



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: 1.877.582.8772

Level 1 Risk and Safety Management Plan (RSMP)
 Technical Standards and Safety Act
 Propane Storage and Handling Regulation

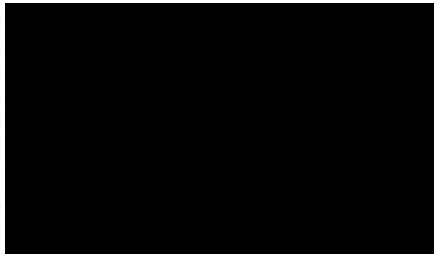
This Level 1 RSMP applies to: a facility with a total propane storage capacity of 5,000 USWG or less; or
 a facility with a fixed propane storage capacity of exactly 5,000 USWG and no more than 500 USWG of portable propane storage capacity on site.

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: 000076637802

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: W. O. STINSON & SON LTD. Ontario Corporation No., if applicable: 105743660

Operator Name (if different from above): _____

Telephone No. 613-822-7400 Fax No. 613-822-6305 E-mail Address jarmstrong@wostinson.com

Street No. 4726 Street Name, Lot / Concession No. BANK ST.

Town / City or Township / County OTTAWA Province ONT Postal Code K1T 3W7

Mailing address if different from above: _____

Street No. _____ Street Name, Lot / Concession No. _____

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

Information on Container Refill Centre or Filling Plant

Location of facility:

Street No. 2955 Street Name, Lot / Concession No. HIWAY 43 Nearest major intersection HWY 43 & CTY RD 19

Town / City or Township / County KEMPTVILLE Province _____ Postal Code K0G 1J0

Name of Licence Holder: W. O. STINSON & SON LTD.

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT): ERIC STINSON ROT type _____

Municipality (or municipalities if the facility or its hazard distance touches multiple borders): TOWNSHIP OF GRENVILLE

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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Name of Licence Holder	Print name: <u>W. O. STINSON & SON LTD.</u>	Signature:	Date (dd-mm-yyyy): <u>15/02/2011</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training	<u>ERIC STINSON</u>		<u>02/05/2011</u>



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SECTION A: GENERAL INFORMATION (cont'd)

Indicate the year the facility was established. 2003 Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment.

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

*Resubmitted
May 25/11
by courier*

	PSIG	Serial Number
Tank 1:	<u>250 PSI @ 115 F</u>	<u>26-02</u>
Tank 2:	<u>NA</u>	_____
Tank 3:	<u>NA</u>	_____

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: 10 Mobile: n/a



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Name of person completing this form (please print) <u>JOHN ARMSTRONG</u>		Official Title <u>GENERAL MANAGER</u>	
Signature <i>[Signature]</i>		Telephone No. <u>613-822-7400</u>	Date (dd-mm-yyyy) <u>02/05/11</u>



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SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

Name of Propane Supplier(s) <i>W.O. STINSON & SON LTD</i>		For Office Use - Party No.	
Street No. <i>7</i>	Street Name Lot / Concession No. <i>VAN JUMAR DR</i>		
Town / City or Township / Country <i>ARNPRIOR</i>		Province <i>ON</i>	Postal Code <i>K7S 3G8</i>
Telephone No. <i>613-623-4207</i>	Fax No. <i>613-623-0315</i>	Contact Name <i>RICK RYAN</i>	
E-mail <i>rryan@wostinson.com</i>			

Name of Propane Transporter. If same as above, please check box. <input checked="" type="checkbox"/>		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	
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.

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Signature 	Telephone No. <i>613-822-7400</i>	Date (dd-mm-yyyy) <i>02/05/11</i>



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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.

3 UNDERGROUND TANKS FOR FUEL, 75000, 60000, 60000 (unleaded, diesel, ^{platinum} & unleaded)
5 ABOVEGROUND TANKS, 4540, 2200, 4540, 2200 2200 (F/O, GOLD, COLORED, KEROSENE, STOVE)

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

ABC FIRE EXTINGUISHER

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 - A MECHANICAL FUSIBLE LINK IS A DEVICE CONSISTING OF TWO STRIPS OF METAL SOLDERED TOGETHER WITH A FUSIBLE ALLOY THAT IS DESIGNED TO MELT AT A SPECIFIC TEMPERATURE, THUS ALLOWING THE TWO PIECES TO SEPARATE, STOPPING THE FLOW OF PRODUCT.

Maintenance and testing schedule for fire protection controls and devices.

NA

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Signature 	Telephone No. 613-822-7400
	Date (dd-mm-yyyy) 02/05/11



