



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

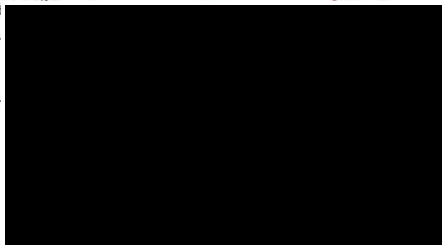
Failure to fully complete this form may result in rejection.
Making a false statement may result in a fine or prosecution under the *Technical Standards and Safety Act*

Licence Number 0076386184-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 ORLEANS PROPANE CENTRE INC Ontario Corporation No., if applicable 1019968

Operator Name (if different from above) JEAN-MARIE COULTURE

Telephone No. 613-834-3202 Fax No. --- E-mail Address ---

Street No. 2754 Street Name, Lot / Concession No. ST-JOSEPH BLVD

Town / City or Township / County ORLEANS Province ONTARIO Postal Code K1C 1G5

Mailing address if different from above.

Street No. SAME AS ABOVE Street Name, Lot / Concession No. SAME AS ABOVE

Town / City or Township / County ORLEANS Province ONTARIO Postal Code K1C 1G5

Information on Container Refill Centre or Filling Plant

Location of facility.

Street No. SAME AS ABOVE Street Name, Lot / Concession No. SAME AS ABOVE Nearest major intersection BELCOURT

Town / City or Township / County ORLEANS Province ONTARIO Postal Code K1C 1G5

as per map from customer

Name of Licence Holder ORLEANS PROPANE CENTRE INC

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). ROT type PP0-3

JEAN-MARIE COULTURE

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

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.

Name of Licence Holder	Print name	Signature	Date (dd-mm-yyyy)
<u>ORLEANS PROPANE CENTRE INC</u>	<u>ORLEANS PROPANE CENTRE INC</u>		<u>5/10/2011</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training	<u>JEAN-MARIE COULTURE</u>		<u>5/10/2011</u>



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 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.

