



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.

Failure to fully complete this form may result in rejection.
Making a false statement may result in a fine or prosecution
under the *Technical Standards and Safety Act*

Licence Number 000076645454

Check applicable type of propane operations.

☒ Cylinder ☐ Motor Fill ☐ Filling Plant ☐ Card/Keylock

Submit along with this completed application a Facility Site Plan and a Map of the Surrounding Area.



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.

Company Name Cunningham's Country Store Ontario Corporation No., if applicable _____

A Operator Name (if different from above) Same

Telephone No. 613-332-1496 Fax No. 613-332-0012 E-mail tcham911@msn.com

B Street No. 35513 Street Name / 911 Number / Address, if applicable HWY 28 east

Town / City or Township / County McArthur Mills Province Ontario Postal Code K0L 2M0

Mailing address if different from above.

C Street No. Same Street Name / 911 Number / Address, if applicable _____

Town / City or Township / County _____ Province _____ Postal Code _____

Information on Container Refill Centre or Filling Plant

Location of facility.

D Street No. 35513 Street Name / 911 Number / Address, if applicable HWY 28 east Nearest Major Intersection HWY 28 & Boulter Road

Town / City or Township / County McArthur Mills Province Ontario Postal Code K0L 2M0

Name of Licence Holder

Cunningham's Country Store

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT).

Tracey Cunningham

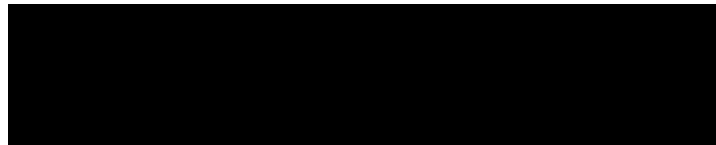
ROT type

PP0-3

Municipality (or municipalities if the facility or its hazard distance touches multiple borders)

Carlow/Mayo Township

Hours of operation.



This document is valid until the next licence renewal date. You are required by law to notify TSSA of any change of information.

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

Print name	Signature	Date (dd-mm-yyyy)
Name of Licence Holder <u>Cunningham's Country Store</u>		
Name of Senior Management person as defined in the Regulation holding the Record of Training <u>Tracey Cunningham</u>	<u>Tracey Cunningham</u>	<u>13-09-2011</u>



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SECTION A: GENERAL INFORMATION (cont'd)

Indicate the year the facility was established.

UNKNOWN - 2006

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

2007

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

	PSIG	Serial Number
Tank 1:	250	6SF004992
Tank 2:		
Tank 3:		

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

Fixed: 1000 Portable: 0 Mobile: 0

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Name of person completing this form (please print)	Official Title	
Tracey Cunningham	Owner/operator	
Signature	Telephone No.	Date (dd-mm-yyyy)
	613-332-1496	13-09-2011



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SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

Name of Propane Supplier(s) Kelly's Fuels		For Office Use - Party No.	
Street No. 2085	Street Name / 911 Number / Address, if applicable Whittington Drive		
Town / City or Township / Country Peterborough		Province On	Postal Code K9J 7H6
Telephone No. 705-745-4629 888-313-4328	Fax No. 705-745-3622	Contact Name Kevin Dupuis (General Manager)	
E-mail kdupuis@kellysfuel.com www.kellysfuel.com			

Name of Propane Transporter. If same as above, please check box. <input type="checkbox"/>		For Office Use - Party No.	
Kelly's Fuels			
Street No. 174	Street Name / 911 Number / Address, if applicable Hastings Street North P.O. Box 119		
Town / City or Township / Country Bancroft		Province On	Postal Code K0L 1C0
Telephone No. 613-332-2294 877-395-4398	Fax No. 613-332-1570	Contact Name Kevin Dupuis (General Manager)	
E-mail kdupuis@kellysfuel.com www.kellysfuel.com			

Off-site Cylinder and/or Mobile Storage None	Capacity stored off-site, in USWG	For Office Use - Party No.
Street No. Street Name / 911 Number / Address, if applicable		
Town / City or Township / Country		Province Postal Code
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) Tracey Cunningham	Official Title Owner/operator	
Signature 	Telephone No. 416-749-5700 613-332-1496	Date (dd-mm-yyyy) 13-09-2011



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SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN

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

Description of the maximum volume, types and storage location of other hazardous materials on site, if any.

Regular Gasoline 13,600 litres - under ground tank

Premium Gasoline 4,500 litres - underground tank

Diesel 9,000 litres - under ground tank

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

ABC Fire extinguisher

1- 1 - ABC fire extinguisher located at the Propane Dispenser.

2- 1- ABC fire extinguisher located at gas bar

3- 2- ABC fire extinguisher located at the gas pumps

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

1- Fusible link on ISC - isolation valve between the tank and the downstream propane dispensing equipment.

2. Power supply breaker inside the main building. This cuts all power to the propane system - shuts down pump; closes solenoid valve.

3- TAS Alarm System inside monitoring of store linked to smoke alarms.

Maintenance and testing schedule for fire protection controls and devices.

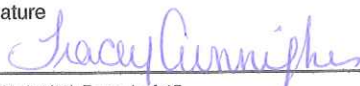
Maintenance and testing is undertaken by Kelly's Propane according to Kelly's Fuel Maintenance Standards. Schedule for key equipment is:

1- Pumps - (pumps every 3 months; pump motor: check belts monthly; grease pump every 6 months).

2- ISC valve (test for closure every 6 months).

3- Storage tank Relief Valves - inspected every 2 years; replacement schedule as per provincial regulations.

