



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

2ND COPY

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.

<p style="text-align: center;">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 000076949982</p> <p>Check applicable type of propane operations.</p> <p><input checked="" type="checkbox"/> Cylinder <input checked="" type="checkbox"/> Motor Fill <input type="checkbox"/> Filling Plant <input type="checkbox"/> Card/Keylock</p> <p>Submit along with this completed application a Facility Site Plan and a Map of the Surrounding Area.</p>	<p>For Office Use Only</p> <div style="background-color: black; width: 100px; height: 50px; margin: 0 auto;"></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.

<p>A Company Name: 1770890 Ontario Inc.</p> <p>Operator Name (if different from above): Ultramar Pang</p> <p>Telephone No.: 613-892-3185 Fax No.: 613-692-3185 E-mail: pang.yoshino@gmail.com</p>	<p>Ontario Corporation No., if applicable: 1770890</p>
<p>B Street No.: 21 Street Name - 911 Number / Address, if applicable: Leaver Avenue</p> <p>Town / City or Township / County: Ottawa Province: ON Postal Code: K2E 6P5</p>	
<p>C Mailing address if different from above.</p> <p>Street No.: Street Name - 911 Number / Address, if applicable:</p> <p>Town / City or Township / County: Province: Postal Code:</p>	

<p>Information on Container Refill Centre or Filling Plant</p> <p>Location of facility</p>		
<p>D Street No.: 3990</p>	<p>Street Name - 911 Number / Address, if applicable: Prince of Wales Dr.</p>	<p>Nearest Major Intersection: Prince of Wales Dr. / Bainsdale</p>
<p>Town / City or Township / County: Ottawa Province: ON Postal Code: K2C 6H2</p>		

<p>Name of Licence Holder: Stephanie Pang</p>	
<p>Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT): Stephanie Pang</p>	<p>ROT type: Certificate</p>
<p>Municipality (or municipalities if the facility or its hazard distance touches multiple borders): Ottawa</p>	

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.

<p>Print name: Stephanie Pang</p>	<p>Signature: </p>	<p>Date (dd-mm-yyyy): 20/06/2011</p>
<p>Name of Licence Holder: Stephanie Pang</p>		
<p>Name of Senior Management person as defined in the Regulation holding the Record of Training: Stephanie Pang</p>		<p>Date: 20/06/2011</p>



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SECTION A: GENERAL INFORMATION (cont'd)

