



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;
- a facility with a fixed propane storage capacity of 5,000 USWG or less;
- 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 000205749

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: A & J Marshall Holdings Ltd. Ontario Corporation No., if applicable: \_\_\_\_\_

Operator Name (if different from above): Andrea and Jeff Marshall

Telephone No.: 705-687-3422 Fax No.: 705-687-6916 E-mail: andreamarshall082@gmail.com Jeff Marshall [ctas82@gmail.com]

**B** Street No.: 431 Street Name / 911 Number / Address, if applicable: Talisman Drive

Town / City or Township / County: Gravenhurst Province: Ontario Postal Code: P1P0A7

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:

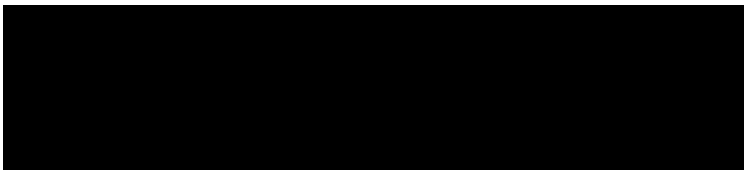
**D** Street No.: 431 Street Name / 911 Number / Address, if applicable: Talisman Drive Nearest Major Intersection: Talisman Drive & Muskoka Rd

Town / City or Township / County: Gravenhurst Province: Ontario Postal Code: P1P0A7

Name of Licence Holder: A & J Marshall Holdings Ltd.

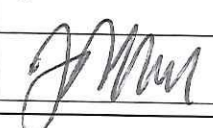
Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT): Jeff Marshall ROT type: PTI Course 100-08

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

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 Name of Licence Holder: <u>A &amp; J Marshall Holdings, Ltd.</u>	Signature 	Date (dd-mm-yyyy) <u>03/04/13</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training: <u>Jeff Marshall</u>		



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

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

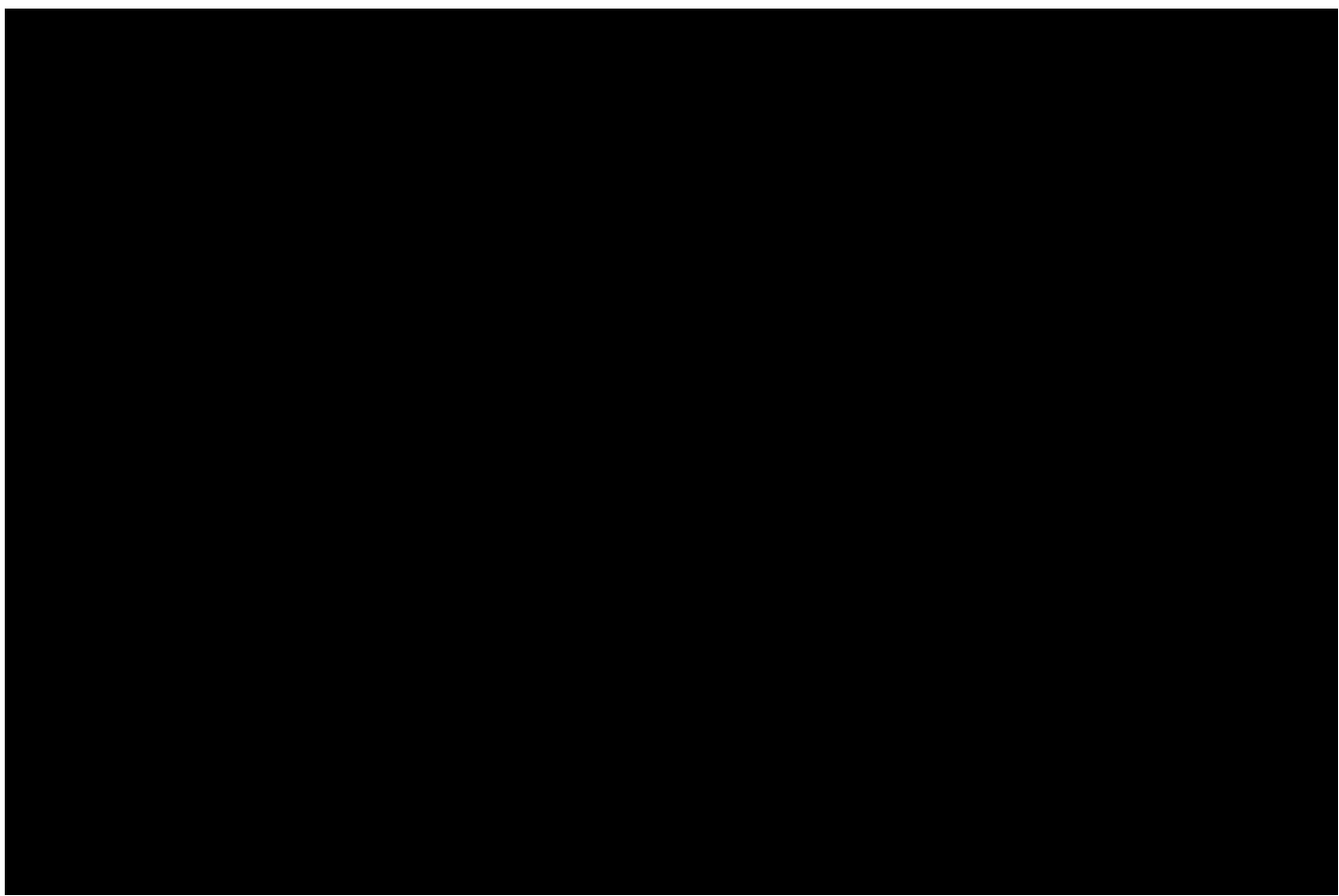
Indicate the year the facility was established. 2009      Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. n/a

