



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

Oct 28

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.

<p style="text-align: center; font-size: small;">Failure to fully complete this form may result in rejection. Making a false statement may result in a fine or prosecution under the <i>Technical Standards and Safety Act</i></p> <p>Licence Number 0000019319-C</p> <p>Check applicable type of propane operations.</p> <p> <input checked="" type="checkbox"/> Cylinder <input type="checkbox"/> Motor Fill <input type="checkbox"/> Filling Plant <input type="checkbox"/> Card/Keylock </p> <p style="font-size: x-small;">Submit along with this completed application a Facility Site Plan and a Map of the Surrounding Area.</p>	<p style="text-align: center; font-weight: bold;">For Office Use Only</p> <div style="background-color: black; width: 100%; height: 100%; min-height: 100px;"></div>
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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	Ontario Corporation No., if applicable
CF Petro Pro	681021 Ont. Ltd.
Operator Name (if different from above)	
CF Petro Pro	
Telephone No.	Fax No.
613-542-8574	613-542-3989
E-mail	
None	
B Street No.	Street Name / 911 Number / Address, if applicable
2408	Perth Road
Town / City or Township / County	Province
Glenburnie	Ontario
Postal Code	
K0H 1S0	
Mailing address if different from above.	
C Street No.	Street Name / 911 Number / Address, if applicable
	RR#1 P.O. Box
Town / City or Township / County	Province
Glenburnie	Ontario
Postal Code	
K0H 1S0	

Information on Container Refill Centre or Filling Plant		
Location of facility.		
D Street No.	Street Name / 911 Number / Address, if applicable	Nearest Major Intersection
Same as Above		Perth Road and Unity Road
Town / City or Township / County	Province	Postal Code
Glenburnie	Ontario	K0H 1S0

Name of Licence Holder	
CF Petro Pro 681021 Ontario Ltd.	
Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT).	ROT type
Wayne Clancy	PT0-1/PP0-3
Municipality (or municipalities if the facility or its hazard distance touches multiple borders)	
City of Kingston / Township of Frontenac	
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 CF Petro Pro 681021 Ontario Ltd.		Sept 27/11
Name of Senior Management person as defined in the Regulation holding the Record of Training Wayne Clancy		



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SECTION A: GENERAL INFORMATION (cont'd)

Indicate the year the facility was established. 1997 Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. None

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

	PSIG	Serial Number
Tank 1:	<u>250</u>	<u>FM 13238</u>
Tank 2:	_____	_____
Tank 3:	_____	_____

Enter capacity of propane in USWG, fixed, portable, and mobile, and provide detailed inventory that includes the number of tank/vessel for each type (fixed, portable, and mobile) and the capacity of each tank/vessel, on a separate document.

Fixed: 5,000 USWG Portable: 473.35 USWG Mobile: None



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Name of person completing this form (please print) <u>Wayne Clancy</u>	Official Title <u>Owner/Operator</u>
Signature <u>Wayne Clancy</u>	Telephone No. <u>613-542-8574</u>
	Date (dd-mm-yyyy) <u>Sept 27/11</u>



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SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

Name of Propane Supplier(s) Primemax Energy Inc		For Office Use - Party No. [REDACTED]	
Street No. 2558	Street Name / 911 Number / Address, if applicable Cedar Creek Rd		
Town / City or Township / Country Ayr		Province Ontario	Postal Code N0B 1E0
Telephone No. 519-740-8209	Fax No. 519-740-1015	Contact Name Rod Recoskie	
E-mail Primemax@primemaxenergy.com			

Name of Propane Transporter. If same as above, please check box. <input checked="" type="checkbox"/>		For Office Use - Party No. [REDACTED]	
Same As Above			
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 Mobile (1 x 1,200 uswg and 1 x 2,400 uswg delivery truck)	Capacity stored off-site, in USWG 3,600	For Office Use - Party No.	
Street No. 3790	Street Name / 911 Number / Address, if applicable Davidson Road		
Town / City or Township / Country Invary		Province Ontario	Postal Code K0H 1X0
Telephone No. 613-542-8574	Fax No.	Contact Name Wayne Clancy	

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.

