

**STATE OF MAINE**

LONG TERM SEMI-TRAILER REGISTRATION

MAINE RE-REGISTRATION?  YES  NO

MAKE TREM	YEAR 2019	UNIT #	COLOR WH	TLR	31-19236
STYLE SE	Vehicle Identification No. (Serial No.) 2TSL4326KB000725		TITLE STATE ME		
NAME ROBBIE D. WOOD INC					
MAILING ADDRESS P.O. BOX 125					
DOLOMITE			ZIP CODE AL 35061		
LEGAL RESIDENCE MMTA SERVICES INC. 44004					
02/08/2019					

*S/RV-147*

MVRT-10E 07/2015

Start Year: 2019

Expires 02/28/2031

REGISTRATION COPY

**RECORD OF ANNUAL INSPECTION**

(49 CFR, 396. 17-23)

Prepare Separate Report for Each Vehicle Inspected

DATE

2018-11

D4256214

COMPANY NAME		VEHICLE TYPE <input type="checkbox"/> TRUCK <input type="checkbox"/> TRACTOR <input checked="" type="checkbox"/> TRAILER <input type="checkbox"/> CONVERTER <input type="checkbox"/> DOLLY	
STREET ADDRESS		VEHICLE MAKE <b>TREMCAR</b>	
CITY	STATE	ZIP	MODEL <b>TRA/REM</b>
INSPECTOR'S NAME (Please Print)		VEHICLE IDENTIFICATION (Company No., State Tag No. or VIN) <b>2T1SL4326KB000725</b>	YEAR <b>2019</b>
		EMPLOYEE NO.	

**REPORT OF CONDITION** (For Detailed Information on Inspection Procedures see FMCSR Section 396, Appendix G)

	OK	REPAIR	EXHAUST	OK	REPAIR	STEERING	OK	REPAIR	FRAME	OK	REPAIR
<b>BRAKES</b>											
Adjustment	✓		Leaks			Adjustment			Members		
Mechan. Compon.	✓		Placement			Column/Gear			Clearance		
Drum/Rotor	✓		<b>LIGHTING</b>			Axle			<b>TIRES</b>		
Hose/Tubing	✓		Headlights			Linkage			Tread		
Lining	✓		Tail/Stop	✓		Power Steering			Inflation		
Antilock System	✓		Clearance/Marker	✓		Other			Damage		
Automatic Adjusters	✓		Identification	✓		<b>FUEL SYSTEM</b>			Speed Restrictions		
Low Air Warning	✓		Reflectors	✓		Tank(s)			Other		
Trailer Air Supply	✓		Other <i>TAPE</i>	✓		Lines					
Compressor											
Parking Brakes			<b>CAB/BODY</b>			<b>SUSPENSION</b>			<b>WHEELS/RIM</b>		
Other			Access			Springs			Fasteners		
			Eqpt./Load Secure			Attachments	✓		Disc/Spoke		
<b>COUPLERS</b>			Tie-Downs			Sliders			<i>300. AS TORQ</i>		
Fifth-Wheel & Mount			Headerboard			<i>AIR</i>	✓		<b>WINDSHIELD</b>		
Pin/Upper Plate	✓		Motorcoach Seats			<b>MIRRORS</b>			<b>WINDSHLD. WIP.</b>		
Pintle-Hook/Eye			Other								
Safety Chain(s)											

REMARKS

Certification: This vehicle has passed all the inspection items for the annual vehicle inspection in accordance with 49 CFR Part 396.

QUALIFIED INSPECTOR'S SIGNATURE

*[Handwritten Signature]*

DATE

*2018-11*

APPLY LABEL TO A CLEAN, DRY SURFACE. USE WITH AN OVERLAMINATE (2402) TO IMPROVE DURABILITY UNDER NORMAL WEATHER CONDITIONS.

AN INDELIBLE INK MARKER IS RECOMMENDED FOR USE WHEN FILLING OUT THE LABEL. INDELIBLE INK IS PERMANENT AND WILL NOT WASH OFF, BUT MAY FADE DUE TO EXPOSURE TO ULTRAVIOLET LIGHT OVER TIME. CAREFUL DISCRETION IS ADVISED REGARDING APPLICATION OF LABEL TO AN AREA NOT EXPOSED TO EXCESSIVE ULTRAVIOLET LIGHT AND/OR ELEMENTS AND IT IS RECOMMENDED THAT THE READABILITY OF THE LABEL BE CHECKED PERIODICALLY.