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

	PSIG	Serial Number
Tank 1:	<u>max wp 250PSI at 120*</u>	<u>CRNB7029-65489TY321</u>
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: 2000      Portable: n/a      Mobile: n/a



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Name of person completing this form (please print) <u>Carol Black</u>		Official Title <u>Office Manager</u>	
Signature <u>Carol Black</u>		Telephone No. <u>705-687-3422</u>	Date (dd-mm-yyyy) <u>03/04/19</u>



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

Activity Information

Name of Propane Supplier(s) Superior Propane - Ontario Regional Operations Centre				
Street No. 251	Street Name / 911 Number / Address, if applicable Woodlawn Road West, Unit 217			
Town / City or Township / Country Guelph		Province Ontario	Postal Code N1H 8J1	
Telephone No. 1-877-873-7467	Fax No. 519-836-7766	Contact Name Mike Mullins		
E-mail mullinsm@superiorpropane.com				

Name of Propane Transporter. If same as above, please check box. <input type="checkbox"/>				
Superior Propane - 5008-BALA				
Street No. 10109	Street Name / 911 Number / Address, if applicable Gordon Street			
Town / City or Township / Country Bala		Province Ontario	Postal Code P0C 1A0	
Telephone No. (416) 459-9705	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
Telephone No.		Postal Code
Fax No.	Contact Name	

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

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Signature 	Telephone No. 705-687-3422
	Date (dd-mm-yyyy) 03/04/13





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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.

Three tanks Co2 max volume , 44litre liquid/ 1590 psi per tank, Two size 44 Oxygen tanks volume 248.84 cu ft per tank,

four acetylene tanks volume 129 cu ft per tank, on west wall in garage, back of garage

Two 1000 litre containers of new motor oil, two 200 litre barrels of new motor oil west side of garage, front of shop

One 2200 litre container of waste oil and one 1000 litre container of waste antifreeze store outside of west shop wall in a fenced compound

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

Fire extinguishers are located in propane filling station, inside man door of the garage (beside emergency shut off), bay #2, alignment bay, beside back door (west wall) and beside brake tester bay ( front bay, west wall). All are clearly marked with appropriate signage

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.

