



Technical Standards and Safety Authority  
 www.issa.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; 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.

AUG 1

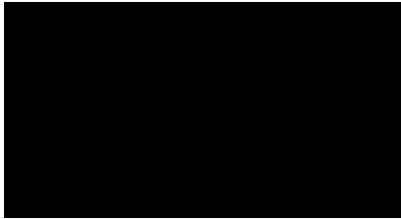
Failure to fully complete this form may result in rejection.  
 Making a false statement may result in a fine or prosecution under the *Technical Standards and Safety Act*

Licence Number: 0076568021-C

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: 1089375 Ontario Ltd. (o/a Pickering Car Wash)    Ontario Corporation No., if applicable: 1089375 Ontario Ltd.

Operator Name (if different from above): Pickering Car Wash

Telephone No.: 905-686-8609    Fax No.: 416-438-5805    E-mail: abholat@rogers.com

Street No.: 1740    Street Name / 911 Number / Address, if applicable: Bayly Street

Town / City or Township / County: Pickering    Province: Ontario    Postal Code: L1W 3N3

Mailing address if different from above.

Street No.:    Street Name / 911 Number / Address, if applicable: Same as Above

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



**Information on Container Refill Centre or Filling Plant**

Location of facility.

Street No.: 1740    Street Name / 911 Number / Address, if applicable: Bayly Street    Nearest Major Intersection: Bayly Street & Brock Road

Town / City or Township / County: Pickering    Province: Ontario    Postal Code: L1W 3N3

Name of Licence Holder: Adam Bholat

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT): Adam Bholat    ROT type: PPO-3

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

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>Adam Bholat</u>		<u>29-07-2011</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training: <u>Adam Bholat</u>		<u>28-07-2011</u>



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

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

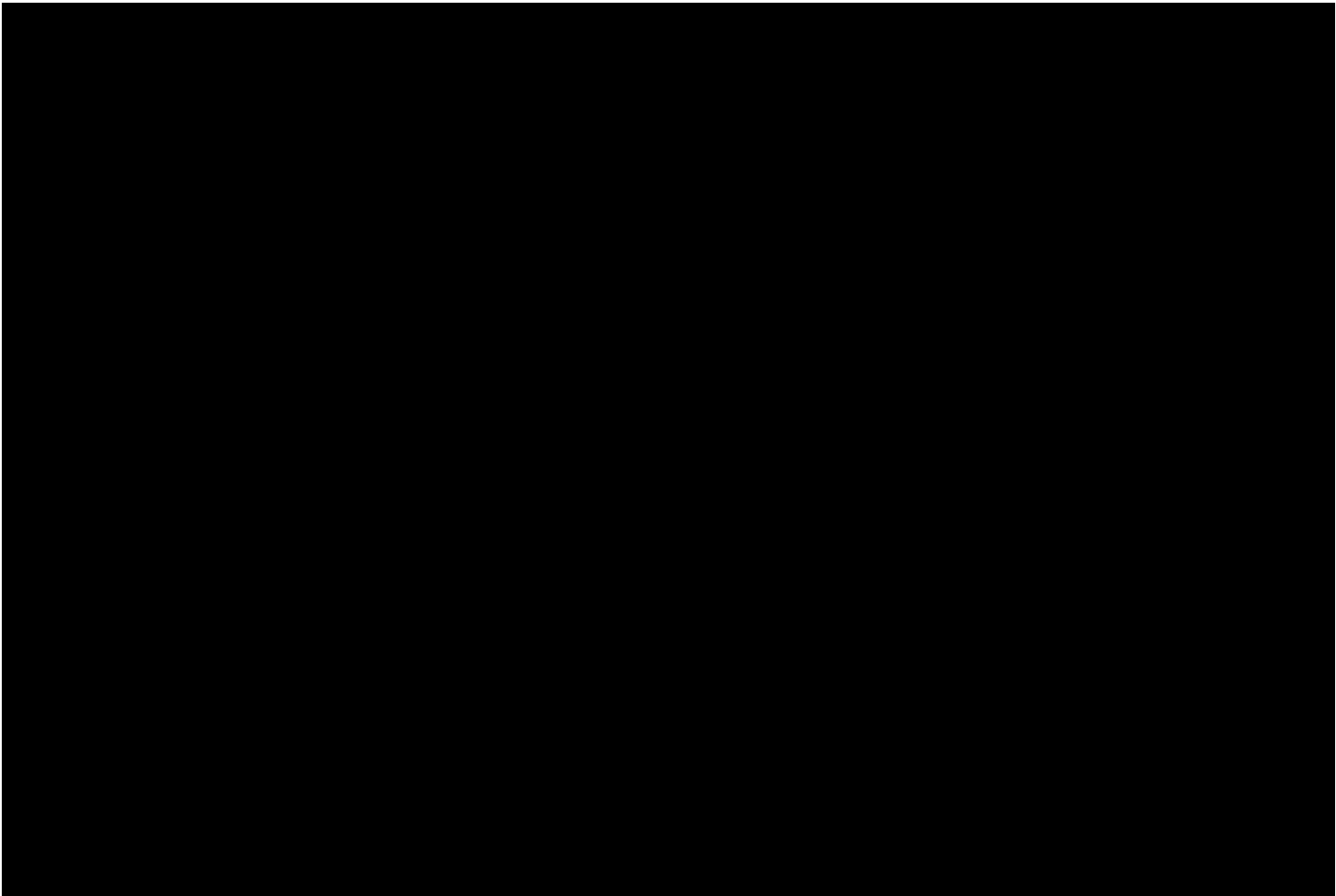
Indicate the year the facility was established. 2007      Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment.  
No significant changes have taken place

