#### Technical Standards and

14th Floor - Centre Tower 3300 Bloor Street West Standards and Safety Authority 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 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 or eita

		Failure to fully complete this form laking a false statement may resu under the <i>Technical Standa</i>	It in a fine or prosecution			
Lice	nce Number	new installation				
Chec	k applicable type	of propane operations.				
	✓ Cylinde	r / Motor Fill	Filling Plant Card/Keylock			
Subn	nit along with this	completed application a Facility Site Pla	an and a Map of the Surrounding Area.			
		SEC	CTION A: GENERAL INFO	ORMATION		
	pane Stora	ge and Handling Regulation	review for an RSMP under On	ntario's <i>Technical</i> S		s and Safety Act,  Corporation No., if applicable
M	Operator Name	THE RESERVE THE PROPERTY OF THE PARTY OF THE				
	Operator Ivame	(if different from above)				1
	Telephone No. 613-332-3881	Fax No. 613-332-4641	E-mail caseyspro@bellnet.ca			
B	Street No.	Street Name / 911 Number / A	Address, if applicable			1
	26062	Hwy #62 South				B 110.1
	1 2	Township / County		Province		Postal Code KOL 1C0
	L'amable			Ontario		KOL 100
С	Street No.	Street Name / 911 Number / 1 Hwy #62 South, Box 512	Address, if applicable	-		
	Town / City or T Bancroft	ownship / County		Province Ontario		Postal Code K0L 1C0
ln	formation on Location of fa Street No.	Container Refill Centre or Fil cility. Street Name / 911 Number / A		Nearest Major Intersection	n	
D	26062	Hwy #62 South		Hwy #62 & Upper Turrit		1
		ownship / County		Province	A Account	Postal Code
	L'amable	ownship / County		Ontario		KOL 1CO
	Lamable			Tomano		
	Name of Licence	Holder				3
	2231796 Onta	rio Inc.				
5.1	Name of a Seni	or Management person as defined in th	e regulation holding the Record of Training	(ROT).	ROT typ	oe .
	Daniel Vollerin	ng			G.2,LP,I	ROT#782
	Municipality (or	municipalities if the facility or its hazar	rd distance touches multiple borders)			
		oft, (Township of Dungannon), Cou				Ĩ
ļ						
	Hours of operation	on.				

This document is valid until the next licence renewal date. You are required by law to notify TSSA of any change of information. Declaration: I am aware that it is an offence to give false information in this document and I hereby declare that the information I have given here is true and complete.

Print nar Name of Licence Holder 2231796 Ontario Inc.		Signature	Date (dd-mm-yyyy) 19-08-2011
Name of Senior Management person as defined Regulation holding the Record of Training Dan	in the	On Call	ly.



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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)					
Indicate the year the facility was established.	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 ea	h fixed propane storage tank on site.				
PSIG	Serial Number				
Tank1: 250	780-9				
Tank2:	The state of the s				
Tank3:	Size and a second side of the desire of the second side of the second				
Enter capacity of propane in USWG, fixed, por	able, and mobile, and provide detailed inventory that includes the number of tank/vessel for				
	capacity of each tank/vessel, on a separate document.				
Fixed: 2,000 USWG	Portable: NONE Mobile: NONE				

Name of person completing this form (please print)  DANIEL VOLLERING	Official Title SECRETARY TREASURER		
Signature Calle	Telephone No. 613-332-3881	Date (dd-mm-yyyy) 19-08-2011	

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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

	*				/
Name of Propane Suppl	ier(s)				
PRIMEMAX ENERGY INC.					
	Name / 911 Number / Address,	if applicable			
2558 CEDAR	CREEK ROAD				
Town / City or Township AYR	/ Country		Province ONTARIO		Postal Code NOB 1E0
Telephone No.	Fax No.	Contact Name			
519-740-8209	519-740-1015	JIM TAYLOR			
E-mail					
		36			
Name of Propane Transp	porter. If same as above, ple	ease check box.			
Street No. Street I	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 N	Name / 911 Number / Address,	if applicable			
Town / City or Township	/ Country		Province		Postal Code
Telephone No.	Fax No.	Contact Name			

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

Name of person completing this form (please print) DANIEL VOLLERING	Official Title SECRETARY TREASURER	
Signature Cally.	Telephone No. 613-332-3881	Date (dd-mm-yyyy) 19-08-2011



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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