2250 litre Diesel Storage

1 x 500 USWG Propane tank for commercial building heating

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

7 Dry chemical fire extinguishers in shop

1 Dry chemical fire extinguisher in the propane fill shed

List of fire protection controls (e.g., fire detection systems, fire notification systems, alarm systems, automatic shut off devices, fusible links, etc.) and describe their function, use and operation.

1 - Fusible Link - if propane transfer system is exposed to fire the link will melt and the tank valve will automatically close.

1 - Excess flow tank - will automatically close if propane flow exceeds maximum flow rate of 50 gallons per minute

1 - Excess flow valve at dispenser (In Line) - will automatically shut off the flow of propane if hose ruptures or becomes disconnected

Maintenance and testing schedule for fire protection controls and devices.

Annual third party inspection of extinguishers

Annual tank inspection

Inspection completed Daily by ROT holder

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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 Howard Williams	For Office Use - Party No.	Name Hugh Harvey	For Office Use - Party No.
Official Title Service Manager		Official Title Vice President	
Telephone No. 613-876-1697	Fax No. 613-542-3989	Cell No. 613-561-6032	Fax No. 613-542-3989
E-mail None		E-mail None	
Role and responsibilities in emergency See Schedule 1-Supervisor Responsibilities for complete listing of Roles and Responsibilities.		Role and responsibilities in emergency See Schedule 1-Supervisor Responsibilities for complete listing of Roles and Responsibilities.	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name Hugh Harvey	For Office Use - Party No.	Name Wayne Clancy	For Office Use - Party No.
Official Title Vice President		Official Title Owner/Operator	
Telephone No. 613-389-9433	Fax No. 613-542-3989	Telephone No. 613-561-6032	Fax No. 613-542-3989
E-mail None		E-mail None	
Role and responsibilities in emergency Alternate Supervisor See Schedule 1-Supervisor Responsibilities for complete listing of Roles and Responsibilities		Role and responsibilities in emergency See Schedule 1-Supervisor Responsibilities for complete listing of Roles and Responsibilities.	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name Robert Kidd	For Office Use - Party No.	Name Rod Recoskie	For Office Use - Party No.
Official Title Assistant Fire Chief	E-mail rkidd@cityofkingston.ca	Official Title Contact Primemax Energy Inc	E-mail Primemax@primemaxenergy.com
Telephone No. 613-548-4001 ext 5204	Fax No. 613-384-5233	Telephone No. 519-740-8209	Fax No. 519-740-1015
Role and responsibilities in emergency Coordinating Emergency Response		Role and responsibilities in emergency Activate ERAP if necessary - See Schedule 1	
Fire Services Address 500 O'Connor Drive, Kingston, Ontario, K7P 1N3		Propane Supplier Address 2558 Cedar Creek Road, Ayr, Ontario, N0B 1E0	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name Greg Robinson	For Office Use - Party No.	Name John Bolognone	Party No.
Official Title Chief Executive Officer	E-mail grobenson@cityofkingston.ca	Official Title Clerk	
Telephone No. 613-548-4001 ext 5156	Fax No. 613-384-5233	Telephone No. 613-546-4291 ext 1247	Fax No. 613-546-5232
Role and responsibilities in emergency Coordinating Emergency Response if Fire Chief is unavailable		E-mail jbolognone@cityofkingston.ca	
Fire Services Address 500 O'Connor Drive, Kingston, Ontario, K7P 1N3		Municipality Name and Address City of Kingston, 216 Ontario Street. Kingston, Ontario, K7L 2Z3	

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Signature 	Telephone No. 613-542-8574
	Date (dd-mm-yyyy)



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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.