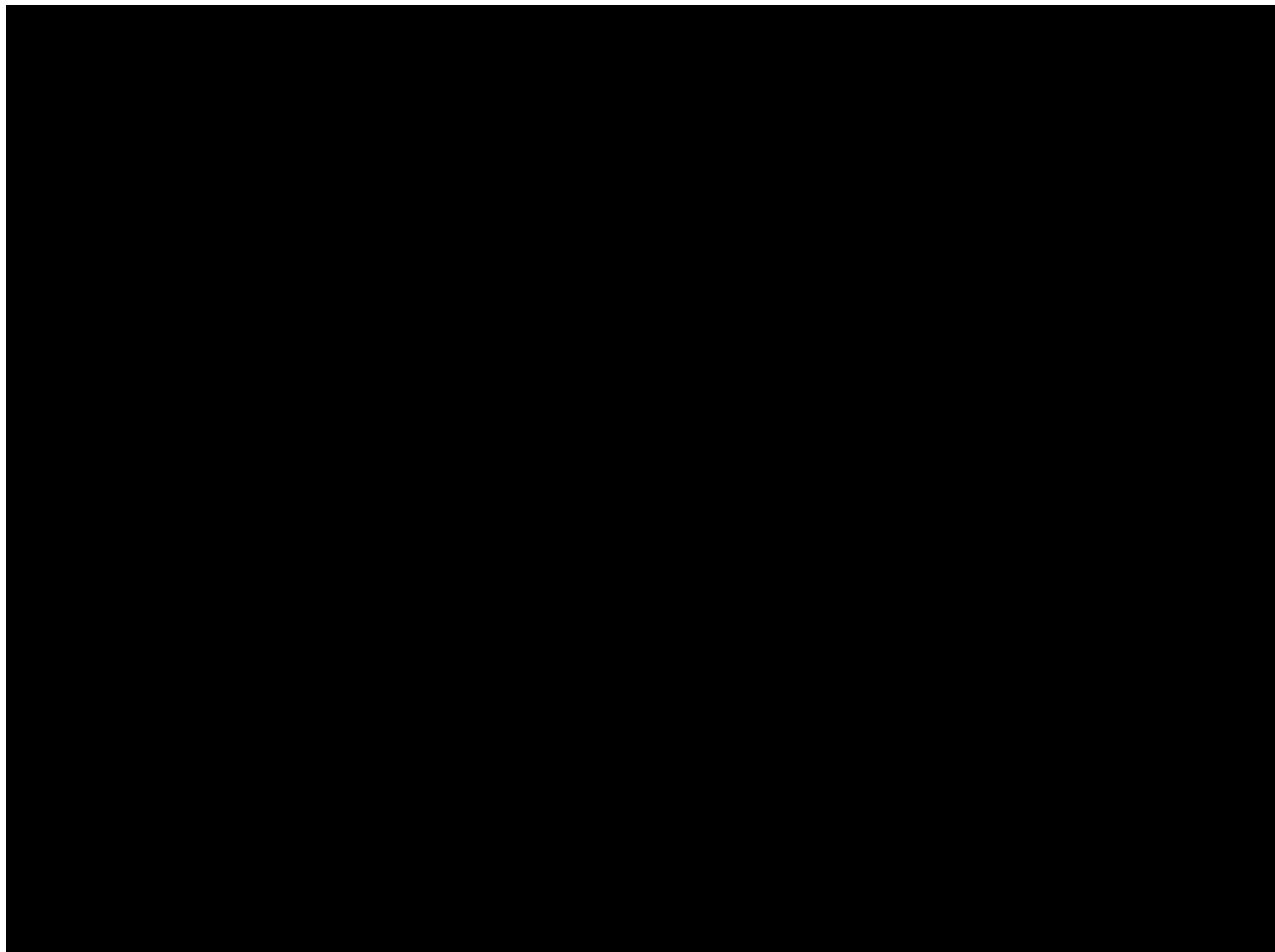
1993

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

	PSIG	Serial Number
Tank1:	250 PSI @ 115F	190-93
Tank2:	N/A	
Tank3:	N/A	

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: 406 Mobile: N/A



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) JEAN-MARIE COUTURE	Official Title OWNER
Signature <i>JM Couture</i>	Telephone No. 613-834-3200
	Date (dd-mm-yyyy) 5/10/2011



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 A: GENERAL INFORMATION (cont'd)
Activity Information

Name of Propane Supplier(s)		[REDACTED]	
W.O. STINSON & SON LTD			
Street No.	Street Name Lot / Concession No.		
4726	BANK STREET		
Town / City or Township / Country		Province	Postal Code
GLOUCESTER		ONTARIO	KIT 3W7
Telephone No.	Fax No.	Contact Name	
613-822-7400	613-822-6305	PAUL FINNISS	
E-mail			
P.FINNISS @ WOSTINSON.COM			

Name of Propane Transporter. If same as above, please check box. <input checked="" type="checkbox"/>		[REDACTED]	
Street No. Street Name Lot / Concession No.			
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	For Office Use - Party No.
Street No. Street Name Lot / Concession No.		
Town / City or Township / Country Province 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	
JEAN-MARIE COULTURE	OWNER	
Signature	Telephone No.	Date (dd-mm-yyyy)
<i>JM Coulture</i>	613-834-3200	5/10/2011



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 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.

N/A

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

ABC FIRE EXTINGUISHERS

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.

FUSIBLE LINKS, MELTS IF FIRE UNDER PROPANE TANK, SHUT OFF PROPANE SUPPLIES.

Maintenance and testing schedule for fire protection controls and devices.

EVERY YEAR

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) JEAN-MARIE COUTURE	Official Title OWNER
Signature <i>JM Couture</i>	Telephone No. 613-834-3200
	Date (dd-mm-yyyy) 5/10/2011



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 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 <i>JEAN-MARIE COULTURE</i>	For Office Use - Party No.	Name <i>GINETTE COULTURE</i>	For Office Use - Party No.
Official Title <i>OWNER</i>		Official Title <i>CASHIER</i>	
Telephone No. <i>613-833-3067</i>	Fax No. <i>N/A</i>	Cell No. <i>613-833-3067</i>	Fax No.
E-mail		E-mail	
Role and responsibilities in emergency <i>FIRST RESPONDER</i>		Role and responsibilities in emergency <i>Call 911</i>	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name <i>GATHY COULTURE</i>	For Office Use - Party No.	Name	For Office Use - Party No.
Official Title <i>BACK UP EMERGENCY</i>		Official Title	
Telephone No. <i>613-446-0116</i>	Fax No.	Telephone No.	Fax No.
E-mail		E-mail	
Role and responsibilities in emergency " "		Role and responsibilities in emergency	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name <i>JOHN de HOOGHE</i>	For Office Use - Party No.	Name <i>PAUL FINNIS</i>	For Office Use - Party No.
Official Title <i>CHIEF</i>		Official Title <i>MANAGER</i>	
Telephone No. <i>911</i>	<i>613-232-1551</i>	Telephone No. <i>613-822-7400</i>	Fax No. <i>613-822-6305</i>
E-mail		E-mail	
Role and responsibilities in emergency <i>DIRECT FIRE PERSONNEL</i>		Role and responsibilities in emergency	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name <i>JOHN GALLISSIE</i>	For Office Use - Party No.	Name <i>BOB MONETTE</i>	
Official Title <i>ASSISTANT DIVISION CHIEF</i>		Official Title <i>MUNICIPAL COUNSELOR</i>	
Telephone No. <i>911</i>	Fax No. <i>613-232-1551</i>	Telephone No. <i>613-580-2471</i>	Fax No. <i>613-580-2511</i>
E-mail		E-mail	
Role and responsibilities in emergency " "		Municipality <i>OTTAWA</i>	

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) <i>JEAN-MARIE COULTURE</i>	Official Title <i>OWNER</i>
Signature <i>J. Coulture</i>	Telephone No. <i>613-834-3200</i> Date (dd-mm-yyyy) <i>5/10/2011</i>



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 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.

