

C.H. Bradshaw Co.
 2004 Hendrix Drive
 Grove City, Ohio 43123-1278
 DOT CT0097

(VKE) REVISION 11/21
 Work Order # 105429

V X External Visual Inspection
 K X Leakage Test / Inspection
 K-EPA 27 X Annual Certification Test
 Method 27 - 63.425 (e) (1) (2)

Customer SJA TRANSPORT Owner SAME
 Address 101 E. SOUTH ST.
 P. O. BOX 415
 C.S.Z. ROCKFORD, OH. 45882

License Plate # U944594 (Temp.) Previous Test Dates
 Owners Unit # 233 V 8/25
 Serial # 1UBFA82V26FOB6412 I 8/25
 D.O.T. Spec # DOT 407 AL P 8/25
 Original Test Date 9/05 K 8/25
 Design or MAWP 25 K-EPA 27 8/25
 Test Location (C.S) GROVE CITY, OIL. Number of Compartments 1
 Trlr. Vin # (If Applicable) 1UBFA82V26FOB6412
 Compartment Size: 1- 8500
 Year Tank Mfg. 2005 Mfg. Name BRENNER TANK Gallons 8500
 Minimum Thickness Of Cargo Tank Shell .192 Heads .204
 Is Tank Lined? NO Insulated? NO
 Is the unit used for transport of any material other than petroleum based products? NO

External Visual Inspection 180.407 (d)

| | Faulty | Okay |
|---|--------|-----------|
| 1.) External Inspection Of Tank Shell And Heads: | | |
| A) Corroded or Abraded Areas (Rust) | | X |
| B) Dents or Punctures | | X |
| C) Distortion of Defects In Welds | X | |
| D) Thickness Testing Needed | | X |
| E) Tank Has Imaging Decals (Wrap) | | <u>NO</u> |
| Internal Visual In Accordance To 180.407(c) | | <u>NO</u> |
| 2.) External Inspection Of Piping, Valves, Gaskets: | | |
| A) Corroded Areas | | X |
| B) Defects in Welds, Signs of Leakage | | X |
| C) Condition of delivery, vapor hoses | | X |

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

C.H. Bradshaw Co.
 2004 Hendrix Drive
 Grove City, Ohio 43123-1278
 DOT CT0097

(PI) REVISION 07/11
 Work Order # 105429

P X Pressure Retest
 I X Internal Visual Inspection

Customer SJA TRANSPORT Owner SAME
 Address 101 E. SOUTH ST.
 P.O. BOX 415
 C.S.Z ROCKFORD, OH. 45882

License Plate # U944594 (Temp) Previous Test Dates
 Owners Unit # 233 V 8/25
 Serial # IUBFA82V26FOB6412 I 8/25
 D.O.T. Spec # DOT 407 AL. P 8/25
 Original Test Date 9/05 K 8/25
 Design or MAWP 25 K-EPA 27 8/25
 Test Location (C.S) GROVE CITY, OH. Number of Compartments 1
 Trlr. Vin # (If Applicable) IUBFA82V26FOB6412
 Compartment Size: 1- 8500
 Year Tank Mfg. 2005 Mfg. Name BRENNER TANK Gallons 8500
 Minimum Thickness Of Cargo Tank Shell .192 Heads .204
 Is Tank Lined? NO Insulated? NO
 Is the unit used for transport of any material other than petroleum based products? NO

Pressure Test 180.407 (g) (viii) Hydrostatic Test or Pneumatic Test 180.407(g) (ix)

| | Yes | No | Date |
|---|-----|----|---------|
| 1.) External Visual Inspection Complete? | X | | 5/15/26 |
| 2.) Internal Visual Inspection Complete? | X | | 5/15/26 |
| 3.) Remove All Pressure Relief Devices? | X | | 5/15/26 |
| 4.) Results OF Testing Pressure Relief Devices? | | | |

| Compt # | Make/Mfg. | Set To Open | Opened At | Reseated At |
|---------|-----------|-------------|-----------|-------------|
| 1 | FORT VALE | 30-33 | 31.9 | 27.5 |

| | Faulty | Okay |
|---|--------|--------|
| 5.) Test Normal Vents To Mfg. Specs | | X |
| Correct Normal Vent For Spec. Tank | | X |
| 6.) Remove Upper Coupler Assembly | | |
| A) Inspect For Corrosion, Abraded, Or Cracks | | X |
| B) Correct Fasteners Reinstalled (Gr. 8) | | X |
| 7.) Internal Inspection Of Tank Shell And Heads: | | |
| A) Corroded, Abraded Areas | | X |
| B) Dents, Distortion, Defects In Welds | | X |
| C) Inspect Areas Above Upper Coupling | | X |
| D) Need For Thickness Testing | | X |
| 8.) Pressure Test @ MC306 = (3 PSIG) Or Design Pressure > 3PSIG | | NA |
| DOT407 = (40 PSIG) Or 1.5 TIMES MAWP > 40PSIG | | 40PSIG |
| Adjacent Compartments To Be Empty | | X |
| All Closures Except Pressure Relief Devices In Place | | X |
| Disable All Load/Unload Venting Device Rated Less Than Pressure | | X |
| Fill Each Compartment With Water Including Dome | | NA |
| 9.) Hydrostatic Pressure Retest (10 Minutes) Pressure Used | | 40PSIG |

*Reduced to 20 psi to complete testing after 5 mins.

