



Technical Standards and Safety Authority  
 www.tssa.org  
 14th Floor - Centre Tower  
 3300 Bloor Street West  
 Toronto Ontario M8X 2X4  
 Fax: 416.231.4903  
 Customer Service: 1.877.682.8772

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

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

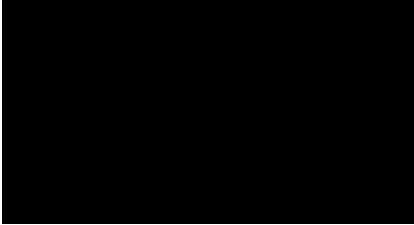
Failure to fully complete this form may result in rejection.  
 Making a false statement may result in a fine or prosecution under the Technical Standards and Safety Act

Licence Number 000076639329

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 1922208 Ont Inc. Ontario Corporation No., if applicable

Operator Name (if different from above) R. M. Auto

Telephone No. 416-286-4338 Fax No. N/A E-mail N/A

Street No. 441B Street Name / 911 Number / Address, if applicable Kingston Road

Town / City or Township / County Scarborough Province ONT Postal Code M1E 2N4

Mailing address if different from above.

Street No. Same Street Name / 911 Number / Address, if applicable Same

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

**Information on Container Refill Centre or Filling Plant**

Location of facility.

Street No. 4415 Street Name / 911 Number / Address, if applicable Kingston Road Nearest Major Intersection KINGSTON & LAWRENCE

Town / City or Township / County Scarborough Province ONT Postal Code M1E 2N4

Name of Licence Holder R.M. Auto Repair Centre

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

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

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.

Print name	Signature	Date (dd-mm-yyyy)
Name of Licence Holder <u>Maqbool Malik on behalf of R.M. Auto Repair Centre</u>	<u>M. A. Malik</u>	<u>17/05/2011</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training <u>Maqbool Malik</u>		



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SECTION A: GENERAL INFORMATION (cont'd)