SEE ATTACHED ERAP

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) <i>JEAN-MARIE COUTURE</i>	Official Title <i>OWNER</i>
Signature <i>J. Couture</i>	Telephone No. <i>613-834-3200</i>
	Date (dd-mm-yyyy) <i>5/10/2011</i>



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 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) <i>JUNE 1993</i>	Print Name of Training Provider: <i>CO-OP — EMBRUN-ONTARIO</i>
	Print Name of Instructor: <i>LAURIER DUPELLE</i>
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)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider: <i>N/A</i>
	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)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider: <i>N/A</i>
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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) <i>JEAN-MARIE COLTURE</i>	Official Title <i>OWNER</i>
Signature <i>J. Colture</i>	Telephone No. <i>613-834-3300</i>
	Date (dd-mm-yyyy) <i>5/10/2011</i>



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 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) <i>30/09/2012</i>	Print Name of Training Provider: <i>STANLEY SUPERIOR PROPANE</i>
	Print Name of Instructor: <i>MOE BOURCIER</i>
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) <i>12/04/2011</i>	Print Name of Training Provider: <i>JEAN-MARIE COUTURE</i>
	Print Name of Instructor: <i>JEAN-MARIE COUTURE</i>
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)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider: <i>N/A</i>
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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) <i>JEAN-MARIE COUTURE</i>	Official Title <i>OWNER</i>
Signature <i>J. Couture</i>	Telephone No. <i>613-834-3200</i>
	Date (dd-mm-yyyy) <i>5/10/2011</i>



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

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

5. Emergency Response Communications Plan

Warnings and Actions

Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate).

ERAP WILL BE INITIATED BY OWNER FIRST RESPONDER, TO NOTIFY EMPLOYEE, CONTACT AUTHORITIES AT "911" AND SURROUNDING BUSINESSES LISTED IN ERAP A.S.A.P.

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).

WHEN EVACUATION OF PREMISES IS INITIATED BY LICENCE HOLDER, I WILL MEET EMPLOYEE AT CERTAIN LOCATION AT CHURCH PARKING LOT ACROSS STREET.

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).

CALL 911, CALL ENVIRONMENT CANADA, TSSA AND ADVISE IF FIRE IS AFFECTING PROPANE TANK AND CONFIRM 911 CALL WITH WIFE

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

THE SITE IS ACCESSIBLE AT ALL TIME AND ANY LOCKS ON GATE CAN BE KEPT OPEN

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

WILL KEEP AUTHORITIES UP TO DATE WITH ANY SITE CHANGE

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

FIRST RESPONDER 10 TO 15 MINUTES

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)	JEAN-MARIE COUURE		Official Title	OWNER
Signature			Telephone No.	613-834-3200
			Date (dd-mm-yyyy)	5/10/2011



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 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)? LOCK CABINET | <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? LOG BOOK | <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? YES NOTIFIED DISTRIBUTOR | <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) | | <u>30 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>[REDACTED]</u> |

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) JEAN-MARIE COULTURE	Official Title OWNER
Signature <i>J. Coulture</i>	Telephone No. 613-834-3200
	Date (dd-mm-yyyy) 5/10/2011



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 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.

Local Fire Services Name	Print name Assistant Division Chief John Gillissie	Signature 	Date (dd-mm-yyyy) 06.10.2011
--------------------------	--	---------------	---------------------------------

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) JEAN-MARIE COUURE	Official Title OWNER
Signature 	Telephone No. 613-834-3300 Date (dd-mm-yyyy) 5/10/2011



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

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) <i>30-08-2011</i>	Capacity of single largest propane storage vessel (USWG) <i>2000 USWG</i>
Tank setback coordinates. Indicate placement on the map.	
Front: <i>36.04</i>	Right side property line: <i>9.37 From East limit</i>
Rear: <i>19.20</i>	Left side property line: <i>19.20 From West limit</i>
GPS coordinates of single largest vessel: <i>45-28'20.81"N 75-31'16.61"W</i>	

OR "SEE SITE PLAN"

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) <i>JEAN-MARIE COULTURE</i>	Official Title <i>OWNER</i>	
Signature <i>JM Coulture</i>	Telephone No. <i>613-834-3200</i>	Date (dd-mm-yyyy) <i>5/10/2011</i>



