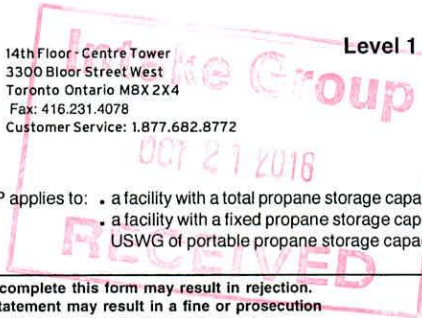




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Level 1 Risk and Safety Management Plan (RSMP)
Technical Standards and Safety Act
Propane Storage and Handling Regulation



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 of portable propane storage capacity of 5,000 USWG or less.

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

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 Corporation No.

Operator Name (if different from above)

Telephone No. Fax No. E-mail

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

Town / City or Township / County Province Postal Code

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

D Location of facility.

Street No. Street Name / 911 Number / Address, if applicable Nearest Major Intersection

Town / City or Township / County Province Postal Code

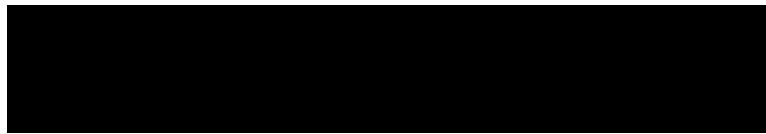
Name of Licence Holder

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT).

ROT type

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

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-mmm-yyyy)
Name of Licence Holder <u>Peter Puglia</u>		
Name of Senior Management person as defined in the Regulation holding the Record of Training <u>Peter Puglia</u>		07-10-2016



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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. 2013
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 PSIG	5.593268
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 USWG Portable: 325 USWA Mobile: N/A

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) Peter Puglia	Official Title Owner	
Signature 	Telephone No. 1.905.372.8781	Date (dd-mmm-yyyy) 07-10-2016



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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)

Activity Information

Name of Propane Supplier(s)		[Redacted]	
Superior Propane - Ontario Regional Operations Centre			
Street No.	Street Name / 911 Number / Address, if applicable		
251	Woodlawn Rd. West, Unit 217		
Town / City or Township / Country		Province	Postal Code
Guelph		Ontario	N1H 8J1
Telephone No.	Fax No.	Contact Name	
1.877.873.7467	1.519.836.7766	David Marvin	
E-mail			
MarvinD@SuperiorPropane.com			

Name of Propane Transporter. If same as above, please check box. <input type="checkbox"/>		[Redacted]	
Superior Propane			
Street No.	Street Name / 911 Number / Address, if applicable		
6722	Highway 7		
Town / City or Township / Country		Province	Postal Code
Peterborough		Ontario	K9J 6X5
Telephone No.	Fax No.	Contact Name	
1.705.927.2234	1.705.745.3834	Mark Wakeford	
E-mail			
WakeforM@SuperiorPropane.com			

Off-site Cylinder and/or Mobile Storage	Capacity stored off-site, in USWG	For Office Use - Party No.
Street No.	Street Name / 911 Number / Address, if applicable	
Town / City or Township / Country	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)	Official Title	
Peter Puglia	Owner	
Signature	Telephone No.	Date (dd-mmm-yyyy)
	1.905.372.8781	07-10-2016



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Propane Storage and Handling Regulation

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.

Site has waste oil tank and some grease and associated oils, solvents, for normal service garage operations. Store has minor aerosol containers and oils, varsol etc. but nothing that would be considered hazardous or explosive and not in great quantities

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

Facility is equipped with fire extinguishers. There are many fire extinguishers located throughout the store and auto service garage. (See Fire Plan)

Hydrants are located on Rogers Rd. and near Mark's Work Wearhouse.


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.

The propane tank will be equipped with a fusible link connected to a chain that will melt at 212 degrees F which will break the chain and the spring loaded ISC valve will close automatically shutting off the propane suction supply to the pump. Auto propane line has electric solenoid valve that will close when the Emergency Shut Down Button (ESD) is pushed. This will close the valve and stop the motor from pumping. There are no alarm systems or detection devices on the site.

