



Vapor Tightness Vapor Form

Barge Owner / Company: Reinauer Transportation Date of Test: 6/7/18

Owner Address: 1983 Richmond Terrace City Staten Island State NY Zip 10302

Barge Name: RTC 145 Official No.: 1220514

Test Type: Air Pressure: 41.5 Testing Location: RTC Yard Staten Island Ny

| Compartment ID | Total Volume of Product Tank bbls (V) | Lowest PVR setting (in. of H ₂ O) [P(l)] | Max Permitted Ldg. rate (bbls/hr) [L] | Type of Air Dry/Inert | Date PRV Pressure obtained | Test Pressure "I" (In. of H ₂ O) | Amount of Drop "D" (In. of H ₂ O) | Pressure Reading after 30 min. (in. of H ₂ O) [P(f)] | Pia= P(i)/27.7 | P=P(i)-P(f) | PM=0.861 * Pia * L/V | If P≤PM, vessels tight |
|----------------|---------------------------------------|---|---------------------------------------|-----------------------|----------------------------|---|--|---|----------------|-------------|----------------------|------------------------|
| <i>Sample</i> | 20,000 | 41.5 | 12,000 | Inert | 8/20/10 | 41.5 | 0.7 | 40.8 | 1.5 | .7 | 0.77 | Tight |
| 1 port | 13000 | 41.5 | 17000 | Dry | 6/7/18 | 41.5 | 0 | 41.5 | 41.5 | 0 | 1.57 | Tight |
| 1 stbd | 13000 | | | | | 41.5 | 0 | 41.5 | 41.5 | 0 | 1.57 | Tight |
| 2 port | 14000 | | | | | 41.5 | 0 | 41.5 | 41.5 | 0 | 1.46 | Tight |
| 2 stbd | 14000 | | | | | 41.5 | 0 | 41.5 | 41.5 | 0 | 1.46 | Tight |
| 3 port | 14000 | | | | | 41.5 | 0 | 41.5 | 41.5 | 0 | 1.46 | Tight |
| 3 stbd | 14000 | | | | | 41.5 | 0 | 41.5 | 41.5 | 0 | 1.46 | Tight |
| 4 port | 14000 | | | | | 41.5 | 0 | 41.5 | 41.5 | 0 | 1.46 | Tight |
| 4 stbd | 14000 | | | | | 41.5 | 0 | 41.5 | 41.5 | 0 | 1.46 | Tight |
| 5 port | 15000 | | | | | 41.5 | 0 | 41.5 | 41.5 | 0 | 1.36 | Tight |
| 5 stbd | 15000 | | | | | 41.5 | 0 | 41.5 | 41.5 | 0 | 1.36 | Tight |
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List any leaks found or repairs made during annual vapor-tightness testing:

I certify that this vessel is vapor tight as required by 40 CFR 63.565 (c) (1) or EPA Method 21.

Name of Tester: Daryl Russell Tester's Signature: Daryl Russell

Tester's Title: _____ Tester's Certification: _____

Witness if any: _____ Witness's Signature: _____