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Name of person completing this form (please print) Tracey Cunningham	Official Title Owner/operator	
Signature 	Telephone No. 613-332-1496	Date (dd-mm-yyyy) 13-09-2011



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

1. Contacts for Emergency Response

1. Facility Contact Personnel - Key Contact

Name <u>Tracey Cunningham</u>	For Office Use - Party No.
Official Title <u>Owner/operator</u>	
Telephone No. <u>613-332-1496</u>	Fax No. <u>613-332-0012</u>
E-mail <u>tcham@msn.com</u>	
Role and responsibilities in emergency <u>Co-ordinate site response plan (ERP)</u>	

5. Facility 24-Hour Contact Person

Name <u>Tracey Cunningham</u>	For Office Use - Party No.
Official Title <u>Owner/operator</u>	
Cell No. <u>613-334-6529</u>	Fax No. <u>613-332-6531</u>
E-mail <u>tcham@msn.com</u>	
Role and responsibilities in emergency <u>Co-ordinate site response plan (ERP)</u>	

2. Facility Contact Personnel - Alternate Contact

Name <u>Corwin Cunningham</u>	For Office Use - Party No.
Official Title <u>Owner/operator</u>	
Telephone No. <u>613-332-2617</u>	Fax No. <u>613-332-0012</u>
E-mail <u>None</u>	
Role and responsibilities in emergency <u>Co-ordinate site response plan (ERP)</u>	

6. Name of Facility Manager

Name <u>Tracey Cunningham</u>	For Office Use - Party No.
Official Title <u>Owner/operator</u>	
Telephone No. <u>613-332-1496</u>	Fax No. <u>613-332-0012</u>
E-mail <u>tcham@msn.com</u>	
Role and responsibilities in emergency <u>Co-ordinate site response plan (ERP)</u>	

3. Local Fire Services - Key Contact

Name <u>NO LOCAL FIRE SERVICE</u>	For Office Use - Party No.
Official Title	
Telephone No.	Fax No.
E-mail	
Role and responsibilities in emergency <u>Coordinate emergency response / advise on Fire Service Response. Liaise with police.</u>	

7. Propane Supplier Key Contact Person

Name <u>Kelly's Fuels (Kevin Dupuis)</u>	For Office Use - Party No.
Official Title <u>General Manager</u>	
Telephone No. <u>888-313-4328</u>	Fax No. <u>705-745-3622</u>
E-mail <u>kdupuis@keelysfuel.com</u>	
Role and responsibilities in emergency <u>Identify and dispatch Kelly's Fuels and or LPGAERC emergency response personal as required</u>	

4. Local Fire Services - Alternate Contact

Name <u>NO LOCAL FIRE SERVICE</u>	For Office Use - Party No.
Official Title	
Telephone No.	Fax No.
E-mail	
Role and responsibilities in emergency <u>Coordinate emergency response when key contact is not available and Liaise with police services.</u>	

8. Municipal Contact

Name <u>Arlene Cox</u>	For Office Use - Party No.
Official Title <u>Clerk Administrator</u>	
Telephone No. <u>613-332-1760</u>	Fax No. <u>613-332-2175</u>
E-mail <u>carlowmayo@hughes.net</u>	
Municipality <u>Carlow / Mayo Township</u>	

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Name of person completing this form (please print) <u>Tracey Cunningham</u>	Official Title <u>Owner/operator</u>
Signature <u>Tracey Cunningham</u>	Telephone No. <u>613-332-1496</u>
	Date (dd-mm-yyyy) <u>13-09-2011</u>



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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.

TAS Alarm System inside monitoring of store linked to smoke alarms

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Name of person completing this form (please print) Tracey Cunningham	Official Title Owner/operator
Signature <i>Tracey Cunningham</i>	Telephone No. 613-332-1496
	Date (dd-mm-yyyy) 13-09-2011



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

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

Training on Emergency Response Plan and Procedures provided to facility key contacts.

Training Date (dd-mm-yyyy) None	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy) 29/12/2011	Print Name of Training Provider: Tracey Cunningham
	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) None	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy) 29/12/2011	Print Name of Training Provider: Tracey Cunningham
	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) None	Print Name of Training Provider: OPA	Please Note - a ROT is valid for 3 years
	Print Name of Instructor:	
Training Date (dd-mm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	
Training Date (dd-mm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	

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Signature Tracey Cunningham	Telephone No. 613-332-1496	Date (dd-mm-yyyy) 13-09-2011



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

4. Emergency Training Plan for Coming Year

Training on Emergency Response Plan and Procedures provided to facility key contacts.

Target Date (dd-mm-yyyy) Q4-2011	Print Name of Training Provider: Kelly's Fuel or Alternate	Please note: Canadian Propane Gas Association
	Print Name of Instructor: to be arranged	is currently developing the course
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	content and it and its provider should be available to
	Print Name of Instructor:	teach in the fourth quarter of this year.
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) Q4-2011	Print Name of Training Provider: Key Contact to train staff
	Print Name of Instructor: to be arranged
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

On-site specific training provided to certificate holders / persons with Records of Training.

Target Date (dd-mm-yyyy) Q4-2011	Print Name of Training Provider: Kelly's Fuel	Please Note - a ROT is valid for 3 years
	Print Name of Instructor: To be arranged	Owner to call if training is required in 2011
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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Signature 	Telephone No. 613-332-1496	Date (dd-mm-yyyy) 13-09-2011



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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 Actions

Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate).

The operator or Alternate will contact emergency services by calling 911 and will provide warnings outlined in the attached: "Propane Emergency Response Procedures" placard (to be posted on site and part of the employee training). If it is safe to do so this could involve advising neighbors to evacuate. The owner/operator may also contact Kelly's Fuel via the emergency number identified in the ERP.

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).

The owner /operator or alternate should first follow the actions in the ERP provided herein. Stage evacuation, if the release of propane cannot be stopped by cutting electrical power may be required. Note a specific muster point is not advisable, since a propane plume can blow in any direction.