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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 <i>CARRIE RICHARD</i>	For Office Use - Party No.	Name <i>CARRIE RICHARD</i>	For Office Use - Party No.
Official Title <i>SITE MANAGER</i>		Official Title <i>SITE MANAGER</i>	
Telephone No. <i>613-258-1826</i>	Fax No. <i>613-258-0239</i>	Cell No. <i>613-777-8787</i>	Fax No. <i>613-258-0239</i>
E-mail <i>crichard@wostinson.com</i>		E-mail <i>crichard@wostinson.com</i>	
Role and responsibilities in emergency <i>SITE MANAGER / FIRST RESPONDER</i>		Role and responsibilities in emergency <i>SITE MANAGER / FIRST RESPONDER</i>	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name <i>CAMERON MOREHOUSE</i>	For Office Use - Party No.	Name <i>JOHN ARMSTRONG</i>	For Office Use - Party No.
Official Title <i>SALES REPRESENTATIVE</i>		Official Title <i>GENERAL MANAGER</i>	
Telephone No. <i>613-614-9047</i>	Fax No. <i>613-258-0239</i>	Telephone No. <i>613-822-7400</i>	Fax No. <i>613-822-6305</i>
E-mail <i>cmorehouse@wostinson.com</i>		E-mail <i>jarmstrong@wostinson.com</i>	
Role and responsibilities in emergency <i>EVACUATION WARDEN</i>		Role and responsibilities in emergency <i>COMPANY SPOKESPERSON / TECHNICAL DIRECTOR</i>	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name <i>ELIZABETH GREENBERG</i>	For Office Use - Party No.	Name <i>RICK RYAN</i>	For Office Use - Party No.
Official Title <i>FIRE PREVENTION OFFICER</i>		Official Title <i>SITE MANAGER - ARMURIOR</i>	
Telephone No. <i>613-258-2438</i>	Fax No. <i>613-258-1031</i>	Telephone No. <i>613-623-4207</i>	Fax No. <i>613-623-0315</i>
E-mail <i>egreenberg@northgreenville.on.ca</i>		E-mail <i>rryan@wostinson.com</i>	
Role and responsibilities in emergency <i>LIASE W INCIDENT COMMAND</i>		Role and responsibilities in emergency <i>ERAP LPG FIRST RESPONDER</i>	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name <i>TIM BOND</i>	For Office Use - Party No.	Name <i>CahL Pomerville</i>	For Office Use - Party No.
Official Title <i>FIRE CHIEF</i>		Official Title <i>Deputy Clerk</i>	
Telephone No. <i>(613)258-2438</i>	Fax No. <i>(613)258-1031</i>	Telephone No. <i>(613)258-9589</i>	Fax No. <i>(613)258-9620</i>
E-mail <i>fire@northgreenville.on.ca</i>		E-mail <i>cahl.pomerville@northgreenville.on.ca</i>	
Role and responsibilities in emergency		Municipality <i>North Grenville</i>	

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Signature <i>[Signature]</i>	Telephone No. <i>613-822-7400</i>
	Date (dd-mm-yyyy) <i>02/05/01</i>



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

2. Additional Safety Measures

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

SEE ATTACHED ERAP - WILSON SEPT 2010

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Signature 		Telephone No. 613-822-7400	Date (dd-m-m-yyyy) 02/05/11



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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) 10/09/2010	Print Name of Training Provider: W.O. STANSON & SON LTD
	Print Name of Instructor: CARRIE RICHARDS
Training Date (dd-mm-yyyy) 10/09/2010	Print Name of Training Provider: W.O. STANSON & SON LTD
	Print Name of Instructor: John Armstrong
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) 10/09/2010	Print Name of Training Provider: W.O. STANSON & SON LTD
	Print Name of Instructor: CARRIE RICHARDS
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:

Specific training provided to certificate holders / persons with Records of Training

Training Date (dd-mm-yyyy) 10/09/2010	Print Name of Training Provider: W.O. STANSON & SON LTD
	Print Name of Instructor: CARRIE RICHARDS
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) <i>10/08/2011</i>	Print Name of Training Provider: <i>W.O. STINSON & SON LTD</i>
	Print Name of Instructor: <i>JOHN ARMSTRONG</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>10/08/2011</i>	Print Name of Training Provider: <i>W.O. STINSON & SON LTD</i>
	Print Name of Instructor: <i>CARRIE RICHARD</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) <i>10/08/2011</i>	Print Name of Training Provider: <i>W.O. STINSON & SON LTD</i>
	Print Name of Instructor: <i>CARRIE RICHARD</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:

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Signature 	Telephone No. <i>613-822-7400</i>
	Date (dd-mm-yyyy) <i>02/05/11</i>



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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).

ERAP WILL BE IMMEDIATELY INITIATED BY SITE MANAGER / FIRST RESPONDER TO NOTIFY STAFF BY PAGING SYSTEM, CONTACT AUTHORITIES @ 911, AND ATTEMPT TO CONTACT SURROUNDING BUSINESSES LISTED IN ERAP.

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).

ONCE EVACUATION OF THE PREMISES IS INITIATED THE EVACUATION WARDEN SHALL BRING AN UP TO DATE EMPLOYEE LIST WITH PHONE #S & COPIES OF THE ERAP, REFLECTIVE VEST & CELL PHONE TO THE "TSC." YARD, WHICH IS THE MEETING PLACE, AND THE SITE MANAGER TO MEET AT BRIDGE ON HWY 43

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).

IMMEDIATELY CALL 911, CALL HEAD OFFICE, CALL ERAP 1-800-265-0212 AND INITIATE ERP # 2-0010-338, CALL ENVIRONMENT CANADA & TSSA, AND ADVISE ALL IF FIRE IS AFFECTING PROPANE CYLINDER

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

LOOK FOR EMERGENCY RESPONSE PLAN ON BUILDING, OPEN AND INITIATE

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

WILL KEEP AUTHORITIES UP TO DATE WITH SITE CHANGES, REGULAR MEETINGS ON SITE

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

FIRST RESPONDER 30 TO 45 MINUTES (SEE ATTACHED)

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JOHN ARMSTRONG	GENERAL MANAGER	
Signature	Telephone No.	Date (dd-mm-yyyy)
	613-822-7400	02/05/11



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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 checked="" type="checkbox"/> |
| 2. Is there adequate night lighting at the site? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Are procedures in place that ensure access routes, aisles, storage area, filling areas and the grounds are kept clear from unwanted materials? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Are there procedures that capture and record the daily inspection of hoses and inspection requirements for filling systems and mechanical devices used in the transfer of propane? <i>See attached Daily Bulk Plant Inspection Form</i> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Are weighing systems validated for accuracy? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8. Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 9. Is the schedule of maintenance and testing activities retained on site? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

7. Water Supply

The propane licence holder should work with the local fire department to determine water supply capabilities that are available based on the propane facility's location.

