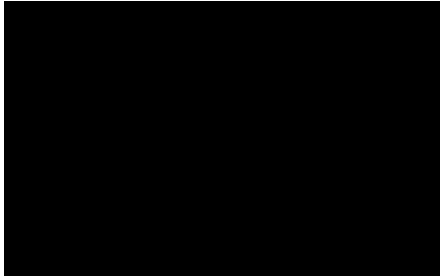
Failure to fully complete this form may result in rejection.
Making a false statement may result in a fine or prosecution under the *Technical Standards and Safety Act*

Licence Number 000285087

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 2569187 ONTARIO INC Corporation No. 2569187

Operator Name (if different from above) _____

Telephone No. 705-484-5000 Fax No. _____ E-mail dgewargis11@gmail.com

B Street No. 2692 Street Name / 911 Number / Address, if applicable HIGHWAY 12

Town / City or Township / County BRECHIN Province ONTARIO Postal Code L0K 1B0

Mailing address if different from above.

C Street No. 134 Street Name / 911 Number / Address, if applicable CHESNEY CRESCENT

Town / City or Township / County KLEINBURG Province ONTARIO Postal Code L4H 4A6

Information on Container Refill Centre or Filling Plant

D Location of facility.

Street No. 2692 Street Name / 911 Number / Address, if applicable HIGHWAY 12 Nearest Major Intersection HIGHWAY 12 & COUNTY ROAD 169

Town / City or Township / County BRECHIN Province ONTARIO Postal Code L0K 1B0

Name of Licence Holder 2569187 ONTARIO INC

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). DAVID GEWARGIS ROT type 100-08

Municipality (or municipalities if the facility or its hazard distance touches multiple borders) TOWNSHIP of RAMARA

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-mmm-yyyy)
Name of Licence Holder <u>2569187 ONTARIO INC</u>		<u>22-09-2017</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training <u>DAVID GEWARGIS</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.

2004 NONE

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

	PSIG	Serial Number
Tank 1:	250	1316-96
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: 1000 Portable: 518.8 Mobile: 0

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Name of person completing this form (please print) <p style="text-align: center;">DAVID GEWARGIS</p>	Official Title <p style="text-align: center;">DIRECTOR</p>		
Signature 	<table border="0" style="width: 100%;"> <tr> <td style="width: 60%;">Telephone No. <p style="text-align: center;">705-484-5000</p></td> <td style="width: 40%;">Date (dd-mmm-yyyy) <p style="text-align: center;">22-09-2017</p></td> </tr> </table>	Telephone No. <p style="text-align: center;">705-484-5000</p>	Date (dd-mmm-yyyy) <p style="text-align: center;">22-09-2017</p>
Telephone No. <p style="text-align: center;">705-484-5000</p>	Date (dd-mmm-yyyy) <p style="text-align: center;">22-09-2017</p>		



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SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

Name of Propane Supplier(s) SPARLING'S PROPANE CO. LTD.		For Office Use - Party No.	
Street No. 2550	Street Name / 911 Number / Address, if applicable HARRIGAN DRIVE		
Town / City or Township / Country BRECHIN		Province ONTARIO	Postal Code L0K 1B0
Telephone No. 705-484-1423	Fax No. 705-484-1156	Contact Name PHIL EDDY	
E-mail philip.eddy@parkland.ca			

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	Capacity stored off-site, in USWG NONE	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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Signature <i>David Gewargis</i>	Telephone No. 705-484-5000	Date (dd-mmm-yyyy) 22-09-2017



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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.
2 x 22,700 litre underground gasoline storage tanks (1 Regular, 1 Premium); 1 x 45,000 litre underground gasoline storage tank (Regular)
1 x 22,700 litre underground diesel storage tank
Propane cylinders are stored on site in cages.

Description of fire and emergency equipment indicated on facility site map.
There are a total of 5 fire extinguishers available on site. One at the propane dispenser as required by code and four at the gasoline dispensers.