Actions will be taken by an on duty ROT person(s)

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).

When the system is operational, a ROT person will be on duty and be in the propane tank area. This person will be able to visually ascertain any abnormal/ accident event and implement the appropriate emergency response actions. When the system is not in operation, the ISC valve (main isolation valve) is closed, and the propane system is unattended. Any accident involving the propane tank during such times will require the intervention of random, nearby individuals.

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

The propane tank system is located in a wide open area that is easily accessible.

The fire access routes are identified in the attached site plan.

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

The critical information required from the license holder is (a) how to shut the system down and (b) the fill level in the tank (if known)

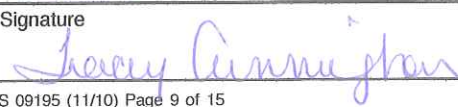
Fill level is relevant from a time-to-BLEVE perspective (a near empty tank will BELEVE sooner than a full tank if there is a fire impingement on the tank).

This information will be provided to the authorities by site Owner Tracey Cunningham or alternate.

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

Tracey or Corwin Cunningham,(owners) would be able to respond with 5-10 minutes after receiving an emergency call and arrive at the facility.

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Signature 	Telephone No. 613-332-1496
	Date (dd-mm-yyyy) 13-09-2011



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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.

6. Building and Site Security and Procedures

	Yes	No
1. Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Is there adequate night lighting at the site?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Are procedures in place that ensure access routes, aisles, storage area, filling areas and the grounds are kept clear from unwanted materials?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Are there procedures that capture and record the daily inspection of hoses and inspection requirements for filling systems and mechanical devices used in the transfer of propane?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Are weighing systems validated for accuracy?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Is the schedule of maintenance and testing activities retained on site?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

7. Water Supply

The propane licence holder should work with the local fire department to determine water supply capabilities that are available based on the propane facility's location.

	Yes	No
1. Is a pressurized water system available at the propane facility site?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location?	<input type="checkbox"/>	<input checked="" 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>None</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>10mMississippi River</u>	

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

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

8. Licence holder and local Fire Services Review

To be completed by the Local Fire Services

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

Yes

☐

No

☒

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

No Local Fire services available

(Municipality to review the (ERP))

Fire services comments, if any:

To be completed by the Licence Holder

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

Tracey Cunningham will upon receipt of the Level 1 (RSMP) take immediately to the Municipality Carlow/Mayo Township for the review and comments.

If any changes are made by the Township, Tracey will update and then send all forms into TSSA for approvals.

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

LOCAL FIRE SERVICES

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

Print name	Signature	Date (dd-mm-yyyy)
Local Fire Services Name Arlene Cox	Arlene Cox	16-Sept-2011

ARLENE COX
CLERK-ADMIN./DEPUTY TREASURER
TOWNSHIP OF CARLOW/MAYO

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Signature Tracey Cunningham	Telephone No. 613-332-1496	Date (dd-mm-yyyy) 13-09-2011



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SECTION C: SUBMISSIONS

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

Facility Site Plan.

The licence holder will submit a copy of the original facility site plan updated with the following information:

1. The storage location of fixed, portable, and mobile vessels.
2. The maximum volume, types and storage location of hazardous materials.
3. Location of permanent structures on site.
4. Access and egress points and location of barriers.
5. Location of fire and emergency equipment (e.g., sprinkler systems, extinguishers, suppression systems) on site and location of fire hydrant or water supply where available.
6. Location of emergency shut off/shut down switches/valves.

Map of Surrounding Area.

The licence holder will submit a scaled aerial map of the surrounding area showing the following information:

7. The capacity and placement of the single largest propane storage vessel, including its setback from the front, rear and side property lines.
8. GPS co-ordinates of the single largest vessel.
9. Visual indication of the single largest fixed vessel and a circle made using the distance in Table 1 as the radius from the single largest fixed vessel.
10. Clear indication of the municipality or municipalities present within the circle.
11. Visual indication of property line information.
12. The location and name of roads within or abutting the site.
13. Key note to the drawing indicating the facility's municipal address, municipal lot number(s) and concession lines as applicable, and the date the map was prepared.
14. Address and contact information for each municipality (municipal clerk or secretary-treasurers of planning board). (Refer to page 5.)
15. Complete "Required Mapping Information from Updated Site Plan" in table below.

Required Mapping Information from Updated Site Plan

Date Map Prepared (dd-mm-yyyy) 06-09-2011	Capacity of single largest propane storage vessel (USWG) 1000 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: 45 m	Right side property line: 11 m
Rear: 16 m	Left side property line: 32 m
GPS coordinates of single largest vessel: 45.07608 -77.34609	

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Signature 	Telephone No. 613-332-1496	Date (dd-mm-yyyy) 13-09-2011



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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