Maintenance and testing schedule for fire protection controls and devices.

The fire extinguishers are checked monthly and retested annually for proper operation. The ESD and other propane equipment is tested annually by a qualified TSSA licensed pipe fitter and provincially licensed electrician.

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Name of person completing this form (please print) Peter Puglia	Official Title Owner	
Signature 	Telephone No. 1.905.372.8781	Date (dd-mmm-yyyy) 07-10-2016



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

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 Peter Puglia	For Office Use - Party No.	Name Peter Puglia	For Office Use - Party No.
Official Title Owner/Dealer		Official Title Owner/Dealer	
Telephone No. 1.905.372.8781	Fax No. 1.905.373.1714	Cell No. 1.306.630.6378	Fax No. 1.905.373.1714
E-mail pmpuglia@gmail.com		E-mail pmpuglia@gmail.com	
Role and responsibilities in emergency Is responsible for ensuring all employees are trained on Emergency Plan and site meets Fire Code and security		Role and responsibilities in emergency Same as item 1	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name Roger Burley	For Office Use - Party No.	Name Peter Puglia	For Office Use - Party No.
Official Title Service Manager		Official Title Owner/Dealer	
Telephone No. 1.905.372.871	Fax No. 1.905.373.1714	Telephone No. 1.905.372-8781	Fax No. 1.905.373.1714
E-mail N/A		E-mail pmpuglia@gmail.com	
Role and responsibilities in emergency Responds to Site when owner is not available and ensures all employees are accounted for if on-site during emergency.		Role and responsibilities in emergency Insures call is made to 9-1-1 and initiates shutdown and clears site of customers, Insures employees are accounted for and assigns staff as required.	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name Aaron Blair	For Office Use - Party No.	Name Jeff Voyer	For Office Use - Party No.
Official Title Captain/Fire Prevention Officer	E-mail ablair@cobourg.ca	Official Title Territory Sales Representative	E-mail Jeff_Voyer@SuperiorPropane.com
Telephone No. 1.905.372.9789 Ext. 3300	Fax No. 1.905.372.0869	Telephone No. 1.905.260.1168	Fax No.
Role and responsibilities in emergency Review the RSMPs for Cobourg and provides guidance to Owners with the Fire Code and insures sites are in compliance and coordinates inspections.		Role and responsibilities in emergency Knowledge of site operation. Part of Emergency Response Plan and can coordinate truck, equipment and personnel if required for evacuation.	
Fire Services Address Town of Cobourg, Fire Hall, 111 Elgin St. Eas, Cobourg, ON K9A 1A1		Propane Supplier Address 6722 Highway #7, Peterborough, ON K9J 6X5	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name	For Office Use - Party No.	Name Alison Torrie Lapaire	For Office Use - Party No.
Official Title	E-mail	Official Title Planner 1 - Development	
Telephone No.	Fax No.	Telephone No. 1.905.372.1005	Fax No. 1.905.372.1533
Role and responsibilities in emergency		E-mail atorrie@cobourg.ca	
Fire Services Address		Municipality Name and Address Town of Cobourg, Victoria Hall, 55 King Street West, Cobourg, ON K9A 1A1	

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Name of person completing this form (please print) Peter Puglia	Official Title Owner
Signature 	Telephone No. 1.905.372-8781
	Date (dd-mmm-yyyy) 07-10-2016



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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.
 Facility has a lockable enclosure that is locked after hours so all equipment on tank is tamperproof. Tank is protected by steel posts and an
 Emergency Shutdown system is in place that will kill power to the pump and solenoid valve when pushed therefore isolating tank from any propane leaks.
 Tank is in constant sight of employees in the garage area and is kept free of any obstructions so Fire Equipment access is easy and a large area to
 manoeuvre trucks around is available from the parking lot and Rogers Road.