Fire Safety plan located in locked box in entrance way to service department. Lock box contains store fire safety plan , propane emergency information, site maps, sprinkler/ standpipe info and emergency contact list.

Maintenance and testing schedule for fire protection controls and devices.

Fire extinguishers inspected monthly and replaced as needed, Sprinkler system and alarms inspected yearly by Alarm Pro of Muskoka. Propane filling station and relief valves inspected yearly. Inspection certificates and training logs at store with Fire safety Plan and Health and Safety binder.

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Signature 		Telephone No. 705-687-3422	Date (dd-mm-yyyy) 03/04/13



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

1. Contacts for Emergency Response

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

Name  
**Andrea Marshall**  
For Office Use - Party No.

Official Title  
**Dealer**

Telephone No.  
**705-687-3422** Fax No.  
**705-687-6916**

E-mail  
**andreamarshall082@gmail.com**

Role and responsibilities in emergency  
**Co-ordinate site response.**

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

Name  
**Jeff Marshall**  
For Office Use - Party No.

Official Title  
**Dealer**

Cell No.  
**705-394-8978** Fax No.  
**705-687-6916**

E-mail  
**Jeff Marshall [ctas82@gmail.com]**

Role and responsibilities in emergency  
**Co-ordinate site response.**

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

Name  
**Mike Pongratz**  
For Office Use - Party No.

Official Title  
**Parts Manager**

Telephone No.  
**705-687-2541** Fax No.  
**n/a**

E-mail  
**parts@62.ctcstores.ca**

Role and responsibilities in emergency  
**Co-ordinate site response if Dealer not available.**

**6. Name of Facility Manager**

Name  
**Jeff Marshall**  
For Office Use - Party No.

Official Title  
**Dealer**

Telephone No.  
**705-687-3422** Fax No.  
**705-687-6916**

E-mail  
**Jeff Marshall [ctas82@gmail.com]**

Role and responsibilities in emergency  
**Co-ordinate site response.**

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

Name  
**Larry Brassard**  
For Office Use - Party No.

Official Title  
**Fire Chief**

Telephone No.  
**705-687-3414** Fax No.  
**705-687-5725**

E-mail  
**lbrassard@gravenhurst.ca**

Role and responsibilities in emergency  
**Co-ordinate/ advise on Fire Service response. Liase with police**

**7. Propane Supplier Key Contact Person**

Name  
**Superior Propane Hotline**  
For Office Use - Party No.

Official Title

Telephone No.  
**1-877-873-7467** Fax No.

E-mail

Role and responsibilities in emergency

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

Name  
**Rob King**  
For Office Use - Party No.

Official Title  
**Fire Prevention**

Telephone No.  
**705-687-3414** Fax No.  
**705-687-5725**

E-mail  
**rking@gravenhurst.ca**

Role and responsibilities in emergency  
**Alternate Coordinate/advise on Fire Services Response. Liase with police**

**8. Municipal Contact**

Name  
**Candace Thwaites**

Official Title  
**Emergency Planning Coordinator**

Telephone No.  
**705-687-3412** Fax No.  
**N/A**

E-mail  
**cthwaites@gravenhurst.ca**

Municipality  
**Town of Gravenhurst, District of Muskoka**

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Name of person completing this form (please print) <b>Carol Black</b>	Official Title <b>Office Manager</b>
Signature 	Telephone No. <b>705-687-3422</b> Date (dd-mm-yyyy) <b>03/04/13</b>





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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 inside propane fill station, Second emergency shut off inside shop by front man door.

Propane pump shut off / reset inside front auto service bay North, North west wall above bulk oil tanks.

