

Level 1 Risk and Safety Management Plan (RSMP)
Technical Stendards and Safety Act
Popane Storage and Handling Regulation

This Level 1 RSMP applies to: a racility 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 notable propagal storage capacity on site.

				USV	VG of portable propane	a srouede cet	pacity on site.				
	M	leking a f	alse statement :	nay result	may result in rejection. In a fine or prosecution to and Safety Act	n					
Lioe	nce Number	000076	639329								
Check	k applicable type	of proper	e operations.			,					
	✓ Cylinds		Motor Fill		Filling Plant	Card/Keylock					
Subm	vit along with this	completed	application a Faci	ity Site Plat	n and a Map of the Surround	ding Area.					
							•				
				\$EC	TION A: GENER	RAL INFO	ORMATION		<u> </u>		
The	Undersign	ed appl	ies to TSBA Handling Re	for a re	eview for an RSMP	under Or	ntario's Tech	nical Sta	ndarda	and Safety Act,	
Pit	Company Nam		manasing m	garano	•••				Ontario 0	Corporation No., If applicable	
A	1522208 Ont										
	Operator Name		nt from above)								
	Telephone No.		Fax No.		E-meil						1
	416-296-433		N/A		N/A			H			
В	Street No. 4418		Street Name / 9111 Kingston Road	Number / Ad	idress, if applicable						
	Town / City or	Township	/ County				Province I			Postal Code	,
	Scarborough						ONT			M1E 2N4	
c	Mailing addr Street No. Same	ı	flerent from ab Street Name / 911 Same		ddress, if applicable		· · · · · · · · · · · · · · · · · · ·				
	Town/City of T	rownship /	County				Province Same		1 1	Postal Code Same	
	1	Conte	ner Refill Cent	re or Fill	ing Plant		1	ļ	 '		\dashv
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	This docume	ent ls ve	lid until the ne	d lloence	renewal date. You at	re required	by law to noti	y TSSA o	nny ch	ange of information.	
		De	eclaration; I am	aware ti	nat it is an offence to nat the information i h	give false li sve given i	nformation in sere is true an	this docui	ment an e.	nd	
				tname	INCOME IN VICTORIAL VICTORIAL	1	Signature	H		Date (dd-mm-yyyy)	
		Ma			M. Auto Repair Centre			i i		17/05/2011	l
Ner	neor⊔cenceH	OKOGET TITE	dana a traduction to					H~	→~—	†	1

Printname	Signature		Date (dd-mm-yyyy)
Name of Licence Holder Medbool Malik on behalf of R.M. Auto Repair Centre		<u> </u>	 17/05/2011
Name of Senior Management person as defined in the Regulation holding the Record of Training Magbool Malik	N- A	are	



Technical Standards and Safety Authority Fax: 416.231.4903 www.tssa.org

14th Floor - Centre Tower 3300 Bloor Street West Toronto Ontario M8X 2X4 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 A: GENERAL INFORMATION (cont'd)

Tank1: 250 PSIG 125-14 Tank2:	Tank1: 250 PSIG Serial Number 125-14 Tank2: Tank3: ter capacity of propane in USWG, fixed, portable, and mobile, and provide detailed inventory that includes the number of tank/vessel for ch type (fixed, portable, and mobile) and the capacity of each tank/vessel, on a separate document.	Tank1: 250 PSIG Serial Number 125-14 Tank2:	Tank1: 250 PSIG 125-14 Tank2:	978		ge of steel
Tank1: 250 PSIG 125-14 Tank2:	Tank1: 250 PSIG 125-14 Tank2:	Tank1: 250 PSIG 125-14 Tank2:	Tank1: 250 PSIG 125-14 Tank2:	antify the psig rating and serial number f	or each fixed propane storage tank of	n'site.
Tank3: ter capacity of propane in USWG, fixed, portable, and mobile, and provide detailed inventory that includes the number of tank/vessel for ch type (fixed, portable, and mobile) and the capacity of each tank/vessel, on a separate document.	Tank3:	Tank3: ther capacity of propane in USWG, fixed, portable, and mobile, and provide detailed inventory that includes the number of tank/vessel for such type (fixed, portable, and mobile) and the capacity of each tank/vessel, on a separate document.	Tank3: there capacity of propane in USWG, fixed, portable, and mobile, and provide detailed inventory that includes the number of tank/vessel for such type (fixed, portable, and mobile) and the capacity of each tank/vessel, on a separate document.		Serial Number 12-5-14	
ter capacity of propane in USWG, fixed, portable, and mobile, and provide detailed inventory that includes the number of tank/vessel for ch type (fixed, portable, and mobile) and the capacity of each tank/vessel, on a separate document.	ter capacity of propane in USWG, fixed, portable, and mobile, and provide detailed inventory that includes the number of tank/vessel for characteristics of the capacity of each tank/vessel, on a separate document.	nter capacity of propane in USWG, fixed, portable, and mobile, and provide detailed inventory that includes the number of tank/vessel for the type (fixed, portable, and mobile) and the capacity of each tank/vessel, on a separate document.	nter capacity of propane in USWG, fixed, portable, and mobile, and provide detailed inventory that includes the number of tank/vessel for the type (fixed, portable, and mobile) and the capacity of each tank/vessel, on a separate document.	Tank2:		and any one of some after such
ter capacity of propane in USWG, fixed, portable, and mobile, and provide detailed inventory that includes the number of tank/vessel for ch type (fixed, portable, and mobile) and the capacity of each tank/vessel, on a separate document.	ter capacity of propane in USWG, fixed, portable, and mobile, and provide detailed inventory that includes the number of tank/vessel for characteristics of the capacity of each tank/vessel, on a separate document.	nter capacity of propane in USWG, fixed, portable, and mobile, and provide detailed inventory that includes the number of tank/vessel for the type (fixed, portable, and mobile) and the capacity of each tank/vessel, on a separate document.	nter capacity of propane in USWG, fixed, portable, and mobile, and provide detailed inventory that includes the number of tank/vessel for ich type (fixed, portable, and mobile) and the capacity of each tank/vessel, on a separate document.	Tank3:		Medica managed hypothetic forms and the
	Compressed on State (Control and Control a					

