

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

(VKE) REVISION 11/21

Work Order # 50684

V ☒
K ☒
K-EPA 27 ☒

External Visual Inspection
Leakage Test / Inspection
Annual Certification Test
Method 27 - 63.425:(e) (1) (2)

Customer SJA Transport, Inc.
Address 101 E. South St.
C.S.Z. Rockford, Ohio 45882

Owner Same

License Plate # TUA 5383
Owners Unit # 206
Serial # 353400
Trlr. Vin # (If Applicable) 1PMAZ442135003400
D.O.T. Spec # DOT 406 AL
Original Test Date 10-02
Design or MAWP 3.3
Test Location (C.S.) Colts, Ohio

Previous Test Dates
V 10-25
I 10-22
P 10-22
K 10-25
K-EPA 27 10-25
Number of Compartments 4

Compartment Size: #1 3500 #2 2000 #3 1100 #4 2700 #5 x

Year Tank Mfg. 10-02 Mfg. Name Polar Trailer Gallons 9300

Minimum Thickness Of Cargo Tank Shell .173 Heads .220

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)	<u> </u>	<u> / </u>
B) Dents or Punctures	<u> </u>	<u> / </u>
C) Distortion or Defects In Welds	<u> </u>	<u> / </u>
D) Thickness Testing Needed	<u> </u>	<u> / </u>
E) Tank has Imaging Decals (Wrap)	<u>YES</u>	<u>(NO)</u>
Internal Visual In Accordance To 180.407(c)	<u>YES</u>	<u>(NO)</u>
2.) External Inspection Of Piping, Valves, Gaskets:		
A) Corroded Areas	<u> </u>	<u> / </u>
B) Defects in Welds, Signs of Leakage	<u> </u>	<u> / </u>
C) Condition of delivery, vapor hoses	<u> </u>	<u> / </u>

	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	_____	_____/____
4) External Inspection Of Emergency Valves And Devices		
A) Emergency valves free from corrosion, erosion, distortion, or external damage that would prevent safe operation	_____	_____/____
B) Remote trip control in operation / activate	_____	_____/____
C) Leakage test seating disc in emergency valve	_____	_____/____
D) Self closing stop valves in operation - function	_____	_____/____
5) <u>Missing</u> bolts, nuts, and fusible links must be replaced and loose nuts - bolts tightened	_____	_____/____
6) All Required Marking On Tank Legible		
A) DOT spec. plate accessible / legible	_____	_____/____
B) Flammable placards legible (all 4-sides)	_____	_____/____
7) External Inspection Of All Major Appurtenances		
A) Fifth wheel plate, pins, bolts	_____	_____/____
B) Suspension, springs, hangers, etc.	_____	_____/____
C) Frame, cross members, gussets, etc.	_____	_____/____
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	_____	_____/____
12) Air system have any leaks	_____	_____/____
13) Tank mounting bolts, boards, attachments in proper working order	_____	_____/____
14) Leakage test entire pump system(s)	<u>Nil</u>	<u>Nil</u>

(VKE) REVISION 11/21 (pg3)
Work Order # 50684

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	#2	#3	#4	#5	#6
Start Time	8:21	8:31	8:11	8:25		
Pressure	2.6	2.6	2.6	2.6		
Final Time	8:26	8:36	8:16	8:30		

Alternate EPA / Pressure Vacuum Test Method 27 / 40CFR63.425

Pressure Test = 18"	1 Minute	2 Minutes	3 Minutes	4 Minutes	5 Minutes	Time 8:33 Am
Test 1	18.0	18.0	18.0	17.9	17.9	Average
2	18.0	18.0	18.0	18.0	18.0	17.95"

Vacuum Test = -6.0"	1 Minute	2 Minutes	3 Minutes	4 Minutes	5 Minutes	Time 8:46 Am
Test 1	-6.0	-5.9	-5.9	-5.8	-5.8	Average
2	-6.0	-5.9	-5.9	-5.8	-5.8	-5.8"

Vapor Vent Test/Vapor Rail Pressure Test	1 Minute	2 Minutes	3 Minutes	4 Minutes	5 Minutes	Time 8:59 Am
Test 1	0"	0"	0"	0"	0"	