N/A

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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) 08-09-2011	Print Name of Training Provider: Beatty Petroleum Consulting Inc.
	Print Name of Instructor: Alex Beatty
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) 15-09-2011	Print Name of Training Provider: CF Petro Pro
	Print Name of Instructor: Howard Williams
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) 15-09-2011	Print Name of Training Provider: CF Petro Pro
	Print Name of Instructor: Howard Williams
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) 08-09-2012	Print Name of Training Provider: CF Petro Pro
	Print Name of Instructor: Howard Williams
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) 15-09-2012	Print Name of Training Provider: CF Petro Pro
	Print Name of Instructor: Howard Williams
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) 15-09-2012	Print Name of Training Provider: CF Petro Pro
	Print Name of Instructor: Howard Williams
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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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).

See Schedule 1

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).

See Schedule 1

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).

See Schedule 1

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

Tank compound is locked with a chain and padlock. Fire services have bolt cutters as part of their necessary equipment to remove padlock.

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

See Schedule 1 - Supervisor Responsibilities

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

Wayne Clancy - 15 Minutes

Hugh Harvey - 30 Minutes

Howard Williams - 10 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>29 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>1300 m</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):

no comments

Fire services comments, if any:


To be completed by the Licence Holder

In response to the above comments, the following action(s) is required:


The licence holder will respond to the Local Fire Services comments by: _____
(dd-mm-yyyy)

LOCAL FIRE SERVICES

The undersigned has reviewed Section B of the Risk and Safety Management Plan Fire Services.

Print name <i>ROBERT KIDD</i> Local Fire Services Name <i>ASSISTANT CHIEF</i> <i>Kingston Fire & Rescue</i>	Signature 	Date (dd-mm-yyyy) <i>(26-10-2011)</i>
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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) 30-08-2011	Capacity of single largest propane storage vessel (USWG) 5000 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: 116' 35.36	Right side property line: 34' 10.36
Rear: 97' 29.57	Left side property line: 215' 65.53
GPS coordinates of single largest vessel: 44°19'09.09" N 76°30'08.55" W	

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SECTION C: SUBMISSIONS (cont'd)