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

Name of person completing this form (please print)	Official Title	
Maqbool Malik	President	
Signature	Telephone No.	Date (dd-mm-vvvv)
m. D. mobile	416-286-4338	28-04-2014

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

SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

Primemax Energy Inc	Supplier(s)					
	Street Name / 911 Number / Ac	dress, if applicable			and .	
Town / City or Tow Ayr		and the state of t		Province Ontario		Postal Code NOB 1E0
Telephone No. 1-519-740-8209	Fax No. 1-519-740-1015	Contact N Mike Taylor	ame			***************************************
E-mail primemax@primema	xenergy.com					WARE THE SECOND
Name of Propane	Transporter. If same as abo	ove, please check be	ох. 🗸			
Street No.	Street Name / 911 Number / Ad	ddress, if applicable	20000		¥	
Town / City or Tow	nship / Country		**************************************	Province		Postal Code
Telephone No.	Fax No.	Contact N	ame			ad.
E-mail						
Off-site Cylinder a	nd/or Mobile Storage		Capacity stored off-sit	e, in USWG	For Office Use	Parly No.
Street No.	Street Name / 911 Number / Ad	tdress, if applicable	I		1	
Town / City or Tow	nship / Country			Province	Postal Code	
Telephone No.	Fax No.	Contact N	ame			
Note: Customer store	age is not considered off-site	storage.				Harvey Barrier a more

owner

Telephone No.

416-286-4338

Date (dd-mm-yyyy)

28-04-2014

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A. moule

Maqbool Malik

Signature



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

EMERGENCY AND PREPAREDNESS RESPONSE PLAN

The licence ho	lder will	omplete Section B	in consultation with the local Fire Se	rvices.
Description of the maximum volume, types Gasoline-2 underground storage units, 1 x 45,				
Diesel- 1 under ground horizontal storage unit-	4,500 LT	₹ ;		
A MSDS for regular gasoline is provided herein	MSDS f	diesel is similar and	not provided.	
Description of fire and emergency equipme	ntindica	d on facility site m	ар.	
Fire Extinguisher Type - Dry chemical. Three L	ocations	:		
1- Located @ propane refill station-10 lb in size	6	<u>:</u>		
2-Located @ gas pump, between Pump # 5 and	67 lb ir	size		
3-Located @ gas pump, between pump # 1and	27 lbs i	size		
List of fire protection controls (e.g., fire detec	tion syst	ms, fire notification	n systems, alarm systems, automatic	shut off devices, fusible links, etc.)
and describe their function, use and operation			•	,
1. Fusible link on ISC valve - isolation valve be	tween the	ank and the downst	ream propane dispensing equipment.	
2. Emergency stop push button - mounted on	post ne	the propane tank.	This shuts down the pump and closes a	solenoid valve upstream of hoses.
3. Power supply breaker inside the garage buil	ding. Th	cuts all power to the	propane system - shuts down pump; cl	oses solenoid valve.
Maintenance and testing schedule for fire pro	tection	ontrols and devices).	
Maintenance and testing is undertaken by Supe				Schedule for key equipment is:
1. Pumps (Pump every 3 months; Pump Mo	or: check	pelts monthly; greas	e motor every 6 months)	
2. ISC Valves (test for closure every 6 month	15)			——————————————————————————————————————
3. Storage tank Relief Valves - Inspect every	2 years;	eplacement schedul	e as per provincial regulations.	
		,		
		:		
		;		
		,		
Declaration: I am I hereby de	aware the	t it is an offence to the information	o give false information in this doci have given here is true and comple	ament and to.
Name of person completing this form (please pr	nt)		Official Title	· Comment of the second of the
Maqbool Malik	·		President	
Signature		i	Telephone No.	Date (dd-mm-yyyy)
Signature M. A. Moldl			416-286-4338	17/05/2011
FS 09195 (11/10) Page 4 of 15		,	***************************************	