Location of Defects Found and Method of Repair:

- 1.) _____
- 2.) _____
- 3.) _____
- 4.) _____
- 5.) _____

Attach Supplemental Sheets For Information Or Supporting Test Papers

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

Was The Tank Marked	"V"	Yes	Month	10	Year	26
	"K"	Yes	Month	10	Year	26
	"K EPA"	Yes	Month	10	Year	26
	"I"	=	Month	=	Year	=

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

Owner Acknowledgment Robert V. Bell Date 10-13-26

R/I, Manager's Acknowledgment [Signature] Date 10-13-26

Inspected By: [Signature] Print Tom Buxak Date 10-13-26



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

TRAILER INSPECTION & WET TEST CERTIFICATION FORM

Carrier Name: SJA Transport, Inc. Trailer #: 206
Carrier Address: 101 E. South Street Rockford, OH 45882 Serial/VIN: 1PMA2442135003400
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
X	
X	
X	
	X
X	
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
2651	2132	1261	2827	N/A	N/A
60	60	60	60		
3591	2072	1201	2767		
3500	200	110	2700		

* 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: _____

10/13/26

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: SSA Transport INC Trailer Unit #: 206
 Trailer: Make Polar Year 10/02 DOT Type 406 Serial Number 1PMA 2442135003400
 Retain Sensors Installed Yes X No

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

	Example	#1	#2	#3	#4	#5	#6
1 Max Compartment Capacity	3140	3651	2132	1261	2827		
2 Probe Outage (60 gal min)	60	60	60	60			
3 *Carrier Outage	80	3591	2072	1201	2767		
4 Maximum Preset	3080	3500	2000	1100	2700		

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

- | | |
|--|-----|
| 1 Has the overfill protection probe been set & tested to a minimum of 60 gross gallons below the maximum compartment capacity? | YES |
| 2 Is the overfill protection system in working condition? | Yes |
| 3 Has each compartment probe been tested with liquid to verify that it activates the shutdown circuitry? | Yes |
| 4 Has the grounding system been checked and is in proper operating condition? | Yes |
| 5 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? | Yes |
| 6 Are all gauge rods and any other compartment protrusions properly grounded with secure bonding wires? | Yes |
| 7 Is a functional brake interlock system installed on the loading header and vapor recovery hose? | Yes |

Tim Buck
Name (Print)
Tim Buck
Name (Sign)

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

10/13/26
Date (MM/DD/YY)

Carrier Verification Requirements

- | | |
|---|-----|
| 1 Is an MC306, DOT406 or other specification plate installed? | YES |
| 2 Is proper placarding installed for the product(s) that are hauled? | ✓ |
| 3 Is the state DOT inspection or DOT 396/17 data current? | ✓ |
| 4 Are pressure, leakage and visual decals current? | ✓ |
| 5 Is emergency response information (including guidebook) on board? | ✓ |
| 6 Is each tank/trailer marked with appropriate unit numbers? | ✓ |
| 7 Are compartment capacity charts current and available upon request? | ✓ |
| 8 Is each compartment loading headers matching with maximum presets recorded above? | ✓ |

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

Robert Dana Robertson
Name (Print & Sign)

President
Title

10/13/26
Date (MM/DD/YY)

TPL-OPS-002-C



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 #: 206

Certification Date: 10/13/26

Trailer Serial #
1PMA2442135003400

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

		#1	#2	#3	#4	#5	
Max Capacity	Front	3651	2132	1261	2827	N/A	Rear
		-60	-60	-60	-60	-60	
Working Capacity	Front	3500	2000	1100	2700		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.

