

5763

Beal Tank Trailer

| Tankmax Inc.<br>Spokane • Pocatello • Kent • Portland • Boise                      |                                                                              | TANK TEST AND INSPECTION REPORT<br>N.B.# 6194 DOT REG. # CT 15343 (Kent) |                                          |                                               |                                     |                                                             |                                     |                                     |
|------------------------------------------------------------------------------------|------------------------------------------------------------------------------|--------------------------------------------------------------------------|------------------------------------------|-----------------------------------------------|-------------------------------------|-------------------------------------------------------------|-------------------------------------|-------------------------------------|
| 8001 S 222nd St. Kent, WA 98032                                                    |                                                                              | Kent 253-872-3374                                                        |                                          |                                               |                                     |                                                             |                                     |                                     |
| CUSTOMER INFORMATION                                                               |                                                                              |                                                                          |                                          |                                               |                                     |                                                             |                                     |                                     |
| OWNER & CARRIER (IF OTHER THAN OWNER)                                              |                                                                              | INSPECTION TEST DATE<br>11/18/24                                         |                                          |                                               |                                     |                                                             |                                     |                                     |
| PRINCIPAL PLACE OF BUSINESS ADDRESS                                                |                                                                              | NEXT TEST DATE<br>11/18/25                                               |                                          |                                               |                                     |                                                             |                                     |                                     |
| CITY, STATE, ZIP CODE                                                              |                                                                              | CUSTOMER PHONE #                                                         |                                          |                                               |                                     |                                                             |                                     |                                     |
| MFG. SERIAL NO.<br>TT10912J                                                        |                                                                              | ORIG. TEST DATE<br>5/1980                                                | DOT SPECIFICATION NO.<br>MC-306          |                                               |                                     |                                                             |                                     |                                     |
| UNIT OR LICENSE NO.<br>401                                                         |                                                                              | FLUID CAPACITY (GALS.)<br>6700                                           | WATER CAPACITY (LBS.)                    |                                               |                                     |                                                             |                                     |                                     |
| TEST INFORMATION                                                                   |                                                                              |                                                                          |                                          |                                               |                                     |                                                             |                                     |                                     |
| <input checked="" type="checkbox"/> EXTERNAL VISUAL (V)                            | <input checked="" type="checkbox"/> VAPOR RECOVERY TEST DOT<br>EPA method 27 | MANUFACTURER<br>BEALL                                                    | MFG. DATE<br>5/1980                      |                                               |                                     |                                                             |                                     |                                     |
| <input checked="" type="checkbox"/> LEAKAGE TEST (K)                               | 63,425 (e) (f) & 63,425 (e) (2)                                              | CERTIFIED BY<br>BEALL                                                    |                                          |                                               |                                     |                                                             |                                     |                                     |
| <input type="checkbox"/> HYDROSTATIC <input checked="" type="checkbox"/> PNEUMATIC | <input type="checkbox"/> THICKNESS TEST (T)                                  | MAWP<br>3                                                                | MAX ALLOWABLE PSI (TEST PRESSURE)<br>5.0 |                                               |                                     |                                                             |                                     |                                     |
| <input type="checkbox"/> PRESSURE RETEST (P)                                       | <input type="checkbox"/> LINING INSPECTION (L)                               | 5 YEAR INSPECTION<br>10/2022                                             | MAX ALLOWABLE TEMP. (FAHRENHEIT)<br>150° |                                               |                                     |                                                             |                                     |                                     |
| <input type="checkbox"/> HYDROSTATIC <input type="checkbox"/> PNEUMATIC            | <input type="checkbox"/> (OTHER)                                             |                                                                          |                                          |                                               |                                     |                                                             |                                     |                                     |
| <input type="checkbox"/> INTERNAL VISUAL (I)                                       |                                                                              |                                                                          |                                          |                                               |                                     |                                                             |                                     |                                     |
| ITEMS INSPECTED OR TESTED                                                          |                                                                              |                                                                          |                                          |                                               |                                     |                                                             |                                     |                                     |
| ITEM                                                                               | YES                                                                          | NO                                                                       | ITEM                                     | YES                                           | NO                                  | ITEM                                                        | YES                                 | NO                                  |