Comp #1
 Start Time 8:00
 Finish Time 8:10
 Pass Test YES

Location Of Defects Found and Corrective Action(s):

- 1.)
- 2.)
- 3.)

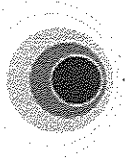
Attach Supplemental Sheets For Information Or Supporting Test Papers

Cargo Tank Meets The Requirements Of The DOT Specification
 Identified On This Report Yes X No

Was The Tank Marked "P" YES Month 05 Year 26
 "I" YES Month 05 Year 26

I certify that the above inspections were conducted in accordance with 180.407.

Owner Acknowledgment Robert W. Behr Date 5/15/26
 R/I. Manager's Acknowledgment [Signature] Date 5/15/26
 Inspected By: Jeff Ward Print JEFF WARD Date 5/15/26



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 #: 233

Certification Date: 5/15/26

Trailer Serial # IUBFA 82 V26 FOB6412

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

| | | #1 | #2 | #3 | #4 | #5 | |
|------------------|-------|------|-----|-----|-----|-----|------|
| Max Capacity | Front | 8560 | N/A | N/A | N/A | N/A | Rear |
| | | -60 | -60 | -60 | -60 | -60 | |
| Working Capacity | Front | 8500 | | | | | 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.

Jeff Ward CT0097
Sig. of Inspector / Inspector's DOT Reg. #

C.H. BLADSHAW
Inspection Company Name

5-15-26
Date



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. Trailer #: 23
 Carrier Address: 101 E. South Street Rockford, OH 45882 Serial/VIN: 1UBFA82V26FOB6412
 Load Type: Top _____ Bottom X Trailer Type: LPG _____ Gas / Dist. X Dist. Only _____
 Vapor Test: Has a valid Method 27 Vapor Tightness Test been attached? 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. Is the overflow protection system in working condition and have the overfill protection probes been set and tested to a minimum 60 gross gallons? | X | |
| 2. Has each compartment probe been tested to verify it activates the shutdown circuitry on this unit? | X | |
| 3. Has the grounding system been checked to ensure it is in working condition and has not been modified or rewired in any manner? | X | |
| 4. Has the grounding system been tampered with to allow a false reading to permit loading? | | X |
| 5. Are all gauge rods and compartment protrusions grounded with secure bonding wires? | X | |
| 6. Has a brake interlock system been installed on the loading header and vapor recovery hose? | 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

| EXAMPLE | Comp #1 | Comp #2 | Comp #3 | Comp #4 | Comp #5 | Comp #6 |
|---------|---------|---------|---------|---------|---------|---------|
| 3140 | 8640 | N/A | N/A | N/A | N/A | N/A |
| 60 | 60 | | | | | |
| 80 | 80 | | | | | |
| 3000 | 8500 | | | | | |

* 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: 5/15/26

Print Name: Robert Belna



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 Trailer Unit #: 233

Trailer: Make Brenner Year 2005 DOT Type 406 Serial Number 1UBFA82V26FOB6412

Retain Sensors Installed Yes _____ No

API RP 1004: Bottom Loading and Vapor Recovery for MC-306 & DOT-406 Tank Motor Vehicles

| | | Front | Compartments | | | | Rear |
|-----------------------------|---------|-------|--------------|-----|-----|-----|------|
| | Example | #1 | #2 | #3 | #4 | #5 | #6 |
| 1 Max Compartment Capacity | 3140 | 8640 | N/A | N/A | N/A | N/A | N/A |
| 2 Probe Outage (60 gal min) | 60 | 60 | | | | | |
| 3 *Carrier Outage | 80 | 80 | | | | | |
| 4 Maximum Preset | 3000 | 8500 | | | | | |

Subtract Lines 2&3 from Line 1

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

YES

- 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?

| |
|-------------------------------------|
| <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"/> |

jEFF wARD
Name (Print)
Jeff Ward
Name (Sign)

C.H. Bradshaw
Inspection Company
CT0097
Inspector's DOT reg. #

5/15/26
Date (MM/DD/YY)

Carrier Verification Requirements

YES

- 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?

| |
|-------------------------------------|
| <input checked="" type="checkbox"/> |
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| <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

Rob Belna *Robert Belna* President
Name (Print & Sign) Title

5/15/26
Date (MM/DD/YY)