- | | Yes | No |
|--|-------------------------------------|--------------------------|
| 1. Is a pressurized water system available at the propane facility site? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only) | | <u>75'</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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Signature <i>[Signature]</i>		Telephone No. <i>613-822-7400</i>	Date (dd-mm-yyyy) <i>02/05/11</i>



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

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

8. Licence holder and local Fire Services Review

To be completed by the Local Fire Services

Has the local fire service had an opportunity to review the Emergency Response and Preparedness Plan?

Yes

No

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

Fire services comments, if any:

INCLUDED IN FIRE SERVICE INFORMATION DOCUMENT ATTACHED

To be completed by the Licence Holder

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

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

LOCAL FIRE SERVICES

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

Print name

FPO ELIZABETH GREENBERG

Local Fire Services Name

Signature

FPO E.A. Greenberg

Date (dd-mm-yyyy)

27/04/2011

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Name of person completing this form (please print)

JOHN ARMSTRONG

Signature

[Handwritten Signature]

Official Title

GENERAL MANAGER

Telephone No.

613-822-7400

Date (dd-mm-yyyy)

02/05/11



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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:

*Resubmitted
May 25/11
by courier*

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)	Capacity of single largest propane storage vessel (USWG)
MAY 12, 2011	2000 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: 53 M (S)	Right side property line: 49 M (E)
Rear: 61 M (W)	Left side property line: 40 M (W)
GPS coordinates of single largest vessel: 45.028372 N 77.639579 W	

SEE SITE PLAN ATTACHED

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JOHN ARMSTRONG	GENERAL MANAGER	
Signature	Telephone No.	Date (dd-mm-yyyy)
<i>[Signature]</i>	613-822-7400	02/05/11



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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

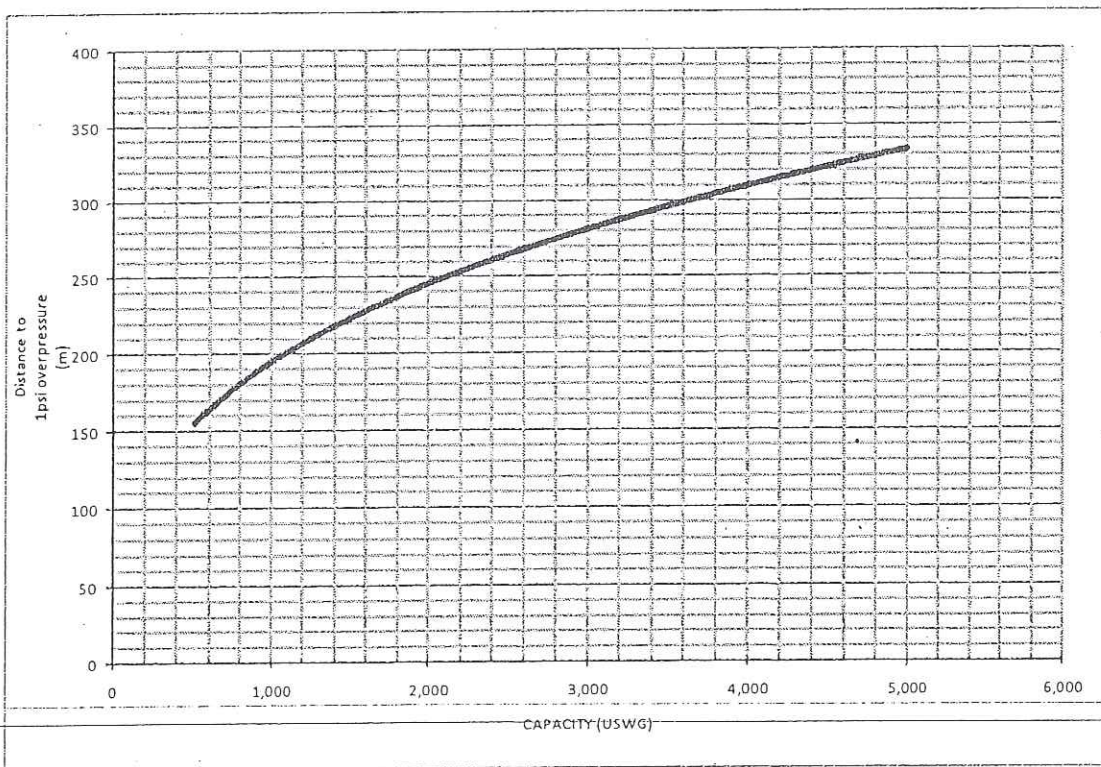
Table 1: Distance Table

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) JOHN ARMSTRONG		Official Title GENERAL MANAGER	
Signature <i>John Armstrong</i>		Telephone No. 613-822-7400	Date (dd-mm-yyyy) 02/05/11



Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
3300 Bloor Street West
Toronto Ontario M8X2X4
Fax: 416.231.4903
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SECTION C: SUBMISSIONS (cont'd)
Applicant must include a Facility Site Plan and Map of Surrounding Area

As an accompaniment to the Map of Surrounding Area, provide the following information about buildings and features present within the circle in Table 2.

