



Technical Standards and Safety Authority  
 www.tssa.org  
 14th Floor - Centre Tower  
 3300 Bloor Street West  
 Toronto Ontario M8X2X4  
 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.

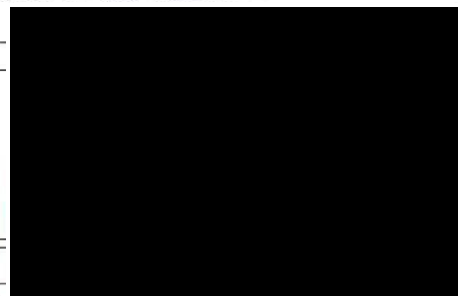
Failure to fully complete this form may result in rejection.  
 Making a false statement may result in a fine or prosecution under the *Technical Standards and Safety Act*

Licence Number 000231818

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 1912482 ONTARIO INC. Ontario Corporation No., if applicable \_\_\_\_\_

**A** Operator Name (if different from above) \_\_\_\_\_

Telephone No. 613 756 4010 Fax No. 613 756 4010 E-mail liutao82@hotmail.com

**B** Street No. 19272 Street Name / 911 Number / Address, if applicable Hwy 60

Town / City or Township / County Barry's Bay Province Ont Postal Code K0J 1B0

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. 19272 Street Name / 911 Number / Address, if applicable Hwy 60 Nearest Major Intersection Hwy 62

Town / City or Township / County Barry's Bay Province Ont Postal Code K0J 1B0

Name of Licence Holder 1912482 ONTARIO INC.

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). Qiang Zhang ROT type \_\_\_\_\_

Municipality (or municipalities if the facility or its hazard distance touches multiple borders) TOWN SHIP OF MADAWASKA VALLEY

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>1912482 ONTARIO INC. Qiang Zhang</u>		<u>02/01/2015</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training <u>Qiang Zhang</u>		<u>02/01/2015</u>



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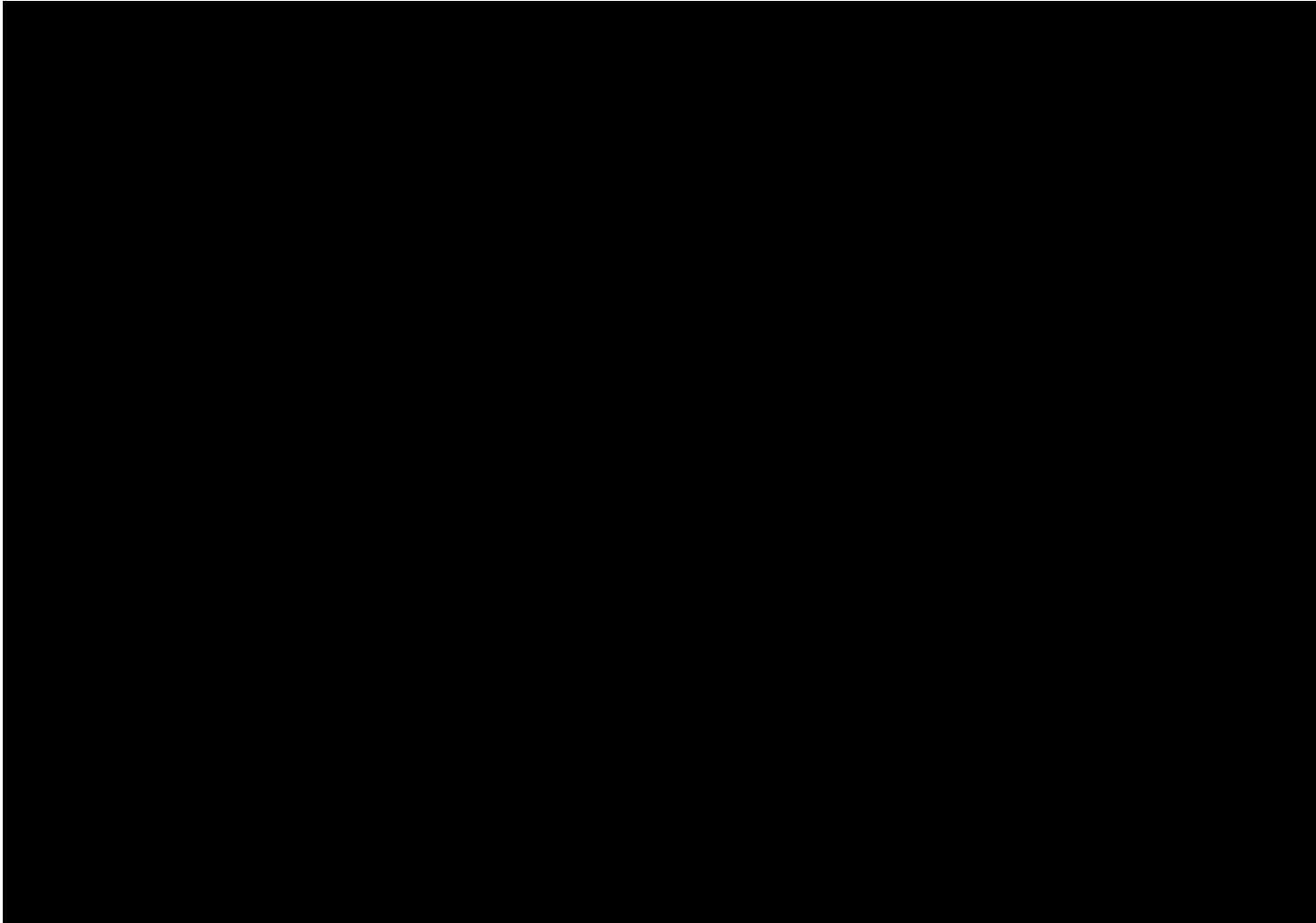
**SECTION A: GENERAL INFORMATION (cont'd)**