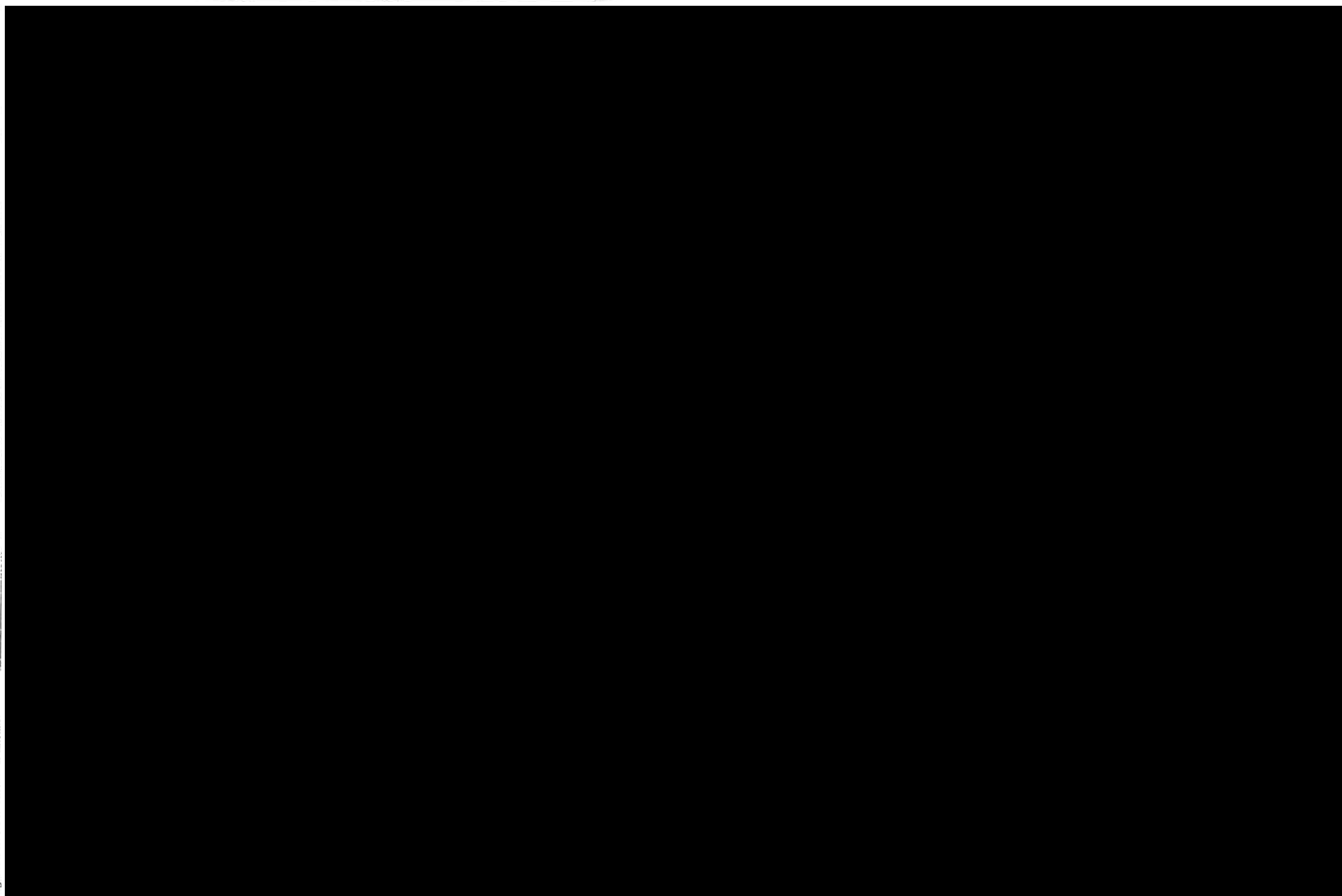
Date the year the facility was established. _____ Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment.
1983

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

	PSIG	Serial Number
Tank1:	250 PSIG	S. 592624
Tank2:	N/A	N/A
Tank3:	N/A	N/A

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: 1885USWG Portable: N/A Mobile: N/A



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Name of person completing this form (please print) Katherine Pang		Official Title Owner	
Signature 		Telephone No. 613-266-1988	Date (dd-mm-yyyy) 20/06/2011



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SECTION A: GENERAL INFORMATION (cont'd)
Activity Information

Name of Propane Supplier(s) W.C. Stinson & Son Ltd.		For Office Use - Party No.	
Street No. 4728	Street Name / 911 Number / Address, if applicable Bank Street		
Town / City or Township / Country K1T 3W7		Province ON	Postal Code K1T 3W7
Telephone No. 613-822-7400	Fax No. 613-822-6305	Contact Name Paul Finniss	
E-mail pfinniss@wostinson.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	Capacity stored off-site, in USWG	For Office Use - Party No.
Street No.	Street Name / 911 Number / Address, if applicable	
Town / City or Township / Country		Province
Telephone No.	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) Rebecca Peng	Official Title Owner
Signature 	Telephone No. 613-266-1988
	Date (dd-mm-yyyy) 20/08/2011



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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.

3 underground tanks for fuel (unlead: 65,000 litre, Super: 25,000 litre, Diesel: 25,000 litre)

1 above-ground tank for Colour Diesel (500 litre)

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

ABC Fire Extinguishers

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. Automatic shut off device being installed in the main control room;

2. Fusible links;

3. Manual switch

Maintenance and testing schedule for fire protection controls and devices.