Table 2: Buildings and Features

Buildings and Features Present within the Circle on the Map of the Surrounding Area AND Name and Address of Closest Building or Feature	* Number of Buildings and Features (mark with an "X")				Distance from Tank to Closest Building or Feature
	0	1	2-10	11+	
Industrial buildings or parks or golf courses Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. [REDACTED]			X		100 m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>KELLER WILLIAMS REALTY</u> Address: <u>2963 Hwy 43,</u> City: <u>KEMPTVILLE</u> Province <u>ONTARIO</u> Postal Code <u>K0G1G0</u>			X		45 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: <u>MADISON MONTESSORI ACADEMY</u> Address: <u>2965 Hwy 43,</u> City: <u>KEMPTVILLE</u> Province <u>ONTARIO</u> Postal Code <u>K0G1G0</u>		X			45 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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Name of person completing this form (please print) <u>JOHN ARMSTRONG</u>	Official Title <u>GENERAL MANAGER</u>
Signature 	Telephone No. <u>613-822-7400</u> Date (dd-mm-yyyy) <u>02/05/11</u>



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Level 1 Risk and Safety Management Plan (RSMP)
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SECTION C: SUBMISSIONS (cont'd)

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

*Resubmitted
May 25/11
by owner*

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	0	0
# 30	8.8	0	0
# 20	5.8	10	58
# 10	2.9	0	0
# 5	1.5	0	0
Total Cylinder Capacity			58

Tanks Stored On-site Not Connected for Use

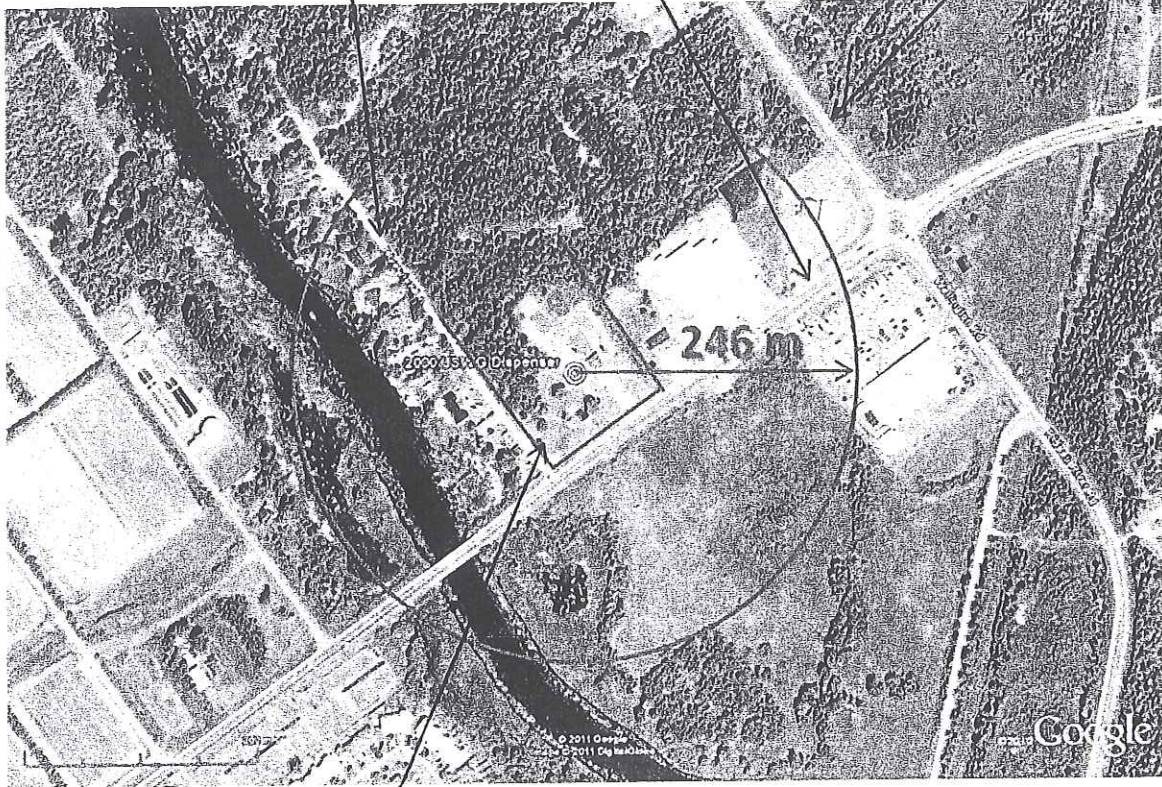
Tank Size In USWG	Quantity	Total Volume in USWG
Total Tank Capacity		

Total Cylinder Capacity	58
Total Tank Capacity	0
Total Portable Capacity	58

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	
JOHN ARMSTRONG	GENERAL MANAGER	
Signature	Telephone No.	Date (dd-mm-yyyy)
<i>[Signature]</i>	613-822-7400	02/05/11

Riverview Ln. County Rd. 43 Wellington Road



Property Line

Property Location:	2955 County Rd. 43 Kemptville, Ontario
Prepared:	May 12, 2011
Propane Tank Water Capacity:	2000 USWG horizontal tank
Tank setbacks:	61m north, 49m east, 53m south, 40m west
Radius:	246 m
GPS Coordinates:	45.028372 N 77.639579 W
Municipality:	Municipality of North Grenville
City Clerk:	Cahl Pominville
Address:	285 County Road #44 Kemptville, ON. K0G 1J0