Indicate the year the facility was established.  
1978

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

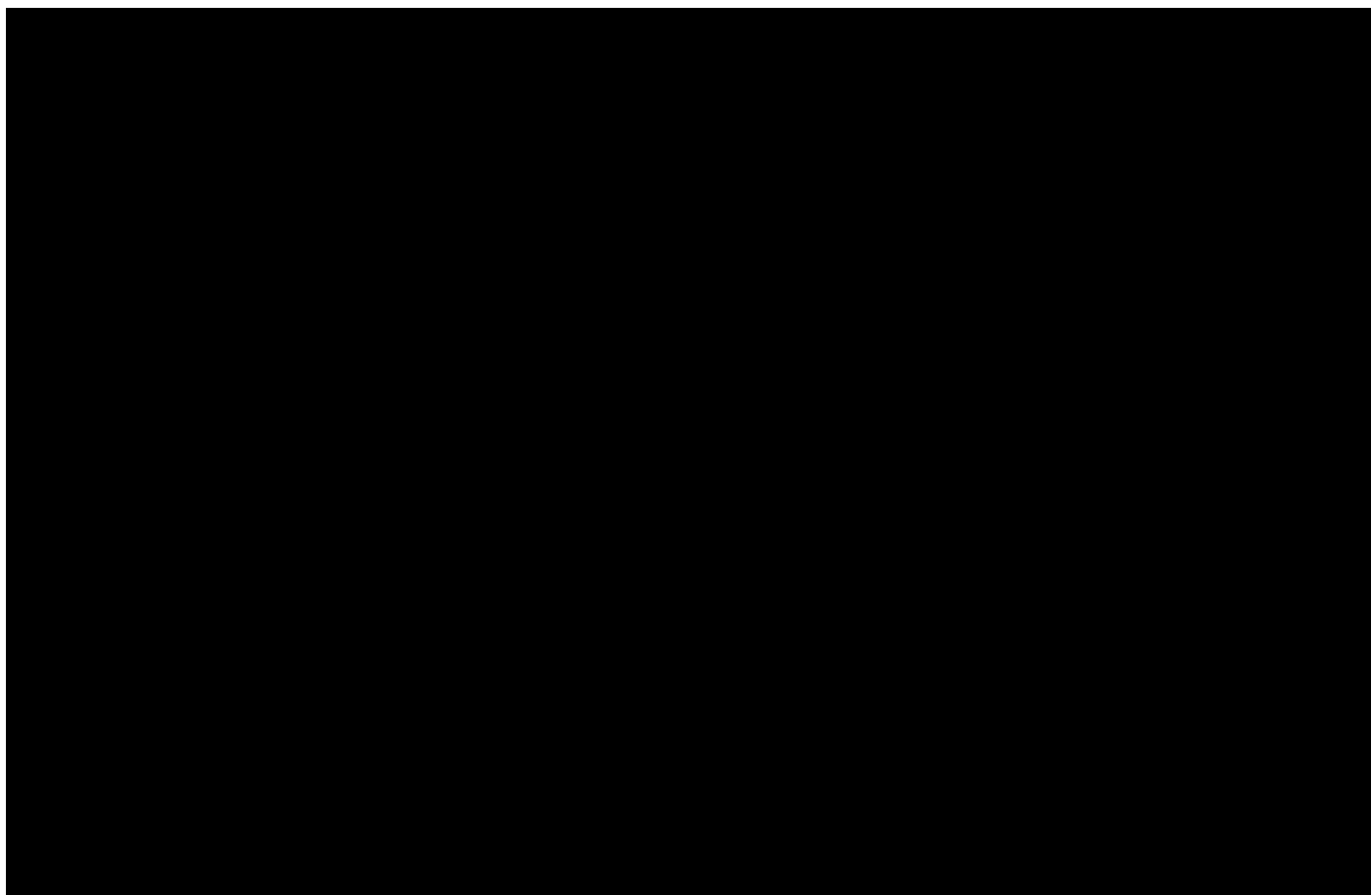
2014 - change of steel

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

	PSIG	Serial Number
Tank1:	250 PSIG	125-14
Tank2:		
Tank3:		

Enter capacity of propane in USWG, fixed, portable, and mobile, and provide detailed inventory that includes the number of tank/vessel for each type (fixed, portable, and mobile) and the capacity of each tank/vessel, on a separate document.

Fixed: 2000 USWG      Portable: 280 USWG      Mobile: 0



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Name of person completing this form (please print) Maqbool Malik	Official Title President
Signature <i>Maqbool Malik</i>	Telephone No. 416-286-4338
	Date (dd-mm-yyyy) 28-04-2014



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

Name of Propane Supplier(s) Primemax Energy Inc.				
Street No. 2558	Street Name / 911 Number / Address, if applicable Cedar Creek Road RR#1			
Town / City or Township / Country Ayr		Province Ontario	Postal Code N0B 1E0	
Telephone No. 1-519-740-8209	Fax No. 1-519-740-1015	Contact Name Mike Taylor		
E-mail primemax@primemaxenergy.com				

Name of Propane Transporter. If same as above, please check box. <input checked="" type="checkbox"/>				
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	For Office Use - Party No.
Street No.	Street Name / 911 Number / Address, if applicable	
Town / City or Township / Country		Postal Code
Telephone No.	Fax No.	Contact Name

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

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Name of person completing this form (please print) Maqbool Malik	Official Title owner
Signature <i>M. A. Malik</i>	Telephone No. 416-286-4338
	Date (dd-mm-yyyy) 28-04-2014



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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.

Gasoline- 2 underground storage units, 1 x 45,000 LTR and 1 x 22,500 LTR. Total 67,500 LTR

Diesel- 1 under ground horizontal storage unit-4,500 LTR.

A MSDS for regular gasoline is provided herein. MSDS for diesel is similar and not provided.

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

Fire Extinguisher Type - Dry chemical. Three Locations

1- Located @ propane refill station-10 lb in size

2- Located @ gas pump, between Pump # 5 and 6--7 lb in size

3- Located @ gas pump, between pump # 1 and 2--7 lbs in size

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.

1. Fusible link on ISC valve - isolation valve between the tank and the downstream propane dispensing equipment.
2. Emergency stop push button - mounted on a post near the propane tank. This shuts down the pump and closes a solenoid valve upstream of hoses.
3. Power supply breaker inside the garage building. This cuts all power to the propane system - shuts down pump; closes solenoid valve.

Maintenance and testing schedule for fire protection controls and devices.