Breaker to shut propane fill station off located in upstairs office

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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) 20/03/2013	Print Name of Training Provider: Superior Propane
	Print Name of Instructor: Jim Houghton
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) Date of Hire	Print Name of Training Provider: Canadian Tire #062
	Print Name of Instructor: Immediate supervisor, Canadian Tire University and Windley Ely online training/ testing
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) March every year	Print Name of Training Provider: Windley Ely
	Print Name of Instructor: On line training/ testing
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

4. Emergency Training Plan for Coming Year

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

Target Date (dd-mm-yyyy) 20/03/14	Print Name of Training Provider: Superior Propane
	Print Name of Instructor: Jim Houghton
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) 01/03/13	Print Name of Training Provider: Canadian Tire #062/ Windley Ely
	Print Name of Instructor: Health and Safety review
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) Q1 2013	Print Name of Training Provider: F.S.W.
	Print Name of Instructor: Bill Bird
Target Date (dd-mm-yyyy) Q1 2014	Print Name of Training Provider: F.S.W.
	Print Name of Instructor: Dave Kennedy
Target Date (dd-mm-yyyy)	Print Name of Training Provider: Superior Propane
	Print Name of Instructor:

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Signature 	Telephone No. 705-687-3422
	Date (dd-mm-yyyy) 03/04/13





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

**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).

Propane handler would immediately contact Auto staff, Manager would be called and so would 911. Manager would page if store needed to be evacuated.

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).

Action and warnings would be given by the opening/ closing manager, Store Manager. If store is evacuated staff have been trained to go to the furthest point away from the Propane station. North East corner of parking lot. This is referred to as the Common Area in the Fire safety Plan.

This is also practised in our yearly fire drill

**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).

Each morning the opening Manager inspects the fill station. If a problem is noted the propane station is not opened until the Service Manager or General Manager contact Superior propane and they deem it safe.

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

Filling Station is very visible in the parking lot and is in a large open area. Authorities will not have any difficulties accessing the site. There are two separate entrances into the parking lot.

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

If it is safe to do so the Dealer or Store Manager will take the readings from the propane gauges and provide this information to the appropriate authorities  
If the staff are evacuated to the common area the Dealer or Store Manager would assume control until the Fire department arrive. In the event they are not on site, the Service Manager, Cash Manager or Parts Manager would take control, attendance and immediately start to notify local business and block customer access to parking lot.

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

It will take the Dealer approximately 10 minutes to reach the store and the First alarm responder (CTC Parts Department Manager living in town) approx. 5 minutes to reach the store.

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Signature 	Telephone No. 705-687-3422	Date (dd-mm-yyyy) 03/04/13



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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>60.96 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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Name of person completing this form (please print) Carol Black	Official Title Office Manager	
Signature 	Telephone No. 705-687-3422	Date (dd-mm-yyyy) 26/02/13



**To:** 'Carol Black'  
**Subject:** RE: RSMP for TSSA

Good Afternoon Carol,

I am available Friday afternoon (April 12<sup>th</sup>) after 1400:00 hours.  
If you are available and you would like to bring all of the information with you to the Gravenhurst Fire Department headquarters at 190-1 Harvie Street I will schedule it in.  
Please bring the Fire Safety Plan (including the Fire Department approval form/sign-off) and the RSMP with you.

*Regards,*



*Robert King*

**Certified Fire Prevention Officer**  
**Certified Public Fire & Life Safety Educator**  
**BCIN 33376**

Town of Gravenhurst  
190-1 Harvie Street | Gravenhurst, ON | P1P 1H3

☎ Phone (Direct Line): 705.687.3414 Ext. 223

Fax: 705.687.5725

✉ Email: [rking@gravenhurst.ca](mailto:rking@gravenhurst.ca) | Website: [www.gravenhurst.ca](http://www.gravenhurst.ca)



**Please consider the environment before printing this e-mail.**

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Such material may contain privileged or confidential information, the disclosure or other use of which by other than the intended recipient may result in the breach of certain laws or the infringement of rights of third parties. If you received this correspondence in error, please notify us immediately by calling our office at 705-687-3412 so that we can make appropriate arrangements for the return of the same.  
Please be advised that this disclaimer does not take the accountability or responsibility away from the individual or the Corporation, however, it may be of some protection if we were ever in a legal battle.