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

Description of the maximum volume, types and stor 1 x 2,000 USWG Propane Dispenser with Motor Fuel Di	rage location of other hazardous materials on site, if any. ispenser
Description of fire and emergency equipment indicate	ated on facility site map.
four (4) fire extinguishers as shown on site plan (attache	ed)
emergency stop- shuts valves once depressed	SEE ATTACHED MAP LOCATION
dry hydrant and 100,000 USWG Pond	
List of fire protection controls (e.g., fire detection sys	stems, fire notification systems, alarm systems, automatic shut off devices, fusible links, etc.)
and describe their function, use and operation.	
*	
see attached documents and diagrams for description o	f procedures and automatic shut off devices and valves
all information is provided to us by the Canadian Propar	ne Association for use in training personnel to prepare for filling propane cylinders
Exam 100-08	
Maintenance and testing schedule for fire protection	n controls and devices.
see attached documents and checklists for maintenance	e and testing procedures

Name of person completing this form (please print)  DANIEL VOLLERING	Official Title SECRETARY TREASURER	
Signature () (alle,	Telephone No. 613-332-3881	Date (dd-mm-yyyy) 19-08-2011



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Fax: 416.231.4903 Customer Service: 1.877.682.8772 Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act

Propane Storage and Handling Regulation

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

1. Contacts for Emergency Response

( a	Onwhook	$\neg$	5. Facility 24-Hour Contact Person	on
1. Facility Contact Personnel - Key Name		or Office Use - Party No.	Name	For Office Use - Party No.
VIRGINIA PLUNKETT		of Office Ose - Farty No.	LARRY PLUNKETT	7
Official Title SITE OPERATIONS MANAGER	U2		Official Title EMERGENCY RESPONSE TEAM LE	100 PM
Telephone No. 613-332-3881	Fax No. 613-332-464	1	Cell No. 613-332-7058	Fax No. 613-332-4641
E-mail			E-mail plunkettb@live.com	
Role and responsibilities in emergency	у		Role and responsibilities in emerger	
FIRST RESPONDER			FIRST RESPONDER, see schedule "	1" for contact details
2. Facility Contact Personnel - Alt	ternate Cont	act	6. Name of Facility Manager	
Name TREVOR PLUNKETT	F	or Office Use - Party No.	Name DANIEL VOLLERING	For Office Use - Party No.
Official Title EMERGENCY RESPONSE TEAM MEN	MBER		Official Title MANAGER/SECRETARY TREASURI	ER
Telephone No. 613-334-6083	Fax No. 613-332-464	41	Telephone No. 705-760-3939	Fax No. 705-742-3542
E-mail			E-mail	
plunkett@live.ca	DV/		caseyspro@bellnet.ca  Role and responsibilities in emerger	ncv
Role and responsibilities in emergency		exette	FIRST RESPONDER, see schedule "	
FIRST RESPONDER, see schedule "1"	for contact d	etalis	FIRST RESPONDER, see scrieduic	1 101 CONTROL COLUMN
3. Local Fire Services - Key Contact	nt.		7. Propane Supplier Key Contact	Person
J. LOCAL FILE DELVICES - NEY COLLA			Tripanie cappina	
Name PAT HOOVER		or Office Use - Party No.	Name JIM TAYLOR	For Office Use - Party No.
Name PAT HOOVER Official Title	E-mail	for Office Use - Party No.	Name	For Office Use - Party No.
Name PAT HOOVER	E-mail	own.bancroft.on.ca	Name JIM TAYLOR Official Title	For Office Use - Party No.
Name PAT HOOVER  Official Title FIRE CHIEF  Telephone No.	E-mail bancroft@to Fax No. 613-332-222	own.bancroft.on.ca	Name JIM TAYLOR Official Title PRESIDENT Telephone No.	For Office Use - Party No.  E-mail  Fax No. 519-740-1015
Name PAT HOOVER  Official Title FIRE CHIEF  Telephone No. 613-332-2442  Role and responsibilities in emergence	E-mail bancroft@to Fax No. 613-332-222	own.bancroft.on.ca	Name JIM TAYLOR  Official Title PRESIDENT  Telephone No. 519-740-8209  Role and responsibilities in emerge	For Office Use - Party No.  E-mail  Fax No. 519-740-1015  ncy NL SUPPORT
