



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

- 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 <u>0076354661-C</u></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.

<p><b>A</b> Company Name <u>BROADBENT HOME HARDWARE</u> Ontario Corporation No., if applicable</p> <p>Operator Name (if different from above)</p>	
<p>Telephone No. <u>613 472-2539</u> Fax No. <u>613 472-2545</u> E-mail Address <u>broadbent.hardware@bellnet.ca</u></p>	
<p><b>B</b> Street No. <u>102349</u> Street Name, Lot / Concession No. <u>HWY 7 WEST RR #2</u></p> <p>Town / City or Township / County <u>MARMORA</u> Province <u>ON</u> Postal Code <u>K0K 2M0</u></p> <p>Mailing address if different from above.</p>	
<p><b>C</b> Street No. Street Name, Lot / Concession No.</p> <p>Town / City or Township / County Province Postal Code</p>	

<p><b>Information on Container Refill Centre or Filling Plant</b></p> <p>Location of facility.</p>			
<p><b>D</b> Street No. <u>102349</u> Street Name, Lot / Concession No. <u>HWY 7 WEST RR #2</u> Nearest major intersection <u>STIRLING / MARMORA RD</u></p>	<p>Town / City or Township / County <u>MARMORA</u> Province <u>ON</u> Postal Code <u>K0K 2M0</u></p>		

<p>Name of Licence Holder <u>BROADBENT HOME HARDWARE</u></p>	
<p>Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT) <u>RUSS BROADBENT</u></p>	<p>ROT type <u>(PPO-3)</u></p>
<p>Municipality (or municipalities if the facility or its hazard distance touches multiple borders) <u>MARMORA ON</u></p>	
<p>Hours of operation.</p> <div style="background-color: black; width: 100%; height: 50px;"></div>	

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 Name of Licence Holder <u>BROADBENTS HOME HARDWARE</u></p>	<p>Signature <u>RR</u></p>	<p>Date (dd-mm-yyyy) <u>12/01/11</u></p>
<p>Name of Senior Management person as defined in the Regulation holding the Record of Training <u>RUSS BROADBENT</u></p>	<p><u>RR</u></p>	<p><u>12/01/11</u></p>



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SECTION A: GENERAL INFORMATION (cont'd)

Indicate the year the facility was established. 1984 Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment.

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

	PSIG	Serial Number
Tank 1:		<u>327-94</u>
Tank 2:		
Tank 3:		

M.W.P. 250 PSI AT 115° F  
MDMT -20° F AT 250 PSI  
I HAVE NO PSIG

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: 1000 USWG Portable: \_\_\_\_\_ Mobile: \_\_\_\_\_

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Name of person completing this form (please print) <u>Russ Broadbent</u>	Official Title <u>OWNER</u>
Signature <u>[Signature]</u>	Telephone No. <u>613 472-2539</u>
	Date (dd-mm-yyyy) <u>12/01/11</u>



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

Name of Propane Supplier(s) <b>CASEY'S PROPANE INC</b>		For Office Use - Party No. [REDACTED]	
Street No. <b>835</b>	Street Name Lot / Concession No. <b>HWY #7 EAST RR #8</b>		
Town / City or Township / Country <b>PETERBOROUGH</b>		Province <b>ON</b>	Postal Code <b>K0K 2M0</b>
Telephone No. <b>1-800-252-1526</b>	Fax No. <b>(705) 742-3542</b>	Contact Name <b>CASEY</b>	
E-mail <b>Caseyspro@bellnet.ca</b>			

Name of Propane Transporter. If same as above, please check box. <input checked="" type="checkbox"/>		For Office Use - Party No. [REDACTED]	
Street No.	Street Name Lot / Concession No.		
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 Lot / Concession No.	
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) <b>KUSS BROADBENT</b>	Official Title <b>OWNER</b>	
Signature 	Telephone No. <b>613 472-2539</b>	Date (dd-mm-yyyy) <b>12/01/11</b>





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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.