BUREAU OF MOTOR VEHICLES  
 VEHICLE SERVICES-TITLE SECTION  
 29 STATE HOUSE STATION  
 AUGUSTA, MAINE 04333-0029  
 207-624-9000 EXT. 52138  
 TTY users call Maine relay 711

**APPLICATION FOR CERTIFICATE OF TITLE (MVT-2)**  
 Check if supplemental application (\$33.00 fee required)  
 Check if rush requested - (Additional \$10.00 fee required)

**THIS IS NOT A CERTIFICATE OF TITLE**

CTA AG 19327

**INSTRUCTIONS:** Typewrite or print legibly on hard surface. Distribute copies as indicated at bottom of form. If vehicle is new, attach a manufacturer's certificate of origin to original copy; for used vehicle, attach last previous certificate of title.  
**CHECKS SHOULD BE MADE PAYABLE TO "SECRETARY OF STATE".**  
**FEE \$33.00**

<b>OWNER INFORMATION</b>		1. Name(s): Last, First, Middle Initial (conjunctive "or" not permitted) ROBBIE D WOOD INC		3. Telephone	
		a. _____ Joint ownership <input type="checkbox"/>		MSRP INSTRUCTIONS	
		b. _____		MSRP equals the total vehicle price minus the destination charge on new vehicles requiring the Monroney label. If the vehicle is used, list the MSRP if recorded on previous Maine title. DO NOT attach Monroney label to application.	
If more than one owner, common ownership will be assumed unless joint ownership box checked.		4. Mailing address-No. & Street (If P.O. Box, # 6. must be completed) 1051 OLD WARRIOR RD City State Zip Code DOLOMITTE, AL 35601		5. MSRP <input type="checkbox"/> New: Recorded on Monroney Label <input type="checkbox"/> Used: Recorded on prior title <input type="checkbox"/> Not required MSRP Amount \$ _____	
<b>VEHICLE INFORMATION</b>		8. Year 19		12. Body type SE	
		9. Make TREM		17. Other data BMV USE	
		10. Model IL		16. State of origin OH	
		11. Vehicle identification number 2TSLA4326KB000725		20. If not actual <input type="checkbox"/> Odometer changed <input type="checkbox"/> Odometer broken MUST FILE MVT-32	
		13. <input checked="" type="checkbox"/> New <input type="checkbox"/> Used <input type="checkbox"/> Rebuilt NA		22. Date of lien Mo./Day/Year 01/29/19	
		14. Purchase date Mo./Day/Year 01/29/19		25. Date of lien Mo./Day/Year	
		15. Previous title no. 7901595431		28. Plate #, if a Maine licensed dealer D <input type="checkbox"/> UC <input type="checkbox"/> MC <input type="checkbox"/>	
<b>LIEN INFORMATION</b>		18. Current odometer reading NA		MUNICIPAL AGENT VALIDATION	
		19. Mileage stated is <input type="checkbox"/> Actual mileage <input type="checkbox"/> In excess of mechanical limits <input type="checkbox"/> Not actual - odometer discrepancy		DATE _____ INITIAL _____	
		21. First lien holder's name if vehicle financed. If no lien, state "none." WELLS FARGO EQUIPMENT FINANCE		SENT TO SECRETARY OF STATE	
The lien holder is the institution or person financing the vehicle. Title will be mailed to the first lien holder, otherwise it will be mailed to the vehicle owner.		23. Address-No. & Street 600 SOUTH 4th STREET MINNEAPOLIS, MN 55415		FEE PD. \$ _____	
<b>SELLER INFORMATION</b>		24. Second lien holder's name NONE		BMV USE: DO NOT WRITE IN THIS SPACE	
		26. Address-No. & Street		R _____	
<b>SIGNATURE OF SELLER IF A DEALER</b>		27. Name and address of seller		DATE	
<b>SIGNATURE(S) OF OWNER(S)</b> Authorized person may sign for a company		29. The undersigned hereby certifies that the vehicle described was sold to the owner(s) named and further certifies that the information shown is true and correct to the best of my knowledge, information and belief.		APPROVED BY:	
<b>READ PENALTY BEFORE SIGNING</b>		Signature of dealer's representative		DATE	
<b>PENALTY</b>		30. The undersigned hereby certifies that all liens against the vehicle described are listed above and that information contained herein is true and correct to the best of my / our knowledge and belief. If representing a company, I further certify that I have been authorized by the company to sign on their behalf.		2/6/19	
		Signature(s) of owner(s) as named in block #1. All owners must sign. Power(s) of attorney must accompany this form. If under age 18 parent or guardian must also sign.		APPROVED BY:	
		If owner is a company, authorized representative sign here.		DATE	
		A person who uses a false or fictitious name or address, makes a material false statement, fails to disclose a security interest, or conceals any other fact in an application for certificate of title is guilty of a Class D crime.		DATE	

