



Technical Standards and Safety Authority
 www.tssa.org
 14th Floor - Centre Tower
 3300 Bloor Street West
 Toronto Ontario M8X 2X4
 Fax: 416 231 4078
 Customer Service: 1.877.662.8772

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 000264706

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.

For Office Use Only
Intake Group
 AUG 05 2016
 SR # [REDACTED]

SECTION A: GENERAL INFORMATION

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

A Company Name: 2491903 Ontario Inc. Corporation No: 2491903
 Operator Name (if different from above): [REDACTED]

Telephone No: 905-563-8816 Fax No: 905-563-4131 E-mail: alman@2491903.com

B Street No: 4673 Street Name / 911 Number / Address, if applicable: Ontario Street
 Town / City or Township / County: Beaverville Province: Ontario Postal Code: [REDACTED]

C Mailing address if different from above.
 Street No: [REDACTED] Street Name / 911 Number / Address, if applicable: [REDACTED]
 Town / City or Township / County: [REDACTED] Province: [REDACTED] Postal Code: [REDACTED]

Information on Container Refill Centre or Filling Plant

D Location of facility.
 Street No: 4673 Street Name / 911 Number / Address, if applicable: Ontario Street
 Nearest Major Intersection: Ontario St. And Union Rd.
 Town / City or Township / County: Beaverville Province: Ontario Postal Code: L0R 1B4

Name of Licence holder: 2491903 Ontario Inc.

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT): Altan Ferroz Ali RCT type: PPO 3L PG

Municipality (or municipalities if the facility or its hazard distance touches multiple borders): Town of Lincoln

[REDACTED]

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 Name of Licence Holder: 2491903 Ontario Inc.	Signature [Signature]	Date (dd-mm-yyyy) 3-8-2016
Name of Senior Management person as defined in the Regulation holding the Record of Training: Altan Qasar		21-07-2016



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SECTION A: GENERAL INFORMATION (cont'd)

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

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

	PSIG	Serial Number
Tank 1:	250	7114
Tank 2:	_____	_____
Tank 3:	_____	_____

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

Fixed: 2000USWG Portable: 11.6 Mobile: 0

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Name of person completing this form (please print) Aftab Qaisar	Official Title Director	
Signature 	Telephone No. 416-857-9981	Date (dd-mmm-yyyy) 3-8-16



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

Name of Propane Supplier(s) Superior General Partner Inc. o/a Superior Propane			For Office Use - Party No.	
Street No. 6750	Street Name / 911 Number / Address, if applicable Century Avenue, Suite 400			
Town / City or Township / Country Mississauga			Province Ontario	Postal Code L5N 2V8
Telephone No. 613-391-9604	Fax No. 613-822-5221	Contact Name Ken Gillis - Regulatory & Technical Support Rep		
E-mail				

Name of Propane Transporter. If same as above, please check box. <input type="checkbox"/>			For Office Use - Party No.	
Superior General Partner Inc. o/a Superior Propane				
Street No. 7022	Street Name / 911 Number / Address, if applicable Wellington Road 124S			
Town / City or Township / Country Guelph			Province Ontario	Postal Code N1H 6L3
Telephone No. 519-831-6564	Fax No.	Contact Name Chris Van Herksen		
E-mail vanherkc@superiorpropane.com				

Off-site Cylinder and/or Mobile Storage none		Capacity stored off-site, in USWG	For Office Use - Party No.	
Street No.	Street Name / 911 Number / Address, if applicable			
Town / City or Township / Country			Province	Postal Code
Telephone No.	Fax No.	Contact Name		

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

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Name of person completing this form (please print) Aftab Qaisar		Official Title Director	
Signature 		Telephone No. 416-857-9981	Date (dd-mm-yyyy) 21-07-2016



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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.

Regular Gasoline 45,000 Liter Storage. Underground Tank Premium Gasoline 22,000 liter. Diesel 22,000 Liter

Diesel Card Lock 2 @ 45,000 liter each.

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

B-C fire extinguishers

one located at propane Station (ABC)

4 located at card lock (ABC)

2 located at corner of kiosk and one inside kiosk

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.

fuelable link on ISC- Isolation valve between the tank and the down stream propane dispensing equipment

emergency shut off in kiosk. This shuts down the pump and closes a Solenoid valve up stream of hoses

pump supply breaker inside the gas bar building. This cut all power to the propane system- shut down pump closes solenoid valve.