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 internal safety control (ISC) valve in the tank outlet is protected with a fusible link. The normally closed valve is pulled open by a cable attached at the cabinet door and can only be in the open position when the cabinet door is open. In the event of a fire, the fusible link will melt, allowing the ISC valve to close within the tank. When unattended, the lever is returned to the closed position, thus closing the ISC valve.

The remote ECO switch is located to the right of the dispenser and when activated terminates power to the propane solenoid valve and pump.

Maintenance and testing schedule for fire protection controls and devices.

The facility is inspected on a monthly basis by the operator. The operation of the ECO function and the ISC valve movement and a visual inspection of the condition of the fire extinguishers are part of the monthly inspection. Any deficiencies found in the propane system are reported to

Sparling's Propane for immediate attention.

Sparling's Propane conducts an annual inspection of the entire propane facility.

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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 DAVID GEWARGIS	For Office Use - Party No.	Name DAVID GEWARGIS	For Office Use - Party No.
Official Title DIRECTOR		Official Title DIRECTOR	
Telephone No. 705-484-5000	Fax No. 705-484-5000	Cell No. 416-460-2595	Fax No. 705-484-5000
E-mail dgewargis@gmail.com		E-mail dgewargis@gmail.com	
Role and responsibilities in emergency Assist emergency responders as required		Role and responsibilities in emergency Assist emergency responders as required	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name DAVID GEWARGIS	For Office Use - Party No.	Name DAVID GEWARGIS	For Office Use - Party No.
Official Title DIRECTOR		Official Title DIRECTOR	
Telephone No. 705-484-5000	Fax No. 705-484-5000	Telephone No. 705-484-5000	Fax No. 705-484-5000
E-mail dgewargis@gmail.com		E-mail dgewargis@gmail.com	
Role and responsibilities in emergency Assist emergency responders as required		Role and responsibilities in emergency Assist emergency responders as required	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name DAVE McCARTHY	For Office Use - Party No.	Name Phil Eddy	For Office Use - Party No.
Official Title FIRE CHIEF	E-mail dmccarthy@ramara.ca	Official Title Branch Manager	E-mail phil.eddy@parkland.ca
Telephone No. 705-484-5374 ext. 263	Fax No. 705-484-0441	Telephone No. 705-484-1423 (Cell # 249-359-6914)	Fax No. 705-484-1156
Role and responsibilities in emergency Manage Emergency Response		Role and responsibilities in emergency Key Contact to Activate Sparling's Propane Emergency Response	
Fire Services Address 2297 Hwy 12, P.O. Box 130, Brechin, ON L0K 1B0		Propane Supplier Address 2550 Harrigan Drive, Brechin ON L0K 1B0	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name TONY STONG	For Office Use - Party No.	Name JANICE McKINNON	For Office Use - Party No.
Official Title DEPUTY CHIEF/FPO	E-mail tstong@ramara.ca	Official Title CAO - Chief Administrative Officer	
Telephone No. 705-484-5374 ext. 201	Fax No. 705-484-0441	Telephone No. 705-484-5374 ext. 222	Fax No. 705-484-0441
Role and responsibilities in emergency Manage Emergency Response		E-mail jmckinnon@ramara.ca	
Fire Services Address P.O. Box 130, 2297 Hwy 12, Brechin, ON L0K 1B0		Municipality Name and Address TOWNSHIP of RAMARA 2297 Highway 12, PO Box 130 Brechin, Ontario L0K 1B0	

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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.

A sign is affixed to the dispenser that identifies Sparling's Propane as the supplier of fuel as well as the 24/7 Sparling's Propane emergency response contact number (1-888-780-7727).

The dispenser cabinet is locked and closed when the business is not open and unattended thus closing the ISC valve.

Monthly inspections of the facility are completed and recorded by the operator. Any deficiencies found are corrected or reported immediately to Sparling's Propane.

The operator conducts a daily visual inspection of the dispenser.

There are four (4) additional fire extinguishers available on the premises.

See the Emergency Response Procedure (attached).