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

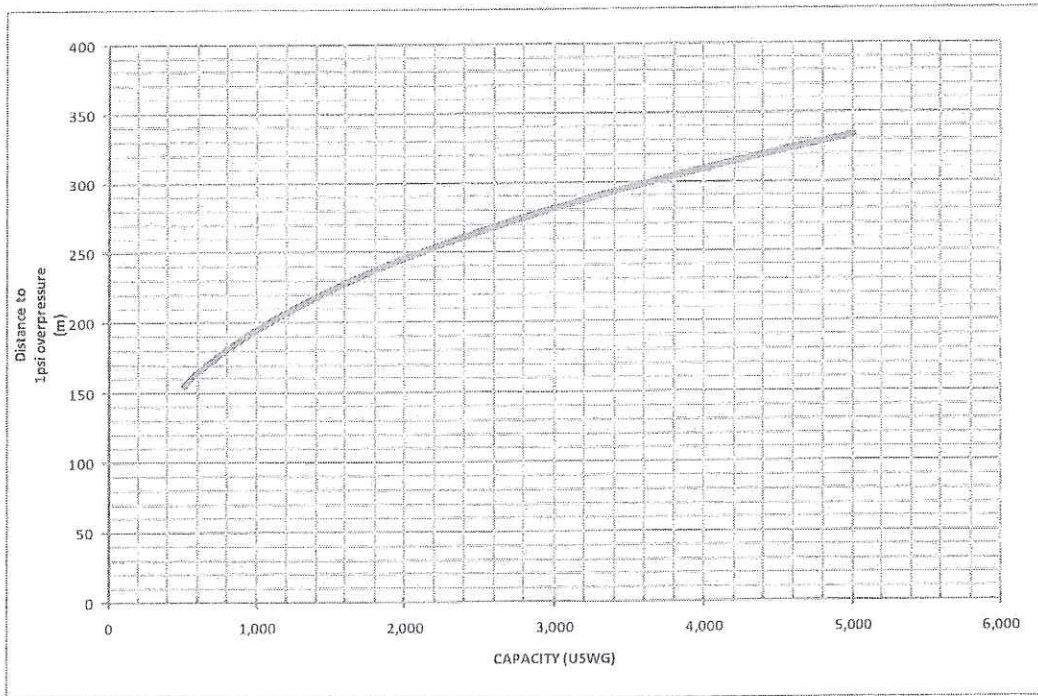
Table 1: Distance Table

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.

Name of person completing this form (please print) <i>JEAN-MARIE COUTURE</i>	Official Title <i>OWNER</i>
Signature <i>JM Couture</i>	Telephone No. <i>613-834-3200</i>
	Date (dd-mm-yyyy) <i>5/10/2011</i>



Technical Standards and Safety Authority
www.issa.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: <u>N/A</u> Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. [Redacted] Name: _____ Address: _____ City: _____ Province _____ Postal Code _____				X	<u>93</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>PHILIP LAI</u> Address: <u>2740 ST- JOSEPH BLVD.</u> City: <u>ORLEANS</u> Province <u>ONTARIO</u> Postal Code <u>K4C 1G5</u>				X	<u>21</u> m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: <u>N/A</u> 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: <u>ROYAL GARDENS SENIOR CITIZEN HOMES</u> <u>SEE DOCUMENT SHOWING INSTITUTIONS</u> Address: <u>2802 ST- JOSEPH BLVD</u> City: <u>ORLEANS</u> Province <u>ONTARIO</u> Postal Code <u>K4C 1G5</u>				X	<u>88</u> m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: <u>N/A</u> 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) <u>JEAN-MARIE COULTURE</u>	Official Title <u>OWNER</u>
Signature <u>JM Coulture</u>	Telephone No. <u>613-834-3200</u> Date (dd-mm-yyyy) <u>05/10/2011</u>



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	70	406
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity			406

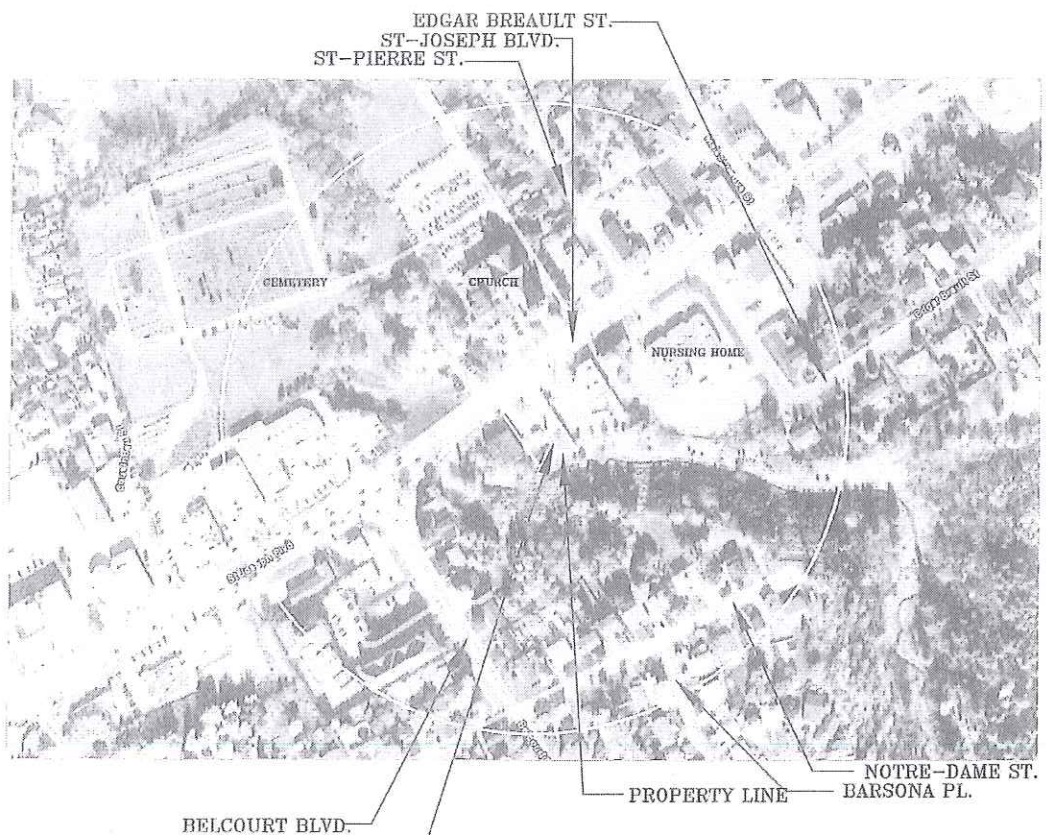
Tanks Stored On-site Not Connected for Use