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

	PSIG	Serial Number
Tank1:	<u>250 PSIG</u>	<u>57-97</u>
Tank2:	_____	_____
Tank3:	_____	_____

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: 81.2 USWG      Mobile: N/A



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Name of person completing this form (please print) <u>Adam Bholat</u>		Official Title <u>Owner</u>
Signature 	Telephone No. <u>647-773-0943</u>	Date (dd-mm-yyyy) <u>29-07-2011</u>



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

Activity Information

<b>Name of Propane Supplier(s)</b> Primemax Energy Inc.		For Office Use - Party No.	
Street No. 2558	Street Name / 911 Number / Address, if applicable Cedar Creek Road R.R.#1		
Town / City or Township / Country Ayr		Province Ontario	Postal Code NOB 1E0
Telephone No. 1-519-740-8209	Fax No. 1-519-740-1015	Contact Name Jim Taylor	
E-mail primemax@primemaxenergy.com			

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

<b>Off-site Cylinder and/or Mobile Storage</b> N/A	Capacity stored off-site, in USWG	For Office Use - Party No.	
Street No.	Street Name / 911 Number / Address, if applicable		
Town / City or Township / Country		Province	Postal Code
Telephone No.	Fax No.	Contact Name	

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

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Name of person completing this form (please print) Adam Bholat		Official Title Owner	
Signature 		Telephone No. 647-773-0943	Date (dd-mm-yyyy) 29-07-2011



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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.

Facility is an operating Car Wash with some chemical storage for soap and other cleaners. There are no major hazardous materials on site that are associated with this operation.

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

The propane tank has three fire extinguishers at the tank area. Two are in the cylinder filling cabinet and there is one on the post near the Auto Propane Dispenser. There is one inside the attendants office and one near the end truck car wash bays

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 tank is equipped with a ISC valve that is connected to a chain equipped with a fusible link that will melt in the event of a fire at 212 F. This will insure the spring loaded valve will close automatically to stop propane from reaching the leak. There is an electric solenoid valve on the piping to the auto propane dispenser so in the event of hitting the Emergency Shutdown Button (ESD) this will stop flow from the tank in case of a hose leak.

Maintenance and testing schedule for fire protection controls and devices.

The fire extinguishers are tested routinely and tagged by an outside company certified to carry out this work.