Indicate the year the facility was established. Unknown	Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. June 15,2014
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Identify the psig rating and serial number for each fixed propane storage tank on site.

	PSIG	Serial Number
Tank 1:	250	7241
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.



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Name of person completing this form (please print) Qiang Zhang	Official Title President
Signature 	Telephone No. 613 756 4010
	Date (dd-mm-yyyy) 02/01/2015



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

Activity Information

Name of Propane Supplier(s) Superior Propane			For Office Use - Party No.		
Street No. 6750	Street Name / 911 Number / Address, if applicable Century Avenue				
Town / City or Township / Country Mississauga			Province ON	Postal Code L5N 2V8	
Telephone No. 705 738 7033	Fax No.	Contact Name Ron Taylor - Field Operation Manager			
E-mail TaylorR@superiorpropane.com					

Name of Propane Transporter. If same as above, please check box. <input type="checkbox"/>			For Office Use - Party No.		
Superior Propane -Barrie					
Street No. 789	Street Name / 911 Number / Address, if applicable Bayview Dr				
Town / City or Township / Country Barrie			Province ON	Postal Code L4N 9A5	
Telephone No. 705 726 1963	Fax No.	Contact Name Dan Parmenter			
E-mail parmentd@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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**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.

Supreme Gasoline - 15,000 litre storage - underground tanks (as per attached site plan)

Regular Gasoline - 80,000 litre storage - underground tanks (as per attached site plan)

Diesel - 20,000 litre storage, - underground tank (as per attached site plan)

Colored Diesel - 15,000 litre storage, - underground tank (as per attached site plan)

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

MOD 20 PCK1

Located @ 1 @ the Propane Dispenser

Located @ 1 each gasoline pump

Located @ 1 in store and 1 in garage

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 - isolation valve between the tank and the downstream propane dispensing equipment.

2. Emergency Shut Off - at propane tank. This shuts down the pump and closes a solenoid valve upstream of hoses.

3. Power supply breaker inside the gas bar 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's Maintenance Standards. Schedule for key equipment is:

1- Pumps - (pumps every 3 months; pump motor: check belts monthly; grease pump every 6 months).

2- ISC valve (test for closure every 6 months).

3- Storage tank Relief Valves - inspected every 2 years; replacement schedule as per provincial regulations.