Tim Borch DOT CT0097
Sig. of Inspector / Inspector's DOT Reg. #

CH BRADSHAW
Inspection Company Name

10/13/26
Date



a U.S. Venture company

RESET FORM

ANNUAL TRAILER INSPECTION REPORT

This form certifies that the trailer has been adequately inspected and tested to DOT standards, and the unit is fit for serviceable use. US Energy personnel reserve the right to disable any unit in our system that they feel fails to maintain serviceable use. A disabled trailer will only be enabled back into service once a new inspection or proof of service/repair of known issue(s) can be presented. **ALL FIELDS BELOW MUST BE COMPLETED FOR ACCEPTANCE.**

TRAILER INFORMATION

Trailer ID:	206	Owner:	SJA TRANSPORT
Total Trailer Capacity:	9,300 GAL	Address:	101 E. SOUTH ST.
Trailer Make:	POLAR	City:	ROCKFORD
Year of Manufacture:	2002	State:	OH
Trailer VIN:	1PMA2442135003400	Zip:	45882
Date of Inspection:	10/13/2026	Owner Phone:	(419) 363-2342

COMPARTMENT INFORMATION

All US Energy terminals utilize a compartment-based loading system. The compartment information detailed below must be accurate and will match the figures entered into the loading system, and the maximum preset will mirror the maximum allowable by compartment for loading this specific trailer. **No exceptions will be made for the maximum preset amounts.**

	FRONT 1	2	3	4	5	REAR 6
Max Compartment Capacity (gal)	3,560	2,060	1,160	2,760		
Probe Outage (60 gal)	60	60	60	60	60	60
Maximum Preset Allowed (gal)	3,500	2,000	1,100	2,700		

MAX CAPACITY - PROBE OUTAGE = MAXIMUM PRESET ALLOWED

INTRINSICALLY SAFE CAMERAS

All US Energy terminals forbid the use of trailer cameras that are not intrinsically safe for use in hazardous locations while loading/unloading operations are ongoing. Any unit that is found to be using incorrectly rated recording devices will be disabled until proof of repair can be provided. **If 'No' is marked below to question 2-4 US Energy will not accept this trailer for use.**

	Y	N	INITIALS
1 Does this unit have trailer cameras installed?	☐	☒	
2 Are the cameras certified as intrinsically safe and approved for use in hazardous locations?	☐	☐	
3 Are cameras connected to trailer power and disabled during loading/unloading?	☐	☐	
4 Are cameras connected to battery backup power and disabled during loading/unloading?	☐	☐	

INSPECTION INFORMATION

If 'No' is marked below to question 1-9, US Energy will not accept this trailer for use at any of their facilities.

	Y	N	INITIALS
1 Is the overfill protection system in working condition?	☒	☐	
2 Have all probes been tested with liquid to verify shutdown capability?	☒	☐	
3 Have probes been set to 60 gross gallons below the max capacity?	☒	☐	
4 Has the grounding system been checked for proper functionality?	☒	☐	
5 Vapor certification (EPA Method 27) current and decals displayed?	☒	☐	
6 Vapor-tightness test report completed and attached (pg. 2 of 2)?	☒	☐	
7 Does trailer have a functional brake interlock device(s) installed?	☒	☐	
8 Are compartment sizes & capacities legibly displayed on the tanker?	☒	☐	
9 Are proper placards displayed on all four sides of the unit?	☒	☐	

CERTIFICATION

I CERTIFY THAT THIS TRAILER HAS BEEN ADEQUATELY INSPECTED TO DOT STANDARDS AND IS FIT FOR SERVICEABLE USE.

Inspector Name:	TIM BUCK	Inspector Signature	
Inspector Company:	CH BRADSHAW	<i>Tim Buck</i>	Date: 10/13/26
Inspector Phone:	(800) 783-0010		

ANNUAL TRAILER VAPOR-TIGHTNESS TEST REPORT

EPA Reference Method 27 - 40 CFR Part 60, Appendix A-8

Required Annual Certification Testing - Pressure, Vacuum, and Internal Vapor Valve

TRAILER INFORMATION			
Trailer ID:	206	Owner:	SJA TRANSPORT
Total Compartment Capacity (As Tested):	9300 GAL	Address:	101 E. SOUTH ST.
Test Location:	CH BRADSHAW	City:	ROCKFORD
Address:	2004 HENDRIX DR	State:	OH
Tester Phone:	(800) 783-0010	Zip:	45882
Test Date:	8/10/2026	Owner Phone:	(419) 363-2342