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SECTION B:	EME	HGEN	11		REPARED r Emergency	NESS RESPONSE Response	PLAN (c	ont'd)
		-	H	}				A STATE OF THE STA
1. Facility Contact Personnel - Key	Conte	i		:	5. Facilit	y 24-Hour Contact Perso	on	
Name Magbool Malik		For Of	ide Us	e Party No.	Name Nagbool M	alík		For Office Use - Party No.
Official Title					Official Tit Manager	le		
Telephone No. Manager	Fax No 416-286			!	Cell No. 416-846-51	90	Fax No.	
E-mail Maq_M786@hotmail.com	Service Market Co.		***************************************	:	E-mail Maq_M786	@hotmall.com		
Role and responsibilities in emergency Coordinate site response	y			1	i i	esponsibilities in emergen site response	су	
2. Facility Contact Personnel - Air	ernate (ontect			6. Name c	of Facility Manager		
Name Rabinder Singh		For Off	de Us	e · Party No.	Name Maqbool Ma	alik		For Office Use - Party No.
Official Title Partner/Owner			İ		Official Titl Manager	e		
Telephone No. 416-258-3360	Fax No 416-286				Telephone 416-846-51	No. 90	Fax No.	
E-mail None					E-mail Maq_M786	@hotmail.com		
Role and responsibilities in emergency Coordinate site response if agent is una					1 ;	esponsibilities in emergen site response	СУ	944A
3. Local Fire Services - Key Contac	rt			i	7. Propane	Supplier Key Contact F	erson).
Name Frank Lamie		For Off	ce Use	e - Party No.	Name Superior Pn	opane 24-hr Hotline		For Office Use - Party No.
Official Title Deputy Fire Chief-Fire Prevention, Toron	nto Fire S	ervice		:	Official Title	3		
Telephone No. 416-338-9054	Fax No				Telephone 1-877-873-7	No. 2467	Fax No.	
E-mail flamie@toronto.ca					E-mail		#	
Role and responsibilities in emergency Coordinate/advise on Toronto Fire Service		nse. Llasc	e with	police.		esponsibilities in emergeno dispatch Superior Propane s required.		GC emergency response
4. Local Fire Services - Alternate Co	ontact				8. Municip	al Contact		
Name Jim Stoops		For Offi	ce Use	- Party No.	Name Joanne Batt	agua		
Official Title Division Chief - Fire Prevention				:	Official Title Zoning Exar	niner, City of Toronta		
Telephone No. 416-338-9102	Fax No.				Telephone 416-395-75	No. 53	Fax No. 416-395-756	39
E-mall jstoops@toronto.ca				:	E-mail jbattagl@tor	onto.ca		
Role and responsibilities in emergency Alternate- Coordinate/advise on Toronto	Fire Sen	ice Resp	onse.	Liase with	Municipality City of Toron			
police			 					
Declaratio (he	n: I am ()reby de	ware th	et it is	s en offenc Informatio	e to give fal on I have giv	se information in this do an here is true and comp	ocument and plete.	3
Name of person completing this form (pl	ease prì	nt)				Official Title		
Maqbool Malik	- Print Share		_	:		President		
Signature m. n. roll	•					Telephone No. 416-286-4338		Date (dd-mm-yyyy) 17/05/2011
FS 09195 (11/10) Page 5 of 15							· · · · · · · · · · · · · · · · · · ·	



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Customer Service: 1877.682.8772

SECTION B:	EMERGENCY	AND	PREPAREI	DNESS R	ESPONSE	PLAN (cont'd)

SECTION B. EME	4.75		afety Measures	(agus a)
Describe any other measures in place at the	facility	at exceed the mini	mum Code and Standards requirements.	
Emergency Shut Off push button to shut down	oump and	close solenoid valve	upstream of dispensing hoses.	
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		Addition of the Contraction of t	, p. 1, man and decreased recommending the state of the s	
				CONTRACTOR
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Declaration: I am a I hereby de	were the	it is an offence t the information i	give false information in this documen have given here is true and complete.	t and
Name of person completing this form (please pring Madbool Mailk	it)		Official Title President	
			Telephone No.	Date (dd-mm-yyyy)
signature m. 9. mile			416-286-4338	17/05/2011
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						1	RESPONSE		(cont'd)
3. R	ecord o	f Emerg	enc	y Train	ing Prov	ided - For most r	ecent 12-month	period.	
 			<u> </u>				The state of the s	-	

	3. Record	of Emerg	ncy Training Prov	ided - For most recent	12-month period.	
Training on Emergency Respo	nce Plen an	d Proced	ures provided to f	acility key contacts)	
			ng Provider: None		<u> </u>	
Training Date (dd-mm-yyyy)	Print Nam					
504 1 T PR						
Training Date (dd-mm-yyyy)			ng Provider:			
	Print Nam		<u> </u>		CONTROL OF THE PROPERTY OF THE	
Training Date (dd-mm-yyyy)			ng Provider:			
AND COLOR OF THE PERSON WHEN THE PERSON WE WANTED THE PERSON WHEN THE PERSON W	Print Nam	e of Instru	¢tor:			
Training on the facility's Emerg	ency Manag	ement b	ocedures provide	d to staff.		
Training Date (dd-mm-yyyy)	Print Name	e of Traini	g Provider: None			
	Print Name	e of Instru	tor:			
Training Date (dd-mm-yyyy)	Print Name	of Train	g Provider:			
	Print Name	e of Instru	nor:			
Training Date (dd-mm-yyyy)	Print Name	of Traini	g Provider:			6 L. Walley
	Print Name	of Instru	tor:			
On-site specific training provid	adto cartific	ata holde	ro / narenne with F	Acords of Training	1	
				Propane Association	Please Note ROT valid	for three waste
Training Date (dd-mm-yyyy) 30/12/2010			tor; Unknown.	Troperie recoviation	1 10000 1/0/01 1/01 1/0/1	in turba Apara
			g Provider:		My My Market and an Albert Andrew Company of the Co	
Training Date (dd-mm-yyyy)						
Table Date	Print Name			· · · · · · · · · · · · · · · · · · ·		
Training Date (ad-mm-yyyy)	Print Name		g Provider:			
	Print Name	OI INBIRU	nor:			
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			:			
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Decla	ration: I am	ware the	t it is an offence t	o give false informatio	on in this document and	I
			r rie miormation	have given here is tru	e una complete.	
Name of person completing this fo	ımı (piease pri	knt)	,	Official Title		
Maqbool Malik Signature	\ <u>a</u>			President Telephone	Va	Date (dd-mm-yyyy)
Signature	gulo	1	;	416-286-433		17/05/2011
• •	1	1		3 10 800 700	-	TT V W SAT RESET E T