Maintenance and testing schedule for fire protection controls and devices.

Pump (every three months, pump motor, check belt monthly, grease pump every six months)

ISE valve (test for closure every six months)

Storage tank relieve valve-inspected every two year, replacement schedule as per provincial regulation.

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Signature 	Telephone No. 416-857-9981	Date (dd-mmm-yyyy) 3-8-2016



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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 Alman Feroz Ali	For Office Use - Party No.	Name Alman Feroz Ali	For Office Use - Party No.
Official Title General Manager		Official Title GM	
Telephone No. 905-563-8816	Fax No. 905-563-4770	Cell No. 905-962-9891	Fax No. 905-563-4770
E-mail almanali@beamsvillereley.com		E-mail almanali@beamsvillereley.com	
Role and responsibilities in emergency Coordinate site response plan (ERP)		Role and responsibilities in emergency Coordinate site response plan (ERP)	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name Aftab Qaisar	For Office Use - Party No.	Name Alman Feroz Ali	For Office Use - Party No.
Official Title Director		Official Title GM	
Telephone No. 416-857-9981	Fax No. 905-508-0906	Telephone No. 905-962-9891	Fax No. 905-563-4770
E-mail aqaisdar2921@rogers.com		E-mail almanali@beamsvillereley.com	
Role and responsibilities in emergency Coordinate site response plan (ERP)		Role and responsibilities in emergency Coordinate site response plan (ERP)	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name Greg Hudson	For Office Use - Party No.	Name Superior Propane Hot Line	For Office Use - Party No.
Official Title Fire Chief	E-mail	Official Title	E-mail NA
Telephone No. 905-563-8205 Ext 253	Fax No. 905-563-6566	Telephone No. 1-877-873-7467	Fax No. NA
Role and responsibilities in emergency Coordinate emergency response, advise on fire service response liaise with police services		Role and responsibilities in emergency Identify and dispatch superior propane and or LPERGC emergency response personnel as required	
Fire Services Address 4800 South Service Road Beamsville L0R 1B1		Propane Supplier Address P.O. Box 4568 Stn A Toronto ON M5W 0J5	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name Bill Blake	For Office Use - Party No.	Name Graig Hudson	For Office Use - Party No.
Official Title Deputy Fire Chief	E-mail	Official Title Fire Chief	
Telephone No. 905-563-8205 ext 253	Fax No. 905-563-6566	Telephone No. 905-563-8205 Ext 253	Fax No. 905-563-6566
Role and responsibilities in emergency Coordinate emergency plan, advise on fire response when key contact is not available and liaise with police services		E-mail	
Fire Services Address 4800 South Service Road Beamsville L0R 1B1		Municipality Name and Address Town Of Lincoln 4800 South Service Road Beamsville L0R 1B1	

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Name of person completing this form (please print) Aftab Qaisar	Official Title Director
Signature 	Telephone No. 416-857-9981
	Date (dd-mmm-yyyy) 3-8-2016



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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.

[Lined area for describing additional safety measures]

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Name of person completing this form (please print) Aftab Qaisar	Official Title Director	
Signature 	Telephone No. 416-857-9981	Date (dd-mm-yyyy) 03-08-2016



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

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

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

Training Date (dd-mmm-yyyy) April 11, 2016	Print Name of Training Provider: FSN Training and Development Inc. Print Name of Instructor: Michael Farah
Training Date (dd-mmm-yyyy)	Print Name of Training Provider: Print Name of Instructor:
Training Date (dd-mmm-yyyy)	Print Name of Training Provider: Print Name of Instructor:

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

Training Date (dd-mmm-yyyy) April 11, 2016	Print Name of Training Provider: FSN Training and Development Inc. Print Name of Instructor: Michael Farah
Training Date (dd-mmm-yyyy)	Print Name of Training Provider: Print Name of Instructor:
Training Date (dd-mmm-yyyy)	Print Name of Training Provider: Print Name of Instructor:

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

Training Date (dd-mmm-yyyy) April 11, 2016	Print Name of Training Provider: FSN Training and Development Inc. Print Name of Instructor: Michael Farah
Training Date (dd-mmm-yyyy) June 14, 2016	Print Name of Training Provider: FSN Training and Development Inc. Print Name of Instructor:
Training Date (dd-mmm-yyyy)	Print Name of Training Provider: Print Name of Instructor:

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	Date (dd-mmm-yyyy) 03-08-2016



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

4. Emergency Training Plan for Coming Year

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

Target Date (dd-mmm-yyyy) June 30, 2017	Print Name of Training Provider: FSN
	Print Name of Instructor: Mike Ferrah
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

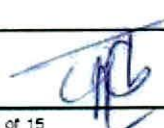
Training on the facility's Emergency Management Procedures provided to staff.