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Name of person completing this form (please print) Peter Puglia	Official Title Owner	
Signature 	Telephone No. 1.905.372.8781	Date (dd-mmm-yyyy) 07-10-2016



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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) 07-10-2016	Print Name of Training Provider: CTC - 023
	Print Name of Instructor: Peter Puglia
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) 07-10-2016	Print Name of Training Provider: CTC - 023
	Print Name of Instructor: Peter Puglia
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) 07-10-2016	Print Name of Training Provider: Fuel Safety Network
	Print Name of Instructor: Leo Alkenbrack
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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Name of person completing this form (please print) Peter Puglia	Official Title Owner
Signature 	Telephone No. 1.905.372-8781
	Date (dd-mmm-yyyy) 07-10-2016



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

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)	Print Name of Training Provider: CTC - 023
TBD	Print Name of Instructor: Peter Puglia
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)	Print Name of Training Provider: CTC - 023
TBD	Print Name of Instructor: Peter Puglia
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)	Print Name of Training Provider: CTC - 023
TBD	Print Name of Instructor: Peter Puglia
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:

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)	Official Title
Peter Puglia	Owner
Signature 	Telephone No.
	1.905.372.8781
	Date (dd-mmm-yyyy)
	07-10-2016



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Level 1 Risk and Safety Management Plan (RSMP)
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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).
If there is a leak or fire at the tank area, the manager on duty will tell all customers to leave the store and then call 9-1-1 and ask for Fire Services and Police response. Barriers will be placed on the entrance/exits to Rogers Road to stop people from entering the areas around the propane tank. Customers will be directed to exit on the County Road 2 exit if safe to do so.

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).
Once the store is free of customers, the staff will meet at the "Muster Point" and when Emergency Responders arrive, they will isolate the area and make any decisions to evacuate the area and warn the businesses around the tank area such as Marks Work Warehouse. The "Muster Point" is in the Canadian Tire parking lot across the lane near the Tim Horton's property.

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).
Manager has access to a phone and they also have a cell phone that can be used to contact 9-1-1. The Manager on duty will call first.
The responsibility lies with the Manager to make the initial call after determining the level of hazard.

Describe provisions for fire department entry when there are no operations or staffing at the propane site.
The tank has a lockable enclosure that houses all the hoses, pump and other equipment. The site is not fenced so access to the tank is off Rogers Road.
There are no restrictions to the site from the street and the area around the tank is wide open.

Describe how the licence holder will ensure continual flow of updated information to authorities.
A manager will be at the site during operating hours and the Owner can be at the site in 15 minutes when notified. The information on the storage tank and cylinder cage status will be given directly to the Incident Commander by the Manager who will stay on site until directed to leave or close the facility.

How long will it take the facility liaison person to respond to the site.
The Facility Contact is local and can respond in 7 minutes as they are in the Town after shifts. Owner can be on site in 15 minutes if not on site already.

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Name of person completing this form (please print) Peter Puglia	Official Title Owner	
Signature 	Telephone No. 1.905.372.8781	Date (dd-mmm-yyyy) 07-10-2016



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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 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>28.5</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) Peter Puglia	Official Title Owner	
Signature 	Telephone No. 1.905.372-8781	Date (dd-mmm-yyyy) 07-10-2016



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Level 1 Risk and Safety Management Plan (RSMP)
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.

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.

<p>Print name Aaron Blair Local Fire Services Name Aaron Blair, Captain/Fire Prevention Officer</p>	<p>Signature </p>	<p>Date (dd-mmm-yyyy) 20/10/2016</p>
--	-----------------------	---

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<p>Name of person completing this form (please print) Peter Puglia</p>	<p>Official Title Owner</p>	
<p>Signature </p>	<p>Telephone No. 1.905.372.8781</p>	<p>Date (dd-mmm-yyyy) 07-10-2016</p>



THE CORPORATION OF THE TOWN OF COBOURG

COBOURG FIRE DEPARTMENT
11 ELGIN STREET EAST
COBOURG, ONTARIO K9A 1A1

Telephone (905) 372-9789
Fax (905) 372-0869
Email: fire@cobourg.ca
www.cobourg.ca

October 20th, 2016

Peter M. Puglia
Canadian Tire
1125 Elgin Street West
Cobourg, Ontario
K9A 5T9

RE: Risk and Safety Management Plan (RSMP) for 2000 USWG Propane Tank- Canadian Tire,
1125 Elgin Street West Cobourg, Ontario

The Cobourg Fire Department was recently asked to review the emergency response and preparedness plan for the above noted business.