Address 2955 Hwy 43
North Grenville, ON K0G 1J0,
Canada

Notes W. O. Stinson & Son Ltd.
Propane Dispenser at
Kemptville office

2000 USWG

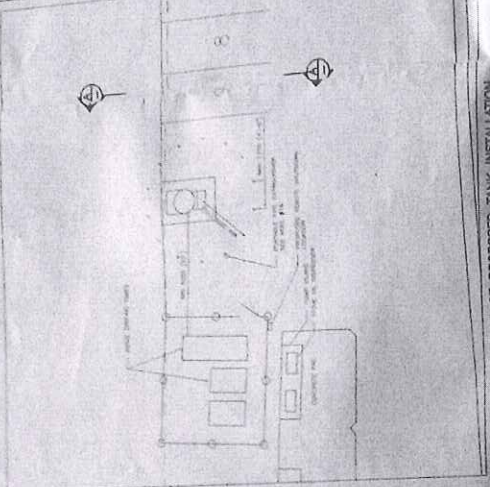


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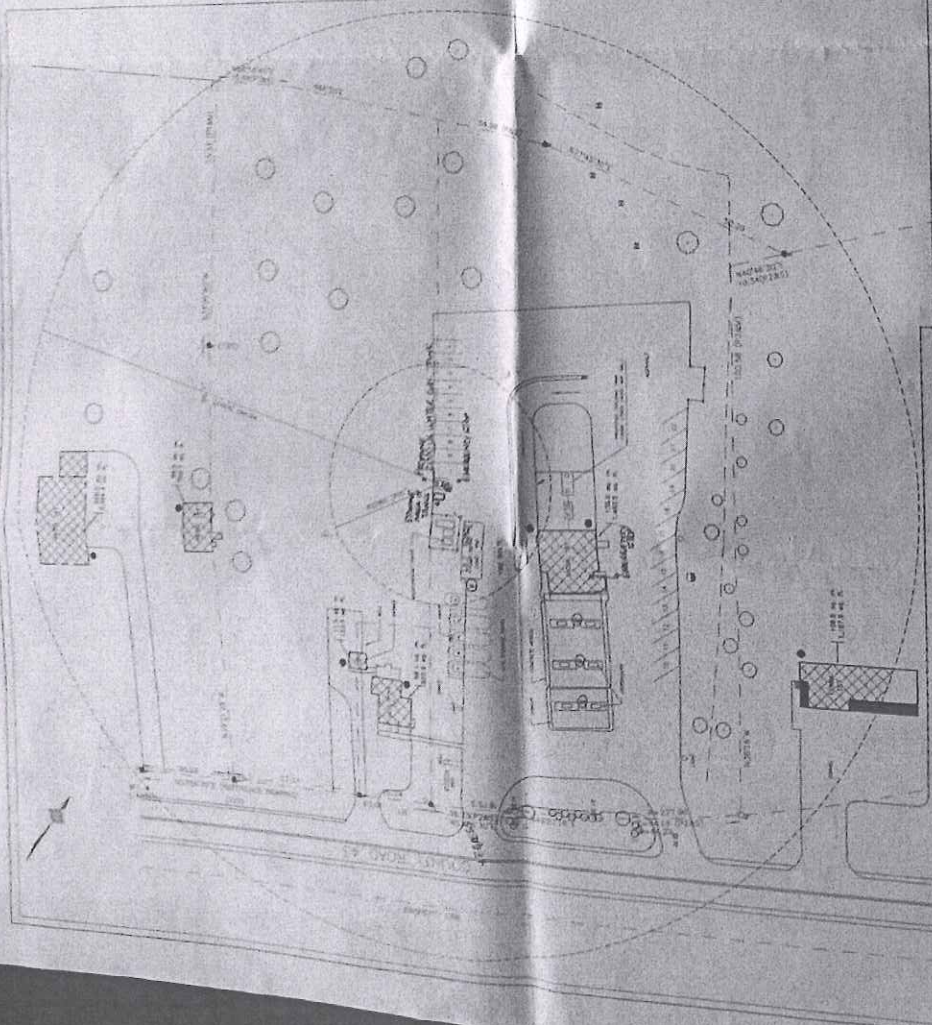
1. ALL WORK SHALL BE IN ACCORDANCE WITH THE CANADIAN NATIONAL BUILDING CODE (CNBC) AND THE CANADIAN NATIONAL FIRE CODE (CNFC).
2. THE PROPOSED TANK SHALL BE INSTALLED IN ACCORDANCE WITH THE CANADIAN NATIONAL BUILDING CODE (CNBC) AND THE CANADIAN NATIONAL FIRE CODE (CNFC).
3. THE TANK SHALL BE INSTALLED ON A CONCRETE FOUNDATION.
4. THE TANK SHALL BE INSTALLED ON A CONCRETE FOUNDATION.
5. THE TANK SHALL BE INSTALLED ON A CONCRETE FOUNDATION.
6. THE TANK SHALL BE INSTALLED ON A CONCRETE FOUNDATION.
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11. THE TANK SHALL BE INSTALLED ON A CONCRETE FOUNDATION.
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13. THE TANK SHALL BE INSTALLED ON A CONCRETE FOUNDATION.
14. THE TANK SHALL BE INSTALLED ON A CONCRETE FOUNDATION.
15. THE TANK SHALL BE INSTALLED ON A CONCRETE FOUNDATION.
16. THE TANK SHALL BE INSTALLED ON A CONCRETE FOUNDATION.
17. THE TANK SHALL BE INSTALLED ON A CONCRETE FOUNDATION.
18. THE TANK SHALL BE INSTALLED ON A CONCRETE FOUNDATION.
19. THE TANK SHALL BE INSTALLED ON A CONCRETE FOUNDATION.
20. THE TANK SHALL BE INSTALLED ON A CONCRETE FOUNDATION.

PROpane BRANCH STANDING NUMBER B STATISTICS

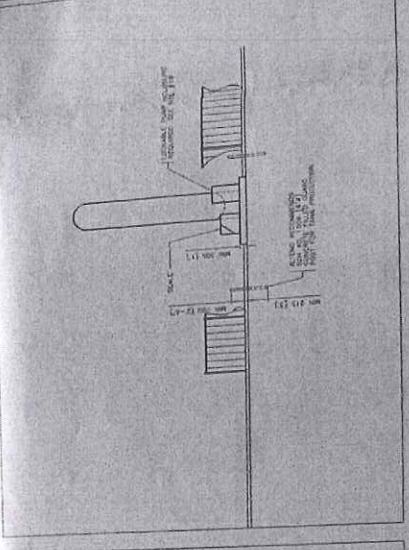
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2. 1000	2. 1000
3. 1000	3. 1000
4. 1000	4. 1000
5. 1000	5. 1000
6. 1000	6. 1000
7. 1000	7. 1000
8. 1000	8. 1000
9. 1000	9. 1000
10. 1000	10. 1000
11. 1000	11. 1000
12. 1000	12. 1000
13. 1000	13. 1000
14. 1000	14. 1000
15. 1000	15. 1000
16. 1000	16. 1000
17. 1000	17. 1000
18. 1000	18. 1000
19. 1000	19. 1000
20. 1000	20. 1000