Target Date (dd-mmm-yyyy) June 30, 2017	Print Name of Training Provider: Alman Feroz Ali
	Print Name of Instructor: Alman Feroz Ali
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Target Date (dd-mmm-yyyy) June 30, 2017	Print Name of Training Provider: Alman Feroz Ali
	Print Name of Instructor: Alman Feroz Ali
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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Name of person completing this form (please print) Aftab Qaisar	Official Title Director
Signature 	Telephone No. 416-857-9981
	Date (dd-mmm-yyyy) 10-08-2016



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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 PERP placed to be posted on site and part of the employee training. If it is safe to do so this could involve advising neighbour to evacuate. The 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 operator or alternate should first follow the actions in the ERP provided herein. Stage evacuation. If the release of propane can not be stopped by cutting electrical power may be required. Note a specific muster point is not advisable. Since a propane plume can blow in any direction.

Action will be taken by on duty ROT person(S)

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 system is operational, a ROT person will be on duty and be in the propane tank area. This person will be able to visually ascertain any abnormal accident event and implement the appropriate emergency response actions. When system is not in operation the ISC valve (main isolation valve) is closed and the propane system is unattended. Any accident 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

The propane tank system is located 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 license holder is a how to shut the system down and b the fill level in the tank (if known).

Fill level is relevant from a time to bleive perspective (a near empty tank will bleive sooner than a full tank if there is a fire impingment on the tank).

The information will be provided to the authorities by Alman Ali or alternate.

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

Key Contact- 15 minutes to arrive at the facility in the event of an emergency.

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Name of person completing this form (please print) Attab Qaisar	Official Title Director	
Signature 	Telephone No. 416-857-9981	Date (dd-mmm-yyyy) 03-09-2016



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

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

6. Building and Site Security and Procedures

- | | Yes | No |
|---|-------------------------------------|--------------------------|
| 1. Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Is there adequate night lighting at the site? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Are procedures in place that ensure access routes, aisles, storage area, filling areas and the grounds are kept clear from unwanted materials? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Are there procedures that capture and record the daily inspection of hoses and inspection requirements for filling systems and mechanical devices used in the transfer of propane? | <input 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 type="checkbox"/> | <input checked="" 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>140 meter fire hydran</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>NA</u> |

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	Date (dd-mmm-yyyy) 03-08-2016



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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-mmm-yyyy)

LOCAL FIRE SERVICES

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

LINCOLN FIRE DEPARTMENT <small>Local Fire Services Name</small>	<small>Print name</small> <small>Signature</small> 	<small>Date (dd-mmm-yyyy)</small> 02 - AUG - 2016
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<small>Name of person completing this form (please print)</small> Aftab Qaisar	<small>Official Title</small> Director	
<small>Signature</small> 	<small>Telephone No.</small> 416-857-9981	<small>Date (dd-mmm-yyyy)</small> 3 - 8 - 2016



SECTION C: SUBMISSIONS

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

Facility Site Plan.

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

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

Map of Surrounding Area.

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

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

Required Mapping Information from Updated Site Plan

Date map prepared (dd-mmm-yyyy)	Capacity of single largest propane storage vessel (USWG)		
02-10-2011	2000 USWG		
Tank setback coordinates. Indicate placement on the map.			
Front:	10 m	Right side property line:	59 m
Rear:	88 m	Left side property line:	52 m
GPS coordinates of single largest vessel:	43.183365, -79.47653		

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Name of person completing this form (please print)	Official Title	
Afiab Qaiser	Director	
Signature	Telephone No.	Date (dd-mmm-yyyy)
	416-857-9981	10-08-2016



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SECTION C: SUBMISSIONS (cont'd)