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

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

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

Training Date (dd-mmm-yyyy) 21-06-2017	Print Name of Training Provider: SPARLING'S PROPANE
	Print Name of Instructor: MIKE NAZCYNSKI
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Training Date (dd-mmm-yyyy) 21-06-2017	Print Name of Training Provider: 2569187 ONTARIO INC.
	Print Name of Instructor: DAVID GEWARGIS
Training Date (dd-mmm-yyyy) As needed (new hires)	Print Name of Training Provider: 2569187 ONTARIO INC.
	Print Name of Instructor: DAVID GEWARGIS
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Training Date (dd-mmm-yyyy) 21-06-2017	Print Name of Training Provider: 2569187 ONTARIO INC.
	Print Name of Instructor: DAVID GEWARGIS
Training Date (dd-mmm-yyyy) As needed (new hires)	Print Name of Training Provider: 2569187 ONTARIO INC.
	Print Name of Instructor: DAVID GEWARGIS
Training Date (dd-mmm-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-mmm-yyyy) 21-06-2018	Print Name of Training Provider: 2569187 ONTARIO INC.
	Print Name of Instructor: DAVID GEWARGIS
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Target Date (dd-mmm-yyyy) 21-06-2018	Print Name of Training Provider: 2569187 ONTARIO INC.
	Print Name of Instructor: DAVID GEWARGIS
Target Date (dd-mmm-yyyy) As needed (new hires)	Print Name of Training Provider: 2569187 ONTARIO INC.
	Print Name of Instructor: DAVID GEWARGIS
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Target Date (dd-mmm-yyyy) 21-06-2018	Print Name of Training Provider: 2569187 ONTARIO INC.
	Print Name of Instructor: DAVID GEWARGIS
Target Date (dd-mmm-yyyy) As needed (new hires)	Print Name of Training Provider: 2569187 ONTARIO INC.
	Print Name of Instructor: DAVID GEWARGIS
Target Date (dd-mmm-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).
The on duty operator will notify management of the situation and call 911.

Also see the Emergency Response Procedures (attached).

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).

Management or in their absence, the on duty operator will evacuate the premises and instruct persons to report to the pre-assigned meeting place at the lamp standard at the north side of the north driveway.

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).

The on-duty operator is to call 911. Once at the meeting place, the operator will confirm with the owner that emergency services were notified. The operator will relay information to emergency services until a key contact is on site who will assume responsibility. The facility is equipped with a portable phone that all attendants have access to.

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

There is no fence around the dispenser.

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

The operator will assume the responsibility of tracking information until a key contact is present. The key contact will then assume responsibility for keeping emergency services updated.

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

During week: 1 hour 20 minutes

Weekends: Owner lives on site

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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
<input checked="" type="checkbox"/>	<input type="checkbox"/>

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:

UPDATED RSMP PROVIDED FOR FIRE SERVICE RECORDS; NO REVIEW REQUIRED. ANY CONCERNS OF FIRE SERVICE WILL BE ADDRESSED AS ENCOUNTERED. A COPY OF THIS UPDATED RSMP IS PROVIDED TO THE FIRE SERVICE.

The licence holder will respond to the Local Fire Services comments by: _____ (dd-mmm-yyyy)

LOCAL FIRE SERVICES

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

Print name	Signature	Date (dd-mmm-yyyy)
Local Fire Services Name		22-09-2017

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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 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 type="checkbox"/>	<input checked="" type="checkbox"/>
2. Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location?	<input type="checkbox"/>	<input checked="" 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>1800 metres</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>1800 metres</u>	

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SECTION C: SUBMISSIONS

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

Facility Site Plan.

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

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

Map of Surrounding Area.