Maintenance and testing is undertaken by Superior Propane according to Superior Propane's Maintenance Standard. Schedule for key equipment is:

1. Pumps (Pump every 3 months; Pump Motor: check belts monthly; grease motor every 6 months)
2. ISC Valves (test for closure every 6 months)
3. Storage tank Relief Valves - inspect every 2 years; replacement schedule as per provincial regulations.

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Name of person completing this form (please print) Maqbool Malik	Official Title President
Signature <i>M. A. Malik</i>	Telephone No. 416-286-4338
	Date (dd-mm-yyyy) 17/05/2011



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

**Contacts for Emergency Response**

**1. Facility Contact Personnel - Key Contact**

Name: Maqbool Malik  
 Official Title:  
 Telephone No. Manager: 416-286-4338  
 Fax No.:  
 E-mail: Maq\_M786@hotmail.com  
 Role and responsibilities in emergency: Coordinate site response

For Office Use - Party No.

**5. Facility 24-Hour Contact Person**

Name: Maqbool Malik  
 Official Title: Manager  
 Cell No.: 416-846-5190  
 Fax No.:  
 E-mail: Maq\_M786@hotmail.com  
 Role and responsibilities in emergency: Coordinate site response

For Office Use - Party No.

**2. Facility Contact Personnel - Alternate Contact**

Name: Rabinder Singh  
 Official Title: Partner/Owner  
 Telephone No.: 416-258-3360  
 Fax No.: 416-286-4338  
 E-mail: None  
 Role and responsibilities in emergency: Coordinate site response if agent is unavailable

For Office Use - Party No.

**6. Name of Facility Manager**

Name: Maqbool Malik  
 Official Title: Manager  
 Telephone No.: 416-846-5190  
 Fax No.:  
 E-mail: Maq\_M786@hotmail.com  
 Role and responsibilities in emergency: Coordinate site response

For Office Use - Party No.

**3. Local Fire Services - Key Contact**

Name: Frank Lamie  
 Official Title: Deputy Fire Chief - Fire Prevention, Toronto Fire Service  
 Telephone No.: 416-338-9054  
 Fax No.:  
 E-mail: flamie@toronto.ca  
 Role and responsibilities in emergency: Coordinate/advise on Toronto Fire Service response. Liaise with police.

For Office Use - Party No.

**7. Propane Supplier Key Contact Person**

Name: Superior Propane 24-hr Hotline  
 Official Title:  
 Telephone No.: 1-877-873-7467  
 Fax No.:  
 E-mail:  
 Role and responsibilities in emergency: Identify and dispatch Superior Propane and or LPERGC emergency response personnel as required.

For Office Use - Party No.

**4. Local Fire Services - Alternate Contact**

Name: Jim Stoops  
 Official Title: Division Chief - Fire Prevention  
 Telephone No.: 416-338-9102  
 Fax No.:  
 E-mail: jstoops@toronto.ca  
 Role and responsibilities in emergency: Alternate- Coordinate/advise on Toronto Fire Service Response. Liaise with police

For Office Use - Party No.

**8. Municipal Contact**

Name: Joanne Battaglia  
 Official Title: Zoning Examiner, City of Toronto  
 Telephone No.: 416-395-7553  
 Fax No.: 416-395-7589  
 E-mail: jbattagl@toronto.ca  
 Municipality: City of Toronto

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Name of person completing this form (please print) Maqbool Malik		Official Title President	
Signature <i>M. A. Malik</i>		Telephone No. 416-286-4338	Date (dd-mm-yyyy) 17/05/2011





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

2. Additional Safety Measures

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

Emergency Shut Off push button to shut down pump and close solenoid valve upstream of dispensing hoses.