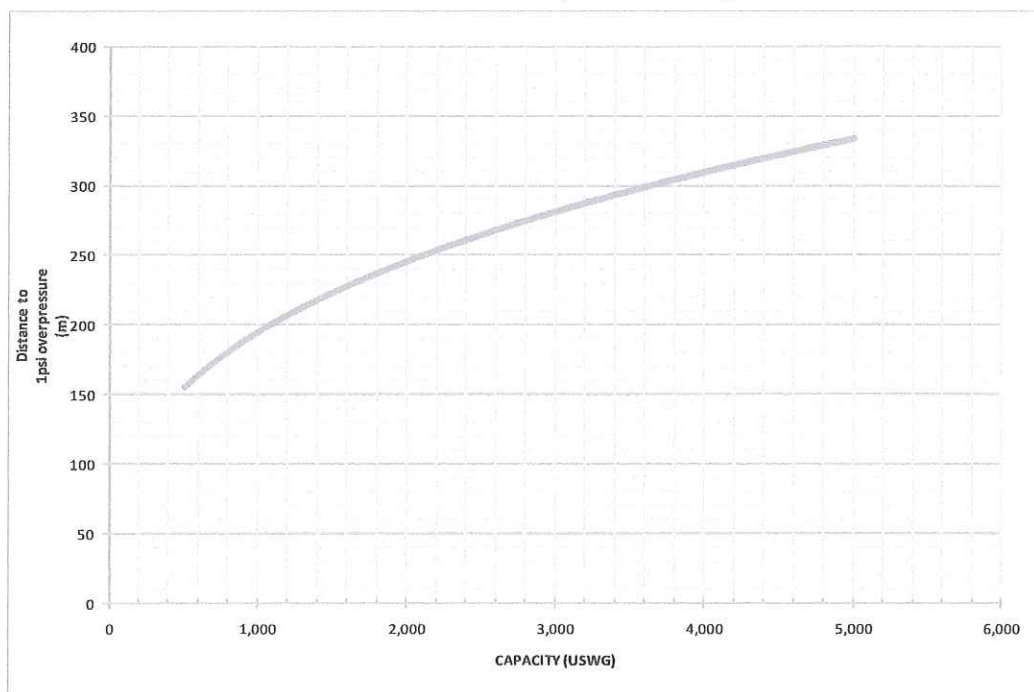
Table 1: Distance Table

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

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)



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) Tracey Cunningham	Official Title Owner/operator	
Signature <i>Tracey Cunningham</i>	Telephone No. 613-332-1496	Date (dd-mm-yyyy) 13-09-2011



Technical Standards and Safety Authority
845 Carlingview Drive
Toronto, Ontario M9W 6N9
Fax: 416.231.4078
Customer Service: 1.877.682.8772
www.tssa.org

Application for Renewal of
Level 1 Propane Licence
Technical Standards and Safety Act
Propane Storage and Handling Regulation

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 to Tank or Closest Building or Feature																	
	10	15	20	25	30	35	40	45	50	55	60	65	70	75	80	85	90	95	100
Industrial buildings or parks or golf courses Name: _____ Address: _____ City: _____ Province: _____ Postal Code: _____																			
Residential building units specifically permanent single family dwellings, condominiums, and apartments Name: _____ Address: _____ City: _____ Province: _____ Postal Code: _____																			
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes Name: <u>Cunningham's Country Store - The Mills Grill</u> Address: <u>3551 Hwy. 28 E.</u> City: <u>McArthur Mills</u> Province: <u>On</u> Postal Code: <u>K0L 2W0</u>																			
Commercial building units - continuous occupancy specifically hotels, campgrounds, and resorts Name: _____ Address: _____ City: _____ Province: _____ Postal Code: _____																			
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons Name: _____ Address: _____ City: _____ Province: _____ Postal Code: _____																			
Emergency responders specifically fire stations, ambulance stations, and police stations Name: _____ Address: _____ City: _____ Province: _____ Postal Code: _____																			

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

You are required by law to notify TSSA of any change of information contained in the Risk and Safety Management Plan within 15 days.

Declaration: I am aware that it is an offence to give false information in this document and I hereby declare that the information I have given here is true and complete.		
Print name of person completing this form. <u>Tracey Cunningham</u>	Official Title <u>Owner/Operator</u>	
Signature <u>Tracey Cunningham</u>	Telephone No. <u>613-332-1496</u>	Date (dd-mm-yyyy) <u>06-01-2017</u>



Technical
Standards and
Safety Authority
www.tssa.org

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Level 1 Risk and Safety Management Plan (RSMP)
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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	0	0
# 100	29.5	0	0
# 40	11.75	0	0
# 33.3	9.62	0	0
# 30	8.8	0	0
# 20	5.8	0	0
# 10	2.9	0	0
# 5	1.5	0	0
Total Cylinder Capacity 0			

Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
None	0	0
Total Tank Capacity 0		

Total Cylinder Capacity	0
Total Tank Capacity	1000 USWG Propane refill tank
Total Portable Capacity	0

