C.H. Bradshaw Co. 2004 Hendrix Drive Grove City, Ohio 43123-1278 DOT CT0097	V	(VKE) REVISION  Work Order #.550  External Visual In	073  espection
•	K/_ K-EPA 27/	Leakage Test / In: Annual Certificati Method 27 - 63.43	on Test
Customer SSA Transport, INC. Address 101 & South St. C,S.Z. Packford Obio 45882	- - -	Owner <u>Same</u>	
License Plate # TUA 1769 Owners Unit # 65 Serial # 5HTAB437477H72107 Trlr. Vin # (If Applicable) 5HTAB436 D.O.T. Spec # DOT 406AL Original Test Date 8-00 Design or MAWP 3.3 Test Location (C.S.) Rockford, Owice	- <u>2477H7U</u> 02 - -	Previous Test Dates V 10 - 24 I 0 - 24 P 10 - 24 K 10 - 24 K-EPA 27 10 - 24 Number of Compartn	nents <u>S</u>
Compartment Size: #1 4400 #2	-	,	
Year Tank Mfg 8-60e . Mfg. Na	me Heil Trailer	Gallons 960	စ္
Minimum Thickness Of Cargo Tank S	hell ./73 Heads	<u>.173</u>	
Is Tank Lined? Insulated? Is the unit used for transport of any ma	 terial other than petrol	eum based products?_	no
E	xternal Visual Inspecti	on 180.407 (d)	
		Faulty	Okay
<ol> <li>External Inspection Of Tank S.</li> <li>A) Corroded or Abraded Areas</li> <li>B) Dents of Punctures</li> <li>C) Distortion of Defects In We</li> <li>D) Thickness Testing Needed</li> <li>E) Tank has Imaging Decals (Internal Visual In Accordance</li> </ol>	s (Rust) elds Wrap)	YES YES	-/- 
External Inspection Of Piping,     A) Corroded Areas     B) Defects in Welds, Signs of     C) Condition of delivery, vapor	Leakage		

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	(VKE) REVISI Work Order #	ION 11/21 (pg2) - 50073
	Faulty	Okay
3) External Inspection Of Manholes:  A) Devices for tightening manhole covers operative  B) Evidence of leakage  C) Inspect and pressure test fill lids, normal vents		<u>-</u>
<ul> <li>4) External Inspection Of Emergency Valves And Devices</li> <li>A) Emergency valves free from corrosion, erosion, distortion, or external damage that would prevent safe operation</li> <li>B) Remote trip control in operation / activate</li> <li>C) Leakage test seating disc in emergency valve</li> <li>D) Self closing stop valves in operation - function</li> </ul>		<u></u>
5) Missing bolts, nuts, and fusible links must be replaced and loose nuts - bolts tightened		
<ul><li>6) All Required Marking On Tank Legible</li><li>A) DOT spec. plate accessible / legible</li><li>B) Flammable placards legible (all 4-sides)</li></ul>		
<ul> <li>7) External Inspection Of All Major Appurtenances</li> <li>A) Fifth wheel plate, pins, bolts</li> <li>B) Suspension, springs, hangers, etc.</li> <li>C) Frame, cross members, gussets, etc.</li> </ul>		<u> </u>
8) Inspect all re-closing pressure relief valves	***************************************	
9) Lights, reflectors, wiring in good working order		
10) Brakes in good working order	***************************************	
11) Air hoses above axles, chambers, chafed, or rotted	National States	
12) Air system have any leaks		
13) Tank mounting bolts, boards, attachments in proper work order	ing 	
14) Leakage test entire pump system(s)	NA	NA

#### (VKE) REVISION 11/21 (pg3) Work Order #<u>\$700.73</u>

### Leakage Test 180.407 (h) Pneumatic

Each cargo tank with all valves and accessories in place or operative must be tested at not less than 80% of the tank design pressure or maximum allowable working pressure (MAWP) whichever is marked on the certification plate.