NONE  
TANK SITS SEPARATE FROM STORE

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

FIRE EXTINGUISHER IS LOCATED BY TANK AND ALSO THROUGHOUT STORE + LUMBER YARD

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.

- STORE HAS FIRE ALARM SYSTEM  
- TANK HAS AN EMERGENCY SHUT OFF SWITCH, THAT CAN BE THROWN IF NEEDED

Maintenance and testing schedule for fire protection controls and devices.

- FIRE EXTINGUISHER'S ARE TESTED ANNUALLY  
- EMERGENCY PROCEDURE PLAN FOR PROPANE LEAK HAS BEEN REVIEWED WITH STAFF

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Name of person completing this form (please print)	Official Title	
Russ Broadbent	OWNER	
Signature	Telephone No.	Date (dd-mm-yyyy)
	613 472-2539	12/01/11



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

1. Contacts for Emergency Response

1. Facility Contact Personnel - Key Contact

Name <b>Russ Broadbent</b>	For Office Use - Party No.
Official Title <b>OWNER</b>	
Telephone No. <b>613 472-2539</b>	Fax No. <b>613 472-2545</b>
E-mail <b>rbroadbent@sympatico.ca</b>	
Role and responsibilities in emergency <b>EMERGENCY SHUTDOWN PROCEDURES</b>	

5. Facility 24-Hour Contact Person

Name <b>Russ Broadbent</b>	For Office Use - Party No.
Official Title <b>OWNER</b>	
Cell No. <b>613 922-5300</b>	Fax No. <b>613 472-2545</b>
E-mail <b>rbroadbent@sympatico.ca</b>	
Role and responsibilities in emergency <b>EMERGENCY CONTACT</b>	

2. Facility Contact Personnel - Alternate Contact

Name <b>Scott Broadbent</b>	For Office Use - Party No.
Official Title <b>OWNER</b>	
Telephone No. <b>613 472-2539</b>	Fax No. <b>613 472-2545</b>
E-mail <b>broadbent.hardware@bellnet.ca</b>	
Role and responsibilities in emergency <b>EVACUATION</b>	

6. Name of Facility Manager

Name <b>Scott Broadbent</b>	For Office Use - Party No.
Official Title <b>OWNER</b>	
Telephone No. <b>613 472-2539</b>	Fax No. <b>613 472-2545</b>
E-mail <b>broadbent.hardware@bellnet.ca</b>	
Role and responsibilities in emergency <b>DAY TO DAY OPERATIONS</b>	

3. Local Fire Services - Key Contact

Name <b>Tony Brownson</b>	For Office Use - Party No.
Official Title <b>FIRE CHIEF</b>	
Telephone No. <b>613 472-2748</b>	Fax No. <b>613 472-5230</b>
E-mail <b>tbrownson@marmoraandlake.ca</b>	
Role and responsibilities in emergency <b>FIRE SUPPRESSION</b>	

7. Propane Supplier Key Contact Person

Name <b>Casper Propane</b>	For Office Use - Party No.
Official Title <b>SUPPLIER</b>	
Telephone No. <b>1-800-252-1526</b>	Fax No. <b>705-742-3542</b>
E-mail <b>casperpro@bellnet.ca</b>	
Role and responsibilities in emergency <b>PROPANE SUPPLIER</b>	

4. Local Fire Services - Alternate Contact

Name <b>Bob Murphy</b>	For Office Use - Party No.
Official Title <b>DUTY FIRE CHIEF</b>	
Telephone No. <b>613 472-2748</b>	Fax No. <b>613 472-5230</b>
E-mail <b>bmurphy@marmoraandlake.ca</b>	
Role and responsibilities in emergency <b>FIRE SUPPRESSION</b>	

8. Municipal Contact

Name <b>Tony Brownson</b>	For Office Use - Party No.
Official Title <b>FIRE CHIEF</b>	
Telephone No. <b>613 472-2748</b>	Fax No. <b>613 472-</b>
E-mail	
Municipality <b>MARMORA</b>	

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Name of person completing this form (please print) <b>Russ Broadbent</b>	Official Title <b>OWNER</b>
Signature <i>R Broadbent</i>	Telephone No. <b>613 472-2539</b>
	Date (dd-mm-yyyy) <b>12/01/11</b>





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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.