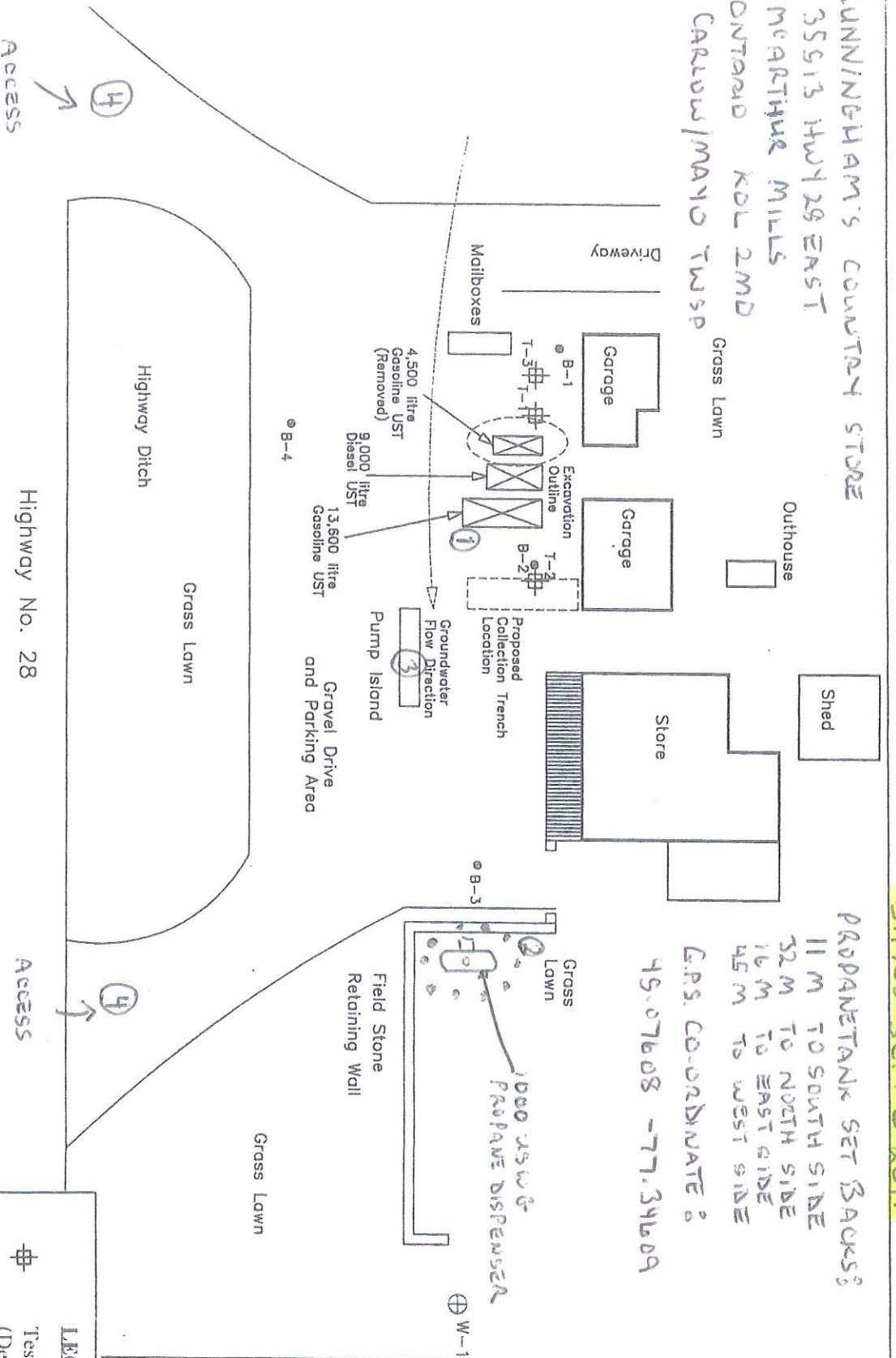
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Name of person completing this form (please print) Tracey Cunningham	Official Title Owner/operator
Signature <i>Tracey Cunningham</i>	Telephone No. 613-332-1496
	Date (dd-mm-yyyy) 13-09-2011

DATED SEPT 6 2011

CUNNINGHAM'S COUNTRY STORE
35513 HWY 28 EAST
MCARTHUR MILLS
ONTARIO K0L 2M0
CARBON/MANO TRSP

PROPANE TANK SET BACKS?
11M TO SOUTH SIDE
32M TO NORTH SIDE
16M TO EAST SIDE
45M TO WEST SIDE
GPS CO-ORDINATE:
45.07608 -77.34609



SKETCH PLAN

Griff's General Store
Part of Lot 23, Concession 13
Township of Mono, County of Hastings

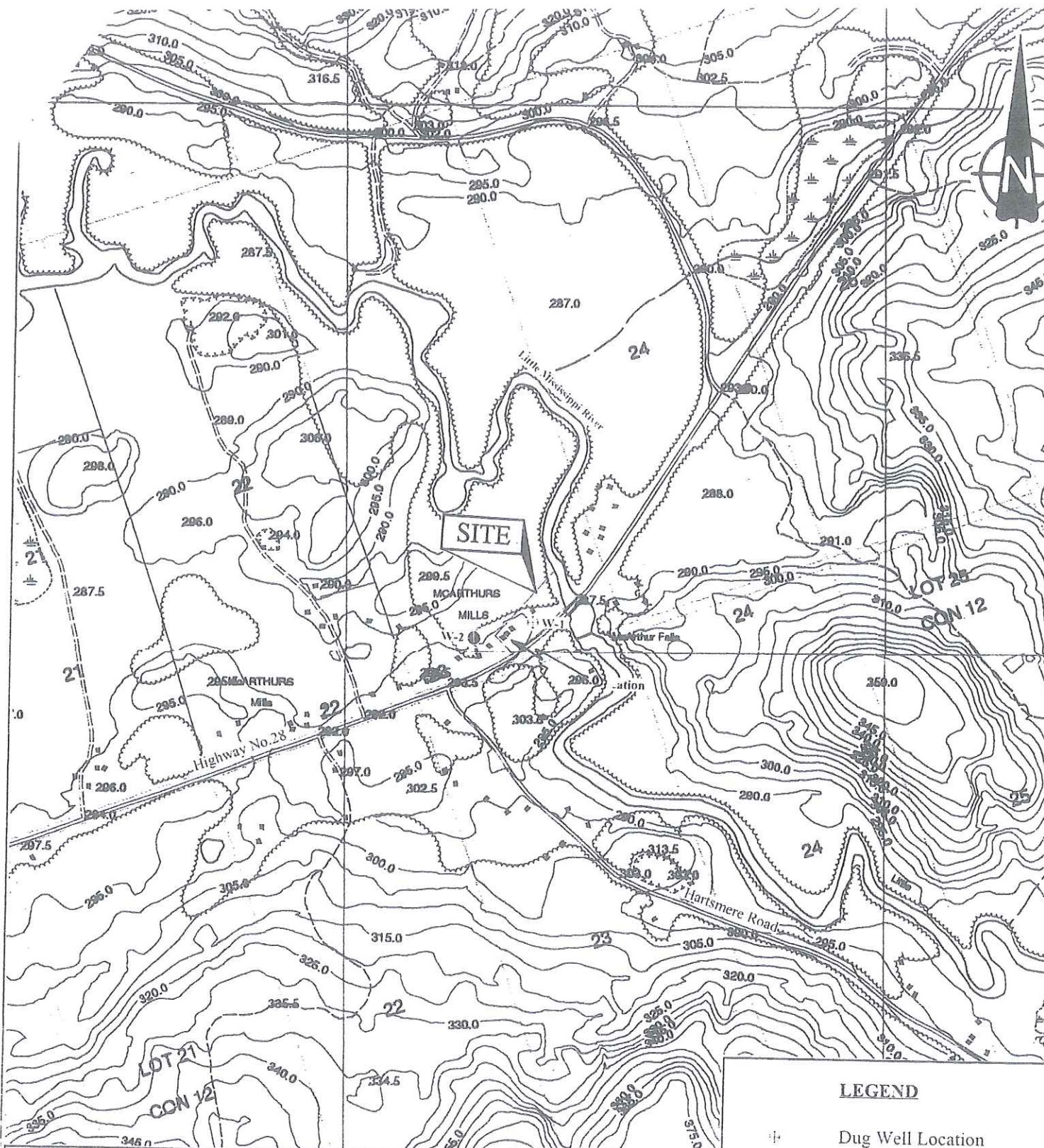
DATE: December, 1999
SCALE: 1 : 400 (approximate)
JOB NUMBER: 99-G-523

