



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

Jan 28, 2012

This Level 1 RSMP applies to:
 • a facility with a total propane storage capacity of 5,000 USWG or less; or
 • a facility with a fixed propane storage capacity of exactly 5,000 USWG and no more than 500 USWG of portable propane storage capacity on site.

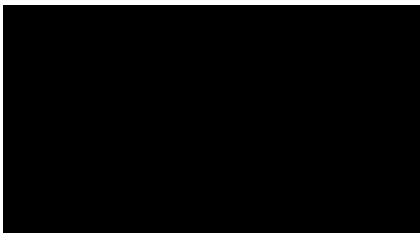
Failure to fully complete this form may result in rejection.
Making a false statement may result in a fine or prosecution under the *Technical Standards and Safety Act*

Licence Number 0076368034C

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 806480 ONTARIO LIMITED DBA: KEN/AUTOCARE CENTRE (FORMERLY KEN'S SUNOCO SERVICE) Ontario Corporation No., if applicable

Operator Name (if different from above) KEN REATH

Telephone No. 519-455-0700 Fax No. 519-659-6845 E-mail kensautocare@bellnet.ca

Street No. 2200 Street Name / 911 Number / Address, if applicable DUNDAS STREET EAST

Town / City or Township / County LONDON Province ONTARIO Postal Code N5V 1R5

Mailing address if different from above.

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.

Street No. 2200 Street Name / 911 Number / Address, if applicable DUNDAS STREET EAST Nearest Major Intersection DUNDAS STREET & INDUSTRIAL ROAD

Town / City or Township / County LONDON Province ONTARIO Postal Code N5V 1R5

Name of Licence Holder KEN REATH

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). KEN REATH ROT type 100-01 CERT& EXAMINER

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

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 Ken Reath Date (dd-mm-yyyy) 11-09-2011

Name of Licence Holder KEN REATH

Name of Senior Management person as defined in the Regulation holding the Record of Training KEN REATH



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SECTION A: GENERAL INFORMATION (cont'd)

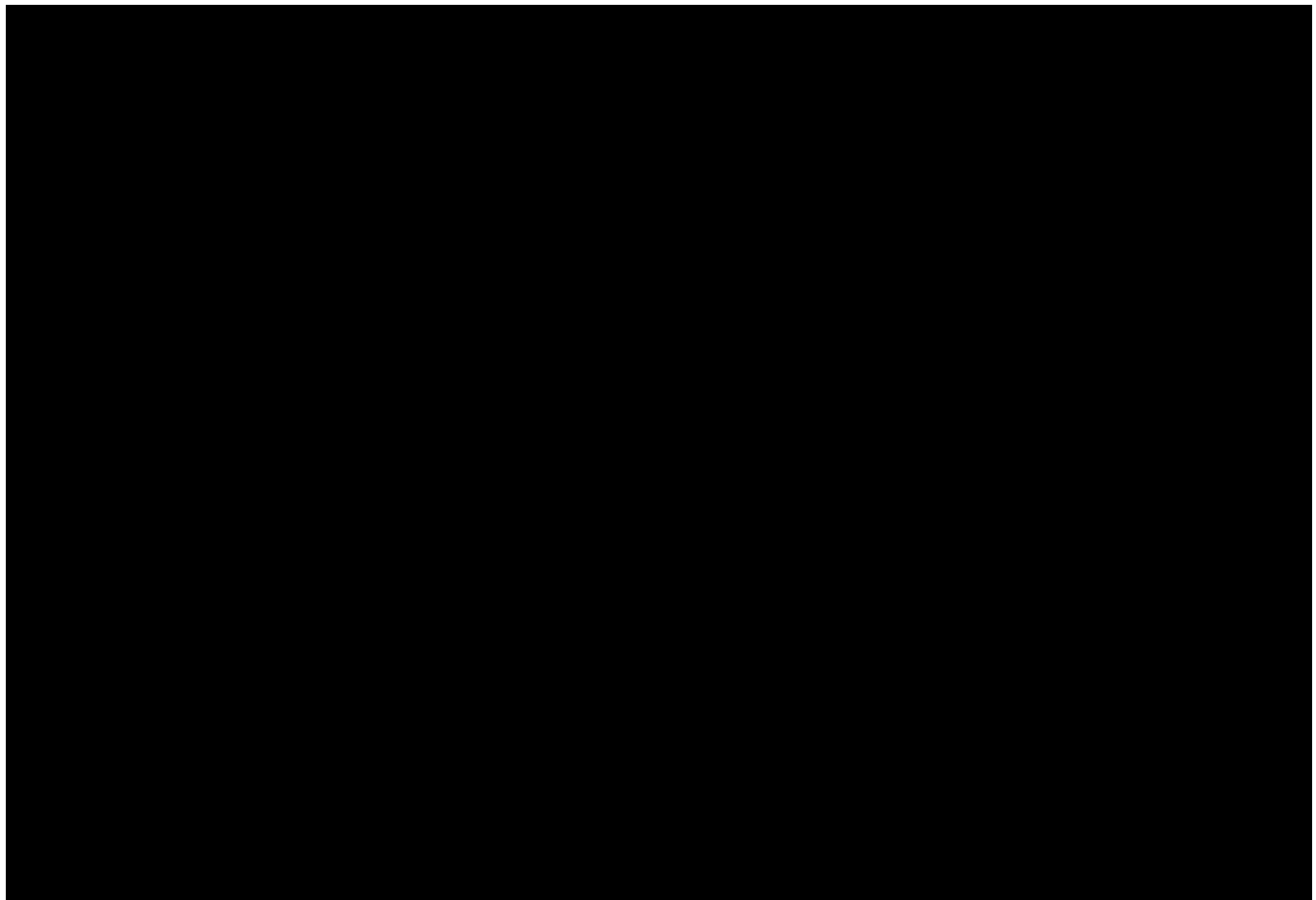
Indicate the year the facility was established. 1980 Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. 1996

