



Technical Standards and Safety Authority
www.tssa.org

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

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

This Level 1 RSMP applies to: a facility with a total propane storage capacity of 5,000 USWG or less; or a facility with a fixed propane storage capacity of 5,000 USWG or less; or a facility with a total propane storage capacity of 5,000 USWG of portable propane storage capacity on site.

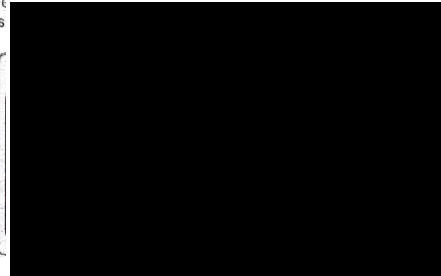
Failure to fully complete this form may result in rejection. Making a false statement may result in a fine or prosecution under the *Technical Standards and Safety Act*

Licence Number IB: 64721677

Check applicable type of propane operations.

Cylinder Motor Fill Filling Plant Card/Keylock

Submit along with this completed application a Facility Site Plan and a Map of the Surrounding Area.



SECTION A: GENERAL INFORMATION

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

A Company Name: Materiaux Pont Masson Corporation No. _____

Operator Name (if different from above): _____

Telephone No. 450-371-1152 Fax No. 450-371-0379 Email _____

B Street No. 2715 Street Name / 911 Number / Address, if applicable: Boul Mgr Langlois

Town / City or Township / County: Salaberry de Valleyfield Province: Quebec Postal Code: J6S 5P7

Mailing address if different from above.

C Street No. _____ Street Name / 911 Number / Address, if applicable: _____

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

Information on Container Refill Centre or Filling Plant

Location of facility.

D Street No. 4920 Street Name / 911 Number / Address, if applicable: hwy 17 Nearest Major Intersection: Station rd

Town / City or Township / County: Alfred Province: Ontario Postal Code: K0A 1M0

Name of Licence Holder: Materiaux Pont Masson Inc

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT): Stephane Bailey ROT type: PIT 100-11 PIT 100-03

Municipality (or municipalities if the facility or its hazard distance touches multiple borders): Alfred-Plantagenet

Hours of operation:

This document is valid until the next licence renewal date. You are required by law to notify TSSA of any change of information.

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Print name	Signature	Date (dd-mm-yyyy)
Name of Licence Holder: <u>Materiaux Pont Masson</u>		<u>16-05-2016</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training: <u>Stephane Bailey</u>		



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SECTION A: GENERAL INFORMATION (cont'd)

Indicate the year the facility was established. Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment.
2016 new

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

	PSIG	Serial Number
Tank 1:	250	91-16
Tank 2:	_____	_____
Tank 3:	_____	_____

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

Fixed: 1000 uswg Portable: n/a Mobile: n/a

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Name of person completing this form (please print) Pascal Denis	Official Title Owner Fernand Denis Inc	
Signature 	Telephone No. 613-524-2897	Date (dd-mmm-yyyy) 3/05/16



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

Name of Propane Supplier(s) Levac Propane		For Office Use - Party No.	
Street No. 5552	Street Name / 911 Number / Address, if applicable St-Catherine		
Town / City or Township / Country St-Isidore		Province Ontario	Postal Code K0C 2B0
Telephone No. 613-524-2079	Fax No. 613-524-2081	Contact Name Etienne Levac	
E-mail etienne@propanelevac.com			

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

Off-site Cylinder and/or Mobile Storage n/a		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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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.

1000 uswg propane tank hooked up to heat existing building (est of building)

10 x 30lbs lift truck propane cylinder (back of building)

1 4500litres tank of diesel fuel for trucks (back of building)

hardware store with inventory of paint (in store)

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

fire extenguisher

fire hydrant (municipal)

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.

push button emergency stop located on propane dispenser

fusible link on main gas valve with manual opening

attendant must hold push button to fill container

fire alarm with 24h monitoring in store

Maintenance and testing schedule for fire protection controls and devices.