GEO-LOGIC INC.
547 RIDGE ROAD UNIT 29 BOX 694 PEI EMBROIDERY, ONT. K9J 6Z8 (705) 749-5341 /

LEGEND
⊕ Test Pit Location (December 8, 1999)
⊕ Dug Well Location
⊕ Borehole Location (December 13, 1999)

LEGEND
1- UNDERGROUND STORAGE TANKS
2- PROPANE TANK
3- PUMP ISLAND
4- DRIVEWAY ACCESS





NOTE: Base plan compiled from Ministry of Natural Resources, Ontario Base Map Series Sheets 10 18 2950 49950 and 10 18 2950 50000, both dated 1999. Air photography taken in 1994.

LEGEND

- ⊕ Dug Well Location
- Drilled Well Location

LOCATION PLAN

Griff's General Store
MacArthur's Mills, Ontario
Part Lot 23, Concession 13
Mayo Twp., Hastings County

DATE: December, 1999

SCALE: 1 : 10,000

JOB NUMBER: 99-G-513

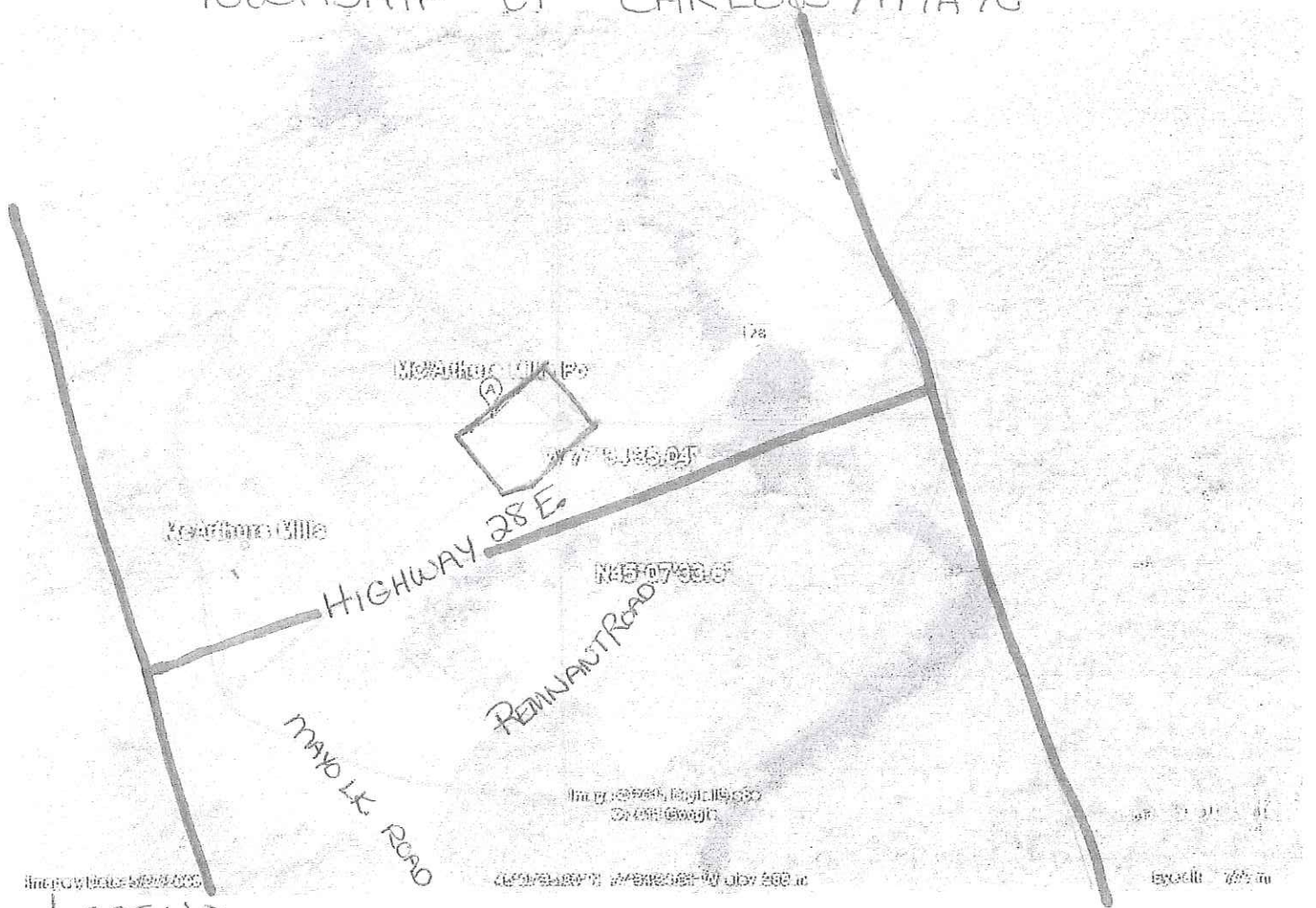
DRAWING NUMBER: PLATE 1

GEO-LOGIC INC.