NONE

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RUSS BROADBENT	OWNER	
Signature	Telephone No.	Date (dd-mm-yyyy)
	613 472-2539	12/01/11



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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) 05/01/11	Print Name of Training Provider: BROADBENT'S HOME HARDWARE
	Print Name of Instructor: RUSS BROADBENT
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) 01/12/10	Print Name of Training Provider: BROADBENT'S HOME HARDWARE
	Print Name of Instructor: SCOTT BROADBENT
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) 2005	Print Name of Training Provider: CASEY'S PROPANE
	Print Name of Instructor: CASEY VOLLEBRING
Training Date (dd-mm-yyyy) 2005	Print Name of Training Provider: CASEY'S PROPANE
	Print Name of Instructor: CASEY VOLLEBRING
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

NO ON-SITE TRAINING HAS BEEN DONE IN 2011. WILL CONTACT CASEY'S PROPANE IF TRAINING IS NEEDED.

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Name of person completing this form (please print) RUSS BROADBENT	Official Title OWNER
Signature <i>[Signature]</i>	Telephone No. 613 472-2539
	Date (dd-mm-yyyy) 12/01/11



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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) 05/01/11	Print Name of Training Provider: BROADBENT'S HOME HARDWARE
	Print Name of Instructor: RUSS BROADBENT
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) 01/12/10	Print Name of Training Provider: BROADBENT'S HOME HARDWARE
	Print Name of Instructor: SCOTT BROADBENT
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) 2005	Print Name of Training Provider: CASEY'S PROPANE
	Print Name of Instructor: CASEY VOLLERING
Training Date (dd-mm-yyyy) 2005	Print Name of Training Provider: CASEY'S PROPANE
	Print Name of Instructor: CASEY VOLLERING
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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Name of person completing this form (please print) RUSS BROADBENT	Official Title OWNER
Signature <i>[Signature]</i>	Telephone No. 613472-2539
	Date (dd-mm-yyyy) 12/01/11





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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)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider: T.B.A.
	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)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider: T.B.A.
	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)	Print Name of Training Provider:
	Print Name of Instructor: T.B.A.
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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Name of person completing this form (please print) RUSS BROADBENT	Official Title OWNER
Signature <i>R Broadbent</i>	Telephone No. 613 472-2537
	Date (dd-mm-yyyy) 18/06/11



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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).

SCOTT OR RUSS BROADBENT, OWNERS WITH ROT CERTIFICATES WILL GIVE WARNINGS TO REST OF STAFF. WARNINGS WILL BE VERBAL WITH INSTRUCTIONS ON FURTHER COURSE OF ACTIONS

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).

STAFF HAS BEEN INFORMED OF MEETING PLACE (RENTAL PROPERTY) ADJACENT TO STORE. GARY THOMPSON (HEALTH + SAFETY OFFICER) IS IN CHARGE OF INSURING ALL ARE PRESENT + TO REPORTING TO OWNERS

**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).

LICENCE HOLDERS WOULD BE INSTRUCTING STAFF TO MAKE 911 CALL IF SITUATION CALLS FOR IT

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

BOTH OWNERS ARE ON FIRE DEPARTMENT AND WOULD BE ATTENDING ANY FIRE CALLS

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

AS OWNERS ARE BOTH FIRE FIGHTERS THEY WOULD HAVE A DIRECT LINE OF COMMUNICATION TO FIRE DEPT + OTHER EMERGENCY PERSONEL

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

WOULD BE ON SITE 1

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Signature <i>R Broadbent</i>	Telephone No. 613472-2539
	Date (dd-mm-yyyy) 12/01/11



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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 type="checkbox"/>	<input checked="" type="checkbox"/>
5. Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders?	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" 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>500m</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>1500m</u>	

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Signature <i>R Broadbent</i>	Telephone No. <b>613 472-2539</b>	Date (dd-mm-yyyy) <b>12/01/11</b>





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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.