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

	PSIG	Serial Number
Tank 1:	<u>250</u>	<u>7167 KINGSLEIGH</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. Please refer to page 15.

Fixed: 2000 Mobile: _____



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Name of person completing this form (please print) <u>KEN REATH</u>	Official Title <u>OWNER / MANAGER</u>
Signature 	Telephone No. <u>519-455-0700</u>
	Date (dd-mm-yyyy) <u>01-09-2011</u>



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SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

Name of Propane Supplier(s) SUPERIOR PROPANE		For Office Use - Party No.	
Street No. 29495	Street Name / 911 Number / Address, if applicable CENTRE ROAD		
Town / City or Township / Country STRATHROY / CANADA		Province ONTARIO	Postal Code N7G 3H7
Telephone No. 1-877-873-7467	Fax No.	Contact Name MIKE MULLINS CELL 519-401-1095	
E-mail mullinsm@superiorpropane.com,			

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

Off-site Cylinder and/or Mobile Storage NONE		Capacity stored off-site, in USWG	For Office Use - Party No.
Street No.	Street Name / 911 Number / Address, if applicable		
Town / City or Township / Country		Province	Postal Code
Telephone No.	Fax No.	Contact Name	

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

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SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN

The licence holder will complete Section B in consultation with the local Fire Services.

Description of the maximum volume, types and storage location of other hazardous materials on site, if any.

2000 USWG ONE PROPANE TANK

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

FIRE EXTINGUISHERS, FUSIBLE LINKS, FIRE HYDRANT

ELECT SHUT OFF AT AUTO METER (SOLENOID)

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.

ISC VALVES-CLOSES WHEN NOT IN USE, FUSIBLE LINKS-MELTS IF FIRE AND CLOSES ISC VALVE, SHUT OFF VALVES-ABLE TO ISOLATE LEAKI

FIRE HYDRANT ON PROPERTY CORNER-ADEQUATE SUPPLY OF WATER CLOSE BY, EXCESS FLOW VALVES IN TANK-SHUTS OFF AUTOMATIC

IF HOSE ERUPTS

Maintenance and testing schedule for fire protection controls and devices.