Annual Fire inspection

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) Stephanie Peng	Official Title Owner	
Signature 	Telephone No. 613-268-1988	Date (dd-mm-yyyy) 20/06/2011



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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 Stephanie Peng	For Office Use - Party No.	Name Stephanie Peng	For Office Use - Party No.
Official Title Owner		Official Title Owner	
Telephone No. 613-226-7624	Fax No. 613-692-3189	Cell No. 613-266-1988	Fax No. 613-692-3189
E-mail peng.yoshino@gmail.com		E-mail peng.yoshino@gmail.com	
Role and responsibilities in emergency Site Manager / first responder		Role and responsibilities in emergency Site Manager / first responder	

2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name Robert Hawkins	For Office Use - Party No.	Name Robert Hawkins	For Office Use - Party No.
Official Title Employee		Official Title same	
Telephone No. 613-204-0103	Fax No. 613-692-3189	Telephone No. same	Fax No. same
E-mail		E-mail	
Role and responsibilities in emergency Evacuation Warden / Second responder		Role and responsibilities in emergency same	

3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name Duncan McNaughton	For Office Use - Party No.	Name Paul Finniss	For Office Use - Party No.
Official Title	E-mail	Official Title Site Manager	E-mail pfinniss@wostinson.com
Telephone No. 613-580-2424	Fax No. Ext. 29603	Telephone No. 613-822-7400	Fax No. 613-822-8305
Role and responsibilities in emergency		Role and responsibilities in emergency Site Manager	
Fire Services Address		Propane Supplier Address 4726 Bank Street, Ottawa, ON K1T 3W7	

4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name Frank Dorapi	For Office Use - Party No.	Name Scott Moffatt	For Office Use - Party No.
Official Title	E-mail	Official Title Councillor	
Telephone No. 613-580-2424	Fax No. Ext 44207	Telephone No. 613-680-2491	Fax No. 613-680-2531
Role and responsibilities in emergency		E-mail scott.moffatt@ottawa.ca	
Fire Services Address		Municipality Name and Address Ottawa	

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Name of person completing this form (please print) Stephanie Peng	Official Title Owner
Signature 	Telephone No. 613-266-1988
	Date (dd-mm-yyyy) 30/06/2011



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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.
See attached.

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) L. Peng	Official Title Owner	
Signature 	Telephone No. 613-266-1988	Date (dd-mm-yyyy) 20/06/2011



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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.

5, Training Date (dd-mm-yyyy) Feb 2012	Print Name of Training Provider: Ultramar Peng
	Print Name of Instructor: Stephanie Peng
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.

12, Training Date (dd-mm-yyyy) May 2012	Print Name of Training Provider: Ultramar peng
	Print Name of Instructor: Stephanie Peng
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) As required, 5 Feb. 2012	Print Name of Training Provider: CDN Safety Training
	Print Name of Instructor: Robert Wood
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:

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) Stephanie Peng	Official Title Owner
Signature 	Telephone No. 613-286-1988
	Date (dd-mm-yyyy) 20/06/2011



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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.

5, Target Date (dd-mm-yyyy): Feb 2012	Print Name of Training Provider: Ultramar Peng
	Print Name of Instructor: Stephanie Peng
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.

12, Target Date (dd-mm-yyyy): March 2012	Print Name of Training Provider: Ultramar Peng
	Print Name of Instructor: Stephanie Peng
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): As required 5 Feb 2012	Print Name of Training Provider: CDN Safety Training
	Print Name of Instructor: Robert Wood
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).
ERAP will be initiated by owner ^{immediately} first responder to notify employees, contact authorities @ 911, and listed contacts immediately.

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).

When evacuation of premises is initiated by evacuation warden, will advise other employees (if any) by intercom, phone or word of mouth to meet at designated location, corner of Prince of Wales and Jockvale.

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).

Call 911, Call ERAP, Call Environment Canada, TSSA and advise if fire is affecting propane cylinder(s).

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

Locate and initiate Emergency Response Plan fully accessible 24 hours.

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

Will keep authorities up-to-date with site changes with regular meetings.

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

First responder - 10 to 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>N/A - Wellwater</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 - Wellwater</u>	

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) Stephanie Peng	Official Title Owner
Signature 	Telephone No. 813-288-1988
	Date (dd-mm-yyyy) 20/08/2011



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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.