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

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

Required Mapping Information from Updated Site Plan

Date map prepared (dd-mmm-yyyy) 18-09-2017	Capacity of single largest propane storage vessel (USWG) 1000
Tank setback coordinates. Indicate placement on the map.	
Front: <u>16 metres</u>	Right side property line: <u>178 metres</u>
Rear: <u>43 metres</u>	Left side property line: <u>3.6 metres</u>
GPS coordinates of single largest vessel: <u>44.33.843 by 079.11.074</u>	

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SECTION C: SUBMISSIONS (cont'd)

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

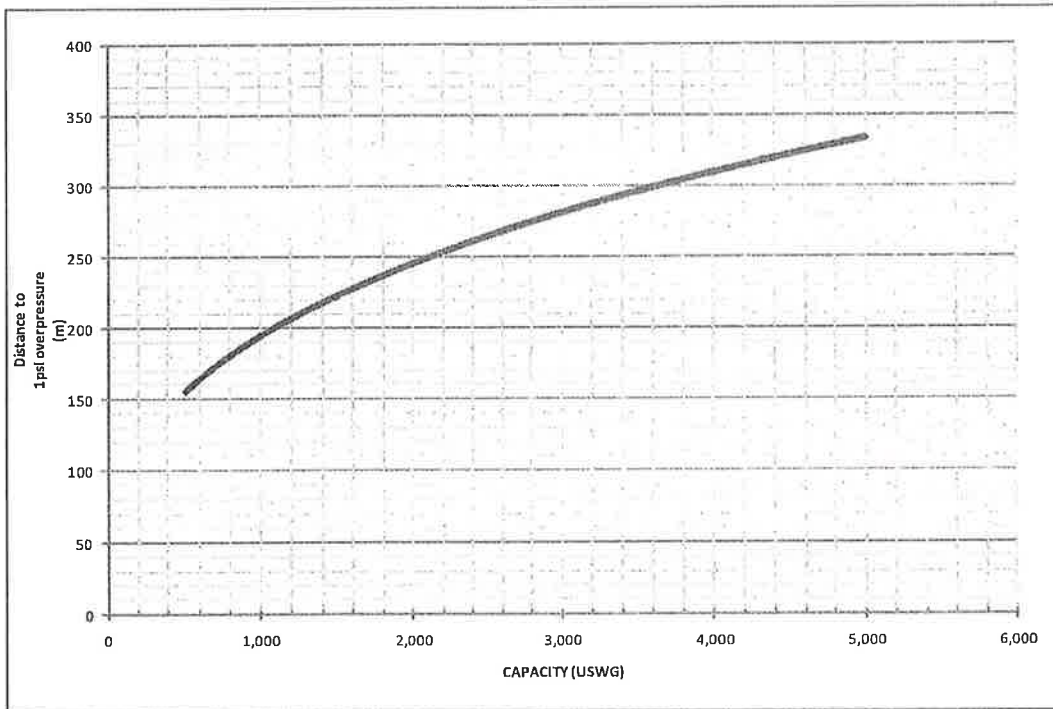
Table 1: Distance Table

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)





Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
3300 Bloor Street West
Toronto Ontario M8X 2X4
Fax: 416.231.4078
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: _____ Address: _____ City: _____ Province _____ Postal Code _____	x				_____ m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. David Cho Kee [REDACTED]		x			160 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".

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) DAVID GEWARGIS	Official Title DIRECTOR
Signature 	Telephone No. 705-484-5000
	Date (dd-mmm-yyyy) 22-09-2017