347 PIDO ROAD UNIT 29
BOX 694 PETERBOROUGH, ONT.
K9J 6Z8
(705) 749-3317

TOWNSHIP OF CARLOW/MAYO


MARCH 27/12



LEGEND

Single largest Fixed Vessel - (1000 usWG) Propane Dispenser
- HAZARD DISTANCE RADIANCE


 - PROPERTY LINES


 - Lot & Concession Lines
(Part Lot 23 Concession 13)

PROPANE TANK SET BACKS:

11m to South Side
 32m to North Side
 16m to East Side
 45m to West Side

GPS CO-ORDINATE:

45.07608 - 77.34609

CUNNINGHAM'S

COUNTRY STORE

35513 Hwy 28 East
 McArthur Mills, On.
 K0L2M0

CARLOW/MAYO TOWNSHIP

PART LOT 23 Con. 13

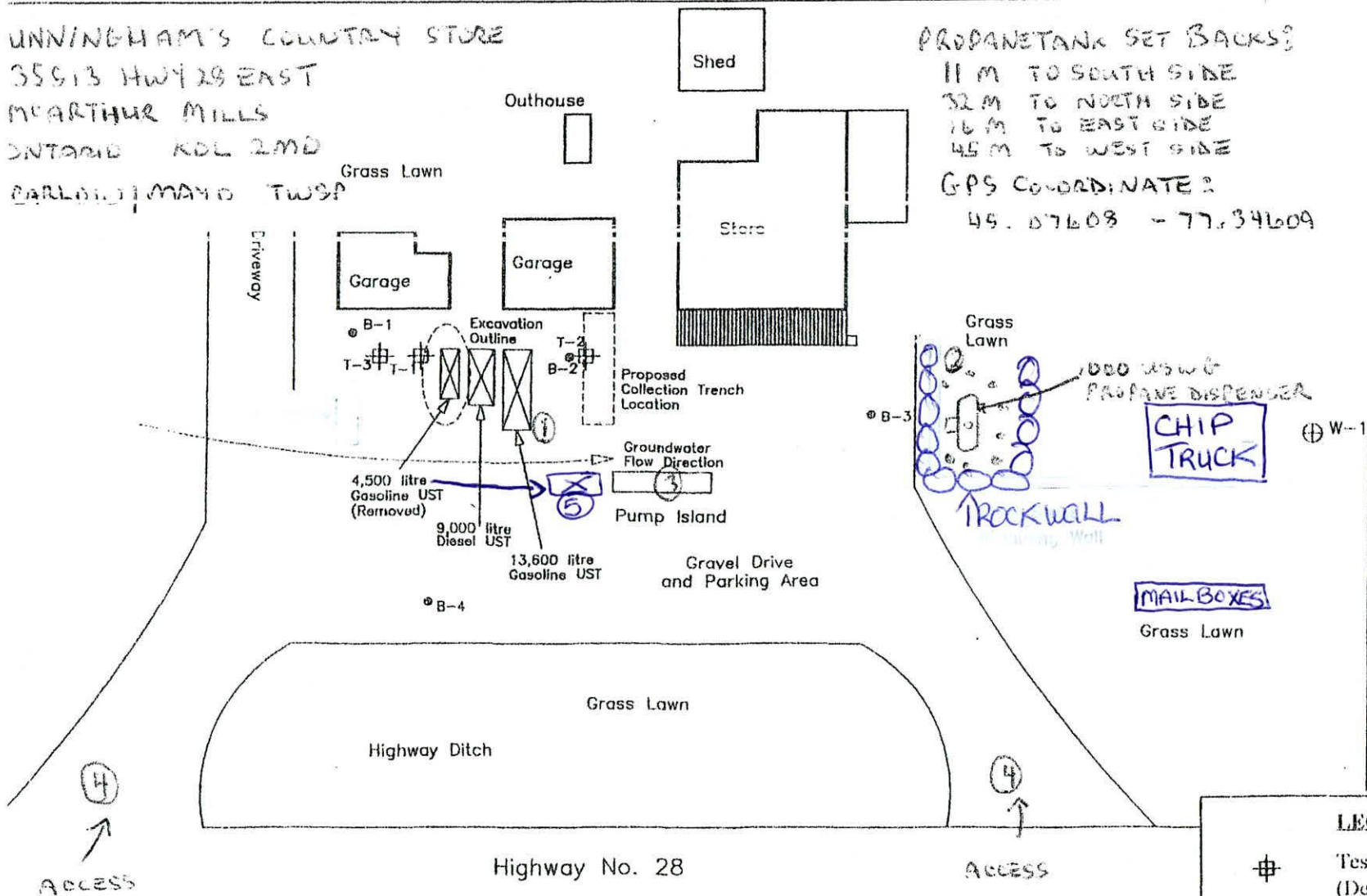
Municipal Contact:

ARLENE COX
 613 332 2175

UNN/INGHAM'S COUNTRY STORE
35613 HWY 28 EAST
MCARTHUR MILLS
ONTARIO K0L 2M0
Grass Lawn
CARLTON PLACE TWP

11 M TO SOUTH SIDE
32 M TO NORTH SIDE
16 M TO EAST SIDE
45 M TO WEST SIDE

44. 07608 - 77.34609






Residential Driveway

LEGEND

- 1- UNDER GROUND STORAGE TANKS
- 2- PROPANE TANK
- 3- PUMP ISLAND
- 4- DRIVEWAY ACCESS
- 5- ABOVE GROUND TANK

LEGEND

-  Test Pit Location
 (December 8, 1999)
-  Dug Well Location
-  Borehole Location
 (December 13, 1999)

SKETCH PLAN

Griff's General Store
Part of Lot 23, Concession 13
Township of Mayo, County of Hastings

DATE: December, 1999

SCALE: 1 : 400 (approximate)

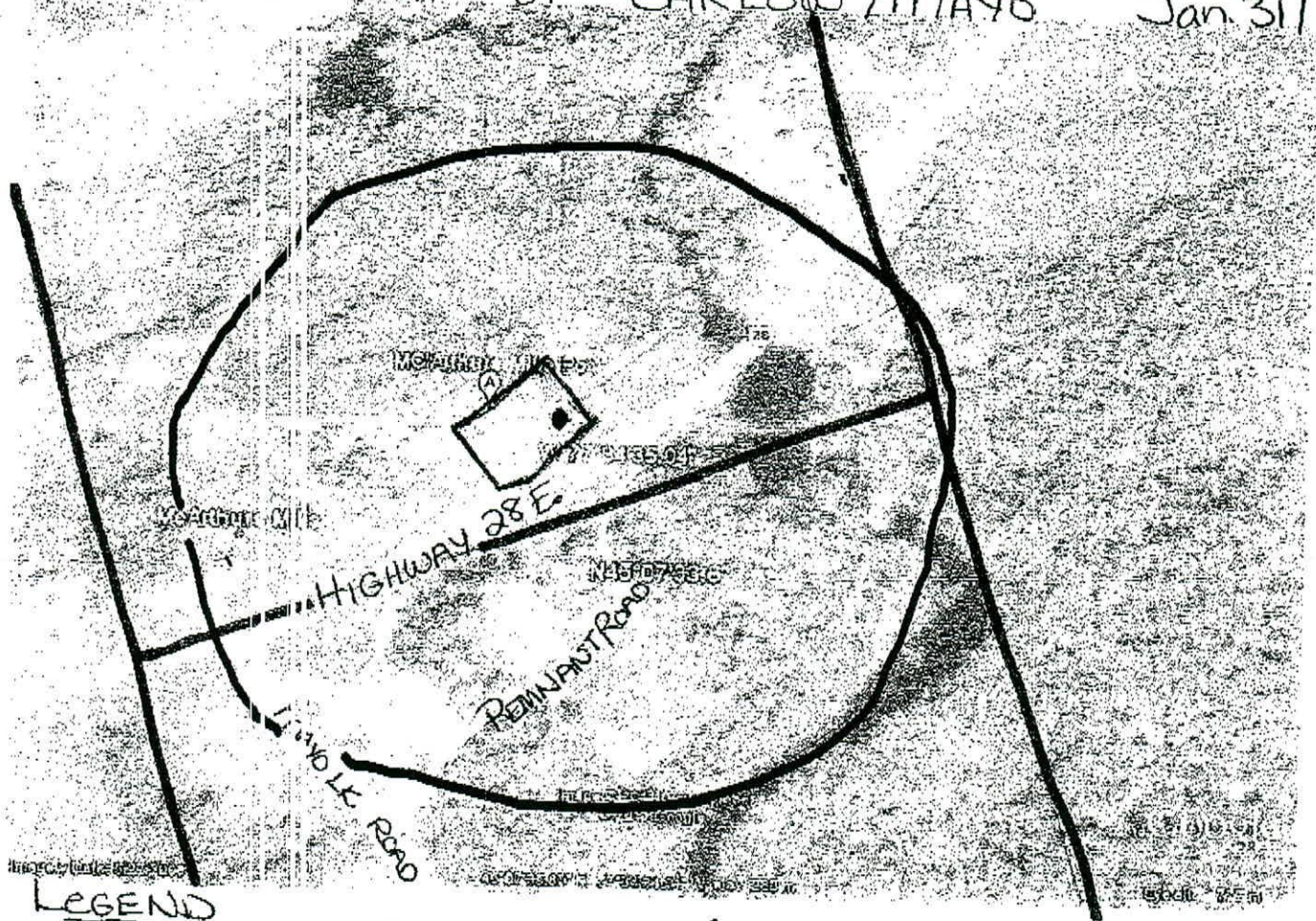
JOB NUMBER: 99-G-523

GEO-LOGIC INC.

347 PICO ROAD UNIT 29
BOX 694 PETERBOROUGH, ONT.
K9J 6Z8
(705) 749-3317

TOWNSHIP OF CARLOW/MAYO

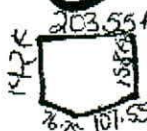
Jan 31/17




LEGEND

● Single largest Fixed Vessel - (1000 uswg) Propane Dispenser

○ - HAZARD DISTANCE RADIANCE


 - PROPERTY LINES


 - Lot & Concession Lines
(Part Lot 23 Concession 13)

PROpane TANK: SET BACKS:

- 11m to South Side
- 32m to North Side
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- 45m to West Side

GPS Co-ORDINATE:

45.07608 - 77.34609

CUNNINGHAM'S

COUNTRY STORE

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K0L2M0

CARLOW/MAYO TOWNSHIP

PART LOT 23 Con. 13

Municipal Contact:

ARLENE COX