PLAN OF PROPOSED TANK INSTALLATION
SCALE: 1/8" = 1'-0"



SITE PLAN
SCALE: 1/8" = 1'-0"



DETAIL ELEVATION OF TANK
SCALE: 1/8" = 1'-0"

1. 1000	1. 1000
2. 1000	2. 1000
3. 1000	3. 1000
4. 1000	4. 1000
5. 1000	5. 1000
6. 1000	6. 1000
7. 1000	7. 1000
8. 1000	8. 1000
9. 1000	9. 1000
10. 1000	10. 1000
11. 1000	11. 1000
12. 1000	12. 1000
13. 1000	13. 1000
14. 1000	14. 1000
15. 1000	15. 1000
16. 1000	16. 1000
17. 1000	17. 1000
18. 1000	18. 1000
19. 1000	19. 1000
20. 1000	20. 1000

W.O. STINSON & SON LTD



ALTENG Inc.
Alternative Energy Consulting
1000 University Ave. Suite 1000
Windsor, Ontario, Canada N9A 1A1
Tel: (519) 253-1144



PROPOSED 2000 USG PROPANE TANK C/W CYLINDER REFILL
Drawing No: 03020K
Scale: P-100

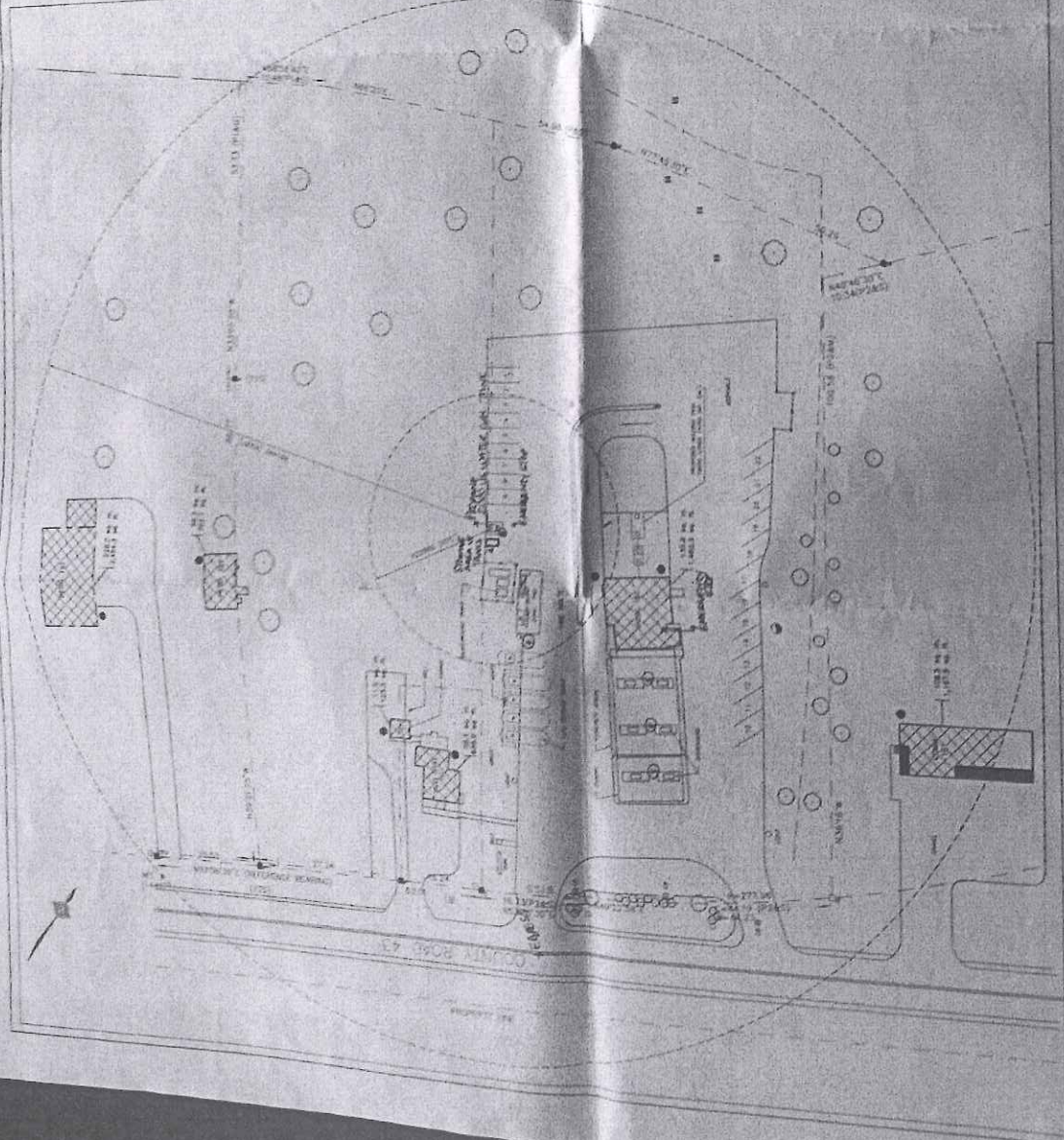
1. For 611-1111-1111

NOTES.