Name PAT HOOVER  Official Title FIRE CHIEF  Telephone No. 613-332-2442  Role and responsibilities in emergency EMERGENCY RESPONDER  Fire Services Address	E-mail bancroft@to Fax No. 613-332-222	own.bancroft.on.ca	Name JIM TAYLOR  Official Title PRESIDENT  Telephone No. 519-740-8209  Role and responsibilities in emerge TELEPHONE ADVICE AND TECHNICA  Propane Supplier Address	For Office Use - Party No.  E-mail  Fax No. 519-740-1015  ncy NL SUPPORT
Name PAT HOOVER  Official Title FIRE CHIEF  Telephone No. 613-332-2442  Role and responsibilities in emergency EMERGENCY RESPONDER  Fire Services Address 33 CHEMAUSHGON ST, BANCROFT, OF	E-mail bancroft@to Fax No. 613-332-222  y  NTARIO  Contact	own.bancroft.on.ca	Name JIM TAYLOR  Official Title PRESIDENT  Telephone No. 519-740-8209  Role and responsibilities in emerge TELEPHONE ADVICE AND TECHNICA  Propane Supplier Address 2558 CEDAR CREED RD, AYR, ONT	For Office Use - Party No.  E-mail  Fax No. 519-740-1015  ncy NL SUPPORT
Name PAT HOOVER  Official Title FIRE CHIEF  Telephone No. 613-332-2442  Role and responsibilities in emergence EMERGENCY RESPONDER  Fire Services Address 33 CHEMAUSHGON ST, BANCROFT, OI  4. Local Fire Services - Alternate Contame	E-mail bancroft@to Fax No. 613-332-222  y  NTARIO  Contact	own.bancroft.on.ca	Name JIM TAYLOR  Official Title PRESIDENT  Telephone No. 519-740-8209  Role and responsibilities in emerge TELEPHONE ADVICE AND TECHNICA  Propane Supplier Address 2558 CEDAR CREED RD, AYR, ONT  8. Municipal Contact  Name	For Office Use - Party No.  E-mail  Fax No. 519-740-1015  ncy NL SUPPORT  TARIO  For Office Use - Party No.
Name PAT HOOVER  Official Title FIRE CHIEF  Telephone No. 613-332-2442  Role and responsibilities in emergency EMERGENCY RESPONDER  Fire Services Address 33 CHEMAUSHGON ST, BANCROFT, OI  4. Local Fire Services - Alternate CO Name ED HOOVER  Official Title DEPUTY CHIEF Telephone No.	E-mail bancroft@to Fax No. 613-332-222  y  NTARIO  Contact	own.bancroft.on.ca	Name JIM TAYLOR  Official Title PRESIDENT  Telephone No. 519-740-8209  Role and responsibilities in emerge TELEPHONE ADVICE AND TECHNICA  Propane Supplier Address 2558 CEDAR CREED RD, AYR, ONT  8. Municipal Contact  Name HAZEL LAMBE  Official Title	For Office Use - Party No.  E-mail  Fax No. 519-740-1015  ncy NL SUPPORT
Name PAT HOOVER  Official Title FIRE CHIEF  Telephone No. 613-332-2442  Role and responsibilities in emergence EMERGENCY RESPONDER  Fire Services Address 33 CHEMAUSHGON ST, BANCROFT, OI  4. Local Fire Services - Alternate Contained to the contained of the conta	E-mail bancroft@to Fax No. 613-332-222  y  NTARIO Contact  E-mail  Fax No.	own.bancroft.on.ca	Name JIM TAYLOR  Official Title PRESIDENT  Telephone No. 519-740-8209  Role and responsibilities in emerge TELEPHONE ADVICE AND TECHNICA  Propane Supplier Address 2558 CEDAR CREED RD, AYR, ONT  8. Municipal Contact  Name HAZEL LAMBE  Official Title DEPUTY CLERK  Telephone No.	For Office Use - Party No.  E-mail  Fax No. 519-740-1015  ncy  L SUPPORT  For Office Use - Party No.
Name PAT HOOVER  Official Title FIRE CHIEF Telephone No. 613-332-2442 Role and responsibilities in emergency EMERGENCY RESPONDER  Fire Services Address 33 CHEMAUSHGON ST, BANCROFT, OI  4. Local Fire Services - Alternate C Name ED HOOVER  Official Title DEPUTY CHIEF Telephone No. 613-332-3008 Role and responsibilities in emergency	E-mail bancroft@to Fax No. 613-332-222  y  NTARIO Contact  E-mail  Fax No.	own.bancroft.on.ca	Name JIM TAYLOR  Official Title PRESIDENT  Telephone No. 519-740-8209  Role and responsibilities in emerge TELEPHONE ADVICE AND TECHNICA  Propane Supplier Address 2558 CEDAR CREED RD, AYR, ONT  8. Municipal Contact  Name HAZEL LAMBE  Official Title DEPUTY CLERK  Telephone No. 613-332-3331  E-mail	For Office Use - Party No.  E-mail  Fax No. 519-740-1015  ncy  L SUPPORT  TARIO  For Office Use - Party No.  613-332-0384