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Signature <i>Maqbool Malik</i>		Telephone No. 416-286-4338	Date (dd-mm-yyyy) 17/05/2011



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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)	Print Name of Training Provider: None
	Print Name of Instructor:
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: None
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Training Date (dd-mm-yyyy)	Print Name of Training Provider: Ontario Propane Association	Please Note ROT valid for three years
30/12/2010	Print Name of Instructor: Unknown.	
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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Name of person completing this form (please print)	Official Title
Maqbool Malik	President
Signature	Telephone No.
<i>M. A. Malik</i>	416-266-4336
	Date (dd-mm-yyyy)
	17/05/2011



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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) Q4 (2011)	Print Name of Training Provider: Superior Propane or Alternate	Please note that the course content is currently being developed by the TSSA with the intention that it and its' provider will be ready to deliver this training in the fourth quarter of this year.
	Print Name of Instructor: to be arranged	
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) Q4 (2011)	Print Name of Training Provider: Key site contact to train staff
	Print Name of Instructor: to be arranged
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) June 6 2011	Print Name of Training Provider: Superior Propane, FSN, or Alternate	Please Note ROT valid for three years
	Print Name of Instructor: to be arranged as required	
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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Name of person completing this form (please print) Maqbool Malik	Official Title President
Signature <i>M. A. Malik</i>	Telephone No. 416-286-4338
	Date (dd-mm-yyyy) 17/05/2011





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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 operator or alternate will contact emergency services by calling 911 and will provide warnings outlined in the attached "Propane Emergency Response Procedures" placard, (to be posted at site and be part of the employee training). If it is safe to do so this could include advising neighbors to evacuate. The owner/operator may also contact Superior Propane via the emergency number identified in the ERP.

Describe what action is to be taken and by whom when a warning is issued (including details of a meeting place in a safe identified area and activating the evacuation plan, if necessary).  
The owner/operator or alternate should first follow the actions in the ERP provided herein. Staged evacuation, if the release of propane cannot be stopped by cutting electrical power may be required. Initial muster station will be away from the site, along Kingston Road, at least 80 metres from the site and away from any dispersing cloud. Subsequent evacuation instructions potentially up to the Hazard Distance to be provided by municipal emergency responders.

**Communication with Emergency Response Authorities**

Describe when and how the licence holder will give early warning to emergency response authorities (including a process to ensure that a call is placed to 911).  
When the system is operational, a ROT person will be on duty and be in the propane tank area. The key contact or alternate will be implementing ER actions including notifying emergency responders. Calling 911 will occur immediately after any attempts to shut down the system.  
When the system is not in operation, the ISC valve (main isolation valve) is closed, and the propane system is unattended but shutdown.  
Any accidents involving the propane tank during such times will require the intervention of random, nearby individuals.

Describe provisions for fire department entry when there are no operations or staffing at the propane site.  
The propane tank system is located in a wide open area that is easily accessible from Kingston Rd. Also a side entrance is available from Falaise Rd.  
The fire access routes are identified in the attached site plan.

Describe how the licence holder will ensure continual flow of updated information to authorities.  
The critical information required from the licence holder is how to shut down the system and the fill level in the tank (if known).  
Fill level is relevant from a time-to-BLEVE perspective (a near empty tank will BLEVE sooner than a full tank if there is fire impingement on the tank).  
This information will be provided either verbally, if staff are on site, or by cell phone during off hour.

How long will it take the facility liaison person to respond to the site?  
Approximately 30 minutes from key contact's home.

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Name of person completing this form (please print) Maqbool Malik	Official Title President		
Signature <i>M. A. Malik</i>	Telephone No. 416-286-4338	Date (dd-mm-yyyy) 17/05/2011	



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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 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?	<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>25m</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>M. A. Malik</i>	Telephone No. 416-286-4338
	Date (dd-mm-yyyy) 17/05/2011



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

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

**8. Licence holder and local Fire Services Review**

**To be completed by the Local Fire Services**

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

Yes

No



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

Fire services comments, if any:

**To be completed by the Licence Holder**

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

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

(dd-mm-yyyy)

**LOCAL FIRE SERVICES**

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

Print name

Signature

Date (dd-mm-yyyy)

Local Fire Services Name

Please Note: RSMP given to Fire Services today  
May 24 2011 for review.

Kalmey - Superior Propane

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Name of person completing this form (please print)

Official Title

Signature

Telephone No.