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

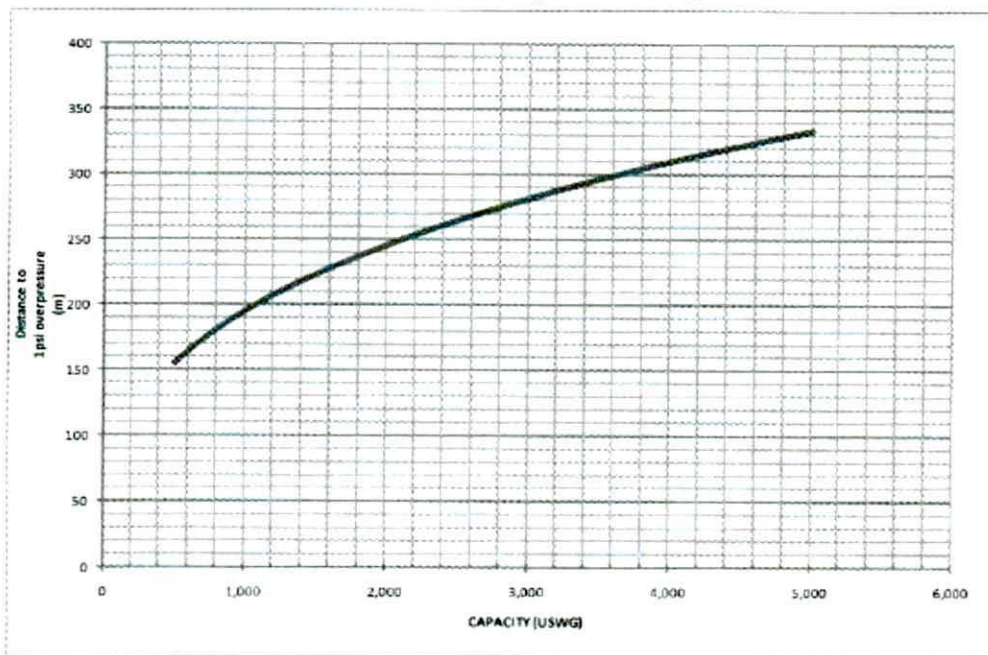
Table 1: Distance Table

Water Capacity (litres)	Nominal Water Capacity (USWG)	Distance to 1 psi overpressure (m)
1,890	500	155
3,780	1,000	195
4,920	1,300	213
6,620	1,750	235
7,130	1,885	241
7,560	2,000	246
18,900	5,000	333

Formula: $D = 16.94 \times (1.524 \times C)^{1/3}$
D = Distance to overpressure of 1 psi (meters)
C = Tank Total Capacity in USWG

Parameters: Density of Propane is 0.5033 kg per litre @ 15 C
Assume all vessels are 80% full
1 gallon [US, liquid] = 0.003785411784 cubic meter
1 cubic metre = 264.17 USWG

Hazard Distance Chart (EPA-TNT model)





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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: NA Address: _____ City: _____ Province _____ Postal Code _____					_____ m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: NA Address: _____ City: _____ Province _____ Postal Code _____					_____ m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: Relay Restaurant Address: 4673 Ontario Street City: Beamsville Province ON Postal Code L0R B4		X			100 m
Commercial building units - continuous occupancy specifically hotels, campgrounds, and resorts. Name: None Address: _____ City: _____ Province _____ Postal Code _____					_____ m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons Name: None Address: _____ City: _____ Province _____ Postal Code _____					_____ m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: Fire Department Town Of Lincoln Address: 4800 South Service Road City: Beamsville Province ON Postal Code L0R 1B1		X			500+ 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) Aftab Qaisar	Official Title Director
Signature 	Telephone No. 416-857-9981
	Date (dd-mmm-yyyy) 03-08-2016



Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
3300 Bloor Street West
Toronto Ontario M8X 2X4
Fax: 416.231.4078
Customer Service: 1.877.682.8772