4822-SS1



**CERTIFICATE OF COMPLIANCE**

THIS CERTIFIES THAT THE NEW TREM CAR INC TANK, FITTINGS, VALVES, PIPING AND PROTECTIVE DEVICES DESCRIBED BELOW WAS DESIGNED, CONSTRUCTED, TESTED, AND COMPLETED IN ACCORDANCE WITH THE APPLICABLE CARGO TANK SPECIFICATION

VEHICLE TVI \_\_\_\_\_ TRAILER \_\_\_\_\_ MANUFACTURER: \_\_\_\_\_ TREM CAR INC. \_\_\_\_\_ TC RN: N/A  
 ASSEMBLER: \_\_\_\_\_ MDIN: 15017  
 (IF NOT SAME AS MANUFACTURER) TANK SERIAL NUMBER: 2T1SL4326KB000725  
 18884  
 RESPONSIBLE OFFICIAL OF TREM CAR INC. \_\_\_\_\_ TANK INSPECTOR: *[Signature]*  
 DESIGN ENGINEER: *[Signature]* NAME AND ADDRESS (IF NOT SAME AS ABOVE)

CARGO TANK COMPLIES WITH SPECIFICATION:

TC 407 DATE OF MFR: 2018-11  
 DATE OF CERT.: 2018-11

VENTS INSTALLED: RAITING \_\_\_\_\_  
 1. BETTS RVCST-25, 409559 SCFH (90%)  
 2. \_\_\_\_\_  
 3. \_\_\_\_\_

ITEMS NOT INSTALLED AT TIME OF SHIPMENT: 1. \_\_\_\_\_

ORIG. TEST DATE	2018-11				
MAX. PAYLOAD	27443	KG			
MAX. LOAD RATE	1893	L/MIN @	172.3	Kpa	
MAX. UNLOAD RATE	1893	L/MIN @	172.3	Kpa	
HEATING SYS. PRESS.	516.8	Kpa		HEATING SYS. TEMP.	121.1 °C
MAWP	172.3	Kpa	310.1	Kpa	
DESIGN TEMP. RANGE	-29	°C		TO	121 °C
WELD MATL.	ER316L			HEAD MATL.	SA240-316316L
SHELL MATL.	SA240-316316L			LINING	N/A
MIN. SHELL THICK.	TOP 2.921	MM		BOTTOM	2.921
MFD. SHELL THICK.	TOP 3.277	MM		BOTTOM	3.277
MIN HEAD THICK.	2.921	MM		MFD HEAD THICK.	3.556
MAX. LADING DENSITY	1.92	KG/L		VOL. CAP	26,790 L
EXPOSED SURFACE AREA	67.07	SQ M			

# TANKER TEST AND INSPECTION REPORT

Information as required by CSA B-620-14

INSPECTION TEST DATE  
**2018-11**

SERIAL NUMBER  
**18884**

CARRIER (if other than owner)

PRINCIPAL PLACE OF BUSINESS ADDRESS

CITY, STATE, ZIP CODE

OWNERS SERIAL NO.

OWNERS SERIAL NO. **2018-11**

ORIG. TEST DATE **2018-11**

TC SPECIFICATION NO. **407**

FLUID CAPACITY (L) **26790**

CARRIER'S EQUIPMENT NO. **SA240-316/316L**

VESSEL MATERIAL SPEC NO.

MANUFACTURER'S SERIAL NO.