Compt	#1,77	#2	#3	#4	#5	#6
Start Time	7:22	7,08	425	<del>,</del>		<del></del>
Pressure Final Time	7:27	- <del>2</del> 73	4:48	<del></del>	<del></del>	<del></del>
	<u></u>		<del></del>	<del></del>		<del></del>
Alternate E	PA / Pressure \	Vacuum Test Me	thod 27 / 40CF	R63.425		
Pressure Te	st = 18"				Time	7:41 Am
Test	I Minute	2 Minutes	3Minutes	4 Minutes	5 Minutes	Average
1	<u> 1870</u>	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	<u> </u>	18,0	18,0	
2	72,0	15,0	(B10	<u> </u>	G <u>\B\</u> 2	<u>/8,0</u> °
Vacuum Te	st = -6.0"				Tima	7:55 Am
Test	1 Minute	2 Minutes	-3 Minutes	4 Minutes	5 Minutes	Average
I	<u>-6,0</u>	<u>- 6,0</u> -	- 579	-579	- 378	Tretage
2	<u>- 6,0</u>	<u>- (0,0)</u>	- 5,9	- 5,9	- <u>5,8</u>	- <u>5,8</u> ''
Vapor Vent	Test/Vapor Ra	il Pressure Test			Tim	e 8:10 Am
Test 1	1 Minute	2 Minutes	3 Minutes	4 Minutes	5 Minutes	<u> </u>
	Ð "	0'	0,1"	0/1"	0,("	
Location of	Defects Found	and Method of	Repair:		<del></del>	
1.) Added	emercenc.	1 Shut off	decal.			
۷.)	<u> </u>					
3.)						
4.)				_		
5.)	. 7.63	<b>~</b> * ~ .				
Attach Suppl	emental Sheet	s For Informatio	on Or Supporti	ng Test Papers	\$	
		uirements Of T	he DOT Speci	fication		***************************************
Identified On	This Report	Yes	`No			
Was The Tan	k Marked	"V" Yes	Month 10	Year 7.5		
		"K" \\ \( \color{\colin{\cin{\colin{\colin{\colin{\colin{\colin{\coli	Month 10			
	"K	EPA 703	Month 10			
		"P"	Month -	Year —		
I certify that t	the above insp	ections, were co	nducted in acc	cordance with	180.407.	
Owner Ackno		Robert	Bon		Date	10-20-25
	's Acknowleds	ement	the text		Date 7	0-25-05-
			Print 70	m Buch	Date 🔏	7-20-75
	•		,	. ,	_	



### CITGO Petroleum Corporation TERMINALS AND PIPELINES

Carrier Equipment Inspection Form					TPL-OPS-002-C					
Effective Date: June 15, 2020					Rev, 0					
Can	ier Name: SJA Transport Ind	<u> </u>		Tr	aller Unit #	<u> 65</u>		<del></del>		
Trail	er: Make <u>HEIL</u> Year	8/2006	DOT	Туре 400	5	Serial	Number <u>5</u> l	HTAB43	2477H	72102
Reta	ain Sensors Installed Yes <u>&gt;</u>	No		_						
	API RP 1004: Bottom Loading and Vapor Recovery for MC-306 & DOT- 406 Tenk Motor Vehicles			Front		Comp	artments		Rear	
		Example		#1	#2	#3	#4	#5	#6	
1	Max Compartment Capacity	3140		4521	1380	3992	N/A	N/A	N/A	
2	Probe Outage (60 gal min)	60		60	60	60			1 1 1	-
3	*Carrier Outage	3080		4461	1320	3932			<del> </del>	$\dashv$
4	Maximum Preset	3000		4400		7176	<u> </u>		<del> </del>	
	Subtract Lines 2&3 from I	ine 1		9900	1300	otlone m	ust be com	plotod	<u> </u>	
	tonadannula - 1-11 II a									
	<ul> <li>Carrier outage is the distance (domeouts). This option is at t</li> </ul>	between the ove he discretion of th	io cario In prob	e and the pro r and varies o	duct that prev n the tenk st	ents setting apping cha	g off the rack : its and the lev	sliutdown sys vel oulage se	stem Jected.	
	Certified Inspection Requirem	ents	All	Boxes Mi	ıst Be Coı	mpleted			YES	
1	Has the overfill protection probe be	an set & tested					i he maximun	n [		_
2	compartment capacity? Is the overfill protection system in w	arkina canditior	<b>n</b> ?							
3	Has each compartments probe bee	n tested with liq	uid to v	erify that it a	otivates the	shutdowi	circuitry?			$\dashv$
4 Has the grounding system been checked and is in proper operating condition?						v	$\dashv$			
Has the grounding system been checked to ensure that has not been modified or rewired in would allow it to provide a false reading to allow loading?					any manner	r lhat		$\neg$		
6	<ul> <li>Are all gauge rods and any other co</li> </ul>	mpartment prot	lrusions	properly gr	ounded with	secure b	 andina wires	:?		$\dashv$
7,	Is a functional brake interlock system	n Installed on th	he load	ing header a	ind vapor re	covery ho	se?			
Ky	le McCann Hac	sier Trailer	871	ruk En	U		10/20	125		
Name (Print)   Inspection Company Date (MM/DD/YY										
M/h / Brown CT-3431										
Nami	(Sign) Inspe	ctor's DOT reg.#		, <del>, , , , , , , , , , , , , , , , , , </del>						
	Carrler Verification Requireme	\m_f_							* 45%	
1	is an MC306, DOT406 or other spe		netallar	10				,	YES	~~
2	is proper placarding installed for the									-
3 is the state DOT inspection or DOT 396/17 data current?							4			
4 Are pressure, leakage and visual decals current?						v				
5 Is emergency response information (including guidebook) on board?						سا	7			
6 Is each tank/trailer marked with appropriate unit numbers?						\				
7	Are compartment capacity charts or									
8	is each compartment loading heads	irs matching wit	ih maxi	mum preset	s recorded a	above?				
_	presentative of the company, I certify	that all informa	ition on	ihis docume	ent le certifie	ad and true			- • • • •	• ;
Robe	er best lober Boh	PRESE	OFN	1			10/2	0/25		
Name	e (runt & Sign)	Tille				Ī	Date (MM/DD)	ΥΥ)		
							TPL-OPS	S-002-C		