| TANK SHELL                                                                         | <input checked="" type="checkbox"/>                                          | <input type="checkbox"/>                                                 | SELF-CLOSING STOP VALVES                 | <input checked="" type="checkbox"/>           | <input type="checkbox"/>            | DENTS                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| TANK HEADS                                                                         | <input checked="" type="checkbox"/>                                          | <input type="checkbox"/>                                                 | EXCESS FLOW VALVES                       | <input type="checkbox"/>                      | <input checked="" type="checkbox"/> | BRAKE INTERLOCKS                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| HEAD TO SHELL                                                                      | <input checked="" type="checkbox"/>                                          | <input type="checkbox"/>                                                 | REMOTE CLOSURE DEVICES                   | <input checked="" type="checkbox"/>           | <input type="checkbox"/>            | UPPER COUPLER                                               | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| PIPING                                                                             | <input checked="" type="checkbox"/>                                          | <input type="checkbox"/>                                                 | RE-CLOSING PRESSURE RELIEF VALVES        | <input checked="" type="checkbox"/>           | <input type="checkbox"/>            | TANK JACKETED                                               | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| VALVES                                                                             | <input checked="" type="checkbox"/>                                          | <input type="checkbox"/>                                                 | NUTS AND BOLTS                           | <input checked="" type="checkbox"/>           | <input type="checkbox"/>            | TANK INSULATED                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| GASKETS                                                                            | <input checked="" type="checkbox"/>                                          | <input type="checkbox"/>                                                 | FRANGIBLE (RUPTURE) DISK                 | <input type="checkbox"/>                      | <input checked="" type="checkbox"/> | TANK LINED                                                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| MANHOLE COVERS                                                                     | <input checked="" type="checkbox"/>                                          | <input type="checkbox"/>                                                 | WELDS                                    | <input checked="" type="checkbox"/>           | <input type="checkbox"/>            | RING STIFFENERS                                             | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| MANHOLE GASKETS                                                                    | <input checked="" type="checkbox"/>                                          | <input type="checkbox"/>                                                 | CORRODED OR ABRADED AREAS                | <input checked="" type="checkbox"/>           | <input type="checkbox"/>            | HIGH PRESSURE GAS HOSES                                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| DEVICES FOR TIGHTENING MANHOLE                                                     | <input checked="" type="checkbox"/>                                          | <input type="checkbox"/>                                                 | DISTORTIONS                              | <input checked="" type="checkbox"/>           | <input type="checkbox"/>            | TANK TRUCK FUEL DEL. HOSE                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| TEST TYPE APPLIED: LEAKAGE TEST (K)                                                |                                                                              |                                                                          |                                          |                                               |                                     |                                                             |                                     |                                     |
| MAWP PRESSURE: 3.0                                                                 |                                                                              | PSI APPLIED: 2.4                                                         |                                          | HOLD TIME: 5 MIN                              |                                     |                                                             |                                     |                                     |
| <input type="checkbox"/> WATER OVER WATER                                          |                                                                              | <input type="checkbox"/> PNEUMATIC OVER WATER                            |                                          | <input checked="" type="checkbox"/> PNEUMATIC |                                     |                                                             |                                     |                                     |
| TEST TYPE APPLIED: PRESSURE TEST (P)                                               |                                                                              |                                                                          |                                          |                                               |                                     |                                                             |                                     |                                     |
| MAWP PRESSURE:                                                                     |                                                                              | PSI APPLIED:                                                             |                                          | HOLD TIME:                                    |                                     |                                                             |                                     |                                     |
| <input type="checkbox"/> WATER OVER WATER                                          |                                                                              | <input type="checkbox"/> PNEUMATIC OVER WATER                            |                                          | <input type="checkbox"/> PNEUMATIC            |                                     |                                                             |                                     |                                     |
| INTERNAL VISUAL INSPECTION (I)                                                     |                                                                              |                                                                          |                                          |                                               |                                     |                                                             |                                     |                                     |
| <input type="checkbox"/> WASHED                                                    |                                                                              | <input type="checkbox"/> PURGED                                          |                                          | <input type="checkbox"/> AIR MONITORED        |                                     | <input type="checkbox"/> CONFINED SPACE                     |                                     |                                     |
| COMMENTS:                                                                          |                                                                              |                                                                          |                                          |                                               |                                     |                                                             |                                     |                                     |
|                                                                                    |                                                                              |                                                                          |                                          |                                               |                                     | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL |                                     |                                     |