---

**From:** Carol Black [<mailto:cblack@62.ctcstores.ca>]  
**Sent:** Wednesday, April 03, 2013 2:41 PM  
**To:** King, Robert  
**Subject:** RSMP for TSSA

Dear Mr. King,

I would like to make an appointment with you to go over the Risk and Safety Management Plan that the TSSA requires for the change of ownership for the Propane Refill Centre Licence at Canadian Tire. Section B of the Emergency and Preparedness Plan requires that the local fire services review and sign that section of the plan. Would you please let me know when you are available to go over this with me. I can be reached at 705-687-3422 extension 188.

I also have updated our Fire Safety Plan with the names and contact numbers of the new owners of the Canadian Tire store at 431 Talisman Drive, Gravenhurst. I have a copy of this information for your records and as well an updated Pesticide Storage Notification sheet for you.



Thank you,

Carol Black  
Office Manager  
A&J Holdings Ltd.  
Canadian Tire #062



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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		

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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) <b>2011 - 08 - 16</b>	Capacity of single largest propane storage vessel (USWG) <b>2000uswg</b>
Tank setback coordinates. Indicate placement on the map.	
Front: <b>60.6 metres</b>	Right side property line: <b>16 metres</b>
Rear: <b>77.5 metres</b>	Left side property line: <b>149 metres</b>
GPS coordinates of single largest vessel: <b>44.9221 -79.3759</b>	

**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) <b>Carol Black</b>	Official Title <b>Office Manager</b>
Signature 	Telephone No. <b>705-687-3422</b>
	Date (dd-mm-yyyy) <b>03/04/13</b>





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

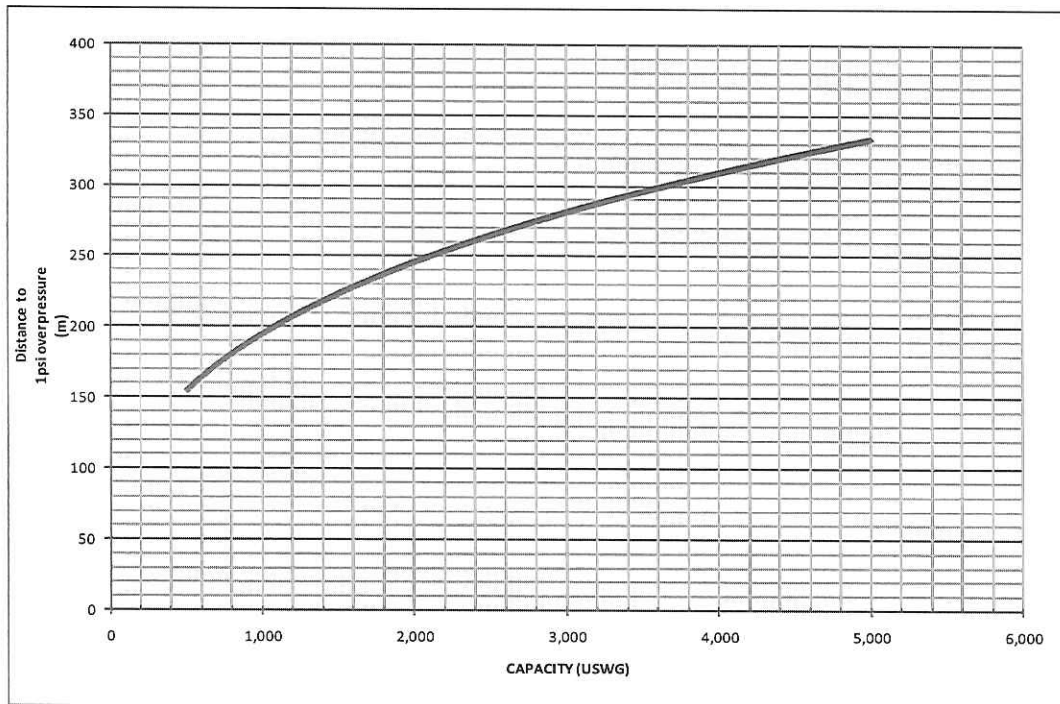
Table 1: Distance Table

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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Signature 		Telephone No. 705-687-3422	Date (dd-mm-yyyy) 03/04/13