Name of person completing this form (please print)  DANIEL VOLLERING	Official Title SECRETARY TREASURER	
Signature	Telephone No.	Date (dd-mm-yyyy)
for aller	613-332-3881	19-08-2011



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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.  Daily/monthly inspections
Emergency response plan available through supplier
Dry hydrant and 100,000 gallon water pond for fire fighting/fire suppression purposes
All areas are monitored by security cameras 24/7(CCTV)
All new staff are trained in emergency policies and procedures
Emergency policy and procedures reviewed yearly or as required for existing staff

Name of person completing this form (please print)  DANIEL VOLLERING	Official Title SECRETARY TREASURER	
Signature	Telephone No.	Date (dd-mm-yyyy)
Ch (alles)	613-332-3881	19-08-2011



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Propane Storage and Handling Regulation

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

3. Record of Emergency Training Provided - For most recent 12-month period.

Training on Emergency Res	sponse Plan and Procedures provided to facility key contacts.
Training Date (dd-mm-yyyy)	Print Name of Training Provider: CASEY'S PROPANE INC.
24-05-2011	Print Name of Instructor: DANIEL VOLLERING
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 Em	ergency Management Procedures provided to staff.
Training Date (dd-mm-yyyy)	Print Name of Training Provider: CASEY'S PROPANE INC.
24-05-2011	Print Name of Instructor: DANIEL VOLLERING
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 pro	vided to certificate holders / persons with Records of Training.
Training Date (dd-mm-yyyy)	Print Name of Training Provider: CASEY'S PROPANE INC.
24/05/2011	Print Name of Instructor: DANIEL VOLLERING
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:

Name of person completing this form (please print)	Official Title	Official Title			
DANIEL VOLLERING	SECRETARY TREASURER				
Signature	Telephone No.	Date (dd-mm-yyyy)			
Selu Chelly	613-332-3881	08-19-2011			



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

4. Emergency Training Plan for Coming Year

Training on Emergency Res	ponse Plan and Procedures provided to facility key contacts.
Target Date (dd-mm-yyyy)	Print Name of Training Provider: CASEY'S PROPANE INC.
01-09-2011	Print Name of Instructor: DANIEL VOLLERING
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 Eme	ergency Management Procedures provided to staff.
Target Date (dd-mm-yyyy)	Print Name of Training Provider: CASEY'S PROPANE INC.
01-09-2011	Print Name of Instructor: DANIEL VOLLERING
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 prov	rided to certificate holders / persons with Records of Training.
Target Date (dd-mm-yyyy)	Print Name of Training Provider: CASEY'S PROPANE INC.
01-09-2011	Print Name of Instructor: DANIEL VOLLERING
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:

Name of person completing this form (please print)  DANIEL VOLLERING	Official Title SECRETARY TREASURER		
Signature Cally	Telephone No. 613-332-3881	Date (dd-mm-yyyy) 19-08-2011	



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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.

5. Emergency Response Communications Plan

Warnings and I	4Ct	ions
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Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate). If an emergency situation such as a serious propane leak or fire occurs, the person who notices the problem will shout FIRE, FIRE and proceed to call 911 and evacuate themselves and all others present at the site.

The neighbours will be notified by the local fire service personnel, or the on-site manager if they arrive at the site first, the occupants of the neighbouring sites will be told that an emergency situation has occured and emergency services have been called.

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). All on-site personnel will proceed (without starting a vehicle) to the meeting place, in the front parking lot. Once in the safe area, confirmation that 911 has been called and a head count will be done. The emergency response plan with be reviewed and tested yearly with all R.O.T. holders.

#### **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).

The staff will follow the flow chart "in case of emergency" procedures and the on-site operations manager, Virginia Plunkett, will be responsible to make sure

the emergency procedures are followed, 911 is called, and all staff and persons present at the site have been evacuated and accounted for at the meeting place

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

The dispenser is accessed by the main entrance for Casey's Propane and the road is always maintained and accessible during all seasons and 24 hours a

day, seven (7) days a week

The fire hydrant is also accessible using the same road and is located beside the dispenser

The dispenser cabinet is locked using a standard lock and can be opened using bolt cutters (readily available on emergency fire truck)

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

The first responders listed above will communicate with the Fire Chief, will assume a command centre at the meeting place until the Fire Chief or emergency

services arrive at the scene and ensure that all persons do not leave the meeting place until the "all clear" has been given and it is safe to return to the site.