ASME CODE SYMBOL

**CERTIFIED BY**

**TREMCAR INC.**

MANUFACTURER

WATER CAPACITY (kg) **26790**

**DESIGNED FOR**

MAXIMUM ALLOWABLE WORKING PRESSURE **27443** KPA

MINIMUM DESIGN METAL TEMPERATURE **372.28** C TO C

**TYPE OF TEST (S)**

EXTERNAL VISUAL (V)  A  W  45 PSIG / 10 MIN

INTERNAL VISUAL (I)  A  W  25 PSIG / 5 MIN

THICKNESS TEST (T)  MEDIUM  W = WATER

ON COMPARTMENTED TRAILER ONLY ONE COMPARTMENT CAN BE FILLED WITH LIQUID (FLUID USE FOR TEST IT'S ONLY WATER) OR AIR WHEN PNEUMATIC TEST IS USED (SEE MANUAL FOR PROCEDURE) AND TEST AT A TIME ALL ADJACENT COMPARTMENT MUST BE EMPTY

TEST PRESSURE **310.10** KPA

**CHECKLIST OF ITEMS INSPECTED OR TESTED (YES=ACCEPT/NO=REJECT)**

OUTSIDE BARREL ITEMS	P	K	T	STRUCTURE ITEMS		GENERAL ITEMS		INTERNAL BARREL ITEMS	
				YES	NO	YES	NO	YES	NO
Tank Shell	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Tank Heads	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Head - to - Shell Seam	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Piping	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Valves	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Gaskets	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Manhole Covers	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Manhole Gaskets	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Devices for Tightening Manhole	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Reclosing Pressure Relief Valves	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Self-closing Stop-valves	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Excess Flow Valves	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Remote Closure Devices	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

(CHECK ONE)  NO DEFECT OR DAMAGE DISCOVERED  DEFECT OR DAMAGE DISCOVERED

EXPLAIN:

**NONE - NEW CARGO TANK**

METHOD OF REPAIRS:

IS REPAIR CERTIFICATION REQUIRED? YES NO

DESIGN CERTIFYING ENGINEER REGISTRATION NO. NONE - NEW TANK TRUCK

TC REGISTRATION NUMBER OF THE TESTING FACILITY/ PERSON

TESTED BY: (PERSON'S) **ROUSSELLE BLONDEL**

COMPANY NAME: **TREMCAR INC.**

ADDRESS: **790 MONTRICHARD AVE.**

CITY, STATE, ZIP CODE: **ST-JEAN-SUR-RICHELIEU, QC, CANADA, J2X 5G4**

TEST DATE **2018-11**

REPAIR DATE

DISPOSITION OF CARGO TANK APPLIED X IN THE APPROPRIATE CASE

CARGO TANK MEET TC SPECIFICATIONS AND IS RETURN TO SERVICE

CARGO TANK FAIL TC SPECIFICATIONS AND IS OUT OF SERVICE

SIGNATURE OF INSPECTOR *[Signature]*

TC REGISTRATION NUMBER **25-0264**

DATE **2018-11**

OWNER SIGNATURE

MARKINGS APPLIED

YES NO

**TREM CAR**

790, avenue Montheillard  
St-Jean-sur-Richelieu, QC  
Canada J2X 5G4

CT-5931  
ST-JEAN-SUR-RICHELIEU

CT-5930  
ST-CÉSaire

ISSUED TO OWNER  
**BCTE INC.**

THIS CERTIFIES THAT THE NEW TREM CAR TANK DESCRIBED BELOW WAS DESIGNED, CONSTRUCTED, TESTED AND COMPLETED  
IN ACCORDANCE WITH THE APPLICABLE CARGO TANK SPECIFICATION

VEHICLE TYPE: **SEMI TRAILER**

YEAR FABRICATED: **2018**

CAPACITY: **7077 USG**

VIN: **2T1SL43Z6KB000725**

DATE SHIPPED: **2018-11**

SERIAL NUMBER: **18884**

RESPONSIBLE OFFICIAL OF TREM CAR INC.

DESIGN CERTIFICATION ENGINEER

REGISTERED INSPECTOR

CARGO TANK COMPLIES WITH SPECIFICATION

DOT: **407**

CERTIFICATION DATE: **2018-11**

CARGO TANK COMPLIES WITH SPECIFICATION

DOT:

EXCEPT AS LISTED

CERTIFICATION DATE:

ITEMS NOT INSTALLED AT TIME OF SHIPMENT:

1.

2.

3.

4.