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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>Industrial Mall</u> Address: <u>205 Margaret Street Unit 7</u> City: <u>Gravenhurst</u> Province <u>ON</u> Postal Code <u>P1P 0A7</u>			x		<u>600</u> m
Residential building units specifically permanent single family dwellings, condominiums, and apartments Name: <span style="background-color: black; color: black;">[REDACTED]</span> Address: <span style="background-color: black; color: black;">[REDACTED]</span> City: <span style="background-color: black; color: black;">[REDACTED]</span>		x			<u>1000</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>Strip mall</u> Address: <u>351 Talisman Drive Unit 5</u> City: <u>Gravenhurst</u> Province <u>ON</u> Postal Code <u>P1P 0A7</u>			x		<u>120</u> m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: <u>Howard Johnsons Motel</u> 705-687-7707 Address: <u>1165 Muskoka Road South</u> City: <u>Gravenhurst</u> Province <u>ON</u> Postal Code <u>P1P 0A7</u>		x			<u>1100</u> m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: <u>Leisure World</u> Address: <u>200 Kelly Drive</u> City: <u>Gravenhurst</u> Province <u>Ont</u> Postal Code <u>P1P 1L3</u>		x			<u>1100</u> m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: <u>Gravenhurst Fire Department and OPP local headquarters</u> Address: <u>190 Harvie Street</u> City: <u>Gravenhurst</u> Province <u>Ont</u> Postal Code <u>P1P 1S9</u>					<u>2200</u> m

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

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Signature 	Telephone No. <u>705-687-3422</u>
	Date (dd-mm-yyyy) <u>03/04/13</u>

Table 2: Buildings and Features

Industrial Building

Glendon Products  
205 Margaret Street  
Gravenhurst, Ontario  
Phone (705)687-7058  
Distance 600m

Sensitive Institutions

Leisure World  
200 Kelly Drive  
Gravenhurst, Ontario  
Phone (705)687-3444  
Distance 1.1km

Emergency Responders-Fire Department

Fire Department  
190 Harvie Street  
Gravenhurst, Ontario  
Phone (705)687-3414 or 911  
Distance 2.2km

Commercial Building Units

Bulk Barn  
351 Talisman Drive, Unit 7  
Gravenhurst, Ontario  
P1P 0A7  
Phone (705)687-6603  
Distance 120m

Subway  
351 Talisman Drive, Unit 5  
Gravenhurst, Ontario  
P1P 0A7  
Phone (705)687-4000

Pet Value  
351 Talisman Drive, Unit 6  
Gravenhurst, Ontario  
P1P 0A7  
Phone(705)687-7671

Radio Shack/The Source  
351 Talisman Drive, Unit 3  
Gravenhurst, Ontario  
P1P 0A7  
Phone(705)687-8141

First Choice  
351 Talisman Drive  
Gravenhurst, Ontario  
P1P 0A7  
Phone(705)

Wild Wing  
351 Talisman Drive  
Gravenhurst, Ontario  
P1P 0A7  
Phone(705)684-9453  
Distance 184m

Sobeys  
225 Edward Street  
Gravenhurst, Ontario  
P1P 0A7  
Phone(705)684-8302  
Distance 298.6m

LCBO  
155 Edward Street  
Gravenhurst, Ontario  
P1P 0A7  
Phone (705)687-2641  
Distance 462m







Location of Propane Storage Tank:

Demarcated by  in centre of circle.