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

Virginia and Trevor Plunkett- 10 to 15 minutes

Larry Plunkett- 10 to 15 minutes

Daniel Vollering- 50 minutes

Name of person completing this form (please print)  DANEIL VOLLERING	Official Title SECRETARY TREASURER			
Signature	Telephone No. 613-332-3881	Date (dd-mm-yyyy) 19-08-2011		



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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)

The licence holder will complete Section B in consultation with the local Fire Services. 6. Building and Site Security and Procedures Yes No Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)? 2. Is there adequate night lighting at the site? 3 Are procedures in place that ensure access routes, aisles, storage area, filling areas and the grounds are kept clear from unwanted materials? 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? Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders? Are weighing systems validated for accuracy? Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)? Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves) Is the schedule of maintenance and testing activities retained on site? 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. No Yes Is a pressurized water system available at the propane facility site? Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location? What is the unobstructed distance to the closest water supply that could be used for n/a firefighting activities? (distance in metres only) What is the unobstructed distance to the closest approved water supply with year Tait Lake round access if there are no hydrants? (distance in metres only)

Name of person completing this form (please print)  DANIEL VOLLERING	Official Title SECRETARY TREASURER	Official Title SECRETARY TREASURER			
Signature Calle ".	Telephone No. 613-332-3881	Date (dd-mm-yyyy) 19-08-2011			



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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

No Yes To be completed by the Local Fire Services Has the local fire service had an opportunity to review the Emergency Response and Preparedness Plan? If not, please explain (e.g., no fire services). Fire services comments, if any: See affached comment forms dated June 22, 2011 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. Date (dd-mm-yyyy) Print name Signature

Name of person completing this form (please print) DANIEL VOLLERING	Official Title SECRETARY TREASURER		
Signature Calle	Telephone No. 613-332-3881	Date (dd-mm-yyyy) 19-08-2011	



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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

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.
- 3 Location of permanent structures on site.
- 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.
- 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 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-yyy		city of single largest propane USWG	storagevessel (USWG)	
Tank setback coordinates. Indica	ttached GPS SOM		310M	
11011.		Right side property line:	JION	
Rear: MAPS	495M	Left side property line:	85M	
GPS coordinates of single largest vessel: 77'46"35"w, 44'59'32"				

Name of person completing this form (please print)  DANIEL VOLLERING	Official Title SECRETARY TREASURER	EASURER		
Signature Leadles '	Telephone No. 613-332-3881	Date (dd-mm-yyyy) 19-08-2011		



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	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:

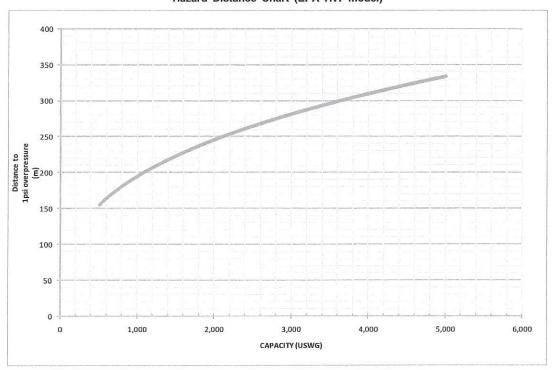
Density of Propane is 0.5033 kg per litre @ 15 C

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

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

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

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

#### Table 2: Buildings and Features

Buildings and Features Present within the Circle on the Map of the Surrounding Area  AND Name and Address of Closest Building or Feature		* Number of Buildings and Features (mark with an "X")			Distance from Tank to Closest Building or
AND Name and Address of Closest Building of Feature	0	1	2-10	11+	Feature
Industrial buildings or parks or golf courses  Name: Casey's Propane Inc.  Address: 26062 Hwy #62 South  City: Province Ontario Postal Code KOL 1C0		X			15.24 m
Residential building units specifically permanent single family dwellings, condominiums, and apartments.  Name:  Address:  City:  Province  Postal Code	X				m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes.  Name:  Address:  Address:  City:   Province  Ontario  Postal Code		X			<u>210</u> m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts.  Name: NONE  Address: Province Postal Code	X				m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons.  Name: NONE  Address:	Х				m
Emergency responders specifically fire stations, ambulance stations, and police stations.  Name:  Address:  City:  Province  Postal Code	X				m

Official Title SECRETARY TREASURER	
Telephone No. 613-332-3881	Date (dd-mm-yyyy) 19-08-2011
	SECRETARY TREASURER Telephone No.