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

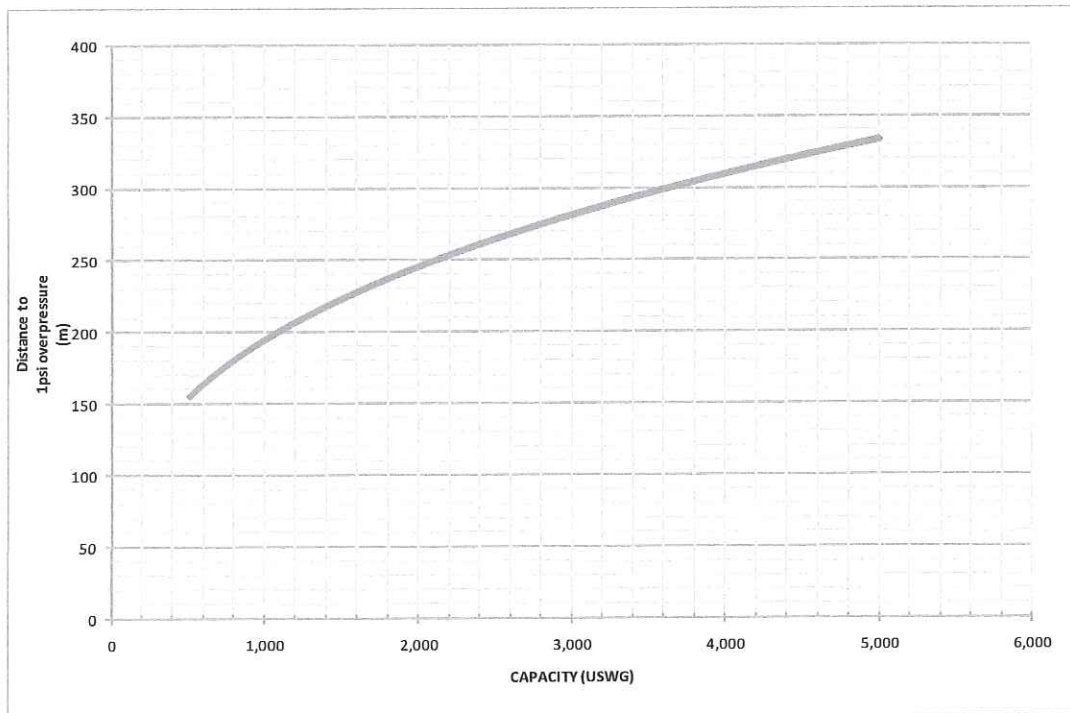
Table 1: Distance Table

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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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>Shannon Park</u> Address: <u>2400 Perth Road</u> City: <u>Glenburnie</u> Province <u>Ontario</u> Postal Code <u>K0H 1S0</u>			2		<u>74</u> m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: [REDACTED] Address: [REDACTED] City: [REDACTED]				51	<u>57</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>Shannon's Garage</u> Address: <u>2429 Perth Road</u> City: <u>Glenburnie</u> Province <u>Ontario</u> Postal Code <u>K0H 1S0</u>			3		<u>96</u> m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: <u>None</u> 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: <u>None</u> Address: _____ City: _____ Province _____ Postal Code _____	x				<u>0</u> m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: <u>City of Kingston Station 8</u> Address: <u>1485 Unity Road</u> City: <u>Glenburnie</u> Province <u>Ontario</u> Postal Code <u>K0H 1S0</u>		1			<u>37</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>Wayne Clancy</u>	Official Title <u>Owner/Operator</u>
Signature 	Telephone No. <u>613-542-8574</u>
	Date (dd-mm-yyyy) <u>Sept 27/11</u>



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

WORKSHEET

Portable Storage Additional Information Worksheet

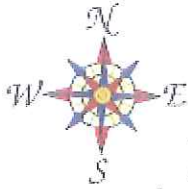
Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9	0	
# 100	29.5	7	206.5
# 40	11.75	5	58.75
# 33.3	9.62	5	48.1
# 30	8.8	5	44
# 20	5.8	20	116
# 10	2.9	0	0
# 5	1.5	0	0
Total Cylinder Capacity		42	473.35 USWG