daily visual inspection of propane tank and valve

monthly inspection of fire extinguisher

yearly fire extinguisher inspection and propane dispenser by 3rd party company

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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 Serge Major	For Office Use - Party No.	Name Eric Bailly	For Office Use - Party No.
Official Title Store manager		Official Title president	
Telephone No. 613-677-3064	Fax No.	Cell No. 450-802-0574	Fax No.
E-mail smajor@pontmasson.com		E-mail ebailly@pontmasson.com	
Role and responsibilities in emergency co-ordination with fire department		Role and responsibilities in emergency co-ordination with fire department (if key contact is not present)	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name Eric Bailly	For Office Use - Party No.	Name Serge Major	For Office Use - Party No.
Official Title president		Official Title Store manager	
Telephone No. 450-802-0574	Fax No.	Telephone No. 613-677-3064	Fax No.
E-mail ebailly@pontmasson.com		E-mail smajor@pontmasson.com	
Role and responsibilities in emergency co-ordination with fire department (if key contact is not present)		Role and responsibilities in emergency co-ordination with fire department (if key contact is not present)	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name Dominic Cote	For Office Use - Party No.	Name Etienne Levac	For Office Use - Party No.
Official Title Fire Cheif	E-mail	Official Title operaqtion manager	E-mail etienne@propanelevac.com
Telephone No. 613-229-5668	Fax No.	Telephone No. 613-524-2079	Fax No. 613-524-2081
Role and responsibilities in emergency co-ordinate fire service		Role and responsibilities in emergency if product or equipment is needed or need to be remove	
Fire Services Address 261 St-Philippe Alfred		Propane Supplier Address 5552 St-Catherine St-Isidore Ontario	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name Evelin Carriere	For Office Use - Party No.	Name Guylaine Poirier	For Office Use - Party No.
Official Title Station Chief	E-mail	Official Title Zoning administrator	
Telephone No. 613-577-4294	Fax No.	Telephone No. 613-679-2292 x209	Fax No. 613-679-4939
Role and responsibilities in emergency co-ordinate fire service in place of fire cheif		E-mail gpoirier@alfred-plantagenet.com	
Fire Services Address 261 St-Philippe Alfred		Municipality Name and Address Township of Alfred and Plantagenet 265 St-Philippe Alfred On K0B 1A0	

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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.

The store has a joint health and safety comity, This comity that meets a minimum of 4 times per year has developped a montly check list. In that check list the propane dispenser will be included. On top of the daily visual inpection, a montly written visual inspection will be done on all the safety feature on the dispenser as well as visual inpection on the general appearance of the tank and its surrounding

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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) 30-05-2016	Print Name of Training Provider: Propane Levac
	Print Name of Instructor: Etienne Levac
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) 30-05-2016	Print Name of Training Provider: Propane Levac
	Print Name of Instructor: Etienne Levac
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor: Etienne Levac
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) 30-05-2016	Print Name of Training Provider: Propane Levac
	Print Name of Instructor: Etienne Levac
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:

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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) 15-05-2017	Print Name of Training Provider: Propane Levac
	Print Name of Instructor: Etienne Levac
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) 15-05-2017	Print Name of Training Provider: Propane Levac
	Print Name of Instructor: Etienne Levac
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) 15-05-2017	Print Name of Training Provider: Propane Levac
	Print Name of Instructor: Etienne Levac
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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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 initial warning will be given by the daily employee responsible for the dispenser. After contacting the emergency agency (911), proceed with and evacuation to the meeting point (if needed). In all case the store manager will be notified and it would be the store manager that would do the public notification

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).
after the warning is issued, all employees are to meet at the fire evacuation meeting area. The store manager will make sure that everybody is accounted for.

Communication with Emergency Response Authorities

Describe when and how the licence holder will give early warning to emergency response authorities (including a process to ensure that a call is placed to 911).
The employee responsible for the dispenser that day will be calling the emergency authorities, the day store manager will confirm with the dispenser employee that the call has been made

Describe provisions for fire department entry when there are no operations or staffing at the propane site.
The gate is equipped with a break away lock

Describe how the licence holder will ensure continual flow of updated information to authorities.
The store manager has a contact list of the municipal emergency department

How long will it take the facility liaison person to respond to the site.
The facility liaison person is 25min away

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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 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>150 meters</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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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.

Print name Local Fire Services Name <i>Dominic Cote</i>	Signature 	Date (dd-mmm-yyyy) <i>03-05-2016</i>
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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. *2A: Propane fork lift tank*
3. Location of permanent structures on site. *2A: Diesel Tank*
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. *5A: fire extinguisher 5A: fire hydrant*
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) 02-05-16	Capacity of single largest propane storage vessel (USWG) 1000 usgw
Tank setback coordinates. Indicate placement on the map.	
Front: 45m	Right side property line: 7.8m
Rear: 596m	Left side property line: 136m
GPS coordinates of single largest vessel: 45deg 33'14.45"N 74deg 53'55"W	

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Signature <i>Pascal Denis</i>	Telephone No. 613-524-2897
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Drawing #2
See note #2



45°33'14.45" N 74°53'46" W Elev : 246 ft
Municipality of Alfred Plantagenet

Drawing #1
See note # 1

Property
line

Property
line

Location of
propane tank

195 meters

195 meters

County rd 17

County rd 17

County rd 17

45° 33' 14.45" N - 74° 53' 55.46" W - ELEV: 246FT
Municipality of Alfred Plantagenet