FIRE EXTINGUISHER CHECKED WEEKLY

SUPERIOR MAINTENANCE 2 TIMES A YEAR OR AS NEEDED

DAILY INSPECTIONS OF HOSES VALVES, SCALES

CK SCALES ACCURATECY

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

1. Contacts for Emergency Response

1. Facility Contact Personnel - Key Contact		5. Facility 24-Hour Contact Person	
Name KEN REATH		Name KEN REATH	
Official Title OWNER / MANAGER		Official Title OWNER / MANAGER	
Telephone No. 519-872-2711	Fax No. 519-659-6845	Cell No. 519-872-2711	Fax No. 519-659-6845
E-mail kensautocare@bellnet.ca		E-mail kensautocare@bellnet.ca	
Role and responsibilities in emergency OWNER / MANAGER-SAFETY OF EMPLOYEES&CUSTOMERS		Role and responsibilities in emergency OWNER / MANAGER-SAFETY OF EMPLOYEES,CUSTOMERS,NEIGHBOURS	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name TERESA REATH		Name KEN REATH	
Official Title ASSIST MANAGER		Official Title OWNER / MANAGER	
Telephone No. 519-679-9675	Fax No.	Telephone No. 519-872-2711	Fax No. 519-659-6845
E-mail		E-mail kensautocare@bellnet.ca	
Role and responsibilities in emergency ASSIST MANAGER-SAFETY OF EMPLOYEES&CUSTOMERS & NEIGHBOURS		Role and responsibilities in emergency OWNER / MANAGER-SAFETY OF EMPLOYEES,CUSTOMERS,NEIGHBOURS	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name JOHN KOBARDA		Name JIM THOMPSON	
Official Title LONDON FIRE DEPARTMENT		Official Title TECH / INSPECTOR 0704881 LP	
Telephone No. 519-661-2500 EXT. 5620	Fax No. 519-661-4892	Telephone No. 519-282-4190	Fax No.
E-mail jkobarda@london.ca		E-mail james_thomson@superiorpropane.com	
Role and responsibilities in emergency LONDON FIRE DEPARTMENT CO-ORDINATION OF EMERGENCY PERSONEL		Role and responsibilities in emergency TECHNICIAN / INSPECTOR 0704881 LP	
Fire Services Address 400 HORTON STREET LONDON, ONTARIO N6B 1L7		Propane Supplier Address SUPERIOR PROPANE 29495 CENTRE ROAD STRATHROY, ONT N7G 3H7	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name BRIAN GEORGE		Name CATHY SAUNDERS	
Official Title LONDON FIRE DEPARTMENT		Official Title CLERK	
Telephone No. 519-661-2500 EXT. 5620	Fax No. 519-661-6507	Telephone No. 519-661-2500 EXT. 4937	Fax No. 519-661-4892
E-mail bgeorge@london.ca		E-mail csaunder@london.ca	
Role and responsibilities in emergency LONDON FIRE DEPARTMENT CO-ORDINATION OF EMERGENCY PERSONEL		Municipality Name and Address LONDON, ONT 300 DUFFERIN AVENUE P.O. BOX 5035 LONDON, ONT N6A 4L9	
Fire Services Address 400 HORTON STREET LONDON, ONTARIO N6B 1L7			

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Name of person completing this form (please print) KEN REATH		Official Title OWNER / MANAGER	
Signature <i>Ken E Reath</i>		Telephone No. 519-455-0700	Date (dd-mm-yyyy) 01-09-2011



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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.

DESIGNATED EMERGENCY MEETING AREA

EACH EMPLOYEE MUST COMPLETE TRAINING MODULES

EACH EMPLOYEE MUST BE LICENSED 100-01 PROPANE

REVIEW EMERGENCY RESPONSIBILITIES WITH EMPLOYEE AT STAFF MEETINGS

ELECTRICAL SHUT OFFS

PADLOCKS WHEN CLOSED

REVIEW PROCEDURES AT STAFF MEETINGS

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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) 01-10-2011	Print Name of Training Provider: PETRO CANADA
	Print Name of Instructor: ROB FARTHING
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) 15/01/2011	Print Name of Training Provider: KEN'S AUTOCARE CENTRE
	Print Name of Instructor: KEN REATH
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) 30-03-2011	Print Name of Training Provider: KEN'S AUTOCARE CENTRE
	Print Name of Instructor: KEN REATH 100-01 CERT E012 PROPANE EXAMINER
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) 12/10/2011	Print Name of Training Provider: KENS AUTOCARE CENTRE
	Print Name of Instructor: KEN REATH
Target Date (dd-mm-yyyy) 11/01/2012	Print Name of Training Provider: KEN'S AUTOCARE CENTRE
	Print Name of Instructor: KEN REATH
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) 19/10/2011	Print Name of Training Provider: KEN'S AUTOCARE CENTRE
	Print Name of Instructor: KEN REATH
Target Date (dd-mm-yyyy) 18/01/2012	Print Name of Training Provider: KEN'S AUTOCARE CENTRE
	Print Name of Instructor: KEN REATH
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) 19/10/2011	Print Name of Training Provider: KEN'S AUTOCARE CENTRE
	Print Name of Instructor: KEN REATH
Target Date (dd-mm-yyyy) 18/01/2012	Print Name of Training Provider: KEN'S AUTOCARE CENTRE
	Print Name of Instructor: KEN REATH
Target 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)

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).