CHIEF TONY BROWNSON Local Fire Services Name MARMORA LAKE FIRE DEPT.	Print name Signature <i>Tony Brownson</i>	Date (dd-mm-yyyy) 26/5/2011
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ROSS BROOBNENT Signature	Official Title OWNER	Telephone No. 613 472-2539	Date (dd-mm-yyyy) 20/05/11
-----------------------------	-------------------------	-------------------------------	-------------------------------



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

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) <u>16/05/11</u>	Capacity of single largest propane storage vessel (USWG) <u>1000 USWG</u>
Tank setback coordinates. Indicate placement on the map.	
Front: <u>19m</u>	Right side property line: <u>51.3m</u>
Rear: <u>106m</u>	Left side property line: <u>9m</u>
GPS coordinates of single largest vessel: <u>77° 41' 47.2" W</u> <u>44° 28' 37.7" N</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) <u>Russ Broadbent</u>	Official Title <u>OWNER</u>	
Signature <u>R Broadbent</u>	Telephone No. <u>613 472-2539</u>	Date (dd-mm-yyyy) <u>16/05/11</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

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

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

Table 1: Distance Table

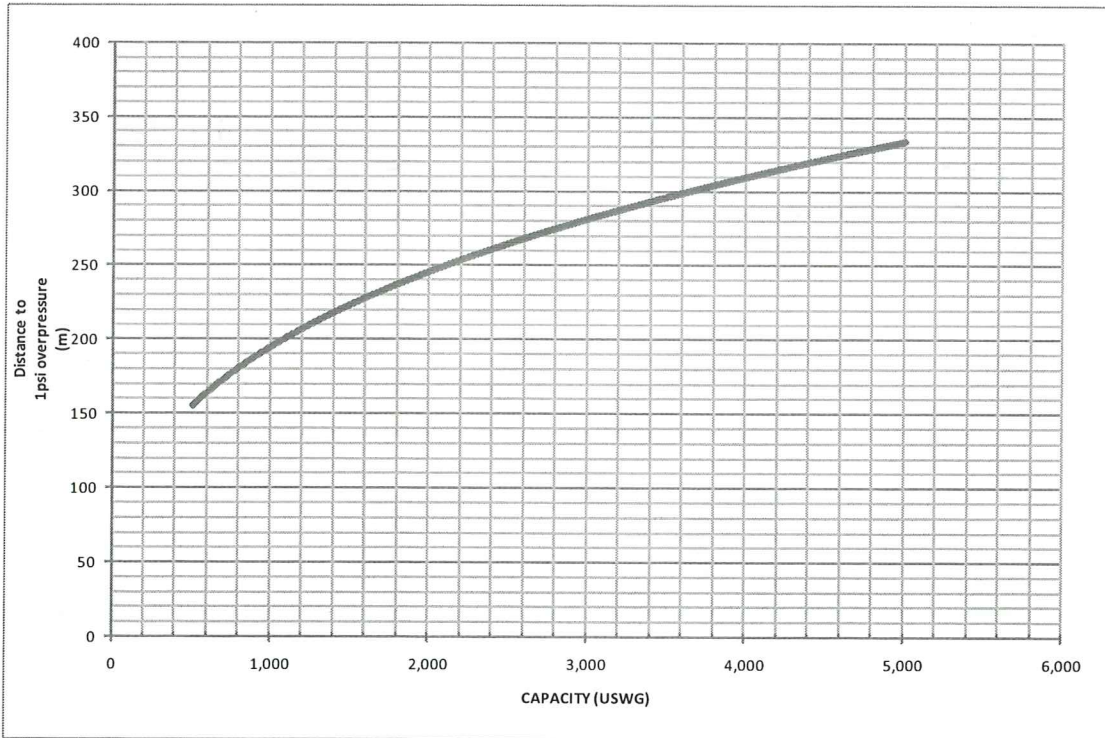
Water Capacity (litres)	Nominal Water Capacity (USWG)	Distance to 1 psi overpressure (m)
1,890	500	155
3,780	1,000	195
4,920	1,300	213
6,620	1,750	235
7,130	1,885	241
7,560	2,000	246
18,900	5,000	333