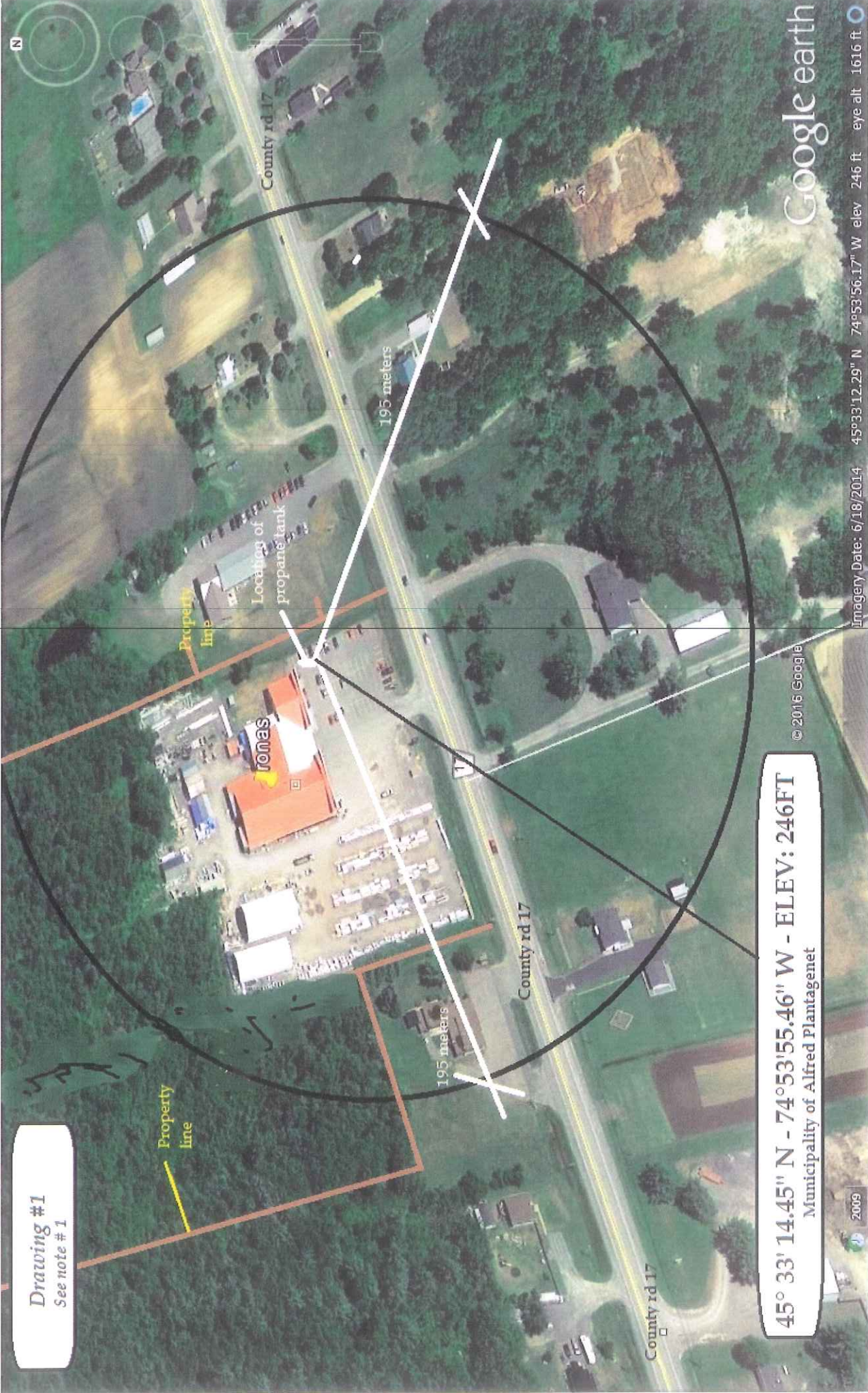
© 2016 Google

Google earth

2009

Imagery Date: 6/18/2014

45°33'12.29" N 74°53'56.17" W elev 246 ft eye alt 1616 ft





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SECTION C: SUBMISSIONS (cont'd)