8. Licence holder and local Fire Services Review

To be completed by the Local Fire Services

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

Yes No

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

Fire services comments, if any:

To be completed by the Licence Holder

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

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

LOCAL FIRE SERVICES

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

Local Fire Services Name	Print name MENNAUGHTON	Signature 	Date (dd-mm-yyyy) Aug 2 / 2011
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Name of person completing this form (please print) Stephanie Pang	Official Title Owner	Telephone No. 613-266-1988	Date (dd-mm-yyyy) 20-06-2011
Signature 			



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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) 09-08-2011	Capacity of single largest propane storage vessel (USWG) 1885 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: 15m (East)	Right side property line: 60m (North)
Rear: 35m (West)	Left side property line: 25m (South)
GPS coordinates of single largest vessel:	See Attached

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SECTION C: SUBMISSIONS (cont'd)

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

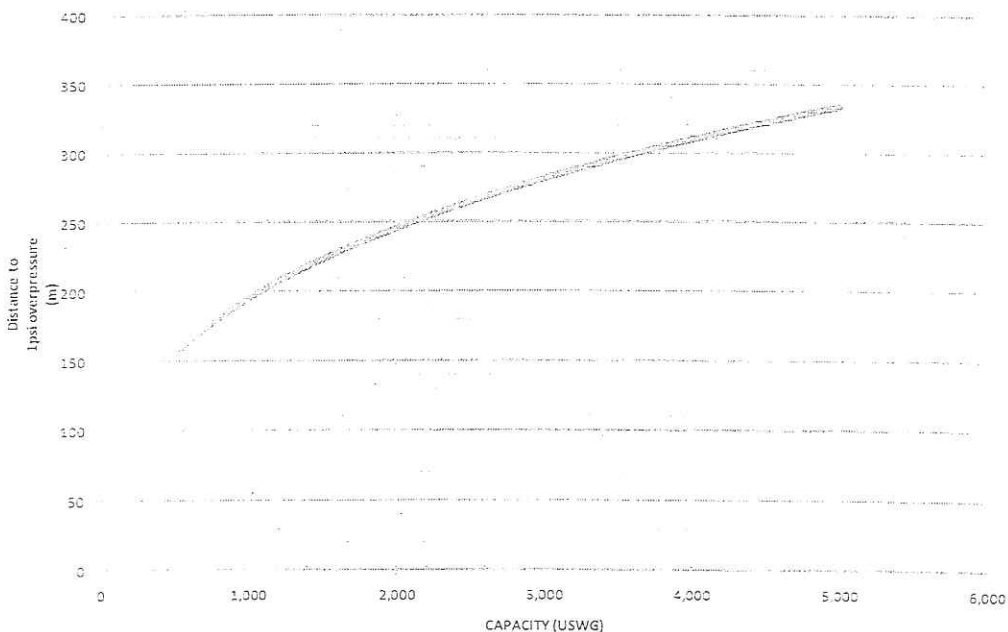
Table 1: Distance Table

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>Beryl Greffney Park</u> <u>7700 Rideau Valley Drive, North</u> City: <u>Ottawa</u> Province <u>ON</u> Postal Code _____	x				<u>~600</u> m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. [Redacted]			x		<u>~220</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>Jack May Chevrolet Buick GMC Ltd</u> Address: <u>3788 Prince of Wales Drive</u> City: <u>Ottawa</u> Province <u>ON</u> Postal Code <u>K2C 3H2</u>		x			<u>~1200</u> m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: <u>Rideau Valley Conservation Authority</u> Address: <u>3889 Rideau Valley Drive</u> City: <u>Ottawa</u> Province <u>ON</u> Postal Code <u>K4M 1A5</u>		x			<u>~700</u> m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: <u>St. Leonard Elementary School</u> Address: <u>5344 Long Island Road</u> City: <u>Ottawa</u> Province <u>ON</u> Postal Code <u>K4M 1E8</u>			x		<u>~1800</u> m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: <u>Manotick Fire Station 94</u> Address: <u>5989 Manotick Main Street</u> City: <u>Ottawa</u> Province <u>ON</u> Postal Code <u>K4M 1B3</u>		x			<u>~4300</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) Stephanie Peng	Official Title Owner
Signature 	Telephone No. 613-266-1988
	Date (dd-mm-yyyy) 20/06/2011



Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
3300 Bloor Street West
Toronto Ontario M8X2X4
Fax: 416.231.4903
Customer Service: 1.877.682.8772

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

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	12	69.60
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity			69.60

Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
N/A	N/A	N/A
Total Tank Capacity		N/A

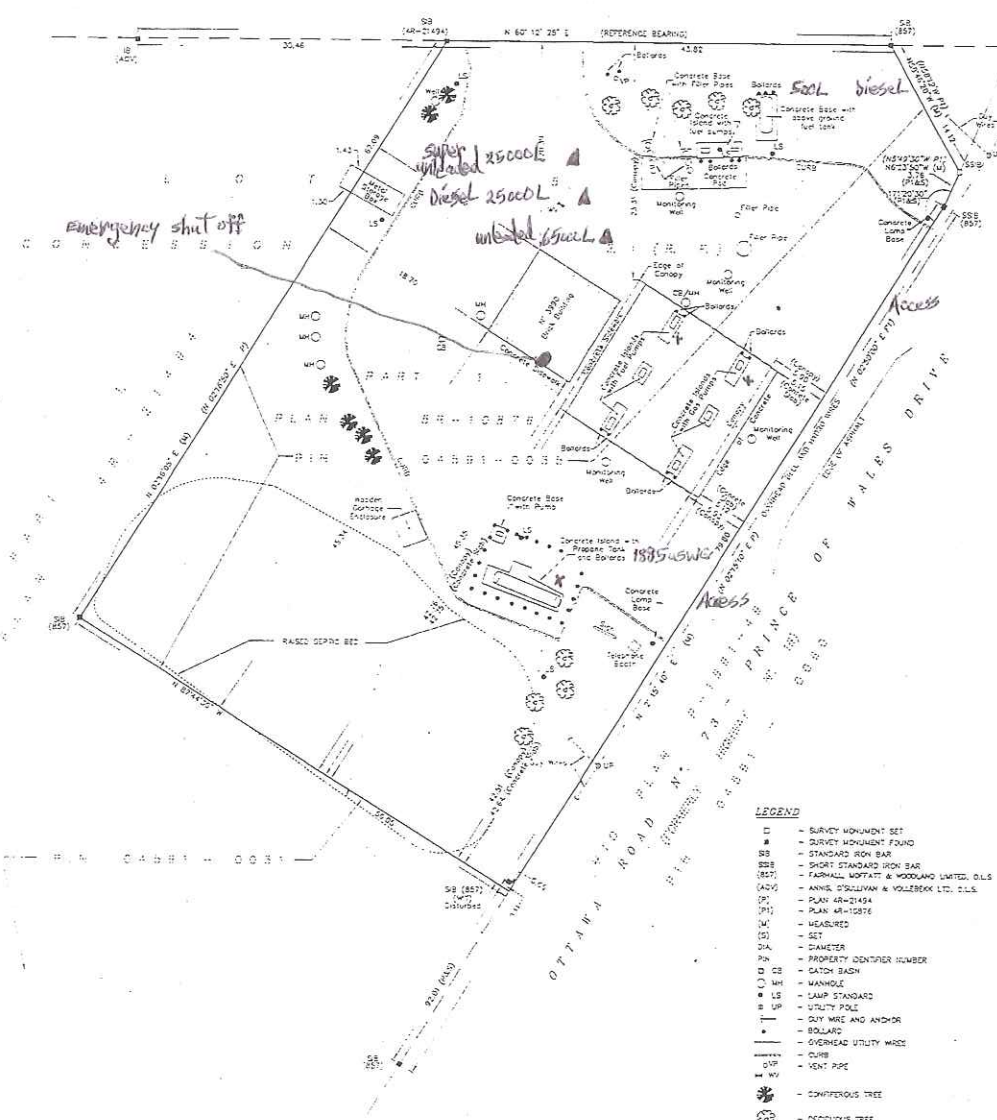
Total Cylinder Capacity	69.60
Total Tank Capacity	
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	69.60

