



STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
 DIVISION OF MOBILE SOURCE PROGRAMS
 BUREAU OF AIR, M.C. #6
 1021 NORTH GRAND AVE EAST, P.O. BOX 19276
 SPRINGFIELD, IL 62794-9276

| For Agency Use Only | |
|-----------------------|-------|
| Log No. | _____ |
| Certificate No. | _____ |
| Expiration Date | _____ |
| Remarks | _____ |
| Company ID # | _____ |
| Testing Facility ID # | _____ |

GASOLINE TRUCK TANK PRESSURE-VACUUM TEST CERTIFICATE APPLICATION

The completion and return of this form is necessary prior to issuance of a pressure-vacuum test certification sticker (35 Ill. Adm. Code 215.584). Failure to supply the information requested will result in administrative delays in issuance of the sticker. One form is necessary for each truck tank.

The testing firm which performs the pressure-vacuum tests must be recognized by the Illinois Environmental Protection Agency for completing the test in accordance with USEPA 450/2-78-051 (OAQPS 1.2-119), (Method 27). Any questions regarding recognized facilities may be directed to 217/524-0546.

Return this completed application to the address as shown above.

| | | | |
|-----------------|------------------|--------|----------|
| Company Name | Telephone Number | County | |
| Mailing Address | City | State | Zip Code |

| | | |
|---------------------------|----------------------------|--|
| Tanker Unit Number | Manufacturer Serial Number | Make and Year of Manufacture |
| Tank Capacity GALLONS: | Number of Compartments | Vapor Collection System <input type="checkbox"/> ORIGINAL MANUFACTURER <input type="checkbox"/> RETROFITTED |

| | | |
|---------------------------------------|-------|------------------|
| Name of Person Submitting Application | Title | Telephone Number |
|---------------------------------------|-------|------------------|

Method 27 Pressure-Vacuum Test for Gasoline Truck Tank: Connect compartments of the tank internally to each other if possible.

| Pressure Test: Pressure tank to 18 inches of water. Allow manometer to stabilize. | | | | | | |
|---|------|---|---|---|---|---|
| Compartment Number | Time | 1 | 2 | 3 | 4 | 5 |
| Initial Manometer Reading (In inches of water) | AM | / | / | / | / | / |
| Manometer Reading after 5 minutes | PM | / | / | / | / | / |
| 2nd Run Manometer Reading (In inches of water) | AM | / | / | / | / | / |
| Manometer Reading After 5 minutes | PM | / | / | / | / | / |
| Vacuum Test: Evacuate tank to 6 inches of water. Allow manometer to stabilize. | | | | | | |
| Initial Manometer Reading (In inches of water) | AM | / | / | / | / | / |
| Manometer Reading after 5 minutes | PM | / | / | / | / | / |
| 2nd Run Manometer Reading (In inches of water) | AM | / | / | / | / | / |
| Manometer Reading after 5 minutes | PM | / | / | / | / | / |

Tank Does Does Not Meet the Standard for "No more than 3 inches of water drop" (35 Ill. Adm. Code 215.584)

Test Performed per Section 40 CFR 63.425 Unit has Aluminum Hoods Yes () No ()

Vapor Recovery vents were tested. Vapor rail pressure increased by _____ inches.

I certify that the tank unit listed on this application was tested in compliance with the Method 27 test procedure.

| | | | |
|----------------------|------------------|--------|----------|
| Name of Testing Firm | Telephone Number | County | |
| Address | City | State | Zip Code |
| Names of Tester | Signature | Date | |

THIS CERTIFICATION MUST BE SIGNED BY A RESPONSIBLE OFFICIAL FOR BOTH PARTIES. APPLICATIONS WITHOUT A SIGNED CERTIFICATION WILL BE DEEMED AS INCOMPLETE. I CERTIFY UNDER PENALTY OF LAW THAT, BASED ON INFORMATION AND BELIEF FORMED AFTER REASONABLE INQUIRY, THE STATEMENTS AND INFORMATION CONTAINED IN THIS APPLICATION ARE TRUE, ACCURATE AND COMPLETE. ANY PERSON WHO KNOWINGLY MAKES A FALSE, FICTITIOUS, OR FRUADULENT MATERIAL STATEMENT, ORALLY OR IN WRITING, TO THE ILLINOIS EPA COMMITS A CLASS 4 FELONY. A SECOND OR SUBSEQUENT OFFENSE AFTER CONVICTION IS A CLASS 3 FELONY (415 ILCS 5/44(H))