_		Ш			
Name of person completing this form (please p	int)	Π		Official Title	
Maqbool Malik				President	
Signature		Π	;	Telephone No.	Date (dd-mm-yyyy)
M. A. maule			;	416-286-4336	17/05/2011
FS 09195 (11/10) Page 7 of 15					



Target Date (dd-mm-yyyy)

www.tssa.org

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Print Name of Inst

ctor:

Print Name of Training Provider:

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

fourth quarter of this year.

SECTION	B: EME	RGEN	CY AND PRE	AREDNESS RES	SPONSE PLAN (cont'd)
		4.	mergency Trainir	g Plan for Coming Yea	r
Training on Emergency Resp	onse Plan ai	d Proce	dures provided to	acility key contacts.	
Target Date (dd-mm-yyyy)	Print Nar	ne of Tra	ring Provider: Super	or Propane or Atternate	Please note that the course content is currently be
Q4 (2011)	Print Nan	ne of Inst	ector: to be arranged		developed by the TSSA with the intention that it an
Target Date (dd-mm-yyyy)	Print Nan	ne of Tra	ng Provider:		provider will be ready to deliver this training in the

	Print Name of Instructor:	
Training on the facility's Eme	ergency Management Procedures provided to staff.	
Target Date (dd-mm-yyyy)	Print Name of Training Provider: Key site contact to train staff	
Q4 (2011)	Print Name of Instructor: to be arranged	PARTICULAR DE LA COMPANSION DE LA COMPAN
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	CLEARING A SECOND
Target Date (dd-mm-yvyy)	Print Name of Training Provider:	
	Print Name of Instructor:	-

		I			
On-site specific training provi	ded to certific	ate hold	ers/persons with	Records of Training.	
Target Date (dd-mm-yww) June 6 2011	Print Nan	e of Train	ng Provider: Superi	or Propane, FSN, or Alterr	ate Please Note ROT valid for three years
	Print Nam	e of Inst	ctor: to be аптапдео	as required	
Target Date (dd-mm-yyyy)	Print Nam	e of Train	ng Provider:		
	Print Nam	e of Instr	ctor:		
Target Date (dd-mm-yyyy)	Print Nerr	e of Train	ng Provider:		
	Print Nam	e of Instri	ctor:		

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.

	j	П		_	•	
Name of person completing this form (please p	rint)	П			Official Title	
Maqbool Malik					President	
Signature M. M. wolft					Telephone No. 416-286-4338	Date (dd-mm-yyyy) 17/05/2011
FS 09195 (11/10) Page 6 of 15		П	and the second s			



Technical Standards and

14th Floor - Centre Tower 3300 Bloor Street West Standards and
Safety Authority
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Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act Propane Storage and Handling Regulation