Date (dd-mm-yyyy)



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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-treasurer or 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) 17/05/2011	Capacity of single largest propane storage vessel (USWG) 2000 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: 10 ft	Right side property line: 15 ft
Rear: 180 ft	Left side property line: 120 ft
GPS coordinates of single largest vessel:	Lat. 43.7687, Long. -79.1892

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Name of person completing this form (please print) Maqbool Malik	Official Title President
Signature <i>m. a. malik</i>	Telephone No. 416-286-4338
	Date (dd-mm-yyyy) 17/05/2011



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**SECTION C: SUBMISSIONS**

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

**Facility Site Plan.**

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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) 17/05/2011	Capacity of single largest propane storage vessel (USWG) 2000 USWG
Tank setback coordinates. Indicate placement on the map. Front: 10 ft Rear: 180 ft	Right side property line: 15 ft Left side property line: 120 ft
GPS coordinates of single largest vessel:	Lat. 43.7687, Long. -79.1892

**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) Maqbool Malik	Official Title President
Signature	Telephone No. 416-286-4338
	Date (dd-mm-yyyy) 17/05/2011





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

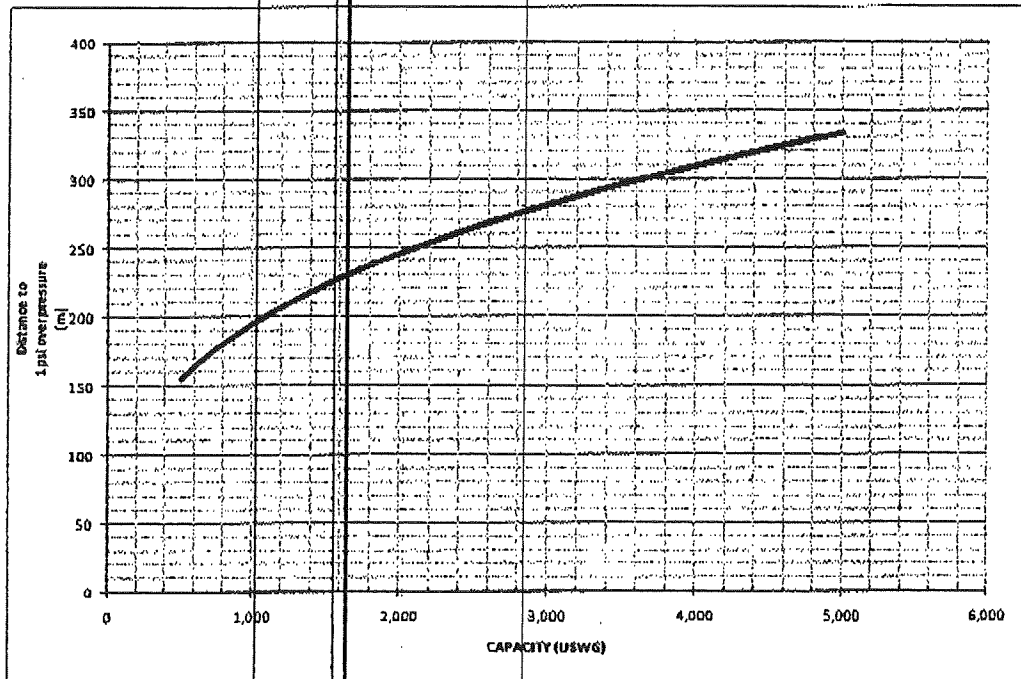
Table 1: Distance Table

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	248
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)



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Name of person completing this form (please print) Nothing completed on this page.		Official Title	
Signature		Telephone No.	Date (dd-mm-yyyy)





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

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

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

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 _____	0				_____ m
Residential building units specifically permanent single family dwellings, condominiums, and apartments [Redacted]		X			<u>61</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes Name: <u>DE GROOTS DIAGNOSTIC &amp; FALABE SEAR MIE 3B5</u> Address: <u>WEST HILL PLAZA 9410 KINGSTON RD. MIE 2N5</u> City: _____ Province _____ Postal Code _____			X		<u>42</u> m
Commercial building units - continuous occupancy specifically hotels, campgrounds, and resorts Name: <u>ANDREWS MOTEL</u> Address: <u>9434 KINGSTON RD.</u> City: <u>SEAR</u> Province <u>ONT</u> Postal Code <u>MIE 2N6</u>	X	1			<u>57</u> m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	0				_____ m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	0				_____ m

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

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Name of person completing this form (please print) Maqbool Malik	Official Title President	
Signature <i>Maqbool Malik</i>	Telephone No. 416-286-4338	Date (dd-mm-yyyy) 17/05/2011