PRESSURE TEST						
PRESSURE TEST PER METHOD 27: 40 CFR PART 60, APPENDIX A-8						
Initial Pressure = 18 in. H ₂ O or 460 mm H ₂ O				Total Time ≥ 5 Minutes		
Initial Pressure	Initial Test Time	Final Pressure	Final Test Time	Pressure Change	Time Change	
Inches or mm H ₂ O	HH:MM	Inches or mm H ₂ O	HH:MM	Inches or mm H ₂ O	Minutes	
Test 1	18.00 ☒ IN ☐ MM	3:10 PM	17.80 ☒ IN ☐ MM	3:15 PM	0.20 ☒ IN ☐ MM	5.0
Test 2	18.00 ☒ IN ☐ MM	3:20 PM	17.80 ☒ IN ☐ MM	3:25 PM	0.20 ☒ IN ☐ MM	5.0
USE Terminal Facilities: ≤ 0.5 in H ₂ O or 12.7 mm H ₂ O pressure drop. Two tests must be within 0.5 in H ₂ O or 12.7 mm H ₂ O						
Average Final Pressure		17.80 ☒ IN ☐ MM	Average Pressure Change		0.20 ☒ IN ☐ MM	

VACUUM TEST						
VACUUM TEST PER METHOD 27: 40 CFR PART 60, APPENDIX A-8						
Initial Vacuum = 6 in. H ₂ O or 150 mm H ₂ O				Total Time ≥ 5 Minutes		
Initial Vacuum	Initial Test Time	Final Vacuum	Final Test Time	Vacuum Change	Time Change	
Inches or mm H ₂ O	HH:MM	Inches or mm H ₂ O	HH:MM	Inches or mm H ₂ O	Minutes	
Test 1	-6.00 ☒ IN ☐ MM	3:25 PM	-5.80 ☒ IN ☐ MM	3:30 PM	-0.20 ☒ IN ☐ MM	5.0
Test 2	-6.00 ☒ IN ☐ MM	3:31 PM	-5.80 ☒ IN ☐ MM	3:36 PM	-0.20 ☒ IN ☐ MM	5.0
USE Terminal Facilities: ≤ 0.5 in H ₂ O or 12.7 mm H ₂ O vacuum drop. Two tests must be within 0.5 in H ₂ O or 12.7 mm H ₂ O						
Average Final Vacuum		-5.80 ☒ IN ☐ MM	Average Vacuum Change		-0.20 ☐ IN ☐ MM	

INTERNAL VAPOR VALVE TEST						
INTERNAL VAPOR VALVE TEST: 40 CFR PART 60 APPENDIX A-8 as required under 40 CFR 60 SUBPART XXa; 40 CFR 63 SUBPART 6B, and/or 40 CFR 63 SUBPART R as appropriate						
Initial Pressure = 0 in. H ₂ O or 0 mm H ₂ O				Total Time ≥ 5 Minutes		
Initial Pressure	Initial Test Time	Final Pressure	Final Test Time	Pressure Change	Time Change	
Inches or mm H ₂ O	HH:MM	Inches or mm H ₂ O	HH:MM	Inches or mm H ₂ O	Minutes	
Test 1	0.00 ☒ IN ☐ MM	3:45 PM	0.20 ☐ IN ☐ MM	3:47 PM	0.20 ☐ IN ☐ MM	5.0
USE Terminal Facilities: Maximum allowable 5 minute pressure increase is 65 mm H ₂ O or 2.5 in H ₂ O						

FINDINGS	
LIST ANY FINDINGS INCLUDING LEAKS FOUND OR REPAIRS MADE DURING VAPOR TIGHTNESS TESTING BELOW.	
PLEASE ATTACH ANY ADDITIONAL DOCUMENTATION CORRESPONDING TO REPAIRS MADE OR ISSUES FOUND TO THIS FORM.	

CERTIFICATION	
I CERTIFY THAT THIS TRAILER IS VAPOR TIGHT AS REQUIRED BY 40 CFR 60.503a(f); 40 CFR 63.11092(g)(1)(ii); and/or 40 CFR 63.425(e)(1)(iii). EPA REFERENCE METHOD 27.	

Tester Name:	TIM BUCK	Tester Signature		Date:	10/17/26
Tester Title:		Witness Signature		Date:	
Tester DOT Certification:	CT0097				
Tester Company:	CH BRADSHAW				
Witness Name (if any):					
Witness Affiliation:					