COPY

|                                        |                                                                        |
|----------------------------------------|------------------------------------------------------------------------|
| PRESSURE RELIEF DEVICES (PRD)          |                                                                        |
| REINSTALLED <input type="checkbox"/>   | REPAIRED <input type="checkbox"/>                                      |
| REPLACED <input type="checkbox"/>      | ANNUAL <input checked="" type="checkbox"/>                             |
| PRESSURE TEST <input type="checkbox"/> | SET OPEN PSI: 3.63                                                     |
| COMMENTS:                              | SET VAC: 6 OZ                                                          |
|                                        | MIN RESEAT PSI:                                                        |
|                                        | <input checked="" type="checkbox"/> PASS <input type="checkbox"/> FAIL |

|                    |                                                             |
|--------------------|-------------------------------------------------------------|
| THICKNESS TEST (T) |                                                             |
| MANUFACTURED:      | MIN:                                                        |
| COMMENTS:          | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL |

|                    |                                                             |
|--------------------|-------------------------------------------------------------|
| UNION COUPLER (UC) |                                                             |
| COMMENTS:          | <input type="checkbox"/> IN PLACE                           |
|                    | <input type="checkbox"/> REMOVED                            |
|                    | <input type="checkbox"/> PASS <input type="checkbox"/> FAIL |

|                                                        |                                            |                                         |                                                     |
|--------------------------------------------------------|--------------------------------------------|-----------------------------------------|-----------------------------------------------------|
| INSPECTION RESULTS                                     |                                            |                                         |                                                     |
| CARGO TANK PASSES: <input checked="" type="checkbox"/> | CARGO TANK FAILS: <input type="checkbox"/> | SEE REMARKS <input type="checkbox"/>    | MARKING APPLIED <input checked="" type="checkbox"/> |
|                                                        |                                            | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>                         |

TO MEET THE REQUIREMENTS OF THE DOT SPECIFICATION IDENTIFIED ON THIS REPORT. SECTION 180.407

REMARKS (DEFECTS FOUND, LOCATION AND CORRECTIVE ACTION NEEDED):

**REMOVE & REPLACE VAPOR VENT O-RINGS - ALL COMP.'S**  
**REMOVE & REPLACE MOUNTING GASKETS ON VAPOR VENTS - COMP. #1 & #2**

|                                                                                     |          |                       |      |
|-------------------------------------------------------------------------------------|----------|-----------------------|------|
| SIGNATURE OF INSPECTOR                                                              | DATE     | SIGNATURE OF OWNER    | DATE |
|  | 11/18/24 |                       |      |
| PRINTED NAME OF INSPECTOR                                                           | UNIT     | PRINTED NAME OF OWNER |      |
| Marcus Owens                                                                        | 401      |                       |      |

| INTERNAL VAPOR VALVE TEST |                  |            |                 |             |      |                                     |      |
|---------------------------|------------------|------------|-----------------|-------------|------|-------------------------------------|------|
| TEST                      | INITIAL PRESSURE | START TIME | START PRESSURE  | FINISH TIME | GAIN | PASS                                | FAIL |
| 1.                        | 18.0             | 0          | 0               | 5 min.      | 0.2  | <input checked="" type="checkbox"/> |      |
| 2.                        | 18.0             | 0          | 0               | 5 min.      | 0.2  | <input checked="" type="checkbox"/> |      |
| PRESSURE INCHES OF WATER  |                  |            |                 |             |      |                                     |      |
| TEST                      | INITIAL PRESSURE | START TIME | FINISH PRESSURE | FINISH TIME | LOSS | PASS                                | FAIL |
| 1.                        | 18.0             | 0          | 18.0            | 5 min.      | 0.0  | <input checked="" type="checkbox"/> |      |
| 2.                        | 18.0             | 0          | 18.0            | 5 min.      | 0.0  | <input checked="" type="checkbox"/> |      |
| VACUUM INCHES OF WATER    |                  |            |                 |             |      |                                     |      |
| TEST                      | INITIAL PRESSURE | START TIME | FINISH PRESSURE | FINISH TIME | LOSS | PASS                                | FAIL |
| 1.                        | 6.0              | 0          | 6.0             | 5 min.      | 0.2  | <input checked="" type="checkbox"/> |      |
| 2.                        | 6.0              | 0          | 6.0             | 5 min.      | 0.0  | <input checked="" type="checkbox"/> |      |

|                                                  |  |                                                  |  |
|--------------------------------------------------|--|--------------------------------------------------|--|
| UNIT PASSES: <input checked="" type="checkbox"/> |  | UNIT FAILS: <input type="checkbox"/> SEE REMARKS |  |
| REMARKS (IF APPLICABLE):                         |  |                                                  |  |

|                                                                                     |      |                       |                    |      |
|-------------------------------------------------------------------------------------|------|-----------------------|--------------------|------|
| SIGNATURE OF INSPECTOR                                                              |      | DATE                  | SIGNATURE OF OWNER | DATE |
|  |      | 11/18/24              |                    |      |
| PRINTED NAME OF INSPECTOR                                                           | UNIT | PRINTED NAME OF OWNER |                    |      |
| Marcus Owens                                                                        | 401  |                       |                    |      |