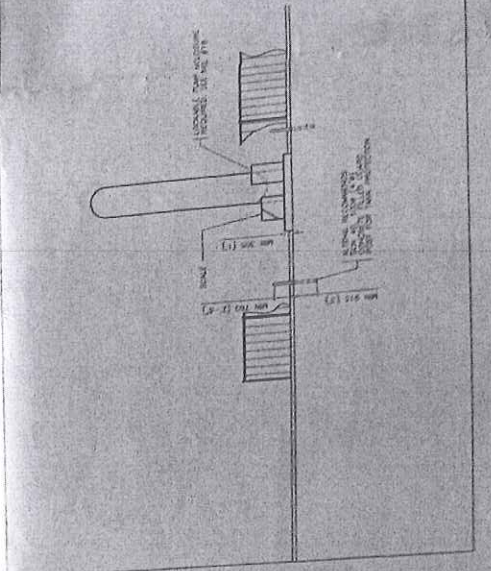
1. ALL WORK SHALL BE IN ACCORDANCE WITH THE LATEST EDITIONS OF THE NATIONAL ELECTRICAL CODE (NEC) AND THE NATIONAL FIRE ALARM AND SIGNAL CODE (NFPA 72).
2. ALL MATERIALS SHALL BE APPROVED BY THE LOCAL INSPECTOR.
3. ALL WORK SHALL BE COMPLETED WITHIN THE SPECIFIED TIME FRAME.
4. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS.
5. THE CONTRACTOR SHALL MAINTAIN ACCESS TO ALL ADJACENT PROPERTIES AT ALL TIMES.
6. ALL UTILITIES SHALL BE LOCATED AND MARKED PRIOR TO ANY EXCAVATION WORK.
7. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING UTILITIES AND STRUCTURES.
8. ALL WORK SHALL BE COMPLETED IN ACCORDANCE WITH THE LOCAL INSPECTOR'S REQUIREMENTS.
9. THE CONTRACTOR SHALL MAINTAIN A SAFE WORKING ENVIRONMENT AT ALL TIMES.
10. ALL MATERIALS SHALL BE STORED PROPERLY ON THE JOB SITE.
11. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL ADJACENT PROPERTIES.
12. ALL WORK SHALL BE COMPLETED WITHIN THE SPECIFIED TIME FRAME.
13. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS.
14. THE CONTRACTOR SHALL MAINTAIN ACCESS TO ALL ADJACENT PROPERTIES AT ALL TIMES.
15. ALL UTILITIES SHALL BE LOCATED AND MARKED PRIOR TO ANY EXCAVATION WORK.
16. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING UTILITIES AND STRUCTURES.
17. ALL WORK SHALL BE COMPLETED IN ACCORDANCE WITH THE LOCAL INSPECTOR'S REQUIREMENTS.
18. THE CONTRACTOR SHALL MAINTAIN A SAFE WORKING ENVIRONMENT AT ALL TIMES.
19. ALL MATERIALS SHALL BE STORED PROPERLY ON THE JOB SITE.
20. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL ADJACENT PROPERTIES.



PLAN OF PROPOSED TANK INSTALLATION
SCALE: 1/8" = 1'-0"



SITE PLAN
SCALE: 1/8" = 1'-0"



DETAIL ELEVATION OF TANK
SCALE: 1/8" = 1'-0"

PROPANE BRANCH 5
WATER, SEWER, GAS, AND
ELECTRICITY SHALL BE
INSTALLED IN ACCORDANCE
WITH THE LATEST EDITIONS
OF THE NATIONAL ELECTRICAL
CODE (NEC) AND THE NATIONAL
FIRE ALARM AND SIGNAL CODE
(NFPA 72).

NO.	DATE	BY	REVISION
1	08/17/20	J.S.	ISSUED FOR PERMIT
2	08/17/20	J.S.	ISSUED FOR PERMIT

W.O.



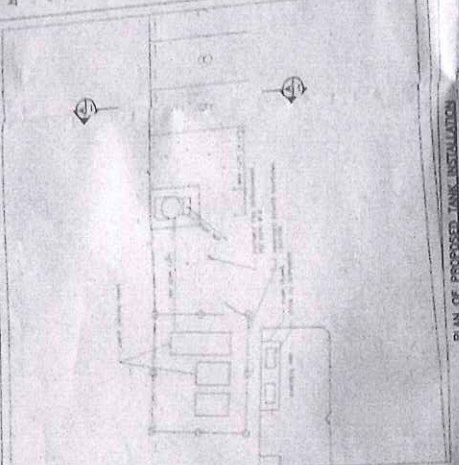
W.O. STINSON
3447 HUNTER
MEMPHIS, TN
PROPOSED
TANK C/A
P-100