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

Total Cylinder Capacity	406
Total Tank Capacity	0
Total Portable Capacity	406

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) JEAN-MARIE COUTURE	Official Title OWNER
Signature <i>JM Couture</i>	Telephone No. 613-834-3200
	Date (dd-mm-yyyy) 5/10/2011



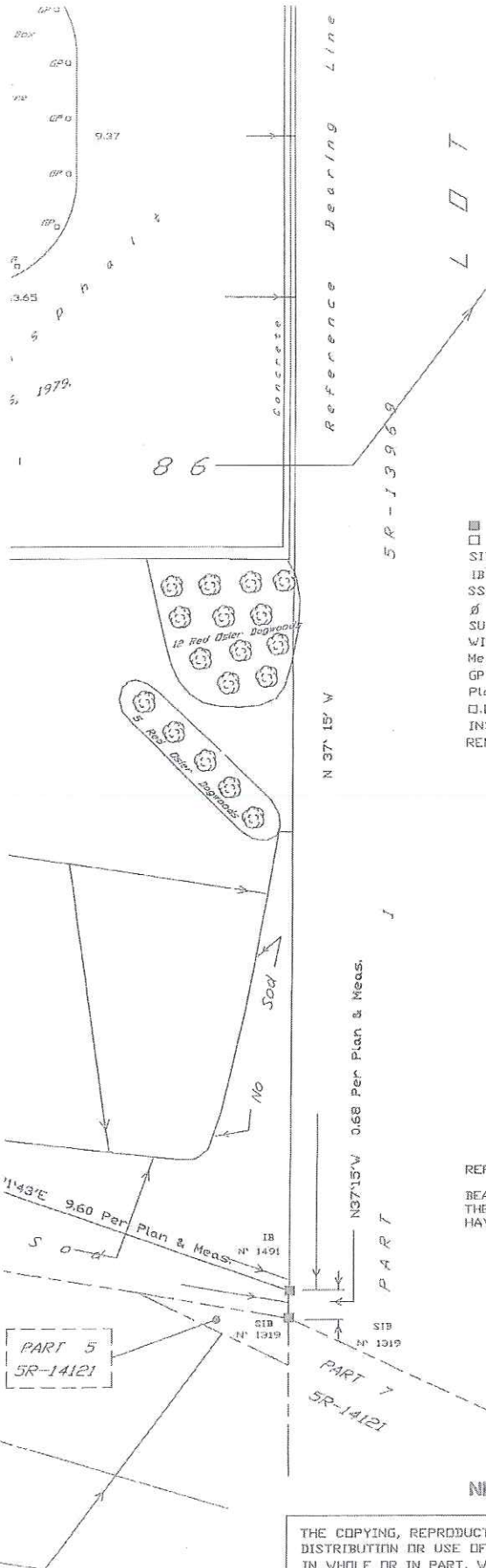
LOCATION: 2754 ST-JOSEPH BLVD.
 PREPARED: AUG 30, 2011

2000 USWG VERTICAL TANK
 TANK SETBACKS: 20.14 NORTH, 19.20 EAST, 26.04 SOUTH, 9.37 WEST
 RADIUS = 243.84m
 GPS COORDINATES: 45-28'20.81"N 75-31'16.61"W
 MUNICIPALITY: OTTAWA

*BOB MONETTE
 MUNICIPAL CONSELOR*

*613-580-2471
 FAX 613-580-2511*

- SENSITIVE INSTITUTIONS:
- 1344 BELCOURT - MANOIR BELCOURT MANOR (SENIOR CITIZEN HOME)
 - 2757 ST-JOSEPH BLVD - PAROISSE ST-JOSEPH D'ORLEANS (CHURCH)
 - 1145 ST-PIERRE STREET - GARDERIE A-2 DAY CARE (DAYCARE CENTER)
 - 2802 ST-JOSEPH BLVD. - ROYAL GARDENS (SENIOR CITIZEN HOME)
 - 2828 ST-JOSEPH BLVD. - LAURIN OPTOMETRY



LEGEND

■	DENOTES	SURVEY MONUMENT FOUND
□	DENOTES	SURVEY MONUMENT PLANTED
SIB	DENOTES	STANDARD IRON BAR (25mm X 120cm)
IB	DENOTES	IRON BAR (16mm X 60cm)
SSIB	DENOTES	SHORT STANDARD IRON BAR 25mm X 60cm)
Ø	DENOTES	ROUND OR DIAMETER
SU	DENOTES	SOURCE UNKNOWN
WIT.	DENOTES	WITNESS
Meas.	DENOTES	MEASURED
GP	DENOTES	METAL GUARD POST
Plan	DENOTES	PLAN 4R-8648
O.L.S.	DENOTES	ONTARIO LAND SURVEYOR
INST. N°	DENOTES	INSTRUMENT NUMBER
REM.	DENOTES	REMAINDER

REFERENCE BEARING:

BEARINGS ARE ASTRONOMIC AND ARE REFERRED TO THE EASTERLY LIMIT OF PART 2, PLAN 4R-8648 HAVING A BEARING OF N37°15'W.