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

WORKSHEET

Portable Storage Additional Information Worksheet

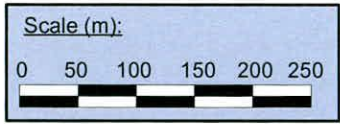
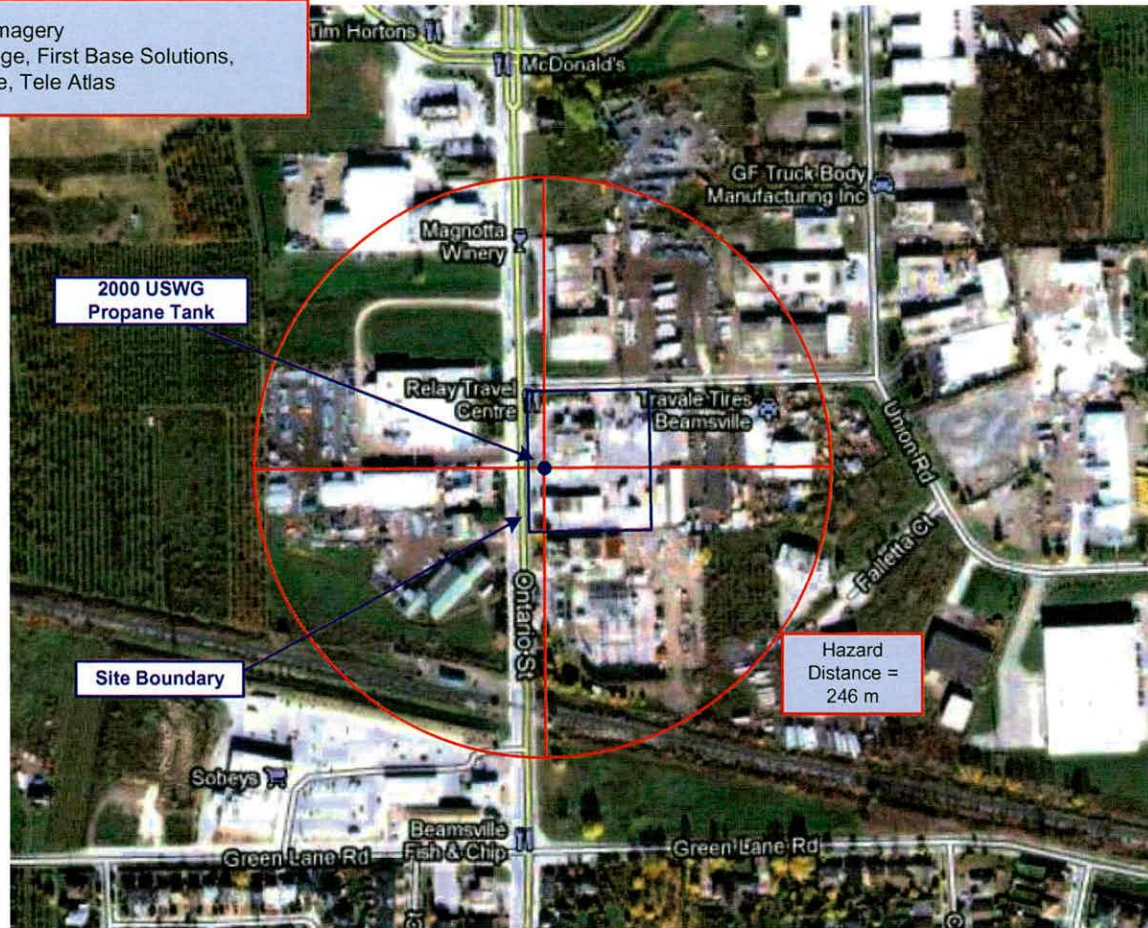
Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9	0	0
# 100	29.5	0	0
# 40	11.75	0	0
# 33.3	9.62	0	0
# 30	8.8	0	0
# 20	5.8	2	11.6
# 10	2.9	0	0
# 5	1.5	0	0
Total Cylinder Capacity			11.6

Tanks Stored On-site Not Connected for Use

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

Total Cylinder Capacity	11.6	11.6
Total Tank Capacity	2000 USWG	2000 USWG
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)		11.6