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

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

l ue licence no	1	Inplate Section		1
	5. En	ergency Hespon	se Communications Plan	
Warnings and Actions		<u> </u>	- in will be given (including public no	diffication as annonriate).
Describe who gives warnings to whom, at The operator or alternate will contact emergency	hd how	nd when the wa	ming will be given (including poblic no	"Propane Emergency
The operator or alternate will contact emergency	services	dy caming at 1 and	The series of the series of the could i	nclude advising neighbors to
Response Procedures" placard, (to be posted a	site and	ne pan or the empi	byee training). If it is safe to do so this desire.	
evacuate. The owner/operator may also contact	Superior	ropane via the em	ergency number identified in the Live,	
			Add Add Add State of the Control of	
Describe what action is to be taken and by w	hom whe	a waming is iss	ued (including details of a meeting place	in a safe identified area and
activating the evacuation plan, if necessary).			the sale Conned organism if the release	e of monage cannot be stopped
The owner/operator or alternate should first follo	w the act	dns in the ERP pro	vided herein. Staged evacuation, if the releas	DO motive from the cite and away
by cutting electrical power may be required. Init	al muster	station will be awa	y from the site, along Kingston Road, at least	OU HIGHES HOM THE SHE BING BANK
from any dispersing cloud. Subsequent evacuat	on instru	ions potentially up	to the Hazard Distance to be provided by mu	nicpai emargency responders.
A A A A A A A A A A A A A A A A A A A				
Communication with Emergency Respo	nse Aut	rorities		
Describe when and how the licence holder w	ill give e	ly warning to em	ergency response authorities (including	a process to ensure that a call is
, , , , , , , , , , , , , , , , , , , ,	1 1	1		
When the system is operational, a ROT person	will be on	duty and be in the	oropane tank area. The key contact or altern	ate will be implementing Liv schools
including notifying emergency responders. Callin	g 911 wi	bccur immediately	after any attemps to shut down the system.	Martin open and an arrange of the same of
When the system is not in operation, the ISC va	ve (maln	solation valve) is c	osed, and the propane system is unattended	but shutdown.
Any accidents involving the propane tank during	such tim	will require the Ir	tervention of random, nearby individuals.	
Describe provisions for fire department entr	y when t	nere are no opera	tions or staffing at the propane site.	·
The propane tank system is located in a wide or	en area	hat is easily access	ible from Kingston Rd. Also a side entrance	is available from Falaise Rd.
The fire access routes are identified in the attack	hed site p	lan.		
				الله الموافية والمستون والموافية والموافية والموافية والموافية والموافقة والموافقة الموافقة والمستون
		<u> </u>		
Describe how the licence holder will ensure c	ontinual	llow of updated in	formation to authorities.	
The critical information required from the licens	e holder i	s how to shut down	the system and the fill level in the tank (ii kill	iWn),
Fill level is relevant from a time-to-BLEVE person	ective (a	near empty tank wi	II BLEVE sooner than a full tank if there is fire	impingement on the tank).
This information will be provided either verbally,	if staff ar	on site, or by cell	phone during off hour.	
How long will it take the facility liaison per	rson tô r	espond to the sit	e.	
Approximately 30 minutes from key contact's ho	me.			
		·		
A Supplemental Association (Control of the Control	,			
			n to alve foles information in this darrow	nent and
Declaration: I am I hereby d	aware th	at it is an onenc	e to give false information in this docum n I have given here is true and complete	**************************************
			Official Title	
Name of person completing this form (please p	nnt)		President	•
Maqbool Malik			Telephone No.	Date (dd-mm-yyyy)
Signature m. N. molik	<u>'</u>		416-286-4338	17/05/2011
	ļ			
FS 09195 (11/10) Page 9 of 15	1	 		•



Technical 3300 Bloor Street West Toronto Ontario MBX 2X4
Safety Authority Fax: 416.231.4903
Customer Service: 1.677.682.8772

**************************************	1					in the state of th
	der will c	emplete Section B	in consultation v	RESPONSE F		ont'd)
	8 . ≥	uilding and Site Se	Curty and F10C	50U1C3	·····	and the state of t
		· ·		Yes	No	
 Does the propane location have contro (lock out procedures)? 	lled acc	as to limit unneces	sary risk and ent	ry Landson	7	
2. Is there adequate night lighting at the s	1	Construction		7		
 Are procedures in place that ensure ac and the grounds are kept clear from un 	cess rout wanted m	es, aisles, storage a aterials?	area, filling areas	· 0		
4. Are there procedures that capture and inspection requirements for filling systematic transfer of propane?						
5. Does the facility have procedures that overfilled propane cylinders?	include	process to isolate	and purge any	V		
6. Are weighing systems validated for ac	Ì			V		
 Are storage areas clearly marked with purged and other hazardous materials 	the vees ?	le' capacity status	(i.e., filled, empt	у,		
Are quality assurance procedures in plant the propane cylinders are filled?(e.g.,	ace to en QCC val	sure that all valves ves)	are closed after	Z		
9. Is the schedule of maintenance and tes	ting activ	ties retained on sit	э?	1		
		7, Wate	r Supply			
		,, ,,				
The propane licence holder should work wit	nthe local	fire department to	determine wate	r		
supply capabilities that are available based	on the pro	pane facility's loca	ition.	Yes	No	
1. Is a pressurized water system available				V		
Can the municipal fire department pur location?	np 375 G	PM (†420 LPM) of	water at this	1		
What is the unobstructed distance to the firefighting activities? (distance in metre		water supply that	could be used fo	25m		
4. What is the unobstructed distance to t round access if there are no hydrants?	ne closes (distance	approved water s in metres only)	upply with year	N/A		
		;				
Declaration: I am	aware th	at it is an offence t	o give false info	ormation in this doc	ument and	1
l hereby d	clare the	t the information (have given her	e is true and compl	ete.	
Name of person completing this form (please pr Maqbool Malik	int)	•	Offici Presi	al Title dent		
Signature $n \cdot \Lambda$ - $molic$		1	1	ohone No. 86-4338		Date (dd-mm-yyyy) 17/05/2011
S 09195 (11/10) Page 10 of 15		*****				