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

1. Contacts for Emergency Response

<b>1. Facility Contact Personnel - Key Contact</b>		<b>5. Facility 24-Hour Contact Person</b>	
Name Qiang Zhang	For Office Use - Party No.	Name Tom Liu	For Office Use - Party No.
Official Title President		Official Title Officer	
Telephone No. 613 756 4010	Fax No. 613 756 4010	Cell No. 416 820 5118	Fax No. 613 756 4010
E-mail liutao82@hotmail.com		E-mail liutao82@hotmail.com	
Role and responsibilities in emergency Co-ordinate site response plan (ERP)		Role and responsibilities in emergency Co-ordinate site response plan (ERP)	
<b>2. Facility Contact Personnel - Alternate Contact</b>		<b>6. Name of Facility Manager</b>	
Name Tom Liu	For Office Use - Party No.	Name Tom Liu	For Office Use - Party No.
Official Title Officer		Official Title Officer	
Telephone No. 416 820 5118	Fax No. 613 756 4010	Telephone No. 416 820 5118	Fax No. 613 756 4010
E-mail liutao82@hotmail.com		E-mail liutao82@hotmail.com	
Role and responsibilities in emergency Co-ordinate site response plan (ERP)		Role and responsibilities in emergency Co-ordinate site response plan (ERP)	
<b>3. Local Fire Services - Key Contact</b>		<b>7. Propane Supplier Key Contact Person</b>	
Name Andy Peplinskie	For Office Use - Party No.	Name Ron Taylor	For Office Use - Party No.
Official Title Fire Chief Official	E-mail ajpeplinskie@gmail.com	Official Title Field Operation Manager	E-mail TaylorR@superiorpropane.com
Telephone No. 613 756 2747 Ext 216	Fax No. (613) 756-0553	Telephone No. 705 738 7033	Fax No.
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 personal as required	
Fire Services Address 17 Billings St, Barry's Bay, ON K0J 1B0		Propane Supplier Address Suite 400, 6750 Century Avenue, Mississauga, ON L5N 2V8	
<b>4. Local Fire Services - Alternate Contact</b>		<b>8. Municipal Contact</b>	
Name Kevin Chapeskie	For Office Use - Party No.	Name Silas Lorbetski	For Office Use - Party No.
Official Title Deputy Fire Chief - North Hall	E-mail	Official Title Planning & Licensing Officer	
Telephone No. 613-633-3814	Fax No. ( )	Telephone No. 613 756 2747 Ext. 217	Fax No. (613) 756-0553
Role and responsibilities in emergency Coordinate Emergency Response / advise on Fire Service Response. Liaise with police services.		E-mail slorbetski@madawaskavalley.ca	
Fire Services Address 17 Billings St, Barry's Bay, ON K0J 1B0		Municipality Name and Address 85 Bay Street, PO Box 1000, Barry's Bay, ON, K0J 1B0	

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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) Q2-2014	Print Name of Training Provider: Superior Propane
	Print Name of Instructor: Kirk Gunter
Training Date (dd-mm-yyyy) None	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy) None	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) Q2-2014	Print Name of Training Provider: Glenn Villeneuve previous owner
	Print Name of Instructor: Glenn Villeneuve
Training Date (dd-mm-yyyy) None	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy) None	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) 07-07-2014	Print Name of Training Provider: FSN Training & Development Inc
	Print Name of Instructor: Leo Alkenbrack cert # T111
Training Date (dd-mm-yyyy) 15-07-2014	Print Name of Training Provider: FSN Training & Development Inc.
	Print Name of Instructor: Leo Alkenbrack cert # T111
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)	Print Name of Training Provider: Nikum Patel	Please note: Canadian Propane Gas Association
10-07-2014	Print Name of Instructor: Nikum Patel (Friend of the owner)	has currently developed the course PTI 911-02
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	content and it and its provider was available to be
None	Print Name of Instructor:	taught in the first month of taking over business
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	
None	Print Name of Instructor:	

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

Target Date (dd-mm-yyyy)	Print Name of Training Provider: 1912482 ONTARIO INC.	
08-08-2014	Print Name of Instructor: Tao(Tom) Liu -Officer	Key Contact: to train staff
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	
None	Print Name of Instructor:	
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	
None	Print Name of Instructor:	

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

Target Date (dd-mm-yyyy)	Print Name of Training Provider: FSN Training & Development Inc.	Please Note - a ROT is valid for 3 years
07-07-2014	Print Name of Instructor: Leo Alkenbrack Cert # T111	Note: To call training provider if any training is required
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	in 2014
None	Print Name of Instructor:	
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	
None	Print Name of Instructor:	

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Qiang Zhang	President	
Signature	Telephone No.	Date (dd-mm-yyyy)
	613 756 4010	02/01/2015





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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 on site and part of the employee training). If it is safe to do so this could involve 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. Stage evacuation, if the release of propane cannot 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.