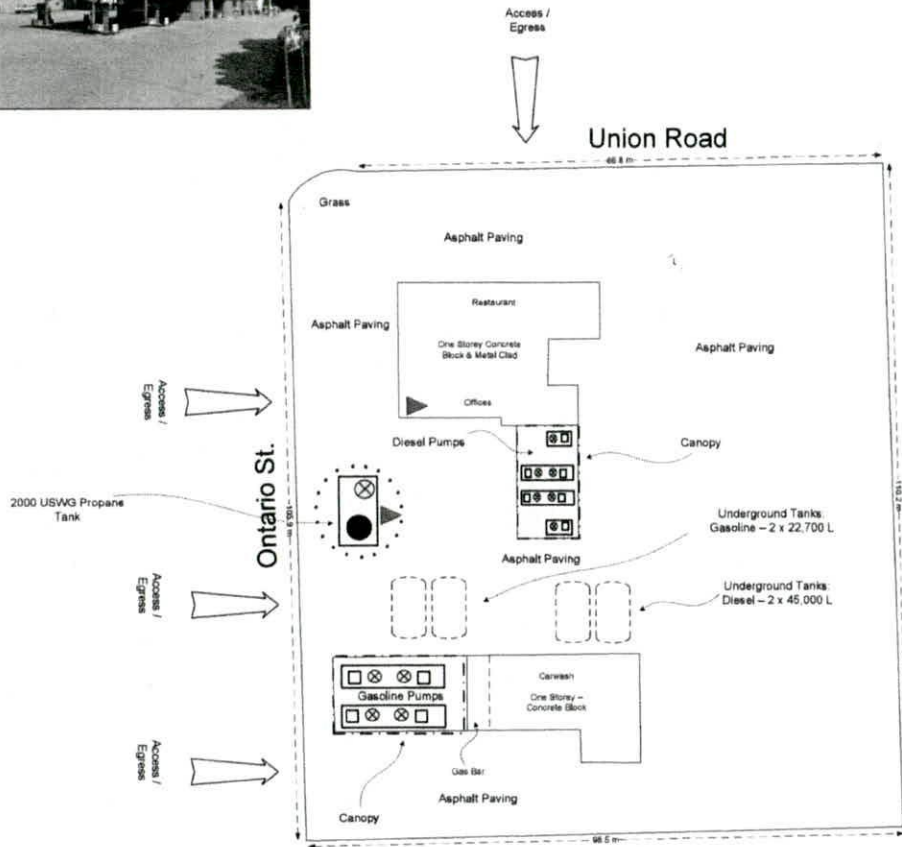
©2011 Google – Imagery
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 Map data ©2011 Google, Tele Atlas



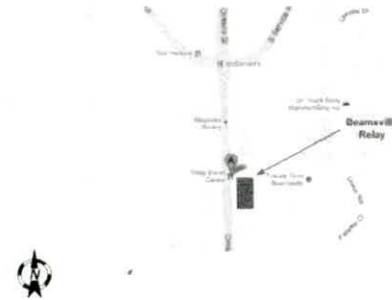
Setback Distances to Site Boundary	North: 59 m South: 52 m	East: 88 m West: 10 m
Capacity of Propane Storage Tank:	Capacity of Propane Storage Tank = 2000 USWG	
GPS Co-ordinates of Propane Storage Tank:	GPS Co-ordinates = 43.183365,-79.47653	
Circular Distance to 1 psi overpressure:	Denoted by circle centred on tank; radial distance = 246 m	

Municipality (ies) within the 1 psi overpressure circle:	Town of Lincoln
Municipal Contact:	William Kolasa Director of Corporate Services/ Clerk 4800 South Service Rd, Beamsville, ON L0R 1B1 Tel: 905-563-8205 ext. 246 Fax: 905-563-6566 email: wkolasa@lincoln.ca

Map of Surrounding Area
Beamsville Relay 4673 Ontario St., Beamsville, ON L0R 1B5 CON 1 PT LOT 16 RP30R333 PART 44 PART 45
Drawn by: L. Wills Date: October 2, 2011



Key Plan:



Notes:

1. Tank distances to property lines:

Property Line Setbacks	Distance
North	50 m
South	52 m
East	88 m
West	10 m

2. Fire Extinguisher

3. Egress/Fire Access Route:
Egress/access points along Ontario St. & Union Rd.

4. E-Stop

FSN Training & Development

Site Plan
Beamsville Relay
4673 Ontario Street, Beamsville, ON L0R 1B5

CON 1 PT LOT 16 RP 30R333 PART 44 PART 45

Drawn by: L. Wills

Checked by:

Date: October 2, 2011

Rev 0