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WORKSHEET

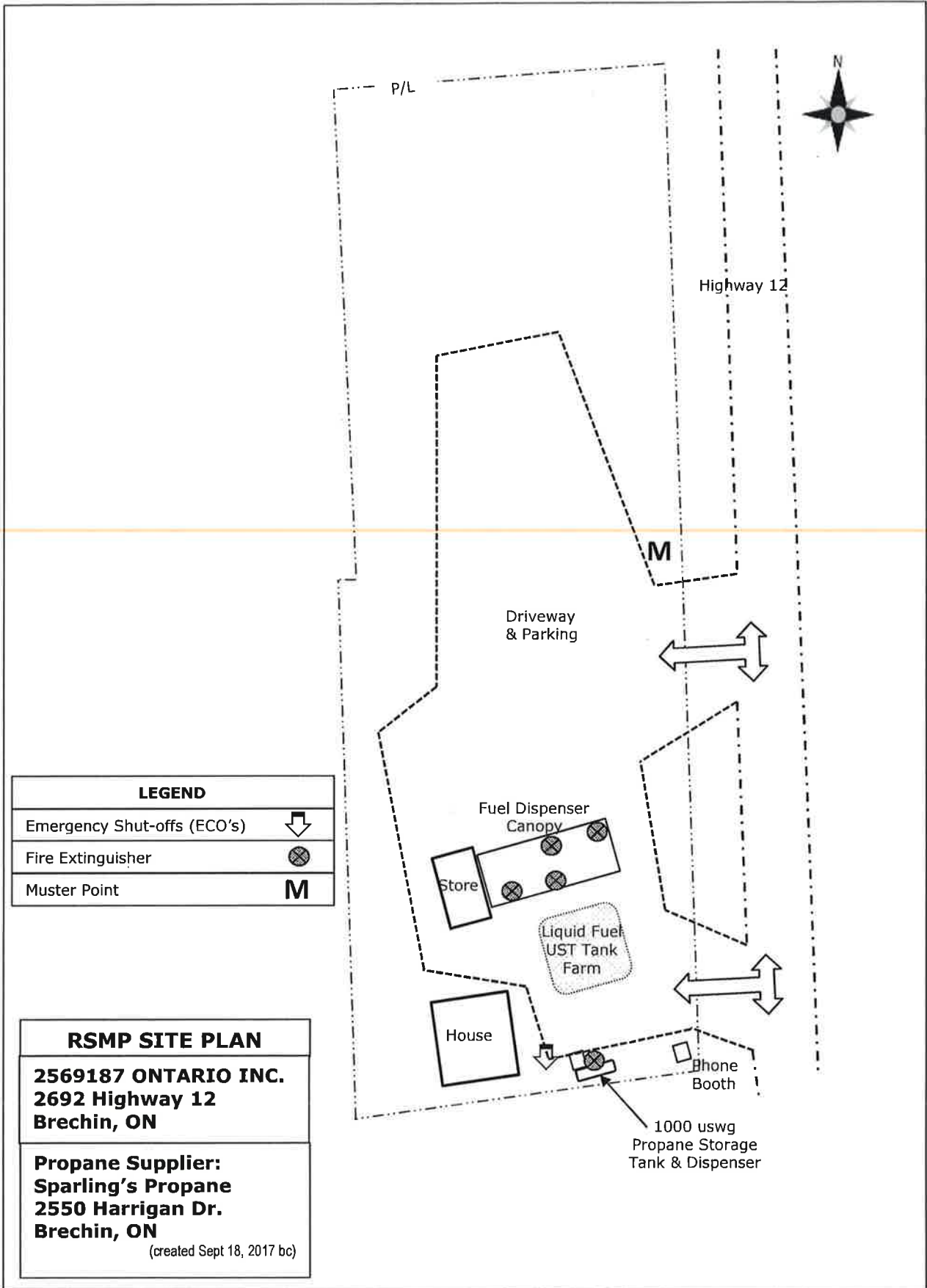
Portable Storage Additional Information Worksheet

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9		
# 100	29.5		
# 40	11.75	4	118
# 33.3	9.62		
# 30	8.8	6	52.8
# 20	5.8	60	348
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity			518.8

Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
Total Tank Capacity		0

Total Cylinder Capacity	518.8
Total Tank Capacity	0
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	518.8