Actions will be taken by an 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 the 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 the 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 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 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-BLEVE perspective (a near empty tank will BELEVE sooner than a full tank if there is a fire impingement on the tank).

This information will be provided to the authorities by Key Contact Qiang Zhang or alternate Tao (Tom) Liu.

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

Key Contact: 1 hour to arrive at the facility in the event of an emergency

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Signature 	Telephone No. 613 756 4010	



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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>34m pond access</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>350m fire hydrant</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

<b>To be completed by the Local Fire Services</b>	<b>Yes</b>	<b>No</b>
Has the local fire service had an opportunity to review the Emergency Response and Preparedness Plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If not, please explain (e.g., no fire services).		
Fire services comments, if any: Fire Chief Officer Andy Peplinskié has no comments, this is long time operational facility, Fire department is very familiar with and satisfied with Emergency Response and Preparedness Plan		
<b>To be completed by the Licence Holder</b>		
In response to the above comments, the following action(s) is required: None		
The licence holder will respond to the Local Fire Services comments by: <u>continue being in contact with Fire Department on regular basis</u> (dd-mm-yyyy)		

<b>LOCAL FIRE SERVICES</b>		
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 Andy Peplinskié		Dec 9 <sup>th</sup> 2014

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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-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) June 10, 2014	Capacity of single largest propane storage vessel (USWG) 2000 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: <u>18.59 m</u>	Right side property line: <u>39.67 m</u>
Rear: <u>65.83 m</u>	Left side property line: <u>55.08 m</u>
GPS coordinates of single largest vessel: <u>Latitude 45.490235 Longit-77.659133</u>	

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

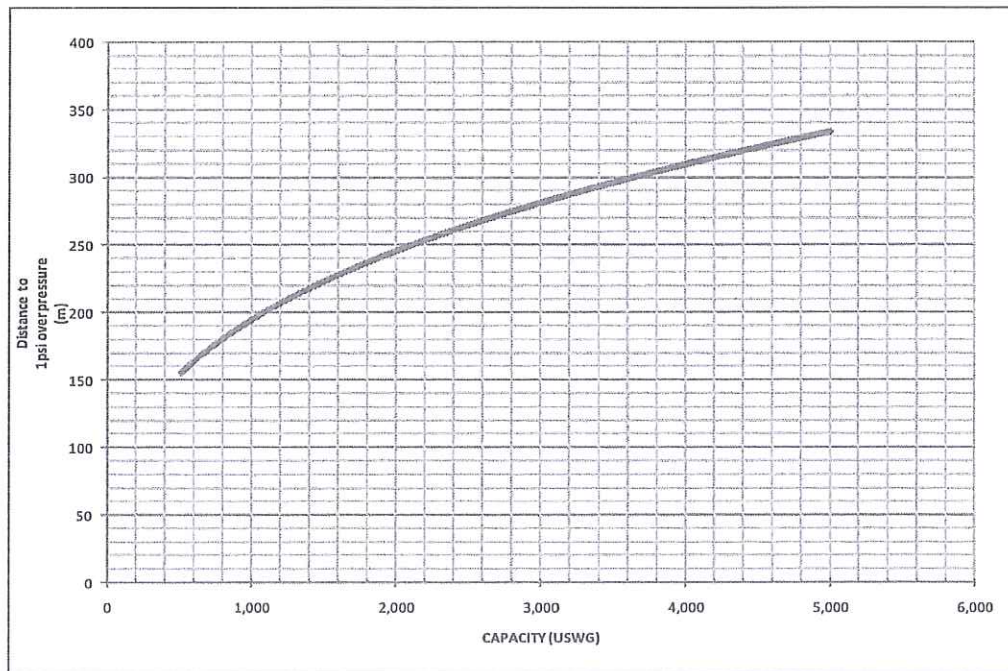
Table 1: Distance Table

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)





Technical Standards and Safety Authority  
www.tssa.org

14th Floor - Centre Tower  
3300 Bloor Street West  
Toronto Ontario M8X2X4  
Fax: 416.231.4903  
Customer Service: 1.877.682.8772