**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

1 - 3.916

**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: _____ Address: _____ City: _____ Province _____ Postal Code _____	0				_____ m
Residential building units specifically permanent single family dwellings, condominiums, and townhouses [REDACTED]				X	75 m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>BOUTER MARINE</u> Address: <u># 102317 HWY 7</u> City: <u>MARMORA</u> Province <u>ON</u> Postal Code <u>K0K2M0</u>			X		98 m
Commercial building units - continuous occupancy specifically hotels, campgrounds, and resorts. Name: <del>BEIT VISTA HOTEL</del> Address: <del>HWY 7</del> City: <del>MARMORA</del> Province <u>ON</u> Postal Code <u>K0K2M0</u>	X	X			_____ m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	0				_____ m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: <u>MARMORA + LAKE FIRE DEPT</u> Address: <u>BURSTALL ST</u> City: <u>MARMORA</u> Province <u>ON</u> Postal Code <u>K0K2M0</u>					4000 m

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

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Signature <u>[Signature]</u>	Telephone No. <u>613 472-2539</u> Date (dd-mm-yyyy) <u>16/05/11</u>



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

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

Portable Storage Additional Information Sheet

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

Tanks Stored On-site Not Connected for Use

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

Total Cylinder Capacity	
Total Tank Capacity	
Total Portable Capacity	

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Signature <i>R Broadbent</i>	Telephone No. <b>613 472-2539</b> Date (dd-mm-yyyy) <b>16/05/11</b>





Public GIS

# County of Hastings Interactive Mapping

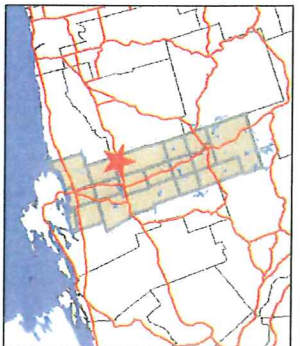
Municipality of MARMORA LAKE



0 115 230 345 m.

Map center: 285505, 4928359

This map is a user-generated static output from an Internet mapping site and is for general reference only. Data layers that appear on this map may or may not be accurate, current, or otherwise reliable. THIS MAP IS NOT TO BE USED FOR NAVIGATION. County of Hastings GIS Section 2010 (www.hastingsnavigator.ca)



### Legend

- Community PROPANE TANK
- Municipal Office
- Emergency Services
- Highway 401
- Provincial Highway
- Road
- Ontario Road Network
- Unaddressed Trail
- Non-maintained Trail
- HastingsRail
- Hastings\_AbandonRail
- Utility Line
- Almagamated Boundary
- Municipal Boundary
- Land Parcel
- Mohawks of the Bay of Quinte
- Provincial Parks
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- 20km24000050000002008GROU-EALTA.sid
- 20km24000050200002008GROU-EALTA.sid
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- 20km26000049600002008GROU-EALTA.sid
- 20km26000049800002008GROU-EALTA.sid
- 20km26000050000002008GROU-EALTA.sid