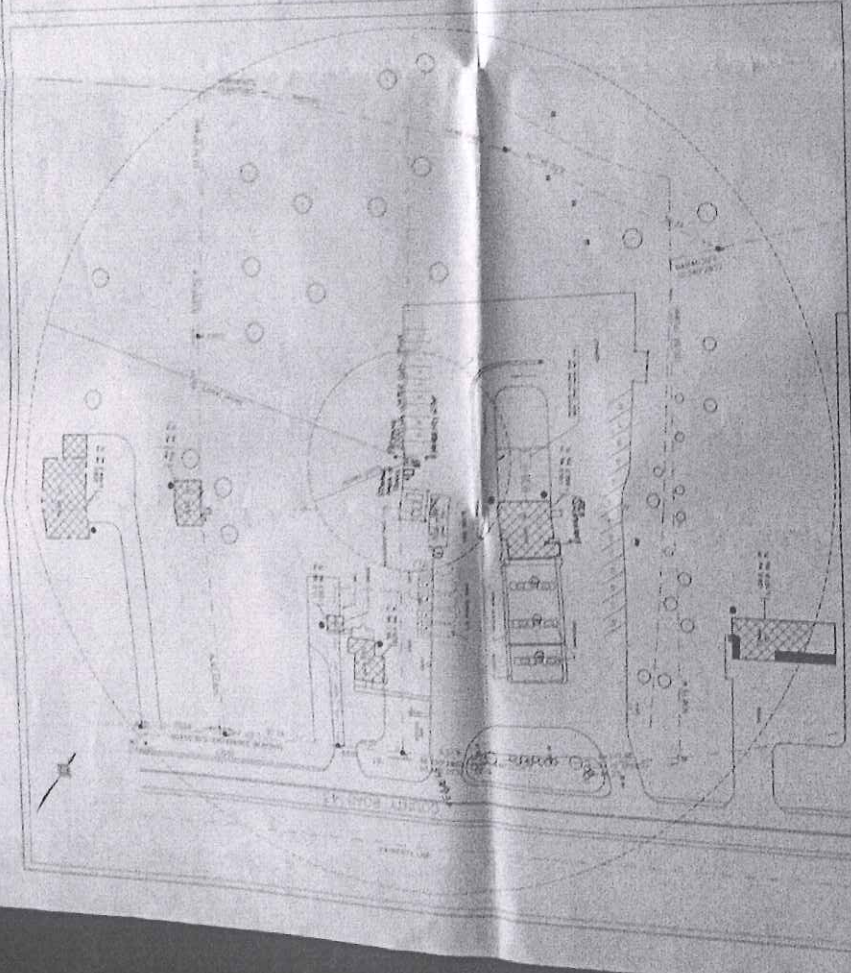
① TAG ATTACHMENTS

NOTES

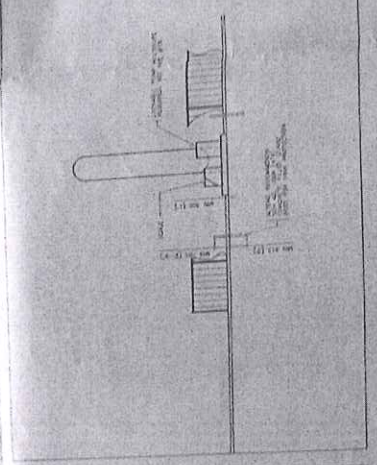
1. THE PROPOSED TANK INSTALLATION IS TO BE LOCATED AT THE CORNER OF THE EXISTING BUILDING AND THE ADJACENT DRIVEWAY.
2. THE TANK SHALL BE CONSTRUCTED OF 12mm THICK GALVANIZED STEEL SHEET PILING WITH A MINIMUM WALL THICKNESS OF 10mm.
3. THE TANK SHALL BE SUPPORTED ON A CONCRETE FOUNDATION WHICH SHALL BE 150mm THICK AND 1.5m WIDE.
4. THE TANK SHALL BE PROVIDED WITH A 150mm DIA. VENT PIPE TO THE ROOF OF THE BUILDING.
5. THE TANK SHALL BE PROVIDED WITH A 150mm DIA. FILL PIPE TO THE ROOF OF THE BUILDING.
6. THE TANK SHALL BE PROVIDED WITH A 150mm DIA. DRAIN PIPE TO THE GROUND LEVEL.
7. THE TANK SHALL BE PROVIDED WITH A 150mm DIA. CLEAN OUT PIPE TO THE GROUND LEVEL.
8. THE TANK SHALL BE PROVIDED WITH A 150mm DIA. INSPECTION MANHOLE TO THE GROUND LEVEL.
9. THE TANK SHALL BE PROVIDED WITH A 150mm DIA. LIFT LIFT TO THE GROUND LEVEL.
10. THE TANK SHALL BE PROVIDED WITH A 150mm DIA. LIFT LIFT TO THE GROUND LEVEL.



PLAN OF PROPOSED TANK INSTALLATION



SITE PLAN
FOR APPROVAL



DETAIL ELEVATION OF TANK

MOVING SERVICES LIMITED & SERVICES

1. THE PROPOSED TANK SHALL BE CONSTRUCTED OF 12mm THICK GALVANIZED STEEL SHEET PILING WITH A MINIMUM WALL THICKNESS OF 10mm.

2. THE TANK SHALL BE SUPPORTED ON A CONCRETE FOUNDATION WHICH SHALL BE 150mm THICK AND 1.5m WIDE.

3. THE TANK SHALL BE PROVIDED WITH A 150mm DIA. VENT PIPE TO THE ROOF OF THE BUILDING.

4. THE TANK SHALL BE PROVIDED WITH A 150mm DIA. FILL PIPE TO THE ROOF OF THE BUILDING.

5. THE TANK SHALL BE PROVIDED WITH A 150mm DIA. DRAIN PIPE TO THE GROUND LEVEL.

6. THE TANK SHALL BE PROVIDED WITH A 150mm DIA. CLEAN OUT PIPE TO THE GROUND LEVEL.

7. THE TANK SHALL BE PROVIDED WITH A 150mm DIA. INSPECTION MANHOLE TO THE GROUND LEVEL.

8. THE TANK SHALL BE PROVIDED WITH A 150mm DIA. LIFT LIFT TO THE GROUND LEVEL.

9. THE TANK SHALL BE PROVIDED WITH A 150mm DIA. LIFT LIFT TO THE GROUND LEVEL.

NO.	DATE	DESCRIPTION
1	10/10/10	ISSUED FOR APPROVAL
2	10/10/10	ISSUED FOR APPROVAL
3	10/10/10	ISSUED FOR APPROVAL

W. O. STINSON & SON LTD

ALTENG Inc.
Alternative Energy Consulting

PROJECT NO.	P-100
PROJECT NAME	PROPOSED 2000 LITRE PROPANE TANK ON CHUCKER BELL
CLIENT	ALTENG INC.
DATE	10/10/10
SCALE	AS SHOWN
DESIGNED BY	ALTENG INC.
CHECKED BY	ALTENG INC.
APPROVED BY	ALTENG INC.
DATE	10/10/10