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

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

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

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

**Table 2: Buildings and Features**

Buildings and Features Present within the Circle on the Map of the Surrounding Area AND Name and Address of Closest Building or Feature	* Number of Buildings and Features (mark with an "X")				Distance from Tank to Closest Building or Feature
	0	1	2-10	11+	
Industrial buildings or parks or golf courses Name: <u>Hydro One Networks Inc</u> Address: <u>19288 Highway 60</u> City: <u>Barry's Bay</u> Province <u>Ont</u> Postal Code <u>K0J 1B0</u>		x			<u>100</u> m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. [Redacted]			x		<u>100</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>Our own building</u> Address: <u>19272 Highway 60</u> City: <u>Barry's Bay</u> Province <u>Ont</u> Postal Code <u>K0J 1B0</u>			x		<u>25</u> 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: _____ Address: _____ City: _____ Province _____ Postal Code _____	x				_____ 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".

**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) Qiang Zhang	Official Title President	Date (dd-mm-yyyy) <u>02/01/2015</u>
Signature 	Telephone No. 613 756 4010	



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

**WORKSHEET**

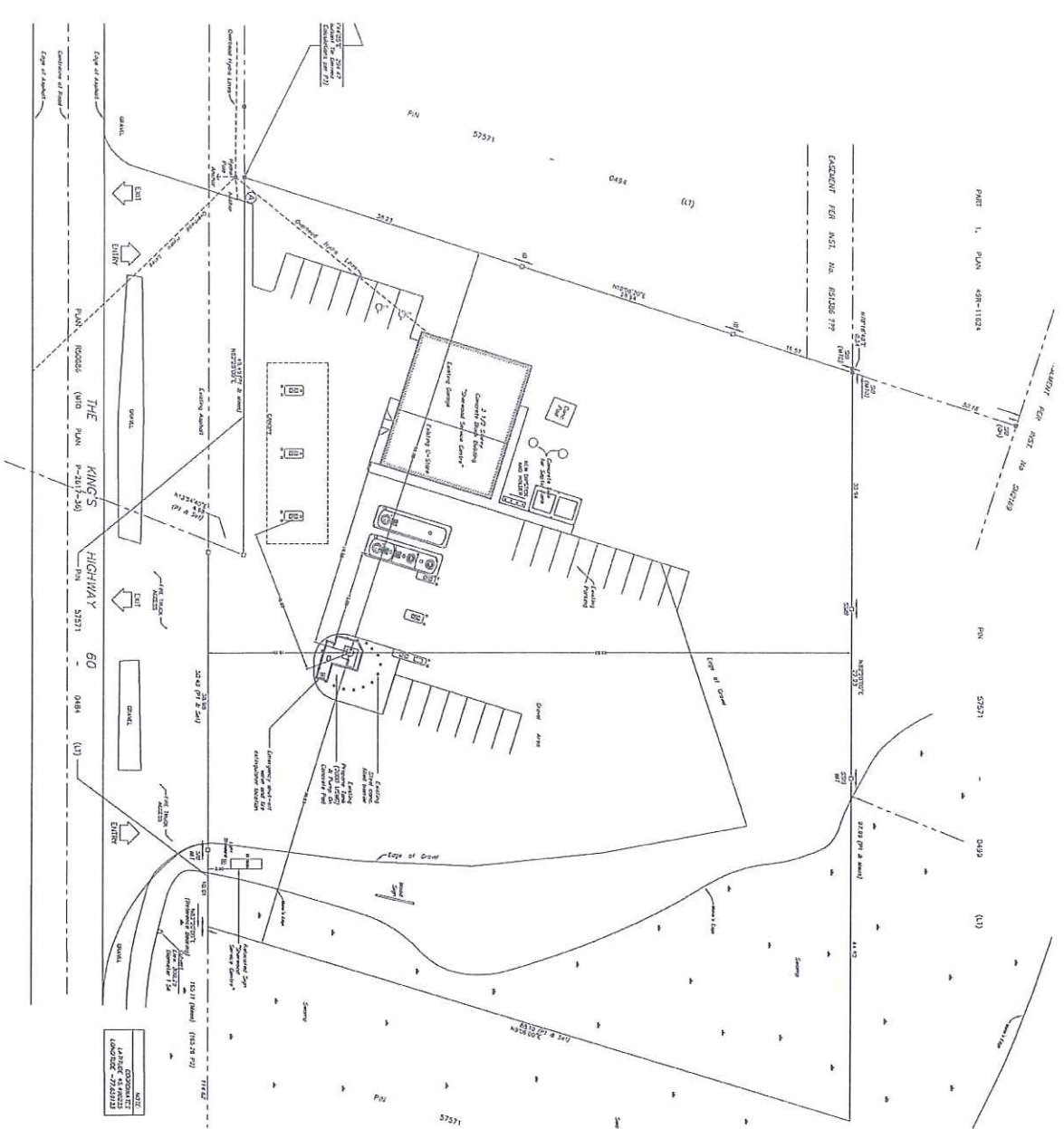
Portable Storage Additional Information Worksheet