Scale: 1:3,916

RADIUS FROM STORKLE TANK 195m

BROADBENTS HOME HARDWARE - #108349 Hwy 7 WEST MARMORA ONT  
MUNICIPALITY CLERK - ROSEMARY PASCOE

1000  
USUG  
41' 42" u  
28' 32" N  
SET BACK  
19m  
106m  
51.3m  
9m



DATE 26/05/11

CUSTOMER \_\_\_\_\_

CONTACT Russ Broadbent

ADDRESS \_\_\_\_\_

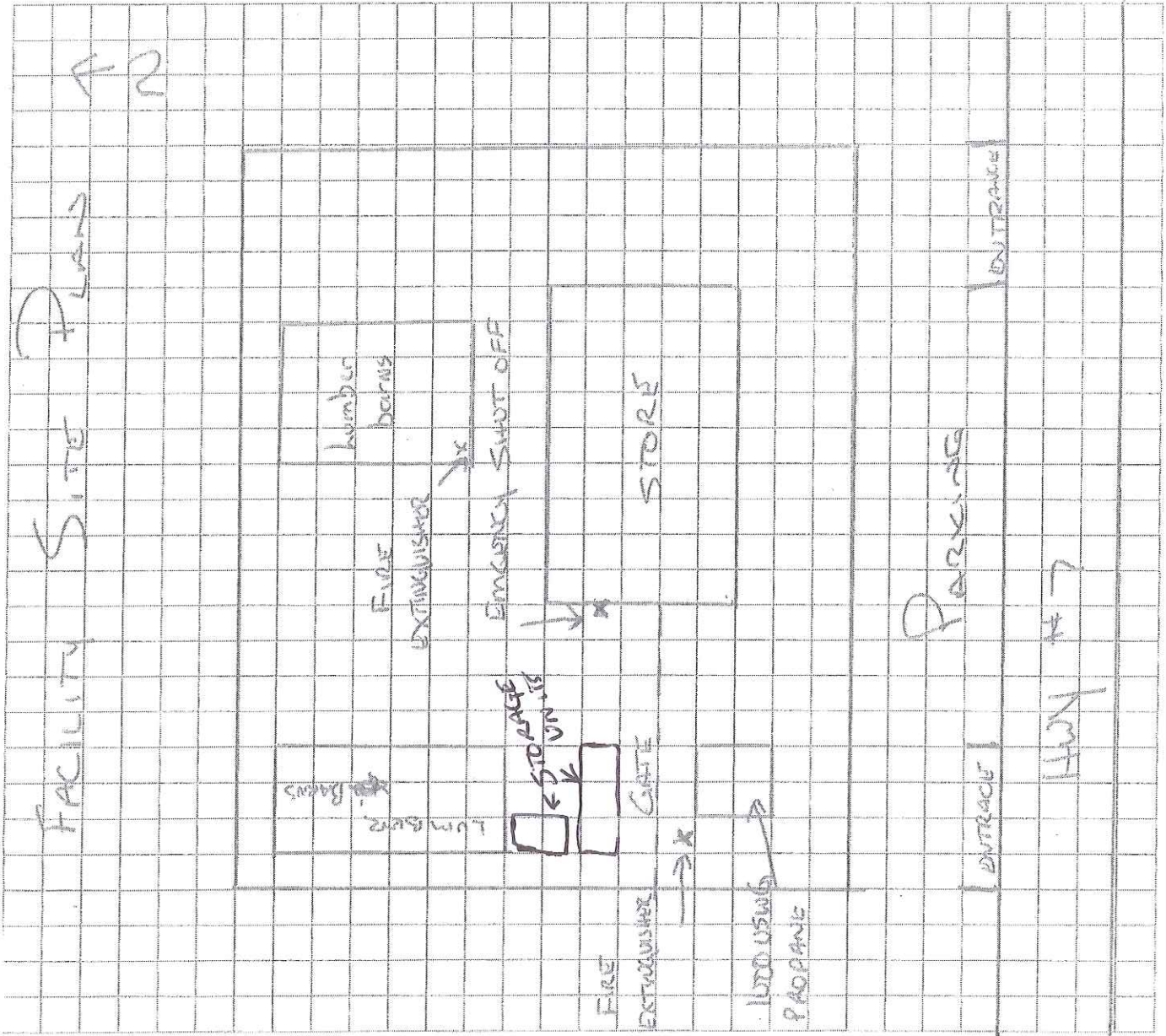
CITY \_\_\_\_\_

POSTAL CODE \_\_\_\_\_

TELEPHONE (HOME) \_\_\_\_\_

(WORK) \_\_\_\_\_

PROJECT \_\_\_\_\_





DATE 26/05/11

CUSTOMER \_\_\_\_\_

CONTACT Russ Broadbent

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

POSTAL CODE \_\_\_\_\_

TELEPHONE (HOME) \_\_\_\_\_

(WORK) \_\_\_\_\_

PROJECT \_\_\_\_\_