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Name of person completing this form (please print) Adam Bholat	Official Title Owner	
Signature 	Telephone No. 647-773-0943	Date (dd-mm-yyyy) 29-07-2011



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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 Adam Bholat		Name Adam Bholat	
Official Title Manager/Operator		Official Title Manager/Operator	
Telephone No. 647-773-0943	Fax No. 416-438-5805	Cell No. 647-773-0943	Fax No. 416-438-5805
E-mail abholat@rogers.com		E-mail abholat@rogers.com	
Role and responsibilities in emergency To insure all employees are trained in the Emergency Plan annually and to make sure all equipment is maintained and operational		Role and responsibilities in emergency Same as Item 1	
<b>2. Facility Contact Personnel - Alternate Contact</b>		<b>6. Name of Facility Manager</b>	
Name Mohammad Shaikh		Name Adam Bholat	
Official Title Assistant Manager		Official Title Manager	
Telephone No. 905-686-8609	Fax No. 416-438-5805	Telephone No. 647-773-0943	Fax No. 416-438-5805
E-mail		E-mail abholat@rogers.com	
Role and responsibilities in emergency To insure people leave the Car Wash and premises and customers leave the site. Calls 9-1-1 and warns Service Station management		Role and responsibilities in emergency Same as Item 1	
<b>3. Local Fire Services - Key Contact</b>		<b>7. Propane Supplier Key Contact Person</b>	
Name Brian Holmes		Name Mike Martin	
Official Title Chief Fire Prevention Officer		Official Title Salesman/Trainer	
Telephone No. 905-839-9968 Ext: 238	Fax No. 905-839-6327	Telephone No. 416-580-1079	Fax No. 416-781-0844
E-mail bholmes@cityofpickering.com		E-mail promarpetroleum@rogers.com	
Role and responsibilities in emergency Reviews RSMP's and insures resources are allocated for inspections and investigations related to the Fire Code and other compliance issues		Role and responsibilities in emergency Knows the Emergency Response Group and can arrange for equipment to come to the site in case of emergencies and provides training to propane handlers	
Fire Services Address Pickering Civic Complex, One The Esplanade, Pickering, ON. L1V 6K7		Propane Supplier Address 494 Brookdale Ave., Toronto, ON. M5M 1R7	
<b>4. Local Fire Services - Alternate Contact</b>		<b>8. Municipal Contact</b>	
Name Steve Foulds		Name Kyle Bentley, P. Eng.	
Official Title Fire Prevention Officer		Official Title Chief Building Official	
Telephone No. 905-839-9968 Ext 234	Fax No. 905-839-6327	Telephone No. 905-420-4660 Ext: 2070	Fax No. 905-420-7648
E-mail sfoulds@cityofpickering.com		E-mail kbentley@cityofpickering.com	
Role and responsibilities in emergency Reviews installations and locations as assigned and provides inspection services and insures locations are in compliance with the Fire Code		Municipality Name and Address Pickering Civic Complex, One The Esplanade, Pickering, ON. L1V 6K7	
Fire Services Address Pickering Civic Complex, One The Esplanade, Pickering, ON. L1V 6K7			

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Name of person completing this form (please print) Adam Bholat		Official Title Owner	
Signature 		Telephone No. 647-773-0943	Date (dd-mm-yyyy) 29-05-2011



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

2. Additional Safety Measures

Describe any other measures in place at the facility that exceed the minimum Code and Standards requirements.

The facility is built to the Propane Code requirements and does not have any extra features that are over and above the Code. Tank is protected with vehicle protection on all sides and has a lockable equipment and valve cabinet that is locked and secured after closing. Solenoid valve on piping from the pump will shut-off the flow of propane in case of Emergency.

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Name of person completing this form (please print) Adam Bholat	Official Title Owner	
Signature 	Telephone No. 647-773-0943	Date (dd-mm-yyyy) 29-07-2011



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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) 11-08-2011	Print Name of Training Provider: Promar Petroleum Inc.
	Print Name of Instructor: Mike Martin
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) 11-08-2011	Print Name of Training Provider: Promar Petroleum Inc.
	Print Name of Instructor: Mike Martin
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) 26-04-2010	Print Name of Training Provider: Promar Petroleum Inc.
	Print Name of Instructor: Mike Martin
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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Name of person completing this form (please print) Adam Bholat	Official Title Owner
Signature 	Telephone No. 647-773-0943
	Date (dd-mm-yyyy) 29-07-2011



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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) TBD	Print Name of Training Provider: <a href="#">Promar Petroleum Inc.</a>
	Print Name of Instructor: <a href="#">Mike Martin</a>
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) TBD	Print Name of Training Provider: <a href="#">Promar Petroleum Inc.</a>
	Print Name of Instructor: <a href="#">Mike Martin</a>
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) 22-04-2013	Print Name of Training Provider: <a href="#">Promar Petroleum Inc.</a>
	Print Name of Instructor: <a href="#">Mike Martin</a>
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:

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Name of person completing this form (please print) <a href="#">Adam Bholat</a>	Official Title <a href="#">Owner</a>
Signature 	Telephone No. <a href="#">647-773-0943</a>
	Date (dd-mm-yyyy) <a href="#">29-07-2011</a>





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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 Attendant will give a verbal warning to the customers outside and in the Car Wash and instruct them to leave the premises. The Attendant will also call 9-1-1 to ask for help and explain the nature of the problem. This call will be made once the nature of the emergency is determined. Only a person with fire extinguisher training is permitted to attempt to put the fire out. Otherwise a call to 9-1-1 must be made.

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 warning is given the Attendant will ask the customers to leave and then inform the manager in the Husky station about the problem situation. Attendant will place cones across the entrance/exits to stop vehicles from entering the Car Wash area and then will go to the Emergency Meeting Place (See Drawing P-101). A call will also be made to the Owner after the 9-1-1 call has been made.

**Communication with Emergency Response Authorities**

Describe when and how the licence holder will give early warning to emergency response authorities (including a process to ensure that a call is placed to 911).

The Attendant will determine what the emergency is and if a call to 9-1-1 is required. There is a phone inside the office or a cell phone can be used to make the call. The Attendant will call or the Owner to explain the nature of the problem and ask him to come to the site.

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

The tank is located against the one property line and access is not restricted. The facility is not fenced so there is no problem for the Fire Department to gain access to the site at all times. The facility only operates in the day so the Fire Department will have to access the site on their own after hours. There are no restrictions to Emergency Vehicles entering the site.

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

The Attendant will always be on site during working hours and can provide information about the tank contents and cylinder contents to the Emergency Responders when asked. After hours the Owner can get to the site and engage with the Emergency Responders

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

30 to 45 minutes

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Signature 	Telephone No. 647-773-0943	Date (dd-mm-yyyy) 29-07-2011



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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>110 m</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) Adam Bholat	Official Title Owner	
Signature 	Telephone No. 647-773-0943	Date (dd-mm-yyyy) 04-10-2011

1089375 Ontario Ltd.  
1740 Bayley Street  
Pickering, ON.  
L1W 3N3

November, 14<sup>th</sup>, 2011

Mr. Bill Douglas, Fire Chief  
The Corporation of the City of Pickering  
Pickering Civic Complex  
One The Esplanade,  
Pickering, Ontario  
L1V 6K7

**Re: Invitation to Fire Services to Review 2000 USWG Propane Tank Installation  
1089375 Ontario Ltd., 1740 Bayley Street, Pickering, ON.**

Dear Chief Douglas:


In regards to your recent review of our Emergency Response and Preparedness Plan related to our existing retail propane tank installation at our facility in Pickering, ON., we appreciate your timely review of the documentation. According to the new Provincial Regulations under Ontario Reg 440/08, we are required to offer the City of Pickering Fire Department an invitation to come and review our installation.

We wish to advise you and any members of the City of Pickering Fire Department, they are more than welcome to review our propane dispensing installation at any time that may be convenient to you and your members. The propane installation is currently operational and can be reviewed at your convenience.

Should you or any of the members within your Department wish to review the installation we ask you to contact the undersigned at 647-773-0943 to make the necessary arrangements.

If you have any questions regarding this issue, do not hesitate to contact us, and once again, we thank you for your cooperation in helping us to secure our license for this service.

Yours truly,



Adam Bholat, Owner  
Pickering Car Wash



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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
<input checked="" type="checkbox"/>	<input type="checkbox"/>

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.

<b>FIRE CHIEF</b> Local Fire Services Name <del>Brian Holmes</del> <b>BILL DOUGLAS</b>	Print name	<i>B. Douglas</i> Signature	04-10-2011 Date (dd-mm-yyyy)
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Adam Bholat Name of person completing this form (please print)	Owner Official Title
<i>A. Bholat</i> Signature	647-773-0943 Telephone No.
	04-10-2011 Date (dd-mm-yyyy)



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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) 01-08-2011	Capacity of single largest propane storage vessel (USWG) 2000 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: 98.9 m	Right side property line: 85.6 m
Rear: 5.1 m	Left side property line: 27.5 m
GPS coordinates of single largest vessel: Lat:43 50' 4.15"N Long:79 3' 58.21"W	