EMPLOYEE ON DUTY MAKES 911 CALL THEN CALLS MANAGER
FOLLOWED BY SUPERIOR PROPANE & PROPER AUTHORITIES

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).

EMERGENCY RESPONDERS WILL DETERMINE WHAT ACTION IS TO BE TAKEN, EMERGENCY MEETING PLACE WILL BE AIRPORT INNS WEST DRIVEWAY

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).

STAFF ON DUTY WILL CALL 911 FOR HELP AND ASSISTANCE

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

FIRE DEPARTMENT WOULD HAVE FULL AVAILABILITY TO OPEN LOT

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

ANY CHANGES WILL BE E-MAILED OR FAXED TO FIRE DEPT AND TSSA

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

USUALLY ABOUT 15 MINUTES

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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>31</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>31</u>	

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

The licence holder will complete Section B in consultation with the local Fire Services.

8. Licence holder and local Fire Services Review

To be completed by the Local Fire Services

Has the local fire service had an opportunity to review the Emergency Response and Preparedness Plan?

Yes

No

If not, please explain (e.g., no fire services).

Fire services comments, if any:

SEE ATTACHED LONDON FIRE DEPARTMENT AUDIT GUIDE. TRAINING RECORDS HAVE NOT BEEN PROVIDED ON FACILITY'S EMERGENCY MANAGEMENT PROCEDURES PROVIDED TO STAFF.

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 John Kobayashi		7/11/2011

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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) 14-09-2011	Capacity of single largest propane storage vessel (USWG) 2000
Tank setback coordinates. Indicate placement on the map.	
Front: 29.5 M	Right side property line: 43 m
Rear: 11 M	Left side property line: 20 M
GPS coordinates of single largest vessel: 43.009825, -81.158499	

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SECTION C: SUBMISSIONS (cont'd)

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

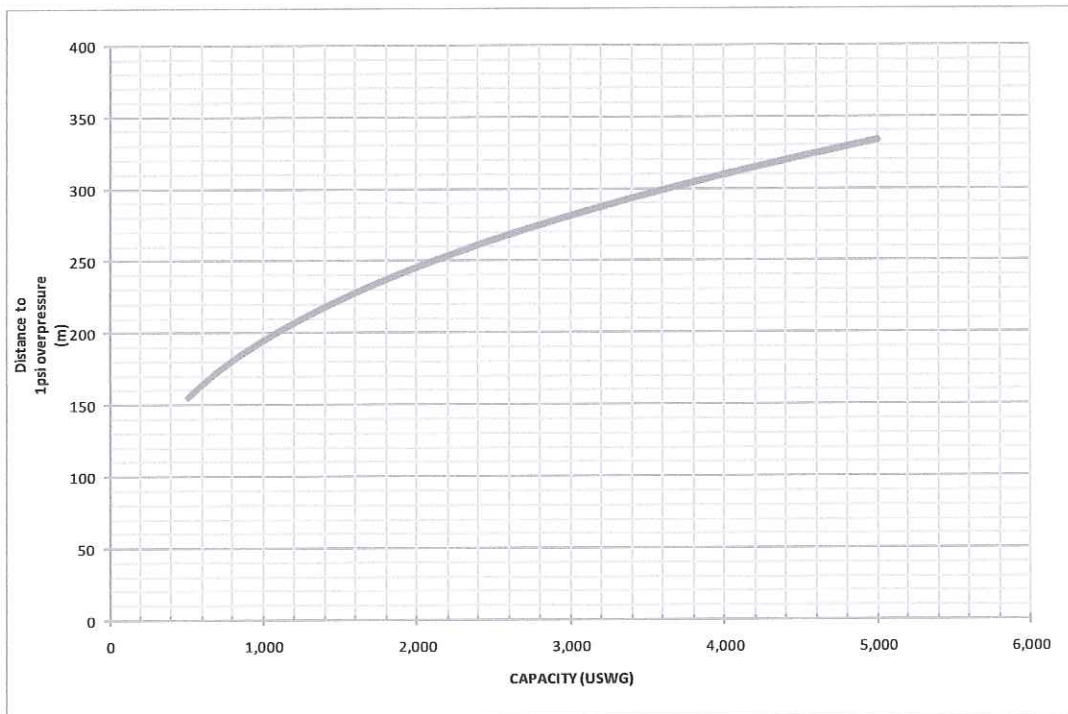
Table 1: Distance Table

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

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

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

Hazard Distance Chart (EPA-TNT model)