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	15	87
# 10	2.9	0	0
# 5	1.5	0	0
<b>Total Cylinder Capacity</b>			<b>87</b>

Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
0	0	0
<b>Total Tank Capacity</b>		<b>0</b>

<b>Total Cylinder Capacity</b>	87
<b>Total Tank Capacity</b>	2000 USWG
<b>Total Portable Capacity</b> (Total Cylinder Capacity + Total Tank Capacity)	87



PART 1, PLAN 488-11024

PLAN 52521

(1)

EXCERPT FROM N.S. PLAN 621268 777

THE KING'S HIGHWAY 60

PLAN 9-261-340

(1)

PROJECT/MONTH	TRAILE NORTH	BY	DATE
1	TRAILE APPROVAL	DM	14.12.25
<p>THIS DRAWING IS THE PROPERTY OF THE ENGINEER AND ARCHITECT. IT IS TO BE USED ONLY FOR THE PROJECT AND SITE SPECIFICALLY IDENTIFIED HEREIN. IT IS NOT TO BE REPRODUCED, COPIED, REPRODUCED, OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, WITHOUT THE WRITTEN PERMISSION OF THE ENGINEER AND ARCHITECT. THE USER OF THIS DRAWING IS RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS FROM THE APPROPRIATE AUTHORITIES.</p>			
<p><b>DRAWN BY:</b> MADON PINEK E: mpinek@triale.com</p>			
<p><b>PROJECT:</b> GAS STATION @ 19272 HIGHWAY 60 BARRY'S BAY ON.</p>			
<p><b>SHEET TITLE:</b> PROPANE STORAGE VESSEL FOR TSSA APPROVAL</p>			
DATE:	APP2	DATE:	
SCALE:	1:250	SCALE:	
PROJECT NO:	2022-2024	PROJECT NO:	

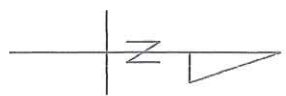




Hazard Distance: 246 m

2000 USWG PROPANE DISPENSER

PROPERTY LINE



MUNICIPAL CONTACT:  
 TOWNSHIP OF MADAWASKA VALLEY  
 SOLS LOBRETSKI  
 PLANNING AND LICENSING OFFICER  
 Phone: (613) 756 2747 EXT 217  
 Fax: (613) 756 0553  
 Email: SLOBRETSKI@MADAWASKAVALLEY.CA

CAPACITY OF PROPANE TANK : 2000 USWG VERTICAL TANK

GPS COORDINATES:  
 Latitude 45.490235 Longitude -77.659133

CIRCULAR DISTANCE TO 1 PSI OVER PRESSURE: 246 m

**Barry's Bay**  
 ADDRESS: 19272 HWY 60, BARRY'S BAY, ONTARIO K0J 1B0

DRAWN BY: HN DATE: NOV 24/14

**Superior**  
 Propane

AREA MAP



**NOTES:**

THE INFORMATION HAS BEEN REVIEWED AND APPROVED BY MARIAN HUYEK AT BARRY'S BAY ULTRAMAR

**Branch 9 Statistics**

- Area A=0
- Area B=0
- Area C=0
- Area D=4725 ft<sup>2</sup>

E=A+2x8      E=0  
 F=C+2xD      F=9450 ft<sup>2</sup>

**Summary**

- 1) No Schools within 300 ft distance
- 2) Distance from the tank to the nearest residential building is over 300 ft

3) E+1x F=9450 ft<sup>2</sup> < 15,000 ft<sup>2</sup>

**Barry's Bay Ultramar**

ADDRESS: 19272, Hwy 60, Barry's Bay, Ontario K0J 1B0

DRAWN BY: HN      DATE: NOV 17/14

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Propane

BRANCH STANDARD #9