# Energy Transfer Partners Carrier Access & Compliance

4041 Market Street Upper Chichester, PA 19014 Em: TTDataAdmin@EnergyTransfer.com Version 20 - Rev. 03/01/2024

# TRAILER INSPECTION & WET TEST CERTIFICATION FORM

Carrier Name: SJA Tran	sport Inc					GE.	•	
104 = 0 11 01					Trailer #		1400477	
					Serial/VIN	, SHIAE	3432477	H/2102
Load Type: Top	_ Bottom X	Trailer Type:	LPG		Gas / Dist.	X	_ Dist. Only	
Vapor Test: Has a valid Meti	nod27 Vapor Tightness	Test been attache	:d?		YES	X	NO	
	Trailer	& Safety M	aintend	ance				
Certified Insp	ection Requiremen						YES	NO
1. Is the overflow protection system in winimum 60 gross gallons?				-	set and teste	ed to a	×	
2. Has each compartment probe been to	ested to verify it activa	tes the shutdown o	ircuitry on	thls unit?			X	
3. Has the grounding sytem been checked manner?	ed to ensure it is in wo	rking condition and	d has not b	een modifie	d or rewired	in any	X	
4. Has the grounding system been tampe	ered with to allow a fa	lse reading to pern	nit loadingi	?				X
5. Are all gauge rods and compartment p								<del> ^  </del>
6. Has a brake interlock system been ins				se7			X	
	•	•	,		ļ			<u> </u>
	<u>Trailei</u>	' Wet Test V	erificat	<u>ion</u>				
probes. This certifies that the entire op correctly. The trailer noted meets the r than the manufacturers specified comp The carrier certifies that response guidebook is on board and th	requirements for the operations and all DOT inspections.	verfill probes to be stickers, decals and	set where	the maxim	un safe fill is	at least sixt	y (60) gallor	ns less
	<u>Max Co</u>	<u>mpartment</u>	Сарас	ities				
	EXAMPLE	Comp #1	Comp #2	Comp #3	Comp #4	Comp #5	Comp #6	]
Max Compartment Capacity	3140	4521	1380	3992	N/A	N/A	N/A	
Probe Outage (60 Gal min.)	60	60	60	60				
Carrier Outage *	80	4461	1320	3932				
Maximum Preset	3000	4400	1300	3900				
* The distance between	the overfill probe and ti	he product that pre	vents the ra	ick shutdow	n system fron	being activ	ated.	•
My signature below certifies that as a								fled and
Signature: Robert Beli				Date: _	10/20	125		
Print Name: Robert Belna			·		:			



Kyle McCapr XI / Sig. of Inspector's DOT Reg. #

## **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 ·	TRANS	ART	·	Tra	iler#: <u>65</u>		
Certification Date:				Trai	ler Serial # SHTAB 43	2477 472	2/02
Calculate Wo	rking Volun	ne (Max volum	e minus - 60 g	_	, ,		=
		#1	#2	#3	#4	#5	i 
Max Capacity	Front	4521	1380	3992	- NVA	NIA	Rear
		-60	-60	-60	-60	-60	
Working Capacity	Front	4400	1300	3900			Rear
The Overfill Protection probe o	f each com	em has been ir partment with L such a height to	a liquid to ve Jllage Certific	is in operating rify it activates a <b>tion</b> gallons of ullag	the shutdow	n circuitry.	
The Grounding system h	as been che	cked and is in	ding System C	ng condition, A	.ND has not b	een modified	in any way to
	prov	ide a false reac Brake	Interlock Ce		e loaded.		
A brake interlock system is installed and functional on the loading header and the vapor recovery hose connection.							connection.
Т	he unit has	MC 306 passed the ins	5 / DOT 406 Capection and i		return to serv	ice.	

HOSTER TRANSPORT TRUCK
Inspection Company Name