

TANKER TEST AND INSPECTION REPORT

For compliance with 49 CFR 180.407(b)(4), 180.417(b) & (c), and 41 CFR 60.592(b)

TANK IDENTIFICATION NO. 105	INSPECTION TEST DATE 5/6/25	REPORT NUMBER 52445
CARRIER (if other than owner)		
PRINCIPAL PLACE OF BUSINESS ADDRESS		
CITY, STATE, ZIP CODE Rockford, OH 45882		TELEPHONE 419-363-2342
OWNER'S TANK SERIAL NO. VIN#...25003108	MFG. DATE 12/2001	CARRIER'S EQUIPMENT NO. 105
CARGO TANK MOTOR VEHICLE MFG Polar	CARGO TANK MOTOR VEHICLE CERT. DATE 12/2001	VESSEL MATERIAL SPEC. NO. 5454AL
MAX. WEIGHT OF LADING LBS. 57,000	LINING MATERIALS N/A	TANK MANUFACTURER Polar
HEATING SYSTEM N/A	DESIGN PRESSURE (PSIG)	DESIGN TEMPERATURE (°F)
SHELL 5454-H32	HEAD 5454-0	MANUFACTURER'S TANK SERIAL NO. VIN#...25003108 → IPMA2432525003108
EXPOSED SURFACE AREA IN SQ. FT. 269-76-97-140-221	MAX. DESIGN DENSITY OF LADING (LBS. PER GAL.) 7.2	DOT SPECIFICATION NO. 406
TYPE OF TEST(S)		FLUID CAPACITY (GALS.) 2800/1000/1200/1800/2000
<input checked="" type="checkbox"/> EXTERNAL VISUAL (V) <input type="checkbox"/> INTERNAL VISUAL (I) <input type="checkbox"/> LINING INSPECTION (L) <input type="checkbox"/> THICKNESS TEST (T)		<input type="checkbox"/> LEAKAGE TEST (P) <input type="checkbox"/> HYDROSTATIC <input checked="" type="checkbox"/> PNEUMATIC <input type="checkbox"/> DELIVERY HOSE/PIPING <input checked="" type="checkbox"/> K-EPA27
<input type="checkbox"/> PRESSURE RETEST (P) <input type="checkbox"/> HYDROSTATIC <input type="checkbox"/> PNEUMATIC		ORIGINAL TEST DATE 12/2001 MAXIMUM ALLOWABLE WORKING PRESSURE PSIG 3.3 WATER CAPACITY IN LBS
<input type="checkbox"/> LINED <input type="checkbox"/> INSULATED <input type="checkbox"/> SPECIAL SERVICE <input type="checkbox"/> MATERIAL CORROSIVE TO TANK <input checked="" type="checkbox"/> DEDICATED SERVICE <input type="checkbox"/> OTHER		TANK <input type="checkbox"/> FLUID CAPACITY (GALS.) ASME CODE SYMBOL

YES		NO		ITEM		ITEMS INSPECTED OR TESTED		TYPE		K-EPA27		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Tank Shell	Frangible (Rupture) Disk	PRESSURE RELIEF DEVICES Device Number: 1 2 3 4 5 Tested: _____ Removed: _____ Inspected: X X X X X Replaced: _____ Reinstalled: _____ Repaired: _____ Pressure - set to discharge: 3.63 3.63 3.63 3.63 3.63 Pressure - when open: _____ Pressure - when repaired: _____	Betts Tiona		Gasolina Delivery Tank Pressure Test - EPA Reference Method 27 TEST START TIME END MEASURE START END AVERAGE RESULTS PRES 1 1:03 pm 1:08 pm 18 18 18 PRES 2 1:10 pm 1:15 pm 18 18 18 VAC 1 1:41 pm 1:46 pm 6 6 6 VAC 2 1:50 pm 1:55 pm 6 6 6 VR VENT 1 1:19 pm 1:24 pm 0 .1 VR VENT 2 _____			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Tank Heads	Major Apertances							
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Head-to-Shell Seam	- taper coupler assembly							
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Valves	- suspension system attachments							
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Gaskets	- connecting structures							
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Machete Covers	Lining Material							
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Machete Gaskets	Pressure Bearing Portions of Hoisting System							
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Devices for Tightening	Flues for Hoisting System							
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Machete Gaskets on Full Opening Rear Head	Corroded or Abraded Areas							
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Self-closing Stop-valves	Distortions							
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Excess Flow Valves	Dents							
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Remote Closure Devices	Welds							
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Releasing Pressure Relief Valves								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Nuts and Bolts								
DELIVERY HOSE/PIPING HOSE I.D. NO. N/A DATE OF ORIG. HOSE ASSEMBLY TEST N/A CONDITION OF HOSE ASSEMBLY & PIPING SYSTEM Good						THICKNESS (INCHES) MFG. MIN. TESTED HEAD _____ SHELL TOP _____ SHELL SIDE _____ SHELL BOTTOM _____		UPPER COUPLER ASSEMBLY <input checked="" type="checkbox"/> EXAMINED IN PLACE <input type="checkbox"/> REMOVED FOR EXAMINATION		LEAKAGE TEST PRESSURE TEST FLUID USED Pneumatic PRESSURE 2.64 psi HOLDING TIME 10min/ea		