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Fax: 416.231.4903
Customer Service: 1.877.682.8772

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

SECTION C: SUBMISSIONS (cont'd)

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

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

Table 2: Buildings and Features

Buildings and Features Present within the Circle on the Map of the Surrounding Area AND Name and Address of Closest Building or Feature	* Number of Buildings and Features (mark with an "X")				Distance from Tank to Closest Building or Feature
	0	1	2-10	11+	
Industrial buildings or parks or golf courses Name: <u>SKYLINE ELEVATORS</u> Address: <u>410 INDUSTRIAL RD</u> City: <u>LONDON</u> Province <u>ONT</u> Postal Code _____		X			<u>30</u> m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. [REDACTED]				X	<u>300</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>STRIP MALL(FLESH GORDONS,LYNN'S DELI)</u> Address: <u>2190 DUNDAS ST</u> City: <u>LONDON</u> Province <u>ONT</u> Postal Code _____		X			<u>200</u> m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: <u>AIRPORT INN & SUITES</u> Address: <u>2230 DUNDAS ST</u> City: <u>LONDON</u> Province <u>ONT</u> Postal Code _____		X			<u>500</u> m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: <u>BONNAVENTURE MEADOWS</u> Address: <u>141 BONNAVENTURE DR</u> City: <u>LONDON</u> Province <u>ONT</u> Postal Code _____					<u>600</u> m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: <u>FIRE DEPT</u> Address: <u>TRAFALGAR ST</u> City: <u>LONDON</u> Province <u>ONT</u> Postal Code _____					<u>2500</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>KEN REATH</u>	Official Title <u>OWNER / MANAGER</u>
Signature 	Telephone No. <u>519-455-0700</u>
	Date (dd-mm-yyyy) <u>01-09-2011</u>



Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
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SECTION C: SUBMISSIONS (cont'd)

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

Portable Storage Additional Information Sheet

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9	0	
# 100	29.5	0	
# 40	11.75	0	
# 33.3	9.62	0	
# 30	8.8	0	
# 20	5.8	0	
# 10	2.9	0	
# 5	1.5	0	
Total Cylinder Capacity			0

Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
NONE		
Total Tank Capacity		

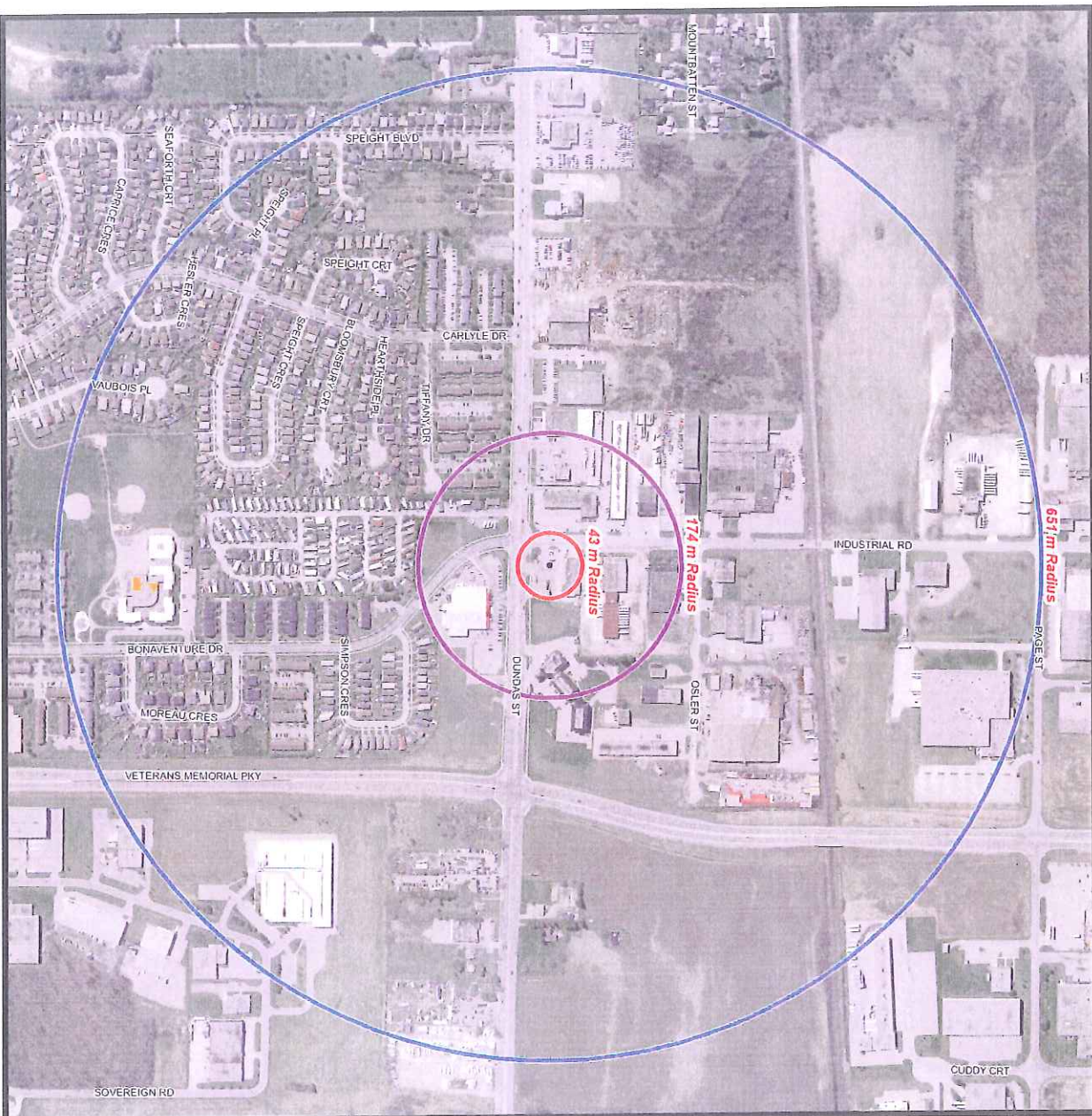
Total Cylinder Capacity	0
Total Tank Capacity	0
Total Portable Capacity	0

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) KEN REATH		Official Title OWNER / MANAGER	
Signature 		Telephone No. 519-455-0700	Date (dd-mm-yyyy) 01-09-2011

GPS COORDINATES: 43.009835, -81.158699

TANK SETBACKS: FRONT: 29.5m RIGHT SIDE PROPERTY LINE: 43m
 REAR: 11m LEFT SIDE PROPERTY LINE: 20m



2200
 DUNDAS ST
 LONDON ONT N5V 1R5
 TSSA LICENSED PROPANE SITE
 BLAST ZONES

Legend

APRIL 2010 AERIAL PHOTO

- Propane Site
- City Boundary
- Fire Ball Radius
- Firefighter Minimum Distance Radius
- Minimum Evacuation Radius

CRITICAL INFRASTRUCTURE

- | | |
|--|--|
| <ul style="list-style-type: none"> Urban & Industrial Infrastructure Airport Critical Industrial Infrastructure Critical Urban Infrastructure Radio Towers Hospitals | <ul style="list-style-type: none"> Municipal Government Facilities Arena Active Landfill (W12A) City Hall City Waterworks Community Services Offices & Other Municipal Uses Operations Centre Pollution Control Plants & Facilities |
|--|--|

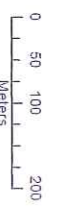
- | | | |
|---|---|--|
| <ul style="list-style-type: none"> School Facilities Post Secondary Secondary Elementary Private | <ul style="list-style-type: none"> First Responders Police Station Fire Station EMS Station Fire & EMS Station (shared facility) | <ul style="list-style-type: none"> Other Government Facilities Provincial Facilities Federal Facilities Courts |
|---|---|--|

VULNERABLE INFRASTRUCTURE

- Childcare Facilities
- Retirement Homes & Care Facilities



PREPARED BY: Environmental Resources & Power (Canada)
 PROJECT: TSSA License Application for Propane Site
 LOCATION: 2200 Dundas St. N, London, Ontario, N5V 1R5
 DRAWING: 2200 Dundas St. N Propane Site, April 2010



2200 Dundas St