**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) J. Ross Keys	Official Title Consultant	
Signature 	Telephone No. 416-526-1405	Date (dd-mm-yyyy) 11-08-2011



**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

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

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

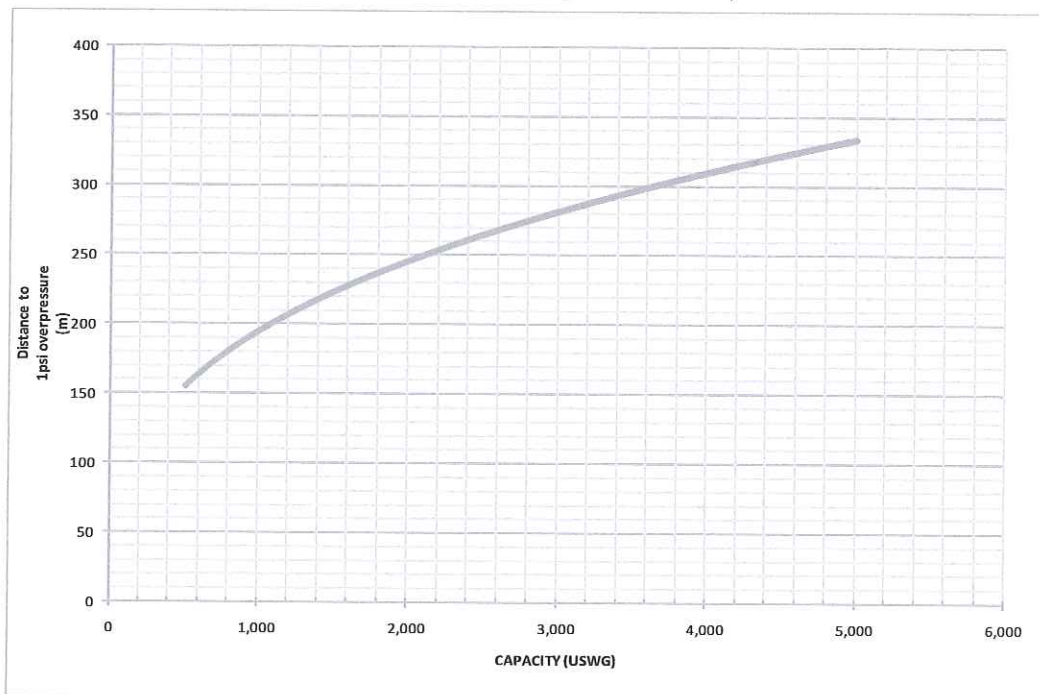
**Table 1: Distance Table**

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

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

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

**Hazard Distance Chart (EPA-TNT model)**





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

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


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

**Table 2: Buildings and Features**

Buildings and Features Present within the Circle on the Map of the Surrounding Area AND Name and Address of Closest Building or Feature	* Number of Buildings and Features (mark with an "X")				Distance from Tank to Closest Building or Feature
	0	1	2-10	11+	
Industrial buildings or parks or golf courses Name: <u>Multi-Use Building with mixed Businesses</u> Address: <u>1019 Toy Avenue</u> City: <u>Pickering</u> Province <u>Ontario</u> Postal Code <u>L1W 3N9</u>			X		<u>14</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>131</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>Tim Hortons</u> Address: <u>1750 Bayly Street</u> City: <u>Pickering</u> Province <u>Ontario</u> Postal Code <u>L1W 3N3</u>			X		<u>91</u> m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				<u>0</u> 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				<u>0</u> m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				<u>0</u> m

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

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

Name of person completing this form (please print) <u>J. Ross Keys</u>	Official Title <u>Consultant</u>
Signature 	Telephone No. <u>416-526-1405</u>
	Date (dd-mm-yyyy) <u>11-08-2011</u>



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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	14	81.2 USWG
# 10	2.9		
# 5	1.5		
<b>Total Cylinder Capacity</b>			81.2 USWG

**Tanks Stored On-site Not Connected for Use**

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

<b>Total Cylinder Capacity</b>	81.2 USWG
<b>Total Tank Capacity</b>	2000 USWG
<b>Total Portable Capacity</b> (Total Cylinder Capacity + Total Tank Capacity)	2081.2 USWG