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Propane Storage and Handling Regulation

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

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

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	0	1	2-10	11+	
Industrial buildings or parks or golf courses Name: _____ Address: _____ City: _____ Province _____ Postal Code _____					_____ m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____					_____ m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____					_____ m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____					_____ m
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Emergency responders specifically fire stations, ambulance stations, and police stations. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____					_____ m

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

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Name of person completing this form (please print) Maqbool Malik	Official Title President
Signature <i>Maqbool Malik</i>	Telephone No. 416-286-4338
	Date (dd-mm-yyyy) 17/05/2011



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

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

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

**Portable Storage Additional Information Sheet**

Cylinder Size	Capacity In USWG	Quantity	Total Volume in USWG
# 420	123.9		
# 100	29.5		
# 40	11.75	5	58.75
# 33.3	9.62	2	19.24
# 30	8.8	2	17.6
# 20	5.8	30	174
# 10	2.9	1	2.9
# 5	1.5	1	7.5
<b>Total Cylinder Capacity</b>			279.99

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

Tank Size In USWG	Quantity	Total Volume In USWG
None	1	2000.00
<b>Total Tank Capacity</b>		

<b>Total Cylinder Capacity</b>	280 USWG
<b>Total Tank Capacity</b>	0 2000 USG
<b>Total Portable Capacity</b>	280 USWG

**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) Maqbool Malik	Official Title President	
Signature <i>M.A. Malik</i>	Telephone No. 416-286-4388	Date (dd-mm-yyyy) 17/05/2011



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

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

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# 5	1.5	1	7.5
<b>Total Cylinder Capacity</b> 279.99			

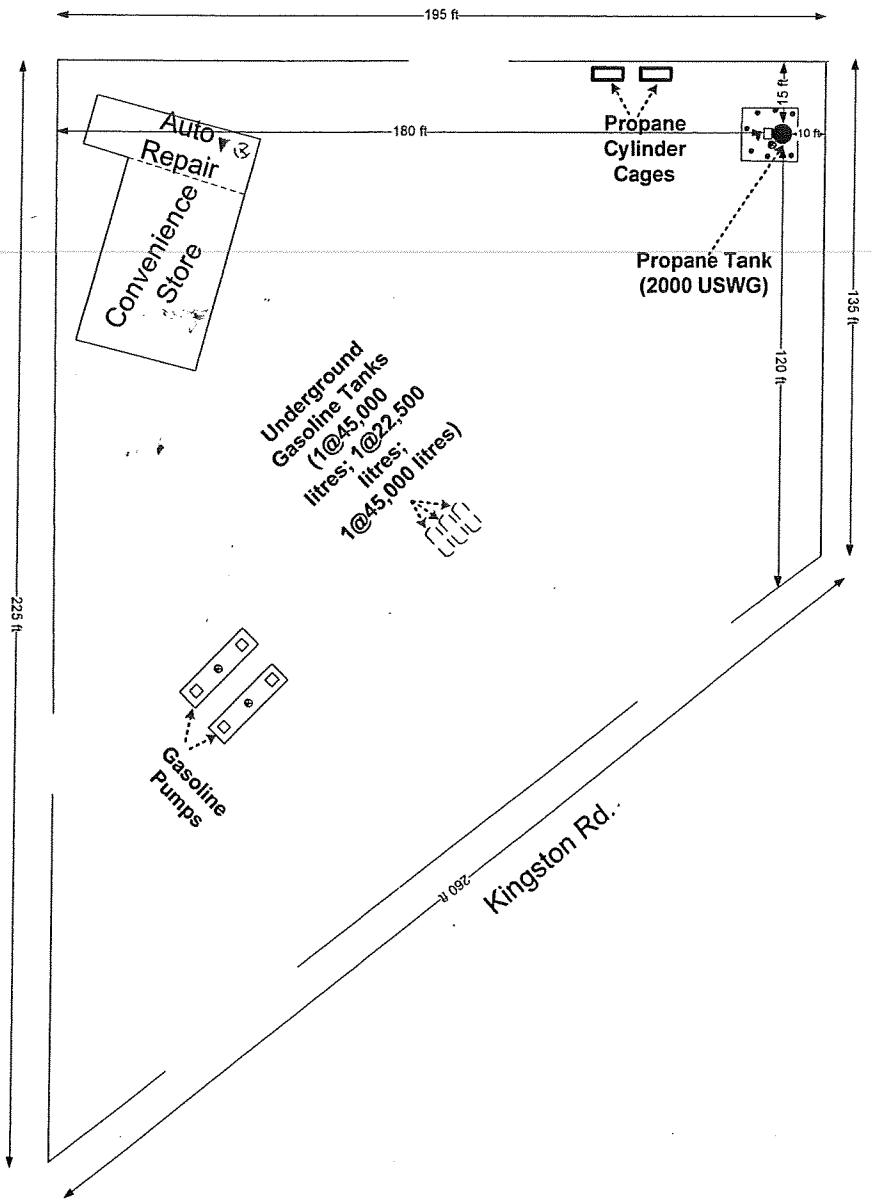
**Tanks Stored On-site Not Connected for Use**