Tanks Stored On-site Not Connected for Use

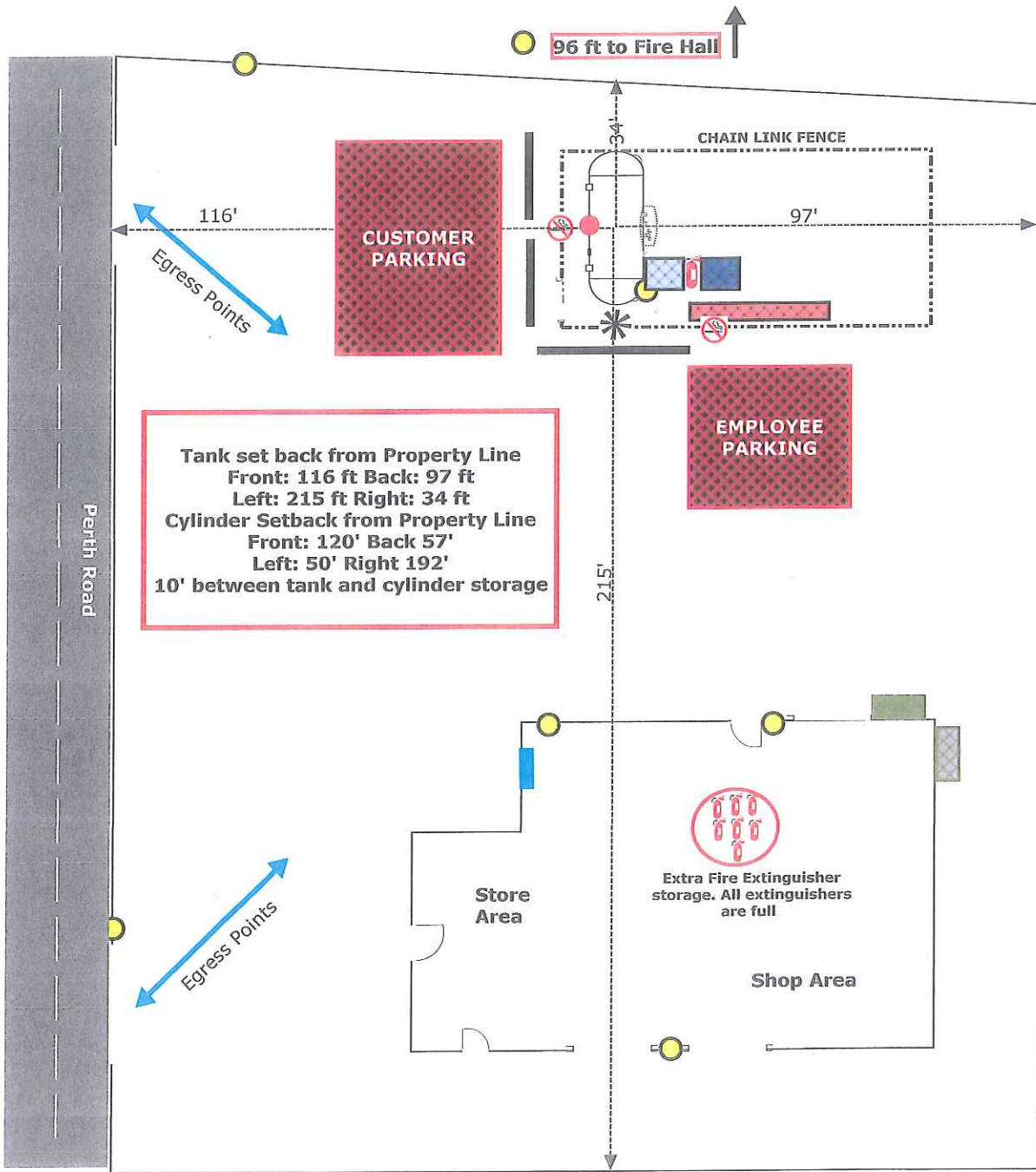
Tank Size In USWG	Quantity	Total Volume in USWG
Total Tank Capacity		

Total Cylinder Capacity	473.35 USWG
Total Tank Capacity	0
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	473.35 USWG

SITE MAP - CF PETRO PRO 2408 Perth Road GLENBURNIE, ONTARIO



	Lights		Electrical Cut Off		Propane Cylinders Empty
	Fire Extinguishers		500 USWG Diesel Tank		Propane Cylinders Full Max. 7 x 100 lbs.
	No Smoking Signs		500 USWG Propane Tank		5 x 40 lbs.
	Emerg. Contact Sign		Propane Dispenser and Shed		5 x 33.3 lbs.
	E-Stop Button		Vehicle Barriers		116 x 20 lbs.