LEGEND	
Emergency Shut-offs (ECO's)	↓
Fire Extinguisher	⊗
Muster Point	M

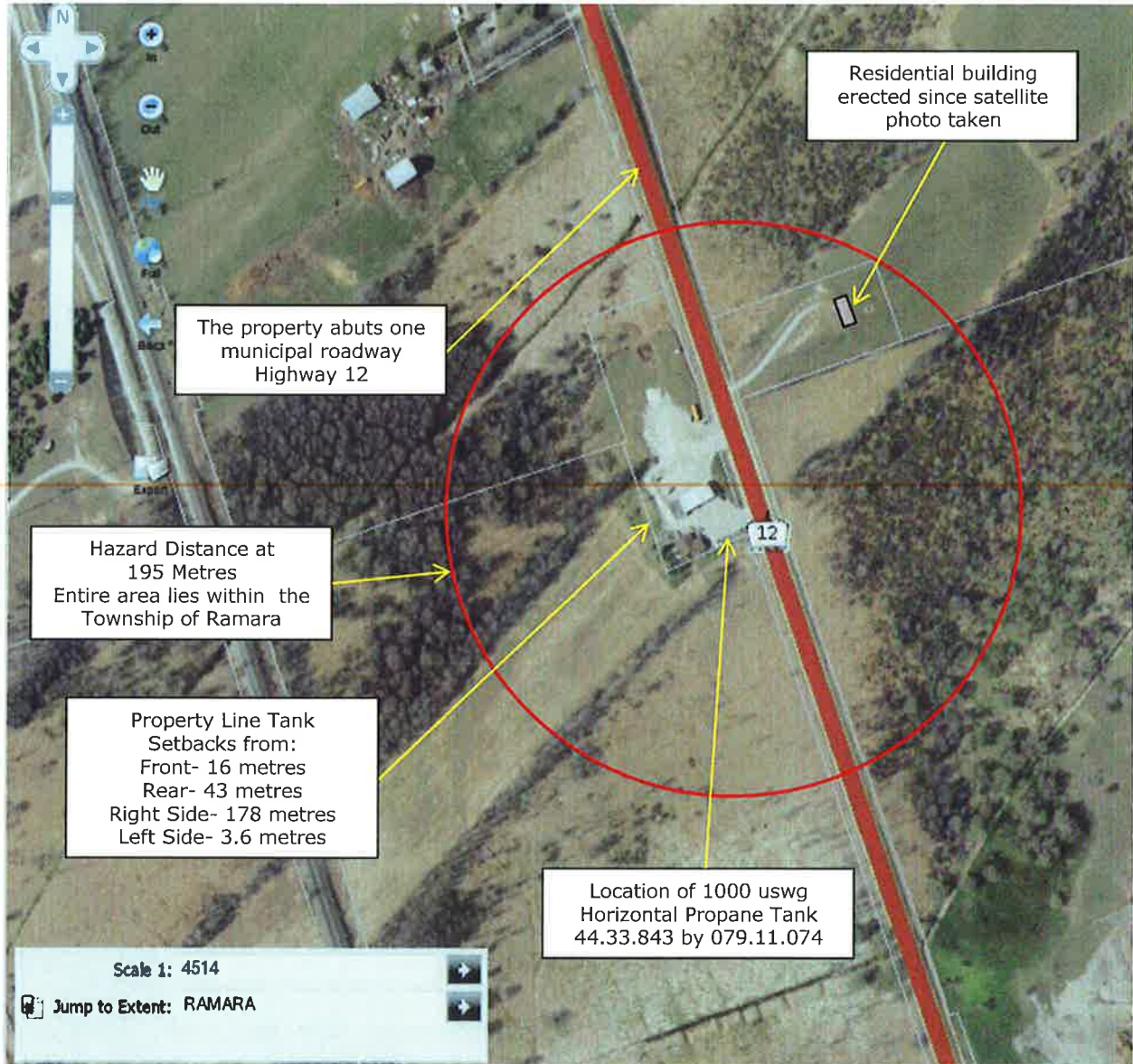
RSMP SITE PLAN

2569187 ONTARIO INC.
2692 Highway 12
Brechin, ON

Propane Supplier:
Sparling's Propane
2550 Harrigan Dr.
Brechin, ON

(created Sept 18, 2017 bc)

AERIAL MAP of 2569187 ONTARIO INC.
 2692 HIGHWAY 12, BRECHIN, ONTARIO



Facility Address: 2692 Highway 12, Brechin, Ontario	
Municipal Contact Information: Janice McKinnon Town Clerk 705-484-5374 ext. 222 jmckinnon@ramara.ca	Date Map Prepared: September 18, 2017