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			PAREDNESS RESPONSE PLAN (c	ont'd)	
The licence ho			nplete Section Bin consultation with the local Fire Services.		
	8. 4	cence holder and l	d local Fire Services Review		
To be completed by the Local Fire Serv Has the local fire service had an opportunit	y to revie	v the Emergency f	Yes Response and Preparedness Plan?	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 fol	lowing ac	tion(s) is required:			
The licence holder will respond to the Loc	al Fire S	rvices comments	by:		
			(dd-mm-yyyy)		
			ESERVICES		
The undersigned has reviewed Section	Bofthell	Risk and Safety N	lanagement Plan Fire Services.		
Print nam	•		Signature	Date (dd-mm-yyyy)	
Local Fire Services Name					
· ·					
Please Note:	RS Ma	mp give	n to Fire Services: 2011 for review. Kalmey - Superi	today or Propone	
		÷	Tyliney - super		
			o give false information in this document and have given here is true and complete.	1	
Name of person completing this form (please pr	nt)		Official Title		
Signature			Telephone No.	Date (dd-mm-yyyy)	
FS 09195 (11/10) Page 11 of 15					



Technical Standards and gro.eszt,www

14th Floor - Centre Tower 3300 Bloor Street West Safety Authority
Fax: 416.231.4903 Customer Service: 1.877.682.8772 Level 1 Risk and Safety Management Plan (RSMP)

4			
7	echnical Standards	and Safety A	C
Prop	ane Storage and Han	dling Regulation	or

A AUTH				
SECTION	C: SUBMISSIONS			
		Inding A	rea	
Applicant must include a r	acility Site Plan and Map of Surro	diding A	~	
Facility Site Plan.				
The Ilcence holder will submit a copy of the original facility site	olan updated with the following infor	ration:		
1 The storage location of fixed, portable, and mobile vessels	3.			
2. The maximum volume, types and storage location of hazar	dous materials.	-		
Location of permanent structures on site.				
 Access and egress points and location of barriers. Location of fire and emergency equipment (e.g., sprinkler 	avatems extinguishers, suppressio	n systems	on site and	
bocation of fire and emergency equipment (e.g., sprinter location of fire hydrant or water supply where available.	Systems, examples of the			
6. Location of emergency shut off/shut down switches/valve	6.			
			2	
Map of Surrounding Area.				
The Ilcence holder will submit a scaled aerial map of the surroun. The capacity and placement of the single largest propane. GPS co-ordinates of the single largest vessel. Visual Indication of the single largest fixed vessel and a cir. Clear indication of the municipality or municipalities present. Visual indication of property line information. The location and name of roads within or abutting the site. Key note to the drawing indicating the facility's municipal emap was prepared. Address and contact information for each municipality (municipality). Complete "Required Mapping Information from Updates."	storage vessel, including its setback cle made using the distance in Tabl t within the circle. address, municipal lot number(s) and nicipal clerk or secretary-treasurers	a 1 as the	radius from the single largest fixed on lines as applicable, and the date	
Date Map Prepared (dd-mm-yyyy)	Capacity of single largest propan	a storage	vessel (USWG)	
17/05/2011	2000 USWG	<u> </u>		
Tank setback coordinates. Indicate placement on the		45.8		ī
Front: 10 ft	_ Alght side property line:			
Rear: 180 ft	Left side property line:	120 ft		
	3,7687, Long79.1892			

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 title and complete.

Name of person completing this form (please print) Magbool Malik	Official Title President	
Signature	Telephone No. 416-286-4338	Date (dd-mm-yyyy) 17/05/2011



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

SE	r	TION	C:	SU	BMIS	SIONS

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.
- The maximum volume, types and storage location of hazardous materials. 2.
- Location of permanent structures on site.
- Access and egress points and location of barriers
- Location of fire and emergency equipment (e.g., strinkler systems, extinguishers, suppression systems) on site and location of fire hydrant or water supply where available.
- 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.
- 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 till e 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
- Address and contact information for each municipality (municipal clerk or secretary-treasurers of planning board). (Refer to page 5.)
- Complete "Required Mapping Information from Updated Site Plan" in table below .

Required Mapping Information from Updated Site Plan

Date Map Prepared (dd-mm-yyyy) 17/05/2011		Capacity of single largest propane storagevessel (USWG) 2000 USWG
Tank setback coordinates. Indicate	placeme	on the map. Flight side property line: 15 ft
Rear: 180 ft		Left side property line: 120 ft
GPS coordinates of single largest v	essel:	Lat.43.7687, Long79.1892

Declaration: I am aware that it is an offence to give false information in this document and

I hereby declare that the information have given here is true and complete.							
Name of person completing this form (please print)			Official Title	•			
Magbool Malik			President				
Signature			Telephone No.	Date (dd-mm-yyyy)			
Signature			416-286-4338	17/05/2011			
1	11	[<u> </u>			

FS 09195 (11/10) Page 12 of 15



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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	1,865	241
7,560	2,000	248
18,900	5,000	333

Formula:

D= 16.94 x (1.524 x C) 1/3

D = Distance to overpressure of 1 psi (meters)

C= Tank Total Capacity in USWG

Parameters:

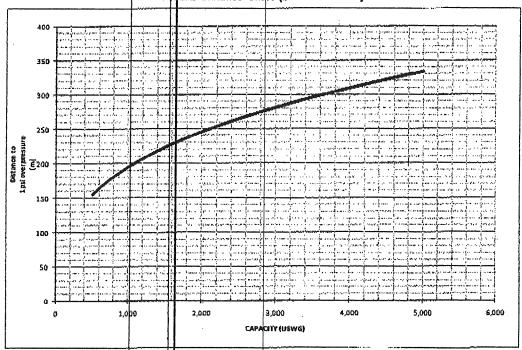
Density of Propane is 0.\$033 kg per litre @ 15 C