**KEY PLAN**  
SCALE 1:1000

**ZONING INFORMATION:**  
Zone is Industrial Commercial (IC Zone)

LOT AREA: 8,172.1sq.m.  
BUILDING AREA: 26,486sq.m.  
LOT COVERAGE OF BUILDING: 32%

**PROPERTY LINE SETBACKS FOR PROpane TANK**

NORTH	5.1m
SOUTH	95.8m
EAST	85.8m
WEST	27.5m

**GPS COORDINATES**

LATITUDE	LONGITUDE
43°50'4.15"N	79°52'58.17"W

**U/G GASOLINE TANKS**

#	PRODUCT	CAPACITY
1	DIESEL	50,000L
2	REGULAR	50,000L
3	PREMIUM	50,000L

**LEGEND:**

- FE FIRE EXTINGUISHER
- FI FIRE HYDRANT
- ESD EMERGENCY SHUT-DOWN
- M MUSTER POINT

**REVISIONS**

NO.	DATE	DESCRIPTION
0	JUL 13, 11	ISSUED FOR PERM REVIEW

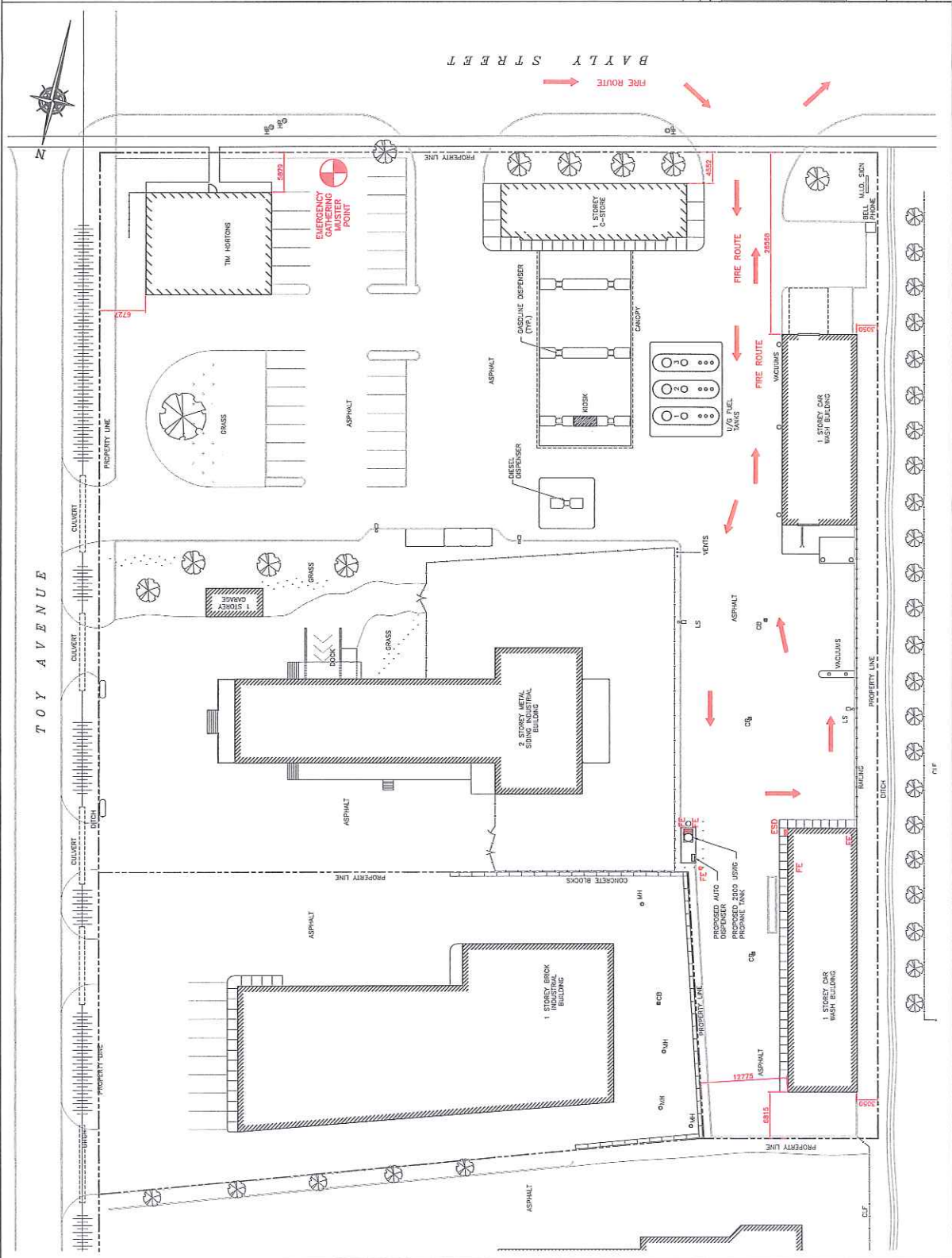
**Pickering Car Wash**

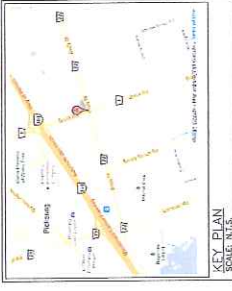
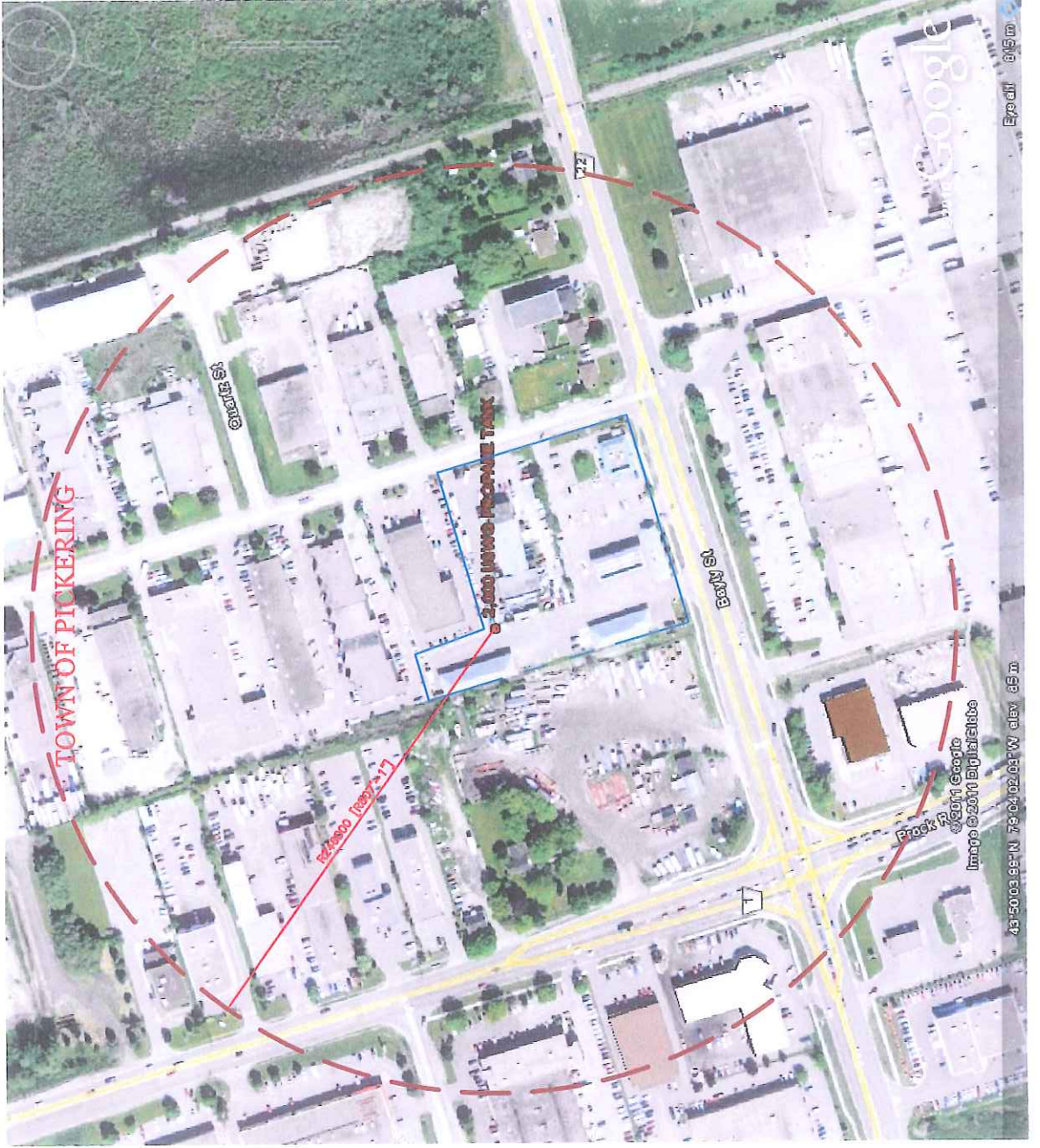
**ALTENG INC.**  
Alternative Energy Consulting  
1740 Bay Street  
Pawling, CT  
Telephone: (203)764-1844