ABOVE ITEMS INSTALLED:

BY:

FIRM

AUTHORIZED SIGNATURE(S)

**CERTIFICATE OF COMPLIANCE**

Job#:	Units:	USG	Job#:	Units:	USG
1883@18892	1/2"	0	1883@18892	1/2"	0
TANK COMPARTMENT / CITERNE COMPARTIMENT: 1					
CALIBRATION CHART / CHARTE DE CALIBRATION					
TANK COMPARTMENT / CITERNE COMPARTIMENT: 1					
1883@18892	3/4"	14	1883@18892	3/4"	14
0	0	14	0	0	14
53	53	6092	53	53	6092
52	52	5982	52	52	6010
51	51	5870	51	51	5898
50	50	5754	50	50	5783
49	49	5636	49	49	5665
48	48	5515	48	48	5576
47	47	5392	47	47	5423
46	46	5267	46	46	5299
45	45	5141	45	45	5172
44	44	5012	44	44	5044
43	43	4882	43	43	4915
42	42	4751	42	42	4784
41	41	4618	41	41	4652
40	40	4485	40	40	4518
39	39	4350	39	39	4384
38	38	4215	38	38	4249
37	37	4079	37	37	4113
36	36	3942	36	36	3976
35	35	3805	35	35	3839
34	34	3668	34	34	3702
33	33	3530	33	33	3565
32	32	3393	32	32	3427
31	31	3255	31	31	3290
30	30	3119	30	30	3153
29	29	2982	29	29	3016
28	28	2846	28	28	2880
27	27	2711	27	27	2745
26	26	2577	26	26	2610
25	25	2443	25	25	2476
24	24	2311	24	24	2344
23	23	2179	23	23	2212
22	22	2050	22	22	2082
21	21	1921	21	21	1953
20	20	1795	20	20	1826
19	19	1670	19	19	1701
18	18	1548	18	18	1578
17	17	1427	17	17	1457
16	16	1309	16	16	1338
15	15	1194	15	15	1222
14	14	1081	14	14	1109
13	13	972	13	13	999
12	12	865	12	12	892
11	11	763	11	11	814
10	10	664	10	10	738
9	9	569	9	9	616
8	8	479	8	8	501
7	7	393	7	7	414
6	6	313	6	6	333
5	5	239	5	5	257
4	4	172	4	4	204
3	3	112	3	3	126
2	2	61	2	2	73
1	1	22	1	1	40
0	0	0	0	0	8

THIS CHART IS NOT INTENDED FOR LEGAL MEASURE  
 CETTE TABLE N'EST PAS CONÇUE POUR MESURE LEGALE

54	54	6199	54	54	6199
55	55	6302	55	55	6302
56	56	6401	56	56	6401
57	57	6497	57	57	6497
58	58	6588	58	58	6588
59	59	6674	59	59	6674
60	60	6754	60	60	6754
61	61	6829	61	61	6829
62	62	6897	62	62	6897
63	63	6958	63	63	6958
64	64	7010	64	64	7010
65	65	7051	65	65	7051
66	66	7066	66	66	7066
67	67	7072	67	67	7072

# TANKER TEST AND INSPECTION REPORT

For compliance with 49 CFR 180.407(h)(4), 180.417(b) & (c), and 40 CFR 60.505(b)

OWNER		CARRIER (if other than owner)		2018-11	18884
PRINCIPAL PLACE OF BUSINESS ADDRESS					
CITY, STATE, ZIP CODE		TELEPHONE		TELEPHONE	
OWNER'S TANK SERIAL NO.		MFG. DATE	VESSEL MATERIAL SPEC. NO.		
CARGO TANK MOTOR VEHICLE MFG.		2018-11	CARGO TANK MOTOR VEHICLE CERT. DATE		
TREM CAR		2018-11	TANK MANUFACTURER		
MAX. WEIGHT OF LADING		N/A	TREM CAR		
LBS. 60500			407		
HEATING SYSTEM		DESIGN PRESSURE (PSIG)	DESIGN TEMPERATURE (°F)	MAXIMUM ALLOWABLE WORKING PRESSURE (PSIG)	
SA240-316/316L		75	250	25	
SHELL		HEAD	WATER CAPACITY IN LBS.		
SA240-316/316L		SA240-316/316L	59022		
EXPOSED SURFACE AREA IN SQ. FT.		MAX. DESIGN DENSITY OF LADING (LBS. PER GAL)	TANK		
722		16.00	<input type="checkbox"/> LINED <input checked="" type="checkbox"/> INSULATED <input type="checkbox"/> SPECIAL SERVICE		