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

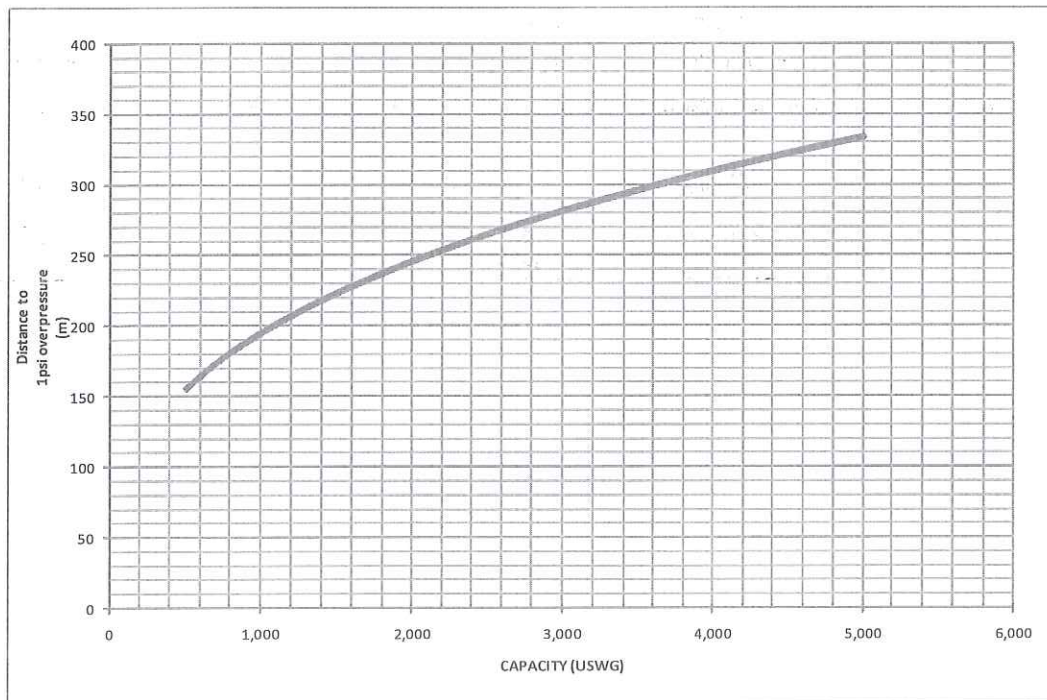
Table 1: Distance Table

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: <u>Materiaux Pont Masson Alfred (location of dispenser)</u> Address: <u>4920 Hwy 17</u> City: <u>Alfred</u> Province <u>Ontario</u> Postal Code <u>K0B 1A0</u>			x		<u>7.8</u> m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: [REDACTED] Address: [REDACTED] City: [REDACTED]			x		<u>173</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>PiiComm</u> Address: <u>4916 Hwy 17</u> City: <u>Alfred</u> Province <u>Ontario</u> Postal Code <u>K0B 1A0</u>		x			<u>44</u> m
<i>Residential</i> Name: <u>Viola Levac</u> Address: <u>4899 Hwy 17</u> City: <u>Alfred</u> Province <u>Ontario</u> Postal Code <u>K0B 1A0</u>			x		<u>129</u> m
<i>Residential</i> Name: <u>Martin Leclair</u> Address: <u>4931 Hwy 17</u> City: <u>Alfred</u> Province <u>Ontario</u> Postal Code <u>K0B 1A0</u>			x		<u>143</u> m
<i>Residential</i> Name: <u>Normand Robitaille</u> Address: <u>4881 Hwy 17</u> City: <u>Alfred</u> Province <u>Ontario</u> Postal Code <u>K0B 1A0</u>		x			<u>173</u> m

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

Declaration: I am aware that it is an offence to give false information in this document and I hereby declare that the information I have given here is true and complete.

Name of person completing this form (please print) <u>Pascal Denis</u>	Official Title <u>Owner Fernand Denis Inc</u>
Signature 	Telephone No. <u>613-524-2897</u> Date (dd-mmm-yyyy) <u>3/05/10</u>



Technical Standards and Safety Authority
www.tssa.org

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

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

SECTION C: SUBMISSIONS (cont'd)
Applicant must include a Facility Site Plan and Map of Surrounding Area

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

Table 2: Buildings and Features

Buildings and Features Present within the Circle on the Map of the Surrounding Area AND Name and Address of Closest Building or Feature	* Number of Buildings and Features (mark with an "X")				Distance from Tank to Closest Building or Feature
	0	1	2-10	11+	
Industrial buildings or parks or golf courses Name: _____ Address: _____ City: _____ Province _____ Postal Code _____					_____ m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: _____ Address: _____ City: _____		x			155 _____ m
<i>Residential</i> Name: Alain Carrere Address: 4888 Hwy 17 City: Alfred Province Ontario Postal Code K0B 1A0			x		128 _____ m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____					_____ m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____					_____ m
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".

Declaration: I am aware that it is an offence to give false information in this document and I hereby declare that the information I have given here is true and complete.

Name of person completing this form (please print) <i>Nasral Amin</i>	Official Title <i>F. Amin's Inc Owner</i>
Signature <i>[Signature]</i>	Telephone No. <i>613-524-2897</i> Date (dd-mmm-yyyy) <i>3/5/16</i>



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WORKSHEET

Portable Storage Additional Information Worksheet

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9		
# 100	29.5		
# 40	11.75		
# 33.3	9.62	10	92.60
# 30	8.8		
# 20	5.8		
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity			

Tanks Stored On-site Not Connected for Use

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

Total Cylinder Capacity	96.20
Total Tank Capacity	
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	96.20