<sup>\*</sup> For multi-unit buildings, count each unit as "1".



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#### **WORKSHEET**

#### Portable Storage Additional Information Worksheet

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9	NONE	S-46, 1111
# 100	29.5	NONE	
# 40	11.75	NONE	
# 33.3	9.62	NONE	
# 30	8.8	NONE	
# 20	5.8	NONE	
# 10	2.9	NONE	
# 5	1.5	NONE	

#### Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
IONE		
	· · · · · · · · · · · · · · · · · · ·	

Total Cylinder Capacity	NONE
Total Tank Capacity	NONE
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	NONE

a tank is overfilled it is placed in this avea until overfilled procedures are convolete. (Approx. 30mins. naximum. F1-4 - Live Ectinguishur - Shurt Off Chapane) Compane Tanks

Future Tanks

to be installed OL Temporary Overfill Location EV - Evacuation Area - Customer Parking Location Symbols: note: tanks containing propane are not \* - Hydrant \$ - Fire Route Stored on site. 2231796 Ortario The Lieina Station Mater Water 26062 Hury # 62 Highway # 62 South Rear CASEY'S PROPANE COMPOLIND - Quality 1

> 10. Bancroft

# Municipal Planning Contact County of Hastings Planning & Development Dept. 15 Victoria Ave. Belleville, ON K8N 125 613-966-6712 246m or 807 Radius Casey's Propane Facility 26062 Highway 62

# Propane Facility Site Plan

(Dungannon Twp.) Con. 4 Part Lots 27 & 28 26062 Highway 62 Casey's Propane Town of Bancroft

2000 USWG Propane Dispensor Tank GPS Coordinates 77° 46' 35" W 44° 59' 32" N

Tank Property Line Setback:
Front - 80m or 262'
Rear - 495m or 1624'
Left Side - 85m or 278'
Right Side - 310m 1017'



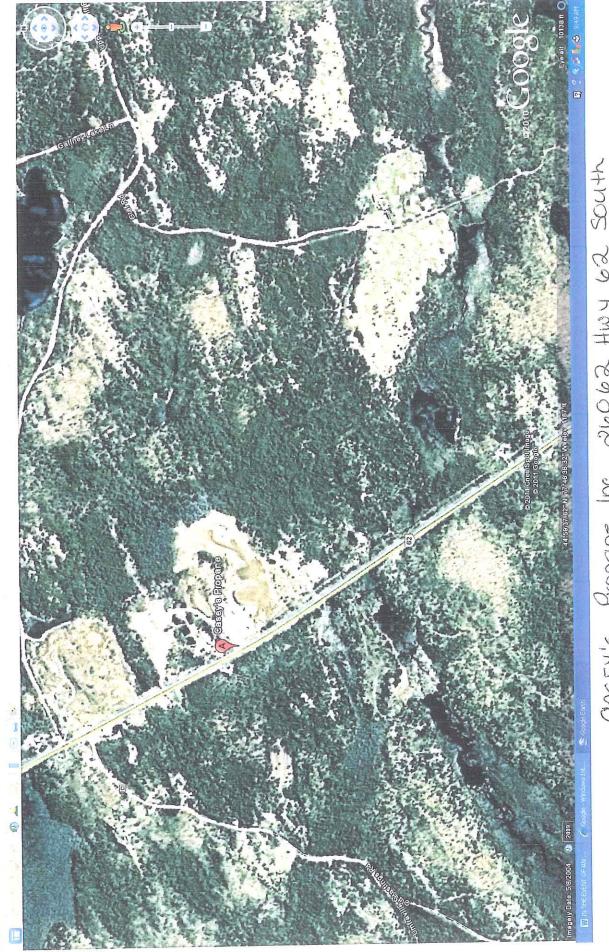




Major Highway Major Road

Map Prepared July 2011 Local Municipality Municipal Contact Information Town of Bancroft, 24 Flint Ave. Bancroft ON, KOL 1CO 613-332-0384

Produced to Come of House Data Same COLOL MANG, DOCK WAS COME OF THE COME OF T



CASEV'S Propane Inc. 26062 HWY 62 South Latitude - 44° 59'30.67" N Longitude - 77° 46'38.29" M