ITEMS INSPECTED OR TESTED					
YES	NO	ITEM	YES	NO	ITEM
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Tank Shell	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fragible (Rupture) Disk
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Tank Heads	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Major Appurtenances
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Head-to-Shell Seam	<input checked="" type="checkbox"/>	<input type="checkbox"/>	- upper coupler assembly
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Valves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	- suspension system attachments
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Gaskets	<input checked="" type="checkbox"/>	<input type="checkbox"/>	- connecting structures
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Manhole Covers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Lining Material
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Manhole Gaskets	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pressure Bearing Portions of Heating System
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Devices for Tightening Manhole	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Flues for Heating System
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Gaskets on Full Opening Rear Head	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Corroded or Abraded Areas
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Self-closing Stop-valves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Distortions
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Excess Flow Valves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Dents
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Remote Closure Devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Welds
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Reclosing Pressure Relief Valves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Nuts and Bolts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

  

DELIVERY HOSE/PIPING		THICKNESS (INCHES)		MEG.		MIN. TESTED	
HOSE I.D. NO.	N/A	HEAD	0.140	0.130			
CONDITION OF HOSE ASSEMBLY & PIPING SYSTEM		SHELL TOP	0.129	0.131			
		SHELL SIDE	0.129	0.131			
		SHELL BOTTOM	0.129	0.131			

  

PRESSURE RELIEF DEVICES			
Device Number	1	2	3
Tested			
Removed			
Inspected			
Replaced			
Reinstalled			
Repaired			
Pressure - set to discharge	25	PSIG	
Pressure - when open	30	PSIG	
Pressure - when resealed	27	PSIG	

  

ITEMS INSPECTED OR TESTED			
TEST	START	END	MEASURE
Gasoline Delivery Tank Pressure Test - EPA Reference Method 27			
PRES. 1			
PRES. 2			
VAC. 1			
VAC. 2			
VR VENT 1			
VR VENT 2			

  

UPPER COUPLER ASSEMBLY			
<input checked="" type="checkbox"/>	EXAMINED IN PLACE	NEW	
<input type="checkbox"/>	REMOVED FOR EXAMINATION		
FLUID USED	WATER	WATER	
PRESSURE	25	45	
HOLDING TIME	5 min	10 min	

(CHECK ONE)  NO DEFECT OR DAMAGE DISCOVERED  DEFECTS OR DAMAGE DISCOVERED

LOCATION OF DEFECTS OR DAMAGE:  weld  heat-affected zone  liquid phase  vapor phase  head-to-shell seam  delivery hose/piping  appurtenances

Explain: **NONE - NEW CARGO TANK**

NATURE AND SEVERITY:

METHOD OF REPAIRS:

IS REPAIR CERTIFICATION REQUIRED?  YES  NO DESIGN CERTIFYING ENGINEER REGISTRATION NO. \_\_\_\_\_

THIS UNIT HAS HAULED	<input type="checkbox"/> ANHYDROUS AMMONIA ( <input type="checkbox"/> CERTIFIED AS 0.2% WATER BY WEIGHT)	<input type="checkbox"/> ANY OTHER MATERIAL THAT MAY CAUSE STRESS CORROSION CRACKING	STRESS RELIEVED AFTER FABRICATION	REPAIR DATE
	<input type="checkbox"/> LIQUEFIED PETROLEUM GAS		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
DOT REGISTRATION NUMBER OF THE TESTING FACILITY/PERSON	TEST DATE	STRESS RELIEVED AFTER REPAIR	ASME OR NATIONAL BOARD NO. OF REPAIR FACILITY	
CT-5931	2018-11	<input type="checkbox"/> YES ( <input type="checkbox"/> Full <input type="checkbox"/> Local) <input type="checkbox"/> NO		
TESTED BY (Person's Name)				
BOUSSIERE LIONEL				
ADDRESS				
790 MONTRICHARD AVE.				
CITY, STATE, ZIP				
ST-JEAN-SUR-RICHELIEU, QC, CANADA, J2X 5G4				

CARGO TANK:  MEETS  FAILS TO MEET THE REQUIREMENTS OF THE DOT SPECIFICATIONS IDENTIFIED ON THIS REPORT

DISPOSITION OF CARGO TANK:  WITHDRAWN FROM SERVICE  RETURNED TO SERVICE MARKINGS APPLIED:  YES  NO

SIGNATURE OF INSPECTOR/TESTER: \_\_\_\_\_ DATE: 2018-11

DOT REGISTRATION NUMBER: CT-5931 SIGNATURE OF OWNER: \_\_\_\_\_

ORIGINAL