**COPY**

TANK 401

Covers

SERIAL NO. TT10912J

COMPARTMENT NO. 1

THEORETICAL INNAGE CALIBRATION  
STANDARD UNITS

Capacity = 1737.6 gal.

| INCH | - 0 - | 1/4 | 1/2 | 3/4 | INCH | - 0 - | 1/4  | 1/2  | 3/4  |
|------|-------|-----|-----|-----|------|-------|------|------|------|
| 0    | -1    | 0   | 0   | 1   | 32   | 877   | 886  | 895  | 903  |
| 1    | 2     | 3   | 4   | 6   | 33   | 912   | 921  | 930  | 938  |
| 2    | 8     | 11  | 14  | 16  | 34   | 947   | 956  | 965  | 973  |
| 3    | 19    | 22  | 25  | 29  | 35   | 982   | 991  | 1000 | 1008 |
| 4    | 32    | 36  | 40  | 45  | 36   | 1017  | 1026 | 1035 | 1043 |
| 5    | 49    | 54  | 58  | 63  | 37   | 1052  | 1061 | 1069 | 1078 |
| 6    | 68    | 73  | 78  | 84  | 38   | 1087  | 1095 | 1104 | 1112 |
| 7    | 89    | 94  | 100 | 106 | 39   | 1121  | 1130 | 1138 | 1147 |
| 8    | 112   | 117 | 123 | 130 | 40   | 1155  | 1164 | 1172 | 1181 |
| 9    | 136   | 142 | 148 | 155 | 41   | 1189  | 1198 | 1206 | 1215 |
| 10   | 161   | 168 | 174 | 181 | 42   | 1223  | 1231 | 1240 | 1248 |
| 11   | 188   | 195 | 202 | 209 | 43   | 1256  | 1265 | 1273 | 1281 |
| 12   | 216   | 223 | 230 | 237 | 44   | 1289  | 1298 | 1306 | 1314 |
| 13   | 244   | 252 | 259 | 266 | 45   | 1322  | 1330 | 1338 | 1346 |
| 14   | 274   | 281 | 289 | 296 | 46   | 1354  | 1362 | 1370 | 1378 |
| 15   | 304   | 312 | 319 | 327 | 47   | 1386  | 1394 | 1402 | 1409 |
| 16   | 335   | 343 | 350 | 358 | 48   | 1417  | 1425 | 1432 | 1440 |
| 17   | 366   | 374 | 382 | 390 | 49   | 1448  | 1455 | 1463 | 1470 |
| 18   | 398   | 406 | 414 | 422 | 50   | 1478  | 1485 | 1492 | 1499 |
| 19   | 431   | 439 | 447 | 455 | 51   | 1507  | 1514 | 1521 | 1528 |
| 20   | 463   | 472 | 480 | 488 | 52   | 1535  | 1542 | 1549 | 1556 |
| 21   | 497   | 505 | 513 | 522 | 53   | 1562  | 1569 | 1576 | 1582 |
| 22   | 530   | 539 | 547 | 556 | 54   | 1589  | 1595 | 1602 | 1608 |
| 23   | 564   | 573 | 581 | 590 | 55   | 1614  | 1620 | 1626 | 1632 |
| 24   | 598   | 607 | 615 | 624 | 56   | 1638  | 1643 | 1649 | 1654 |
| 25   | 633   | 641 | 650 | 658 | 57   | 1660  | 1665 | 1670 | 1675 |
| 26   | 667   | 676 | 684 | 693 | 58   | 1680  | 1684 | 1689 | 1693 |
| 27   | 702   | 711 | 719 | 728 | 59   | 1698  | 1702 | 1706 | 1710 |
| 28   | 737   | 745 | 754 | 763 | 60   | 1713  | 1717 | 1720 | 1723 |
| 29   | 772   | 780 | 789 | 798 | 61   | 1726  | 1729 | 1731 | 1734 |
| 30   | 807   | 815 | 824 | 833 | 62   | 1735  | 1737 | 1738 |      |
| 31   | 842   | 851 | 859 | 868 |      |       |      |      |      |

\* THEORETICAL CALIBRATION IS NOT INTENDED FOR LEGAL MEASUREMENT  
OF PRODUCT VOLUMES!