Our office has now had an opportunity to review the document, dated October 7th, 2016, and it appears to be satisfactory.

Sincerely,

Shelby Rutherford
p.p. Aaron Blair
Chief Fire Prevention Officer



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Level 1 Risk and Safety Management Plan (RSMP)
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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-mmm-yyyy) 18-04-2013	Capacity of single largest propane storage vessel (USWG) 2000 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: 104.6 m	Right side property line: 185.2 m
Rear: 95.3 m	Left side property line: 5.7 m
GPS coordinates of single largest vessel: Lat 43 58' 9.02"N Long 78 12' 9.02"W	

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Name of person completing this form (please print) Peter Puglia	Official Title Owner
Signature	Telephone No. 1.905.372.8781
	Date (dd-mmm-yyyy) 07-10-2016



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

SECTION C: SUBMISSIONS (cont'd)

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

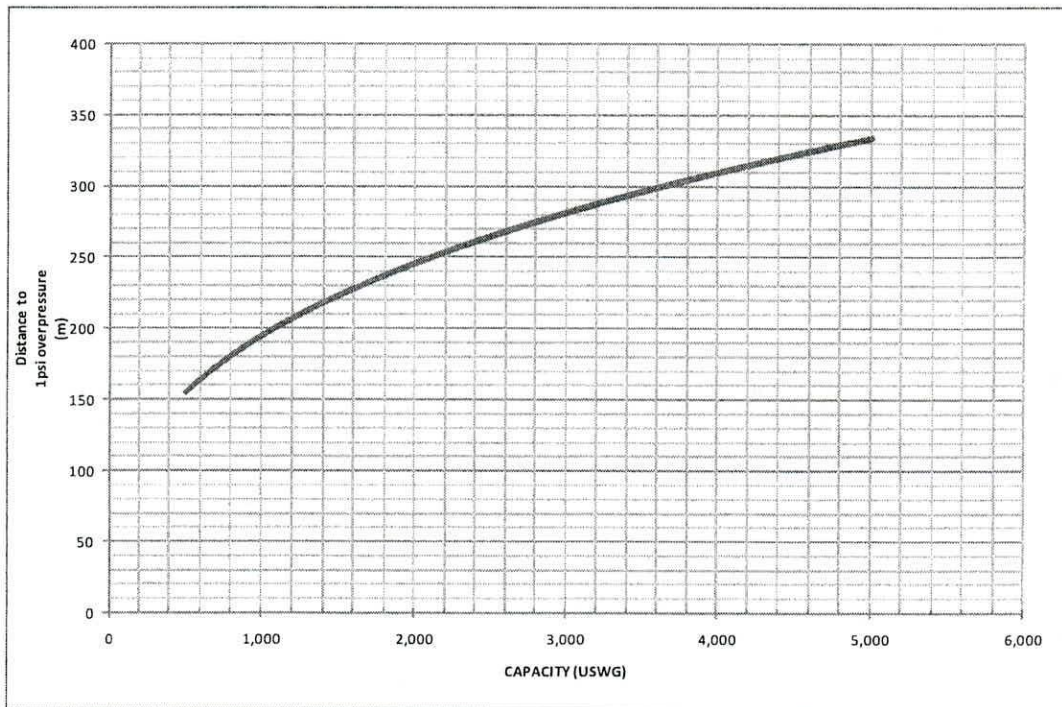
Table 1: Distance Table

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 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 _____	x				_____ m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: _____ Address: _____ City: _____				x	109 m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: Marks Work Warehouse Address: 1125 Elgin St. W City: Cobourg Province ON Postal Code K9A 5T9			x		61 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) Peter Puglia	Official Title Owners
Signature	Telephone No. 1.905.372.8781
	Date (dd-mmm-yyyy) 07-10-2016