Tank Size in USWG	Quantity	Total Volume in USWG
None		
<b>Total Tank Capacity</b>		

<b>Total Cylinder Capacity</b>	280 USWG
<b>Total Tank Capacity</b>	0
<b>Total Portable Capacity</b>	280 USWG

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Name of person completing this form (please print) Maqbool Malik	Official Title President
Signature <i>M. A. Malik</i>	Telephone No. 416-286-4338
	Date (dd-mm-yyyy) 17/05/2011



Scale (ft)  
0

60

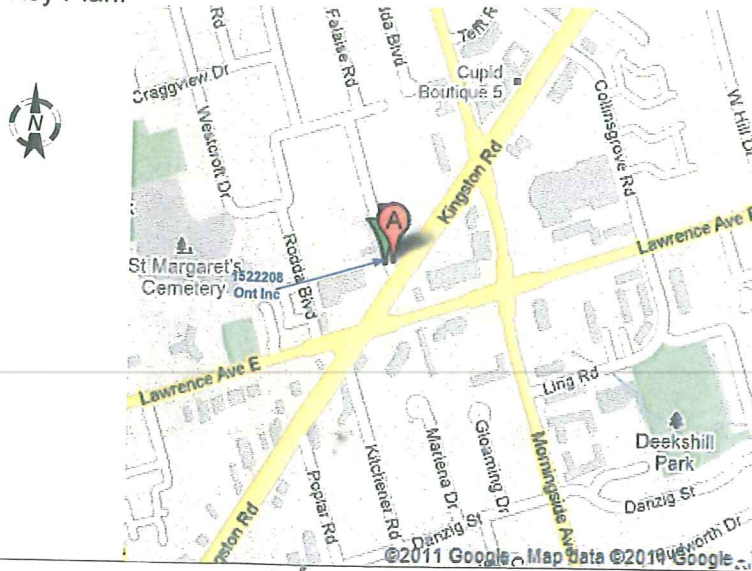
120

240





Key Plan:



Notes:

1. Tank distances to property lines:

Property Line Setbacks	Distance
East (Right Side)	15 ft
South (Front Side)	10 ft
West (Left Side)	120 ft
North (Back Side)	180 ft

2. Fire Extinguisher 

3. Egress/Fire Access Route:  
Site is accessible from Kingston Rd, also from Falaise Rd.

4. E-Stop 

**Superior Propane Ltd.**

Title: **Site Plan**  
**1522208 Ont Inc**  
4418 Kingston Road, Scarborough, Ontario, M1E 2N4