NOTE: NOT FOR REGISTRATION PURPOSES

THE COPYING, REPRODUCTION, ALTERATION, DISTRIBUTION OR USE OF THIS SITE PLAN, IN WHOLE OR IN PART, WITHOUT THE EXPRESS WRITTEN PERMISSION OF DUTRISAC & JOHNSON INC., IS STRICTLY PROHIBITED.

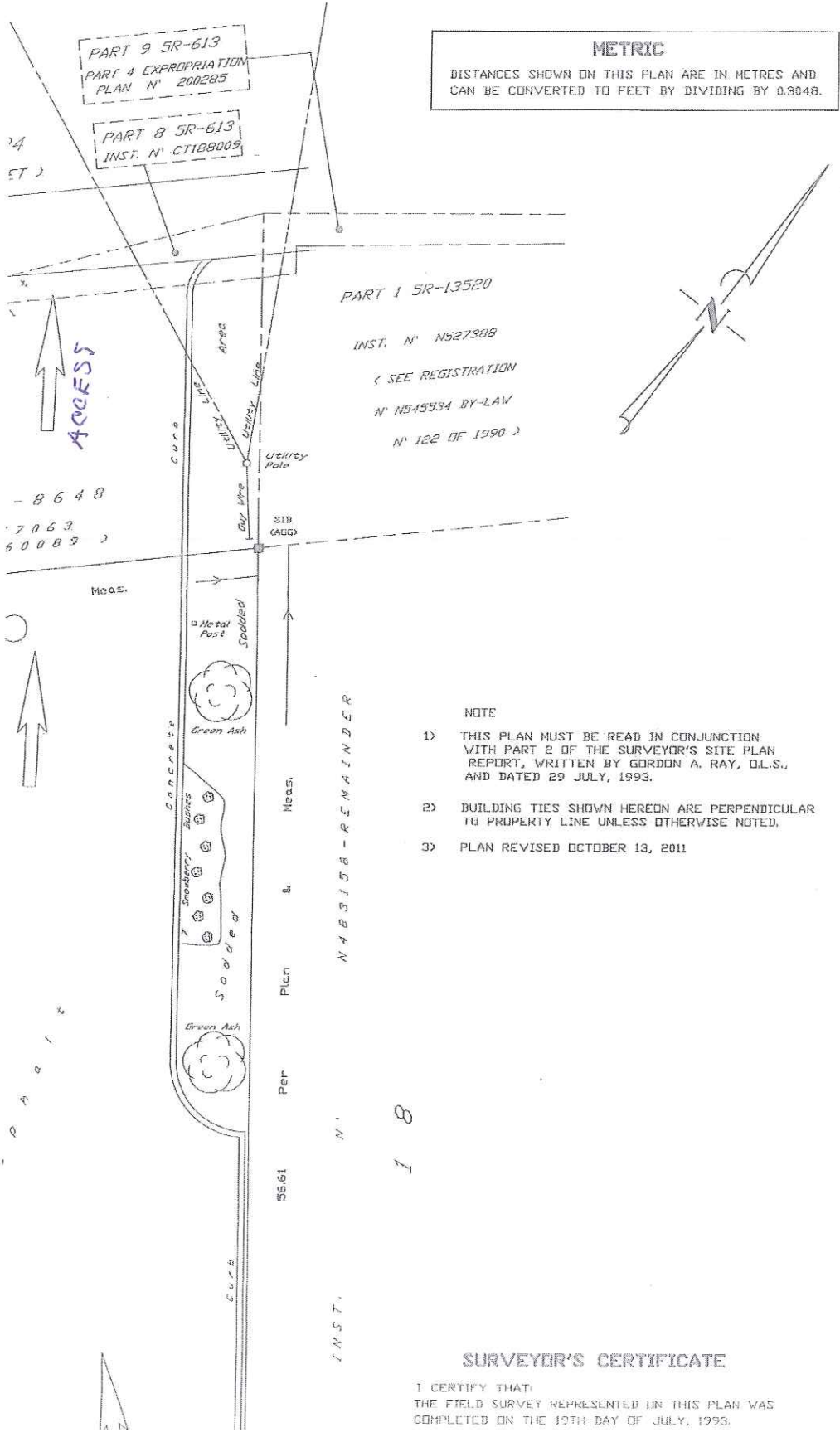
DUTRISAC & JOHNSON INC. GRANTS TO ORLEANS PROPANE CENTRE ("THE CLIENT"), THEIR SOLICITORS, MORTGAGEES, AND OTHER RELATED PARTIES, PERMISSION TO USE THE ORIGINAL SIGNED AND SEALED COPIES OF THIS SITE PLAN IN A TRANSACTION INVOLVING "THE CLIENT".