Don McKel

METRIC
 DISTANCES SHOWN ON THIS PLAN ARE IN METRES AND
 CAN BE CONVERTED TO FEET BY DIVIDING BY 0.3048



BARNSDALE ROAD
 ROAD ALLOWANCE BETWEEN LOTS 5 & 6



SURVEYOR'S REAL PROPERTY REPORT - PART 1
 PLAN OF
 PART OF LOT 5
 CONCESSION 2 (RIDEAU FRONT)
 GEOGRAPHIC TOWNSHIP OF NEPEAN
 NOW CITY OF OTTAWA

SCALE 1 : 250
 0 5 10 20 25 metres

FAIRHALL MOFFATT & WOODLAND LIMITED
 ONTARIO LAND SURVEYORS

NOTES
 BEARINGS HEREON ARE GRID BEARINGS DERIVED FROM THE SOUTHERLY
 LIMIT OF THE ROAD ALLOWANCE BETWEEN LOTS 5 & 6, CONCESSION 2 (RIDEAU FRONT),
 GEOGRAPHIC TOWNSHIP OF NEPEAN AS SHOWN ON PLAN 48-21424, MAKING
 A BEARING OF N 89°22'15" E AND ARE REFERRED TO THE CENTRAL MCDONALD
 1983 W. DATUM, ZONE 18 OF THE 4TH NAD ONTARIO COORDINATE SYSTEM,
 (NAD 83)

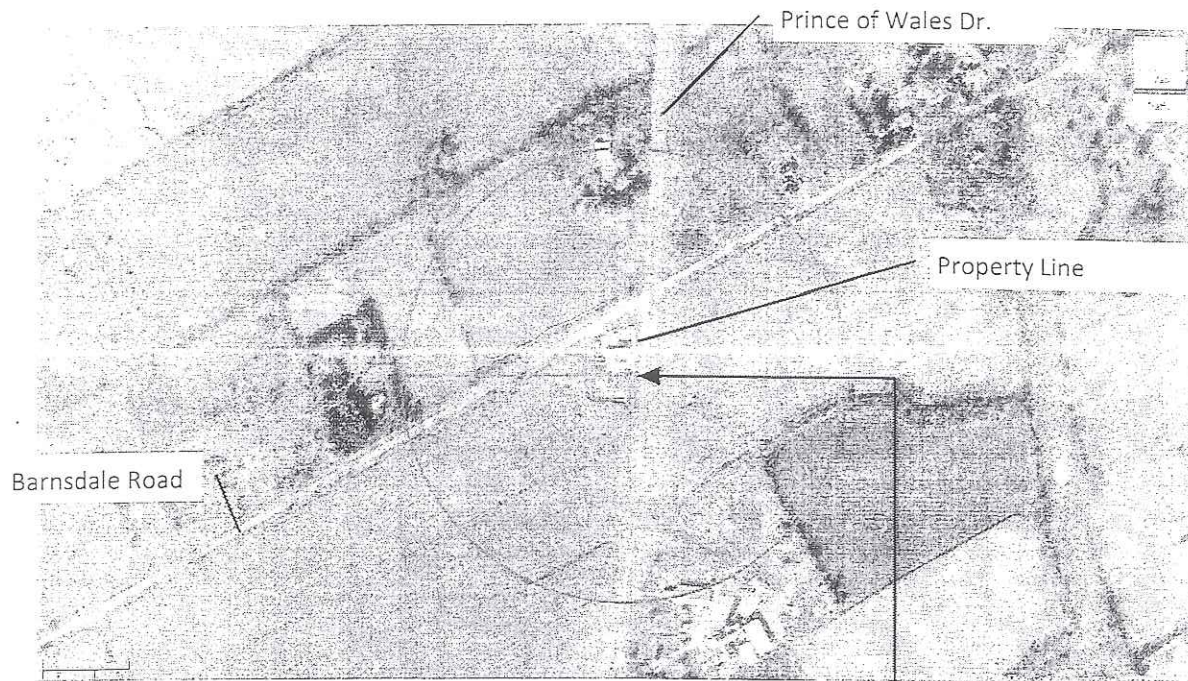
- LEGEND
- - SURVEY MONUMENT SET
 - - SURVEY MONUMENT FOUND
 - SB - STANDARD IRON BAR
 - SB8 - SHORT STANDARD IRON BAR
 - (S17) - FAIRHALL MOFFATT & WOODLAND LIMITED, O.L.S.
 - (S18) - ANNE SULLIVAN & WOODBROOK LTD., O.L.S.
 - (S19) - PLAN 48-21424
 - (S20) - PLAN 48-15876
 - (W) - WEASURED
 - (S) - SET
 - (DIA) - DIAMETER
 - (PN) - PROPERTY IDENTIFIER NUMBER
 - (CB) - CATCH BASIN
 - (M) - MANHOLE
 - (LS) - LAMP STANDARD
 - (UP) - UTILITY POLE
 - (W) - WIRE AND ANCHOR
 - (BOL) - BOLLARD
 - (OUM) - OVERHEAD UTILITY MAST
 - (C) - CURB
 - (VP) - VENT PIPE
 - (T) - CONTIGUOUS TREE
 - (D) - DISCONTIGUOUS TREE