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WORKSHEET

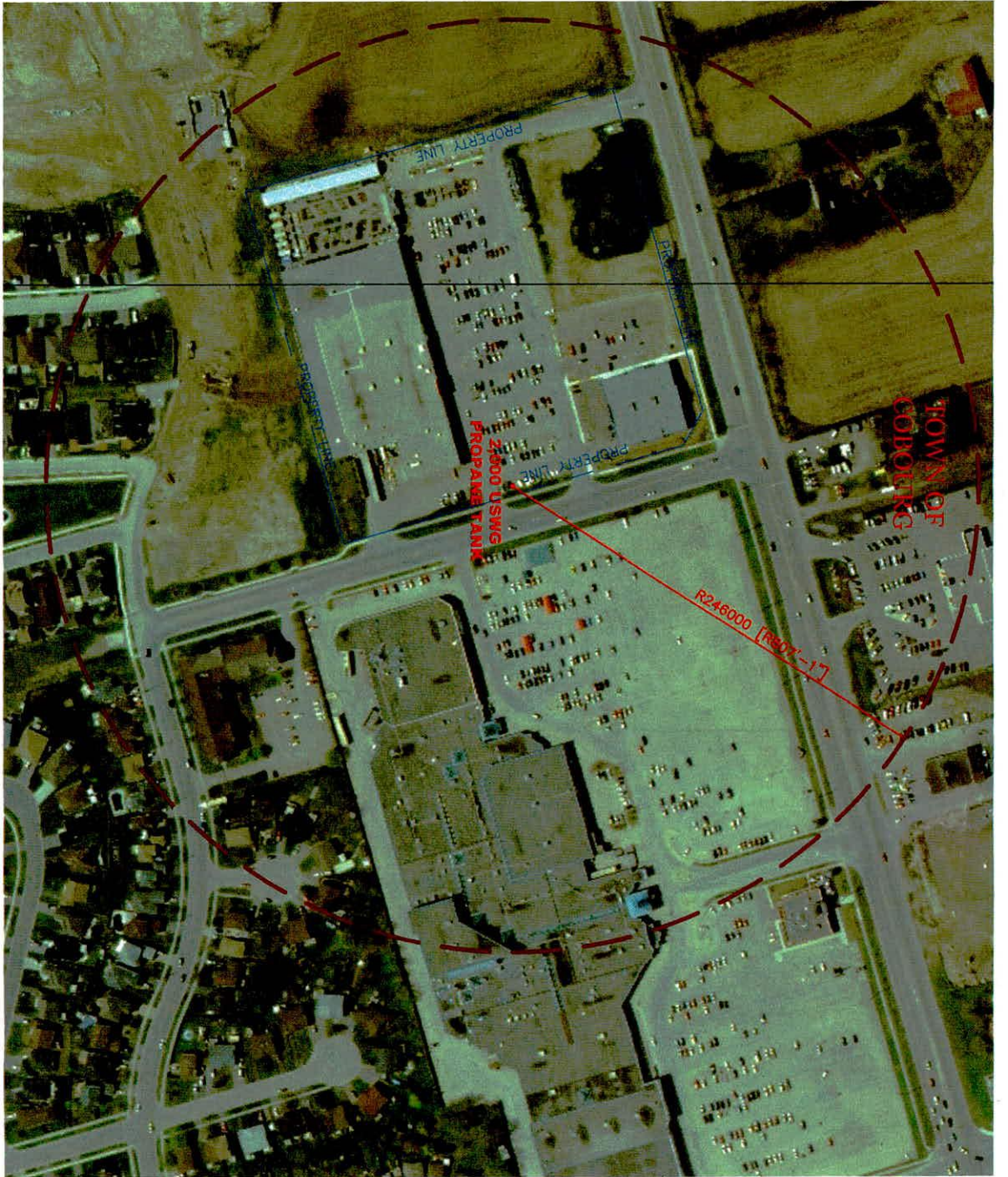
Portable Storage Additional Information Worksheet