**Plan 2178 Lot 15 PT Lot 14 PT Lot 16**

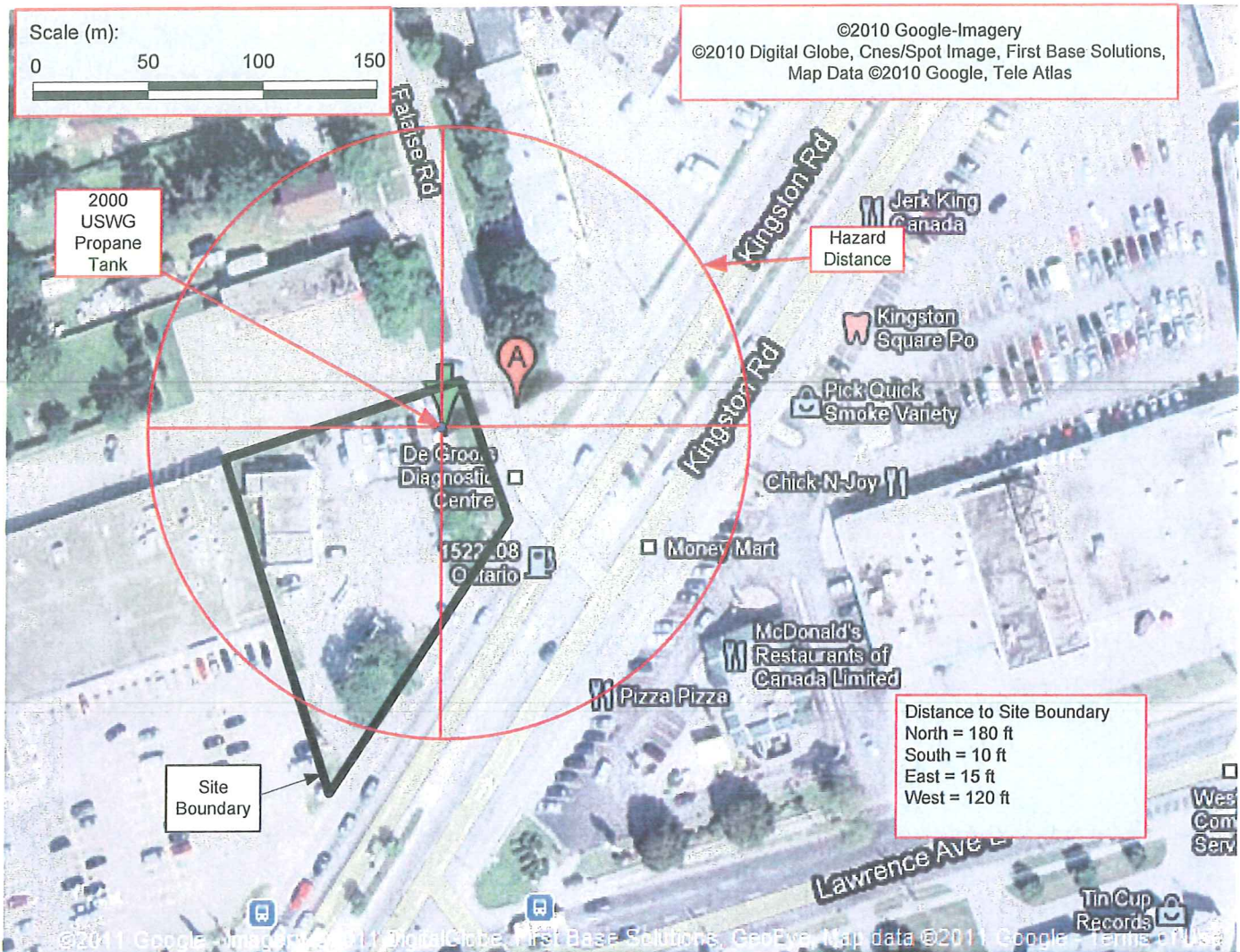
Drawn by: L. Forget

Checked by: C. Britskey

Date: May 18, 2011

Rev 0





Location of Propane Storage Tank	Property Lines and Setbacks	Map of Surrounding Area
Demarcated by in center of circle	Property Lines and Setbacks shown on Site Plan	
Capacity of Propane Storage Tank	Municipality (ies) within the 1 psi overpressure circle	1522208 Ont Inc 4418 Kingston Rd, Scarborough, On, M1E 2N4 Plan 2178 Lot 15 PT Lot 14 PT Lot 16
Capacity of Propane Tank = 2000 USWG	City of Toronto	
GPS Co-ordinates of Propane Storage tank	Municipal Contact	
GPS Co-ordinates = 43.768789, -79.189121	Joanne Battaglia Zoning Examiner, City of Toronto Tel: 416-395-7553 Fax: 419-395-7589 Email: jbatagl@toronto.ca	Drawn by: L. Forget Date: May 18 <sup>th</sup> 2011
Circular Distance to 1 psi overpressure Denotes by circle centred on tank: radial distance = 246 m		