* This is not an original copy unless embossed with surveyor's seal.

DUTRISAC & JOHNSON INC.
ONTARIO LAND SURVEYORS

ROCKLAND
PHONE (613) 446-7101

CORNWALL
PHONE (613) 936-9292



METRIC

DISTANCES SHOWN ON THIS PLAN ARE IN METRES AND CAN BE CONVERTED TO FEET BY DIVIDING BY 0.3048.

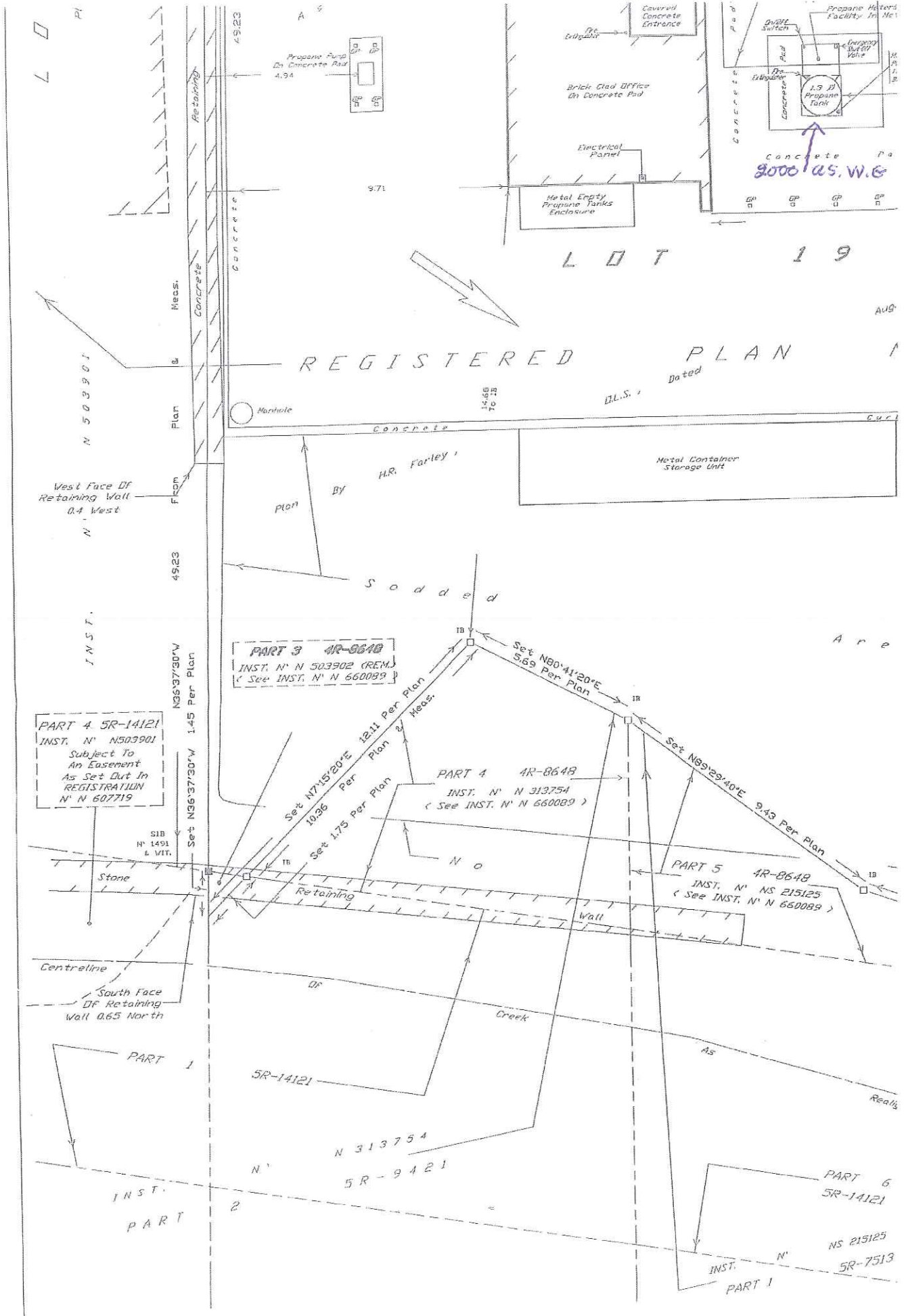
PART 1 5R-13520
INST. N° N527388
(SEE REGISTRATION
N° N545534 BY-LAW
N° 122 OF 1990)

NOTE

- 1) THIS PLAN MUST BE READ IN CONJUNCTION WITH PART 2 OF THE SURVEYOR'S SITE PLAN REPORT, WRITTEN BY GORDON A. RAY, O.L.S., AND DATED 29 JULY, 1993.
- 2) BUILDING TIES SHOWN HEREON ARE PERPENDICULAR TO PROPERTY LINE UNLESS OTHERWISE NOTED.
- 3) PLAN REVISED OCTOBER 13, 2011

SURVEYOR'S CERTIFICATE

I CERTIFY THAT:
THE FIELD SURVEY REPRESENTED ON THIS PLAN WAS
COMPLETED ON THE 19TH DAY OF JULY, 1993.