Capacity of Propane Storage Tank:

Capacity of Propane Storage Tank = 2000 USWG

GPS Coordinates of Propane Storage Tank:

GPS Co-ordinates = 44.9221, -79.3759

Circular Distance to 1 psi overpressure:

Denoted by circle centred on tank radial distance = 246 m

Note: Property Lines a setbacks shown on site plan.

Municipality (ies): within the 1 psi overpressure circle:

Municipal Contact:

Gravenhurst Fire Department

705-687-3414

Robert King

### Map of Surrounding Area

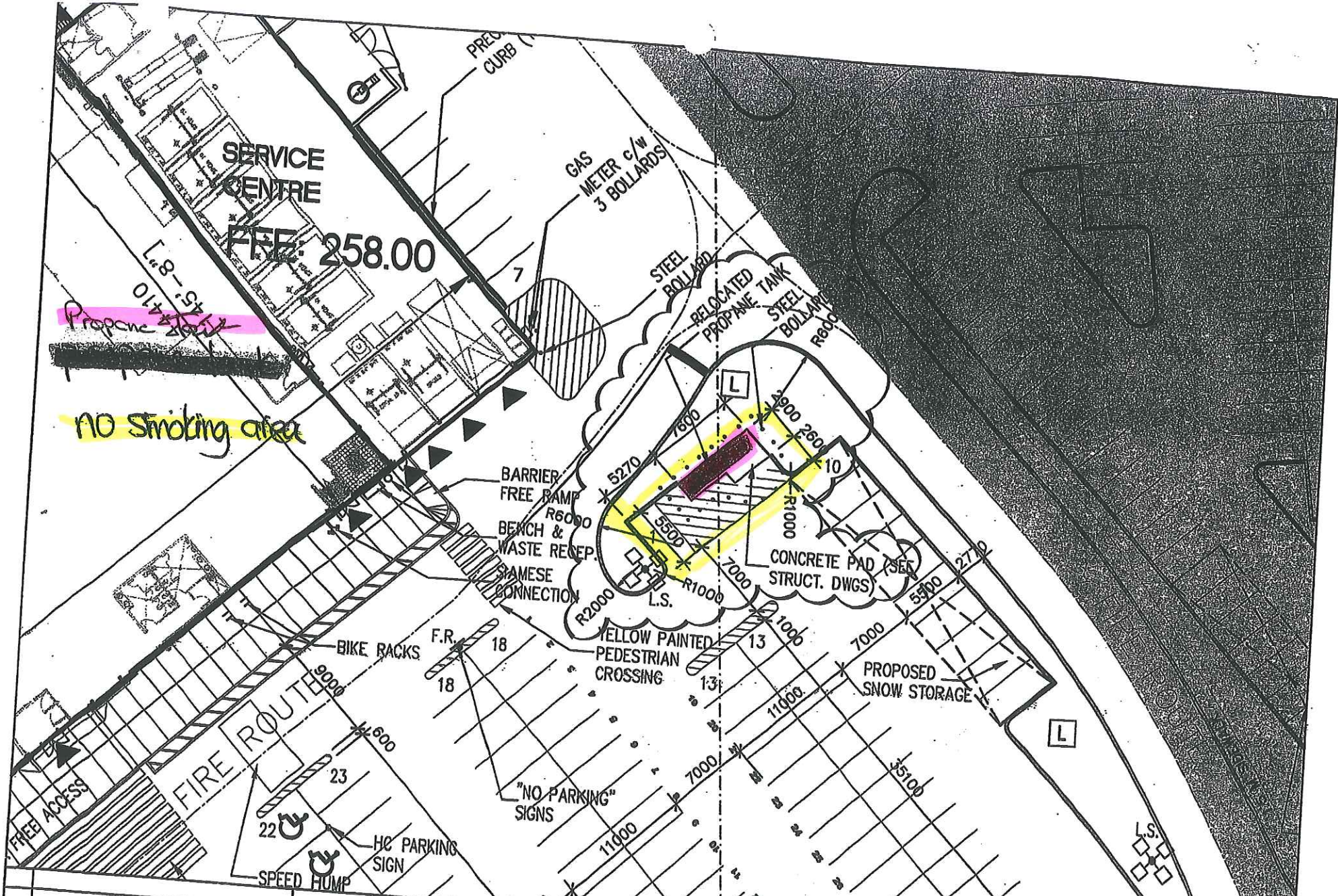
#### 431 TALISMAN DR. GRAVENHURST, ON P1P0A7