Drawn By: DFE  
Checked By: JARC  
Date: AUG 02, 11  
Drawing Title: LUP-SUS  
Drawing Scale: 1:500

**EMERGENCY FIRE PLAN**

File Number: 072200-101  
Drawing Number: 072200  
Plotting Scale: 1:1





**NOTES:**  
 1. THIS PLAN IS BASED ON AN INVESTIGATION OF THE SITE AND THE RESULTS OF THE INVESTIGATION. THE ENGINEER'S RESPONSIBILITY IS TO REPORT THE RESULTS OF THE INVESTIGATION AND TO PROVIDE RECOMMENDATIONS FOR THE IMPLEMENTATION OF THE RISK AND SAFETY MANAGEMENT PLAN.

$$D = 17 \times \left( (L1 \times W) \times \frac{HCG}{HCG_{min}} \right)^{1/3} = 240m$$

PROPERTY USE REVISIONS FOR PROPOSED TANK	REVISIONS
NORTH	51.1m
SOUTH	98.6m
EAST	85.6m
WEST	27.5m

GPS COORDINATES	COORDINATES
LATITUDE	43°50'41.5"N
LONGITUDE	79°04'02.01"W

AS PER THE REQUIREMENTS OF THE IMPLEMENTATION OF THE RISK AND SAFETY MANAGEMENT PLAN, THE PROJECT OWNER IS REQUIRED TO PROVIDE A LEVEL 1 RISK.

**PLANNING ADVISORY INFORMATION:**

AS PER ISEA ADVISORY REQUIREMENTS, THE INFORMATION PROVIDED BELOW IS THE PROPERTY OF THE CORPORATION OF THE CITY OF PICKERING, ONTARIO, CANADA. THE INFORMATION IS NOT TO BE USED FOR ANY OTHER PURPOSES WITHOUT THE WRITTEN PERMISSION OF THE CORPORATION OF THE CITY OF PICKERING, ONTARIO, CANADA. LTV 007  
 ATTN: MR. JOEL BENTLEY, C.E.O.  
 PH: 1-800-426-1869 EXT: 2070

DATE	DESCRIPTION	BY
0 AUG 22, 11	ISSUED FOR MAP	

**Pickering Car Wash**

**ALTENG Inc.**  
 Alternative Energy Consulting  
 126 Home Crescent, Thornhill, Ontario L3T 5J3  
 Telephone: (905) 764-1844 Fax: (905) 764-5889

Drawn By: D.C.  
 Checked By: J.R.C.  
 Date: AUG 02, 11  
 Drawing Scale: 1/1000

Project: 100078 Ontario (Utd.) Inc.  
 100078 Ontario (Utd.) Inc.  
 Pickering, ON L7M-3K3

Sheet Title: BEST RADIUS PAVI LAYOUT  
 Drawing Number: 072200  
 Project Number: P-200

Vince Golby/TSSA  
11/30/2011 03:31 PM

To Propane Licensing/TSSA@TSSA  
cc abholat@rogers.com  
bcc  
Subject RSMP SR # 543410

Hi, please make the following corrections to this sites RSMP, thanks.

Pg.2 - total portable storage is 468.5 USWG not 81.2.

Pg.4 - volume, type and loaction of other hazardous materials on site should include 2 X 75,000 L. underground gasoline tanks and 1 x 75,000 underground diesel tank

Pg.12 - tank setback distances should be Rear - 43 m. and Right - 2 m.

Pg.14 - nearest commercial building is the Car Wash Store @ 1740 Bayly St Pickering and the distance to the tank is 14 m.

Vince Golby  
Inspector, Fuels Safety Division  
416-576-4628  
vgolby@tssa.org