Assume all vessels are 60% full

1 gallon [US, liquid] = 0|003785411784 cubic meter

1 cubic metre = 264.17 USWG

Hazard Distance Chart (EPA-TNT model)



Declaration: I am aware that it is an offence to give false information in this document and

i nereby de	ciare in	si ine	miormation i	uase dise	u uese is tirae sua combiéte:	
Name of person completing this form (please pr	int)		ı		Official Title	
Nothing completed on this page.						
Signature			:		Telephone No.	Date (dd-mm-yyyy)
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FS 09195 (11/10) Page 13 of 15		-				
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Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act Propane Storage and Handling Regulation

SECTION C: SUBMISSIONS (cont'd)

PETRO CANADA

Applicant must include a Facility Site Plan and Map of Surpunding 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 AND Name and Address of Closest Building or Feature	Area	1	and F	of Build eatures th an "		Distance from Tank to Closest Building or
The same of the sa		0	1	2-10	11+	Feature
Industrial buildings or parks or golf courses Name:		10				m
Address: Province Postal Code						,
Residential building units specifically permanent single family dwellings, condominiums, and apartm	ents					
			X			<u>6/</u> m
Name: DE G-ROUTS DIAGNOSTK & FALAST SZAK NAddress: WEST HILL PHZA 4410 KINKSTOW RD. M City: Province Postal Code	1 5 3BE			X		<u>42</u> m
Commercial building units — continuous occupancy specifically hotels, campgrounds, and resorts. Name: ANDREWS MOTEL Address: 4434 KINGSTON RD, City: SEAR Province ON Postal Code MIR	2N6	Х	Ì			<u>57</u> m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, me institutions, and prisons. Name: Address: Province Postal Code	tal health	Ø				m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: Address:		0				m
City: Province Postal Code						

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

Name of person completing this form (please print)	Official Tit	e		***************************************
Maqbool Malik	President			•
Signature	Telephone	No.		Date (dd-mm-yyyy)
M-A robe	416-286-43	38	,	17/05/2011

^{*} For multi-unit buildings, count each unit as "1".



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

~	SEC	TION	C: SUE	BMISSIONS (cont'd)
Applica	nt must li	clude a	Facility Site	e Plan and Map of Surrounding Area
		1		

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

* Number of Buildings Distance from and Features Tank to Closest Buildings and Features Present within the Circle on the Map of the Surrounding Area (mark with an "X") **Building** or AND Name and Address of Closest Building or Feeture 1 2-10 11+ Feature Industrial buildings or parks or golf courses Name: Address: ___ Province _ Postal Code _ Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: Address: ____ Province _ Postal Code __ Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Address: ___ Province Postal Code _ City: Commercial building units - continuous occupancy specifically hotels, campgiounds, and resorts. Address: Province _ Postal Code _ City: Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: Address: ___ Province _ Postal Code_ City:

Declaration: I am I hereby d	aware ti eclare th	at it is an offence at the information	o give felse information in I have given here is true a	n this document and nd complete.	
Name of person completing this form (please p Maqbool Malik	rint)		Official Title President		1
Signature M-R- rook	ile		Telephone No. 416-286-4338	1	Date (dd-mm-yyyy) 17/05/2011
S 09195 (11/10) Page 14 of 15					

_ Postal Code _

stations, and police stations.

Province

m m

Name:

City:

Address: ___

Emergency responders specifically fire stations, embulant

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



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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 Sur dunding Area

Portable Storage Additional Information Speet

Cylinder Slze	Capacity in USWG	Quantity		Total Volume in USWG
# 420	123.9			
# 100	29.5			
# 40	11.75	5	58.75	
# 33.3	9.62	2	19.24	
# 30	8.8	2	17.6	
# 20	5.8	30	174	
# 10 .	2.9	1	2.9	
#5	1.5	1	7.5	
Cylinder Capacity	279 99			

Tanks Stored On-site Not Connected for Use

Tank Size in USWG	Quantity		Total Volume In USWG
None	1		Jano. Co
Total Tank Capacity			
Total Cylinder Capacity	280 USWG		
Total Tank Capacity	0 2000	U5 ¢	
Total Portable Capacity	280 U\$WG		

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.

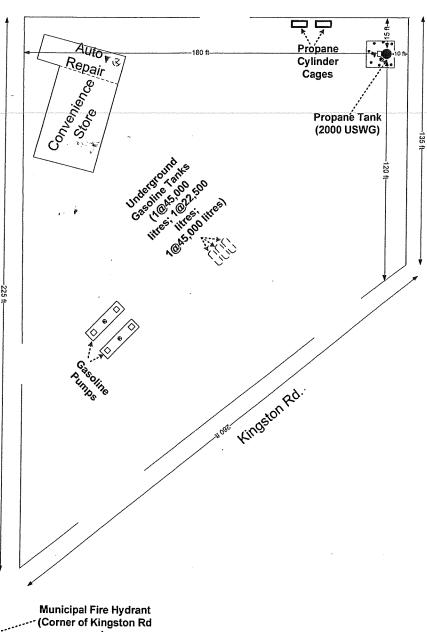
Name of person completing this form (please print) Magbool Malik	Official Title President	
Signature	Telephore, No. 416-286-4338	Date (dd-mm-yyyy) 17/05/2011