	<p>After an extinguisher had been discharged, even if only partially discharged it must be re-charged by a professional fire extinguisher company/person.</p> <p>Remember: Do not use a Fire extinguisher to extinguish propane fed fires. To extinguish a propane fire: <i>SHUT OFF THE PROPANE SUPPLY IF IT IS SAFE TO DO SO!</i></p>
<p>ALL STAFF:</p>	<p>Upon noticing a fire or a leak of propane shouts “FIRE, FIRE, FIRE” (even if this is a leak or some other emergency situation. This is your verbal emergency notice.)</p> <ol style="list-style-type: none"> 1. Upon hearing “fire, fire, fire” all staff must immediately ensure that all persons (customers and staff) are evacuated from the building and yard, and proceed to the muster point at <u>Shannon’s Garage 2429 Perth Rd.</u> 2. Call 9-1-1 3. A head count will follow to ensure that everyone is off site. 4. Contact or call your supervisor – <u>Howard Williams @ cell # 619-561-6036</u> to notify him/her of the emergency. 5. If fire or leak is severe or escalating, consider evacuating all persons to <u>the Glenhaven Cemetary 2563 Division St.</u> Knock on doors of nearest neighbours to advise them that there is a situation with the propane tank and that you are evacuating the area. You cannot tell them to leave their homes, but you can advise them of the situation. 6. Do not return to the building or yard until emergency personnel have given the all clear to return.
<p>PROPANE R.O.T. HOLDER RESPONSIBILITES:</p>	<p>Upon noticing a fire or a leak of propane shouts “FIRE, FIRE, FIRE” (even if this is a leak or some other emergency situation. This is your verbal emergency notice.)</p> <ol style="list-style-type: none"> 1. Upon hearing “Fire, Fire, Fire” the R.O.T. holder must immediately ensure that all persons (customers and staff) are evacuated from the buildings and yard, and have proceeded to the muster point at <u>Shannon’s Garage 2429 Perth Rd.</u> 2. If there is a fire that is being fed by propane, do not attempt to extinguisher the fire, but <i>if it is safe to do so</i>, shut-off the supply of propane that is feeding the fire. There are several ways to shut-off the propane at the tank: <ol style="list-style-type: none"> a) The regular ON/OFF switch can be turned to the OFF position. If you are not able to safely get to the ON/OFF switch, then; b) There is a remote emergency shut-off switch located at <u>the base of the tank.</u> If you are not able to safely get to the remote emergency switch, then; c) There is also one remote Emergency Shut-off breaker

	<p>switch <u><i>in the front show room.</i></u> that shuts off electrical power only, then:</p> <p>d) Evacuate yourself from the yard.</p> <p>3. Call 911. Even if you think this is a small type of fire or leak, it is better to have emergency people responding and send them away if they are not needed, than to need them and not have them on site!</p> <p>4. Contact or call your supervisor – <u><i>Howard Williams @ cell # 619-561-6036</i></u> to notify him of the emergency.</p> <p>5. If fire or leak is severe or escalating, consider evacuating all persons to <u>the Glenhaven Cemetary 2563 Division St.</u> Knock on doors of nearest neighbours to advise them that there is a situation with the propane tank and that you are evacuating the area. You cannot tell them to leave their homes, but you can advise them of the situation.</p> <p>6. Do not return to the building or yard until emergency personnel have given the all clear to return.</p> <p>7. If your supervisor is not on site, be prepared to:</p> <ol style="list-style-type: none"> a. liaison with the Fire Department or other first responders.
<p>SUPERVISOR RESPONSIBILITIES:</p>	<p>Upon noticing a fire or a leak of propane shouts “FIRE, FIRE, FIRE” (even if this is a leak or some other emergency situation. This is your verbal emergency notice.)</p> <p>If the supervisor is on site then he/she follows the same procedures as the R.O.T. holder plus the supervisor will continue with the emergency plan starting at 3. below.</p> <p>If the supervisor is off site and receives a call stating that there is an emergency then the supervisor shall:</p> <ol style="list-style-type: none"> 8. Ensure that all the steps above have been followed. If they have not been followed, provide clear direction to: <ol style="list-style-type: none"> a) Evacuate the premises. b) Stop the flow of product if it is safe to do so. (This step is skipped if the person calling the supervisor is not an R.O.T. holder) c) Call 911. d) Proceed immediately to the site. 9. Upon arrival the supervisor shall ensure that all persons are safe. 10. Communicate with any first responders that have arrived on site. If no first responders are on site, set up a command post at <u>Shannon’s Garage 2429 Perth Rd</u> until the first responder arrives. 11. If fire or leak is severe or escalating, consider evacuating all persons to <u>the Glenhaven Cemetary 2563 Division St.</u> Knock on doors of nearest neighbours to advise them that there is a situation with the propane tank and that you are

SCHEDULE 2

**IN THE EVENT OF AN EMERGENCY SITUATION
YOU MUST:**