\* COLLAR OFFSET IS MEASURED FROM THE COMPARTMENT MAJOR DIAMETER

SERIAL NO. TT10912J  
COMPARTMENT NO. 3

THEORETICAL INNAGE CALIBRATION  
STANDARD UNITS

Capacity = 3669.7 gal.

| INCH | - 0 - | 1/4  | 1/2  | 3/4  | INCH | - 0 - | 1/4  | 1/2  | 3/4  |
|------|-------|------|------|------|------|-------|------|------|------|
| 0    | 0     | 0    | 1    | 1    | 34   | 1790  | 1807 | 1825 | 1843 |
| 1    | 2     | 3    | 5    | 6    | 35   | 1861  | 1879 | 1897 | 1914 |
| 2    | 8     | 11   | 13   | 16   | 36   | 1932  | 1950 | 1968 | 1986 |
| 3    | 20    | 24   | 28   | 32   | 37   | 2004  | 2021 | 2039 | 2057 |
| 4    | 37    | 43   | 48   | 55   | 38   | 2075  | 2092 | 2110 | 2128 |
| 5    | 62    | 69   | 77   | 85   | 39   | 2146  | 2163 | 2181 | 2199 |
| 6    | 94    | 103  | 110  | 118  | 40   | 2216  | 2234 | 2252 | 2269 |
| 7    | 126   | 135  | 144  | 153  | 41   | 2287  | 2304 | 2322 | 2339 |
| 8    | 163   | 172  | 183  | 193  | 42   | 2357  | 2374 | 2392 | 2409 |
| 9    | 204   | 214  | 225  | 237  | 43   | 2427  | 2444 | 2461 | 2479 |
| 10   | 248   | 260  | 272  | 284  | 44   | 2496  | 2513 | 2530 | 2548 |
| 11   | 296   | 308  | 321  | 334  | 45   | 2565  | 2582 | 2599 | 2616 |
| 12   | 346   | 360  | 373  | 386  | 46   | 2633  | 2650 | 2667 | 2683 |
| 13   | 400   | 413  | 427  | 441  | 47   | 2700  | 2717 | 2734 | 2750 |
| 14   | 455   | 469  | 483  | 498  | 48   | 2767  | 2783 | 2800 | 2816 |
| 15   | 512   | 527  | 541  | 556  | 49   | 2833  | 2849 | 2865 | 2882 |
| 16   | 571   | 586  | 601  | 617  | 50   | 2898  | 2914 | 2930 | 2946 |
| 17   | 632   | 647  | 663  | 678  | 51   | 2962  | 2978 | 2993 | 3009 |
| 18   | 694   | 710  | 725  | 741  | 52   | 3025  | 3040 | 3056 | 3071 |
| 19   | 757   | 773  | 789  | 805  | 53   | 3086  | 3101 | 3117 | 3132 |
| 20   | 821   | 838  | 854  | 870  | 54   | 3147  | 3161 | 3176 | 3191 |
| 21   | 887   | 903  | 920  | 936  | 55   | 3205  | 3220 | 3234 | 3249 |
| 22   | 953   | 969  | 986  | 1003 | 56   | 3263  | 3277 | 3291 | 3304 |
| 23   | 1020  | 1037 | 1054 | 1071 | 57   | 3318  | 3332 | 3345 | 3358 |
| 24   | 1088  | 1105 | 1122 | 1139 | 58   | 3371  | 3384 | 3397 | 3410 |
| 25   | 1156  | 1173 | 1190 | 1208 | 59   | 3422  | 3434 | 3447 | 3458 |
| 26   | 1225  | 1242 | 1259 | 1277 | 60   | 3470  | 3482 | 3493 | 3504 |
| 27   | 1294  | 1312 | 1329 | 1347 | 61   | 3515  | 3525 | 3536 | 3546 |
| 28   | 1364  | 1382 | 1399 | 1417 | 62   | 3556  | 3565 | 3575 | 3584 |
| 29   | 1434  | 1452 | 1470 | 1487 | 63   | 3593  | 3601 | 3609 | 3617 |
| 30   | 1505  | 1523 | 1540 | 1558 | 64   | 3624  | 3631 | 3638 | 3644 |
| 31   | 1576  | 1594 | 1611 | 1629 | 65   | 3650  | 3656 | 3660 | 3664 |
| 32   | 1647  | 1665 | 1683 | 1700 | 66   | 3668  |      |      |      |
| 33   | 1718  | 1736 | 1754 | 1772 |      |       |      |      |      |

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