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9		
# 100	29.5		
# 40	11.75		
# 33.3	9.62		
# 30	8.8		
# 20	5.8	48	325 USWG
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity			325 USWG

Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
2000 USWG	1	2000 USWG
Total Tank Capacity		

Total Cylinder Capacity	325 USWG
Total Tank Capacity	2000 USWG
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	2325 USWG



NOTES:
 CONSIDERANCE DISTANCE TO AN OVERPRESSURE LEVEL OF 1
 IS SHOWN FOR THE SUPERDEPRESSION OF THE RISK AND
 SAFETY MANAGEMENT PLAN

$$D = 17 \times \left(0.1 \times 8 + \frac{100}{1000} \right)^{1/2} = 24m$$

PROPERTY LINE SETBACKS	
NORTH	104.6m
SOUTH	83.3m
EAST	5.3m
WEST	183.2m

GPS COORDINATES	
LATITUDE	43°59'3.81"N
LONGITUDE	-78°13'02.7"W

AS PER TESTS CONDUCTED FOR THE SUPERDEPRESSION OF THE
 RISK AND SAFETY MANAGEMENT PLAN, THIS FACILITY ONLY
 REQUIRES A LEVEL 1 RISK SUPERDEPRESSION.

PLANNING ADVISORY INFORMATION:

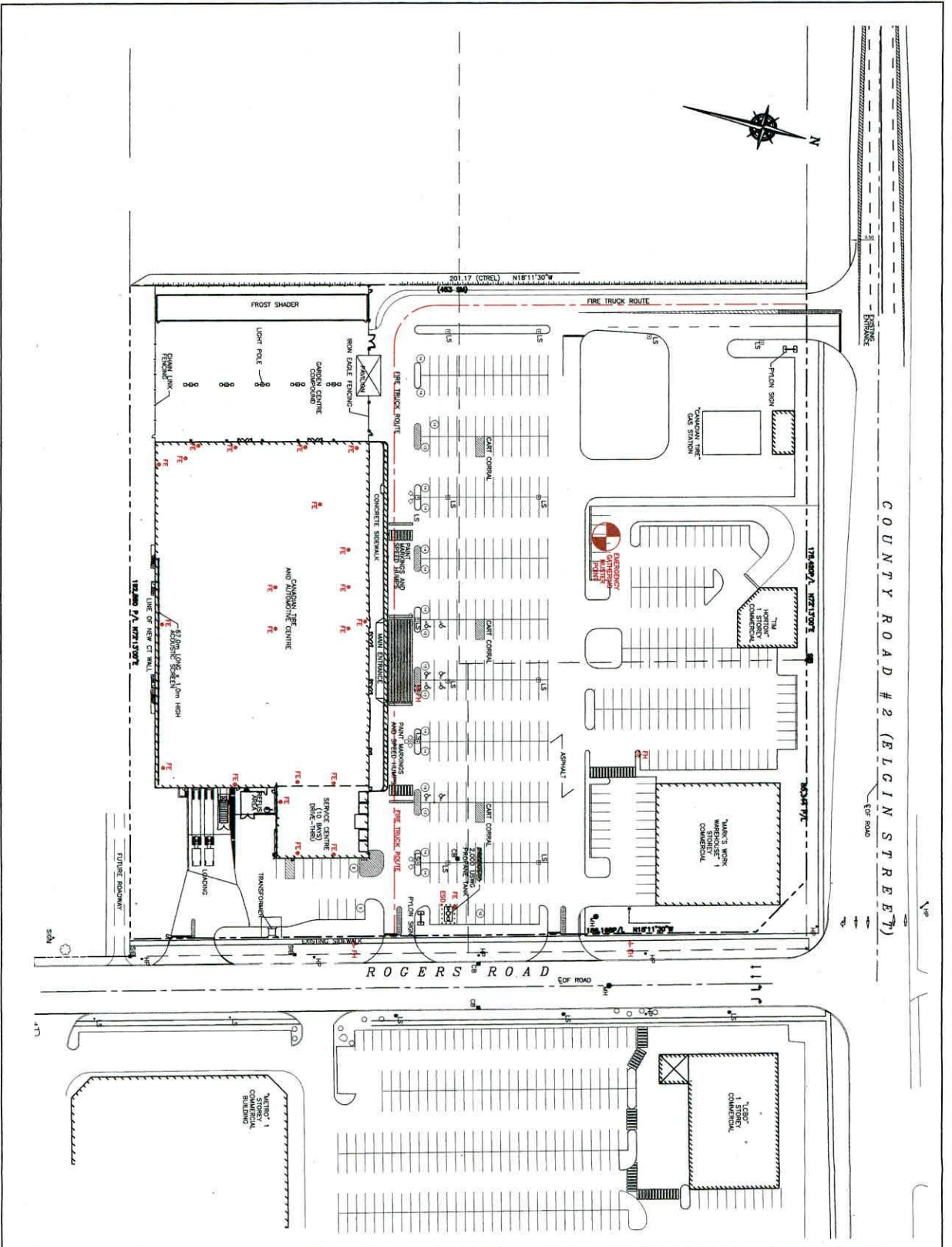
AS PER TEST ADVISORY REQUIREMENTS, THE
 FOLLOWING PLANNING INFORMATION IS
 PROVIDED BELOW:
 THE CORPORATION OF THE TOWN OF CARleton
 50 KING STREET WEST 2ND
 CARLETON, ONT. N0A 2A2
 ATTN: MR. CONROD V. BOVAC
 TEL: 505.33.5211 EXT. 2411