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 apertances

NATURE AND SEVERITY:

METHOD OF REPAIRS:
 Replaced damaged #5 vapor vent
 Repaired leaking air fittings
 Grooved and welded frame cracks
 Replaced damaged shocks on both axles
 Replaced worn brake shoes and drums on rear axle

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

THIS UNIT HAS HAULED	<input type="checkbox"/> ANHYDROUS AMMONIA (<input type="checkbox"/> UNREFINED AS U.S.C. 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	5/7/25
DOT REGISTRATION NUMBER OF THE TESTING FACILITY/PERSON CT-0786	TEST DATE 5/7/25	STRESS RELIEVED AFTER REPAIR	ASME OR NATIONAL BOARD NO. OF REPAIR FACILITY 3022	
TESTED BY (Person's Name) Charles Wenger / Superior Tank & Trailer, Inc	REPAIRED BY Superior Tank & Trailer Inc			
ADDRESS 11415 Erie Ave SW	ADDRESS 11415 Erie Ave SW			
CITY, STATE, ZIP Beach City, Ohio 44608	CITY, STATE, ZIP Beach City, Ohio 44608			

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 Charles Wenger	DOT REGISTRATION NUMBER 0786	DATE 5/7/25	SIGNATURE OF OWNER Robert Boh	DATE 5/7/25
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17MA24325

DOT/MC 406 CHECKLIST/TEST REPORT FOR VAPOR TIGHTNESS TEST			DATE 5/7/25	CUSTOMER SJA Transport 101 E. SOUTH St. Rockford, OH 45882		
UNIT NO. 105	YEAR OF MFG. 2001	MANUFACTURER Polar		CAPACITY 8800		TOTAL GALLONS
SERIAL OR VIN ...25003108	MATERIAL Alum	MAWP/DESIGN PRESSURE 3.3		COMPT. 1) 2800 2) 1000 3) 1200		INSULATION YES
OBTAIN ABOVE INFORMATION FROM DATA PLATE ON TANK.				4) 1800 5) 2000 6)		NO X
TRANSPORT SERVICE: CORROSIVE TO TANK DEDICATED		MINIMUM THICKNESS: SHELL _____ HEAD _____		LINED YES _____ NO X		TEST PRESSURE PSI 5

Method 27 - DETERMINATION OF VAPOR TIGHTNESS OF GASOLINE DELIVERY TANK
USING PRESSURE- VACUUM TEST
EPA 40CFR Part 60-Appendix A DOT 49CFR [180.407(h)(2)]

TEST RESULTS

Pressure Test: No. 1		Time	Pressure Test: No. 2		Time
Start Pressure	18 "	W.C. 1:03 pm	Start Pressure	18 "	W.C. 1:10 pm
Finish Pressure	18 "	W.C. 1:08 pm	Finish Pressure	18 "	W.C. 1:15 pm
Change	0 "	W.C.	Change	0 "	W.C.

Measured Change From Test 1 to Test 2= 0 " W.C.
Calculate the Arithmetic Average of the Two Tests= 18 " W.C.

TEST RESULTS

Vacuum Test: No. 1		Time	Vacuum Test: No. 2		Time
Start Pressure	6 "	W.C. 1:41 pm	Start Pressure	6 "	W.C. 1:50 pm
Finish Pressure	6 "	W.C. 1:46 pm	Finish Pressure	6 "	W.C. 1:55 pm
Change	0 "	W.C.	Change	0 "	W.C.