* Fire extinguishers
 ● Emergency shut off
 ▲ Fuel Tanks underground

SURVEYOR'S REAL PROPERTY REPORT - PART 2
 REPORT SUMMARY

DESCRIPTION OF LAND	
PART OF LOT 5, CONCESSION 2 (RIDEAU FRONT), GEOGRAPHIC TOWNSHIP OF NEPEAN, NOW CITY OF OTTAWA AS IN ALL OF PLAN 48-21424 DESIGNATED AS PART 1 PLAN 48-15876	
REGISTERED EASEMENTS	
NONE REGISTERED	
REMARKS	
NOTE DUTY WIRE OVER EASTERLY LIMIT AND STORAGE BOX OVER WESTERLY LIMIT	
COMPLIANCE WITH EDWARDS LAND USE ENVIRONMENTAL AND BUILDING REGULATIONS NOT CERTIFIED BY THIS REPORT	
THIS REPORT WAS PREPARED FOR MR. KENT HAWKINS THE UNDERSIGNED ACCEPTS NO RESPONSIBILITY FOR USE BY OTHER PARTIES	
SURVEYOR'S CERTIFICATE	
I CERTIFY THAT: 1. THIS SURVEY AND PLAN ARE CORRECT AND IN ACCORDANCE WITH THE SURVEY ACT, THE SURVEYORS ACT AND THE REGULATIONS MADE UNDER THEM. 2. THE SURVEY WAS COMPLETED ON NOVEMBER 26, 2008 DATE: _____ JOHN H. DUNN, ONTARIO LAND SURVEYOR	
ASSOCIATION OF ONTARIO LAND SURVEYORS PLAN SUBMISSION FROM 1720746	THIS PLAN IS NOT VALID UNLESS IT IS APPROVED SIGNATURE COPY FILED BY THE SURVEYOR REGISTRY (SEE SECTION 19 (1))
Fairhall Moffatt & Woodland	JOB NO. L58400 E 356657 N 5017456
130 TORONTO WYTHAM DRIVE, TORONTO, ONTARIO M2N 6L1 TEL: (416) 391-1288 FAX: (416) 391-1145	REFERENCE: 103 - 2 (R) RP S. (L) 08/15/1200/040 S. (L) 08/15/1200/040 (14)

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Prepared: June 9, 2011

Address: 3990 Prince of Wales Dr., Ottawa, ON K2C 3H2

Tank: ~~1825~~ USWG Horizontal Tank

Tank Set backs: Approx 35m east, Approx 15m west, Approx 25m South, Approx 60m North

Radius: Approx. 250m

GPS Coordinates of the Tank:
45.240178, -75.712685

Municipality:

City of Ottawa

City Councilor for the Region:

Scott Moffatt

Address:

Ottawa City Hall

110 Laurier Avenue West, Ottawa, Ontario K1P 1J1