NO.	DATE	REVISIONS	BY	CHK
1	DEC. 04, '14	SCALE BASED CHANGING P.L. NORTH SUEDE LTD.		JMC
2	DEC. 14, '15	ISSUED FOR PERMITS		JMC



ALTENG INC.
 Alternative Energy Consulting
 128 North Crescent, Toronto, Ontario M1S 2S3
 Telephone: (905)764-1644 Fax: (905)764-4488

Prepared by: **J.A.E.**
 Checked by: **J.A.E.**
 Drawing Title: **BLDG. LAYOUT FOR 2400 USWG PROpane TANK**
 Drawing No.: **130400-2-000**
 Drawing Date: **0**
 Project Number: **130400**
 Project Name: **P-200**



COUNTY ROAD #2 (ELGIN STREET)

ROGERS ROAD



KEY PLAN
SCALE: N.T.S.

ZONING INFORMATION:
LOT AREA: 35545.4sq.m.
BUILDING AREA: 1389sq.m.
LOT COVERAGE OF BUILDING: 3.91%

PROPERTY LINE SETBACKS

NORTH	10.5m
SOUTH	8.5m
EAST	6.0m
WEST	183.0m

GPS COORDINATES

LATITUDE	43°29.92'N
LONGITUDE	78°17.92'W

- LEGEND:**
- FE PRE-EXISTING/EXISTING
 - EDB EMERGENCY SHUT-DOWN
 - TH FREE THROUGH (DRY)
 - METER POINT ON WIND DIRECTION

NO.	DESCRIPTION	DATE	BY
1	PRELIMINARY DESIGN	JAN 12, 2010	JAK
2	REVISED DESIGN	FEB 15, 2010	JAK
3	REVISED DESIGN	MAR 15, 2010	JAK
4	REVISED DESIGN	APR 15, 2010	JAK



ALTENG INC.
Alternative Energy Consulting
126 Main Street, Suite 100, Elgin, ON N2H 1A5
Tel: (855)784-1644 Fax: (855)784-5988

Project: PA PAVILION SALES LTD. (1/4 of Condemn Trk)
1125 5th St. W.
Elgin, ON N2H 5N1

Client: ALK
Date: APR 04, 13
Drawing Scale: 1:200

Client: ALK
Date: APR 04, 13
Drawing Scale: 1:101