Measured Change From Test 1 to Test 2= 0 " W.C.
Calculate the Arithmetic Average of the Two Tests= 6 " W.C.

Vapor Vent Test Conducted: Yes No Result of Test .1 " W.C.

Repairs Required for Compliance:

Yes (see area marked Description of Defects and Corrective Action)
 No

Description of Defects and Corrective Action: SEE WO# 52445
Replaced damaged #5 vapor vent

<input checked="" type="checkbox"/> Cargo tank returned to service	<input type="checkbox"/> Cargo tank withdrawn from service
<input checked="" type="checkbox"/> Month - Year - K-EPA27 marked on cargo tank	
TANK DISPOSITION:	<input checked="" type="checkbox"/> TESTED SUCCESSFULLY IN ACCORDANCE WITH US DOT 49CFR 180.407
	<input type="checkbox"/> FAILS TO MEET SPECIFICATION REQUIREMENTS

INSPECTOR/TESTOR: *Charles R. Winger* SUPERIOR TANK & TRAILER CO., INC. OWNER OR REPRESENTATIVE: *Robert Beh*
DOT REG. NO CT-0786 OWNER DOR REG. NO DATE 5-7-25



Energy Transfer Partners
 Carrier Access & Compliance
 4041 Market Street
 Upper Chichester, PA 19014
 Em: TTDataAdmin@EnergyTransfer.com
 Version 2.0 - Rev. 03/01/2024

TRAILER INSPECTION & WET TEST CERTIFICATION FORM

Carrier Name: SJA Transport, Inc.
 Carrier Address: 101 E. South Street Rockford, OH 45882
 Load Type: Top _____ Bottom X Trailer Type: LPG
 Vapor Test: Has a valid Method 27 Vapor Tightness Test been attached?

Trailer #: 105
 Serial/VIN: 1PMA2432525003108
 Gas / Dist. X Dist. Only _____
 YES X NO _____

Trailer & Safety Maintenance

Certified Inspection Requirements - All Boxes Must Be Completed

1. Is the overflow protection system in working condition and have the overfill protection probes been set and tested to a minimum 60 gross gallons?
2. Has each compartment probe been tested to verify it activates the shutdown circuitry on this unit?
3. Has the grounding system been checked to ensure it is in working condition and has not been modified or rewired in any manner?
4. Has the grounding system been tampered with to allow a false reading to permit loading?
5. Are all gauge rods and compartment protrusions grounded with secure bonding wires?
6. Has a brake interlock system been installed on the loading header and vapor recovery hose?

	YES	NO
1.	X	
2.	X	
3.	X	
4.		X
5.	X	
6.	X	

Trailer Wet Test Verification

This document certifies that this trailer testing has been completed and has passed the wet test requirement for overfill protection probes. This certifies that the entire operation of the truck overfill prevention system is wired correctly and that the entire system is working correctly. The trailer noted meets the requirements for the overfill probes to be set where the maximum safe fill is at least sixty (60) gallons less than the manufacturers specified compartment capacity.

The carrier certifies that all DOT inspections, stickers, decals and DOT 396/17 data is current for this trailer. An emergency response guidebook is on board and the vehicle has compartment capacity / strapping charts that are current and available upon request.

Max Compartment Capacities

Max Compartment Capacity
 Probe Outage (60 Gal min.)
 Carrier Outage *
 Maximum Preset

EXAMPLE
3140
60
80
3000

Comp #1	Comp #2	Comp #3	Comp #4	Comp #5	Comp #6
2932	1097	1358	1884	2102	N/A
60	60	60	60	60	
2872	1037	1298	1824	2042	
2800	1000	1200	1800	2000	

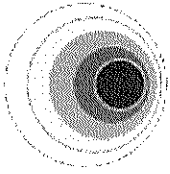
* The distance between the overfill probe and the product that prevents the rack shutdown system from being activated.

My signature below certifies that as a representative of the above carrier, all information obtained and written on this document is certified and true.