SITE PLAN OF

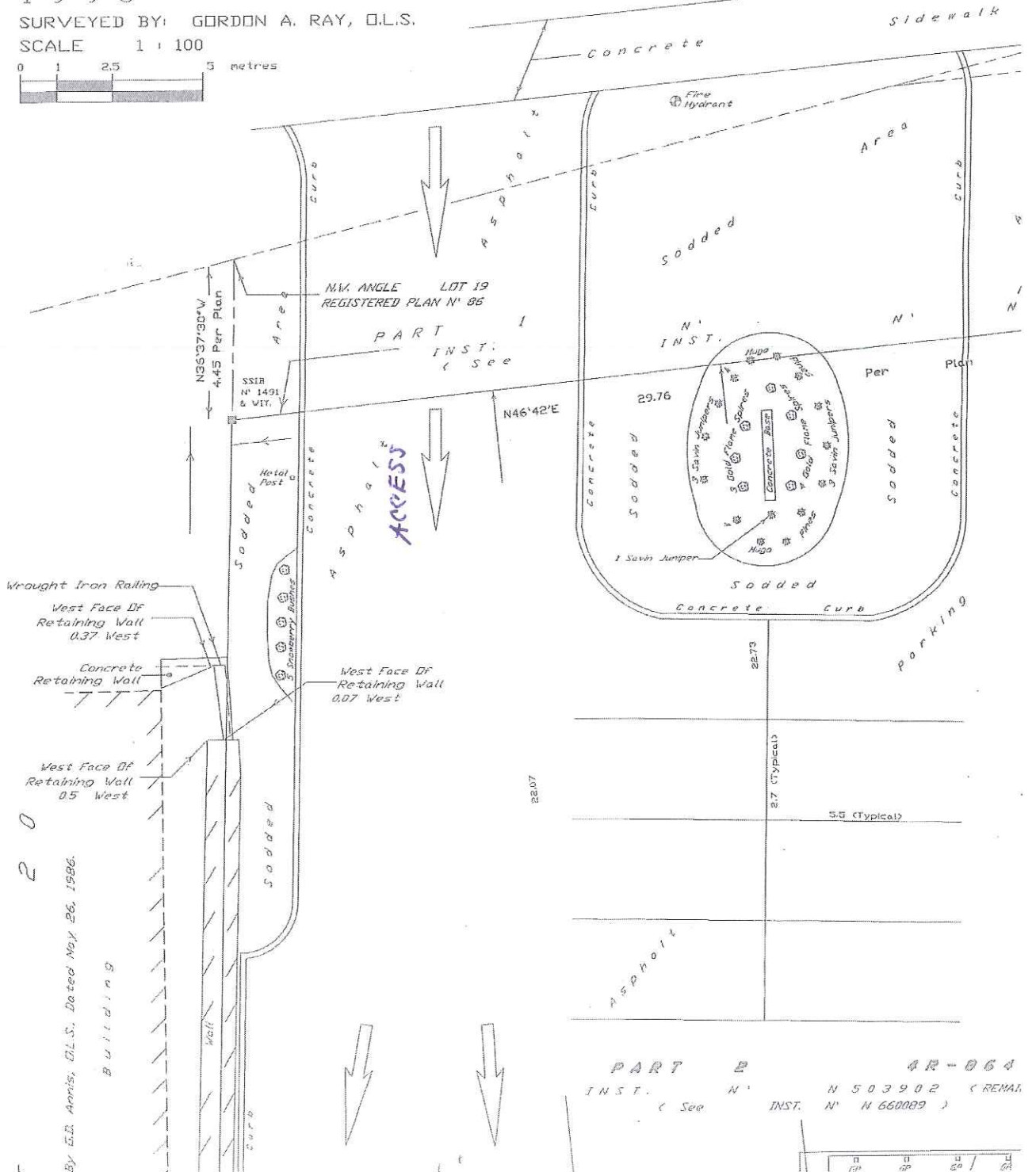
PART 1: PLAN OF
PARTS 2 AND 3, PLAN 4R-8648

IT BEING PART OF LOT 19 (SOUTH SIDE OF ST. JOSEPH BOULEVARD)
REGISTERED PLAN N° 86
FORMERLY IN THE TOWNSHIP OF GLOUCESTER, NOW IN THE
CITY OF GLOUCESTER
REGIONAL MUNICIPALITY OF OTTAWA-CARLETON
1993

SURVEYED BY: GORDON A. RAY, O.L.S.
SCALE 1 : 100



ST. JOSEPH BOULEVARD
REGIONAL ROAD N°
(FORMERLY OTTAWA)



20

By E.D. Annis, E.L.S., Dated May 26, 1986.

Building

PART B 4R-064
INST. N° N 503902 (REMAI
(See INST. N° N 660089)