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1	Bio BSST. WWW.	L (IV) - 15-14	\$31,4903 Service:	877.682.8772				Propane Storage:	and Handling Hegulation
Γ			SEC	TION C:	SUI	BMISSION	S (cont'	d)	
		Applica	ntmusti	nclude a Facil	lity Sit	e Plan and Map	of Surrou	nding Area	
			P	ortable; Stora	ge Ac	ditional Inform	nation She	et	
	Cylinder Size	Сар	acity in	uswg.		Quantit	ly	Total Volu	me in USWG
	# 420		123.9						
e e	# 100		29.5						
	# 40		11.7	5	5			58.75	
	# 33.3	4.5	9.62		2			19.24	
	# 30		8.8		2			17.6	
	# 20		5.8		30			174	1 11 11 11 11 11 11 11 11
	# 10		2.9		1			2.9	
	#5		1.5		1			7.5	
	Total Cylinder Capacity 2	79.99							
				!		e Not Connect	ted for Us	Total Volume in	IICW/2
	Tank Size In USW	Ģ		-	}uanti	ty .		Total volume ii	1 03444
	None			 					
				-				Acres	
			;				+		
				-					
				-	-				
				1			-		
				-			+-		
	Total Tank Capacity								
	Total Cylinder Capacity				280	USWG			
	Total Tank Capacity		:		0				
	Total Portable Capacity				280	USWG			
	Decia	retion: I am I hereby d	aware t	hat it is an of	fence nation	to give false in	formation	in this document and and complete.	
	lame of person completing this fo aqbool Malik	om (please p	rint)	1			ficial Title esident	,	
-	Signature M-A-	noli	le)	elephone N 5-286-4338	0.	Date (dd-mm-yyyy) 17/05/2011
FS	09195 (11/10) Page 15 of 15		-		.,			- A ABOVERS	





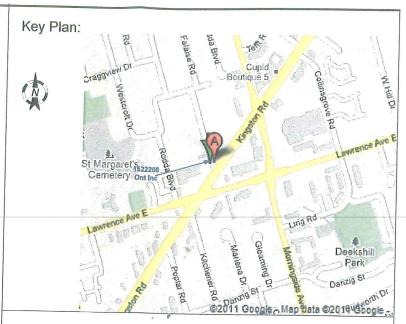
Municipal Fire Hydran (Corner of Kingston Rand Lawrence Ave East)

Scale (ft) 0

60

120

240



Notes:

1. Tank distances to property lines:

Property Line Setbacks	Distance
East (Right Side)	15 ft
South (Front Side)	10 ft
West (Left Side)	120 ft
North (Back Side)	180 ft

2. Fire Extinguisher



- 3. Egress/Fire Access Route: Site is accessible from Kingston Rd, also from Falaise Rd.
- 4. E-Stop



Superior Propane Ltd.

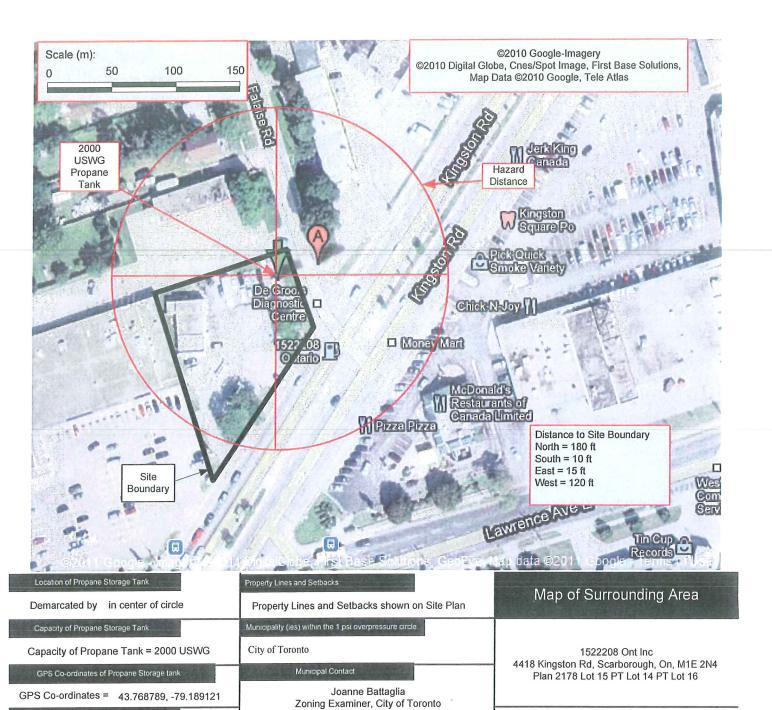
Title:

Site Plan 1522208 Ont Inc

4418 Kingston Road, Scarborough, Ontario, M1E 2N4

Plan 2178 Lot 15 PT Lot 14 PT Lot 16

Drawn by: L. Forget	Checked by: C. Britskey
Date: May 18, 2011	Rev 0



Tel: 416-395-7553 Fax: 419-395-7589

Email: jbattagl@toronto.ca

Drawn by: L. Forget Date: May 18th 2011

Circular Distance to 1 psi overpressure

Denotes by circle centred on tank: radial distance = 246 m