Signature: Robert Belna

Date: 5/7/25

Print Name: Robert Belna



Buckeye Terminals, LLC

Buckeye Annual & Post Incident Trailer Inspection Form

This form must be completed each year or following a lock out on each trailer and provided to each facility utilized by this equipment. This form shall accompany the federally required annual pressure-vacuum test or Distillate Only Loading Certification and as such any equipment without either shall be automatically locked out from the loading system if no renewal is provided on or before the anniversary date.

Carrier Name: SJA TRANSPORT

Trailer #: 105

Certification Date: 5/7/25

Trailer Serial #
IPMA 2432525003108

Calculate Working Volume (Max volume minus - 60 gallons ullage) for each compartment below.

		#1	#2	#3	#4	#5	
Max Capacity	Front	2932	1097	1358	1884	2102	Rear
		-60	-60	-60	-60	-60	
Working Capacity	Front	2800	1000	1200	1800	2000	Rear

Certified Inspection Company Verification Requirements

Wet Test Certification

The Overfill Protection Probe system has been inspected and is in operating condition. The process should test the probe of each compartment with a liquid to verify it activates the shutdown circuitry.

Ullage Certification

Overfill Protection Probes are at such a height to allow for 60 gallons of ullage prior to reaching the compartments maximum volume.

Grounding System Certification

The Grounding system has been checked and is in proper working condition, AND has not been modified in any way to provide a false reading allowing the trailer to be loaded.

Brake Interlock Certification

A brake interlock system is installed and functional on the loading header and the vapor recovery hose connection.

MC 306 / DOT 406 Certification

The unit has passed the inspection and is released for return to service.

Charles F. Wang 0786
Sig. of Inspector / Inspector's DOT Reg. #

SUPERIOR TANK
Inspection Company Name

5/7/25
Date



CITGO Petroleum Corporation
TERMINALS AND PIPELINES

Carrier Equipment Inspection Form	TPL-OPS-002-C
Effective Date: June 15, 2020	Rev. 0

Carrier Name: SJA Transport Inc Trailer Unit #: 105
 Trailer: Make Polar Year 12/2001 DOT Type 406 Serial Number 1PMA2432525003108

Retain Sensors Installed Yes X No _____

API RP 5004: Bottom Loading and Vapor Recovery for MC-306 & DOT-406 Tank Motor Vehicles

	Example
1 Max Compartment Capacity	3140
2 Probe Outage (60 gal min)	60
3 *Carrier Outage	3000
4 Maximum Preset	3000

Subtract Lines 2&3 from Line 1

Front Compartments						Rear
#1	#2	#3	#4	#5	#6	
2932	1097	1358	1884	2102	N/A	
60	60	60	60	60		
2872	1037	1298	1824	2042		
2800	1000	1200	1800	2000		

All Sections must be completed

*Carrier outage is the distance between the overfill probe and the product that prevents setting off the rack shutdown system (domeouts). This option is at the discretion of the carrier and varies on the tank strapping charts and the level outage selected.

Certified Inspection Requirements

All Boxes Must Be Completed

- Has the overfill protection probe been set & tested to a minimum of 60 gross gallons below the maximum compartment capacity?
- Is the overfill protection system in working condition?
- Has each compartments probe been tested with liquid to verify that it activates the shutdown circuitry?
- Has the grounding system been checked and is in proper operating condition?
- Has the grounding system been checked to ensure that has not been modified or rewired in any manner that would allow it to provide a false reading to allow loading?
- Are all gauge rods and any other compartment protrusions properly grounded with secure bonding wires?
- Is a functional brake interlock system installed on the loading header and vapor recovery hose?

YES

<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"/>

Ben Mac
Name (Print)
[Signature]
Name (Sign)

Hoover T+T
Inspection Company
CT307
Inspector's DOT reg. #

5/7/25
Date (MM/DD/YY)

Carrier Verification Requirements

- Is an MC306, DOT406 or other specification plate installed?
- Is proper placarding installed for the product(s) that are hauled?
- Is the state DOT inspection or DOT 396/17 data current?
- Are pressure, leakage and visual decals current?
- Is emergency response information (including guidebook) on board?
- Is each tank/trailer marked with appropriate unit numbers?
- Are compartment capacity charts current and available upon request?
- Is each compartment loading headers matching with maximum presets recorded above?

YES

<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"/>

As representative of the company, I certify that all information on this document is certified and true

Robert Debra Parvaz PRES.
Name (Print & Sign) Title

5/7/25
Date (MM/DD/YY)