Part of Lot 5, Concession West of Muskoka Road, Muskoka, designated as Part 1 on Reference Plan 35R-16288, part of lot 5, concession east of Muskoka road, Muskoka, being Part of Muskoka Road, Muskoka, between Lot 2, Concession East of Parts 1 and 2 on Reference Plan 35R-16753, Town of Gravenhurst, District Municipality of Muskoka, being all of the lands in PIN 48188-0005(T)









NO Smoking area

**ALEX REBBANKS ARCHITECTS INC.**  
 1 St. Clair Avenue E. Suite 500  
 Toronto, Ontario  
 Canada, M4T 2V7  
 T 416 482 4343  
 F 416 482 0654  
 E info@alexrebbanks.com

0	ISSUED FOR CHANGE NOTICE #11	OCT. 08, 2008.
NO.	REVISIONS	DATE

PROJECT: 2008-08	DWG. TITLE: 501 TALISMAN DRIVE
DATE: 10/08/08	PART SITE PLAN
SCALE: 400	GRAVENHURST, ONTARIO
DWN: KA	STORE No:
CHKD: AK	IPCF C.C. #:
DWG. No. SKA-17	



CONTRACTOR SHALL LOCATE AND TIE INTO  
 CTS PROVIDED BY SITE SERVICE  
 2. EXTEND HYDRO DUCTS TO MAIN  
 D LOCATION. (REFER TO SINGLE LINE  
 DRAWING E09).  
 CTS FOR TELEPHONE TO TELEPHONE  
 IN COMPUTER ROOM AT MEZZANINE

PANEL 'B'

BACKBOARD AT  
 MEZZANINE.

METER CABINET

Black Oil

~~Sealing washers~~

~~Hazardous materials~~

~~Shipping Buttons~~

propane tank area

oxygen acetylene CO<sub>2</sub> tanks

waste oil, waste antifreeze

OUTLET FOR PROPANE STATION  
 T-86/88/90 & T-92  
 (CONNECTION TO BE SUIT CODE  
 REQUIREMENTS)  
 REFER TO DETAIL ON THIS DRAWING.  
 SEE SITE

1x25mmC TO BELL  
 AT SERVICE COUNTER

EXPLOSION PROOF/WEATHER-PROOF  
 BELL PUSH ON BOLLARD  
 T-94

**NOTES:**

- ELECTRICAL CONTRACTOR SHALL ALLOW TO CONNECT PROPANE FEED TO  
 PANEL/DISCONNECT VIA STARTER IN SERVICE CENTRE SUPPLIED AS PART OF PROPANE  
 STATION; CONTRACTOR TO ENSURE INSTALLATION TO CODE, EITHER TECK CABLE OR  
 WIRE WITH APPROPRIATE CONDUITS EYS, FITTINGS ETC. SEE DETAIL ON THIS DRAWING.

**h** HAMMERSCHLAG + JOFFE INC  
 69 Lesmill Road Toronto,  
 Ontario Canada M3B 2T8  
 T: (416) 444.9263  
 F: (416) 444.1463  
 E: dwg@hamiof.com

JOB		CANADIAN TIRE NO.062 GRAVENHURST	
DRAWING TITLE		Scale	N.T.S.
PART PLAN CNE-6		Date	OCT/06/08
		Job Number	08-159
		Part plan Of E01	ESK-01