

Test and Inspection Report in Accordance with CSA B620

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Facility Name:	A.R.S. Trucking & Welding Ltd	TEST DATE	MAY 27/11
Address	#10 40 Challenger Crescent Sherwood Park, AB, T8H 2J6	WOT#	24184
Telephone	(780)464-9612	Facility Registration No.	25-077
Tank Owner	DANDY OIL PRODUCTS	Owner Signature	
Address	15630 - 118 AVE EDMONTON		
Telephone	AB 756 104 780 452 1102	Date:	

OWNERS SERIAL No.: 401
 MANUFACTURE Columbia
 MFR DATE 3/2006 MATERIAL 5454 H32
 COMP. CAPACITY 1 14000 IGL 2 5000 IGL
 4 IGL 5 IGL

Cert. Date 03-10
 SERIAL No. 2091EA23861026064
 TANK SPEC TC 400
 3 14000 IGL

TESTS PERFORMED "V" ☒ "I" ☒ "K" ☒ "P" ☒ "UIC" ☐

EXTERNAL VISUAL INSPECTION "V"

Item inspected	QC Manual	Complies	Reject
Data plate, present and legible	12.1.3	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Shell & Heads, corrosion abrasion dents overlay patches leaks etc	12.1.4	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Structural members, outriggers, crossmembers etc	12.1.5	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Piping and valves for leakage, damage, corrosion	12.1.7	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Remote closures, thermal devices	12.1.7	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Hoses for defects, identification and test dates	12.1.8	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Gaskets on full opening rear heads for damage or cuts	12.1.9	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Tank attachments to frame or running gear	12.1.10	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Ladders, walkways etc	12.1.11	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Fill covers, manways and closure devices	12.1.12	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Relief valves and vents (replace or test if tank in service where lading corrosive to relief device)	12.1.13	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Accident damage protection	12.1.14	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Inspector Bruce LeKay

Date MAY 27/11

INTERNAL VISUAL INSPECTION "I"

Item inspected	QC Manual	Complies	Reject
Interior surface, corrosion, distortion overlay patches, cracking etc	12.2.2	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Interior welds for defects, cracking etc	12.2.3	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Internal supports and attachments	12.2.4	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Internal valves, piping and vents for leakage, damage, etc	12.2.4	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Inspector Bruce LeKay

Date MAY 27/11

Note: Rejection Criteria for Visual Inspections

- Any of the following conditions shall cause the tank to be rejected
- Less than minimum material thickness under any cut, dig or gouge
- Any dent with a depth greater than 1/4" where it includes a weld
- Any dent with a depth greater than 10% of the length of the dent
- Any weld defect including a crack, pinhole, or incomplete fusion of the weld
- Any structural defect or any source of leakage
- Any repairs made using overlay patches
- Defective, unidentified or out of test Hose Assemblies

UPPER COUPLER INSPECTION "UIC" (QC Manual Reference 12.1.5 and 12.1.6)

	Complies	Reject
Upper coupler removed from tank and inspected (including tank areas above)	<input type="checkbox"/>	<input type="checkbox"/>
Upper coupler inspected in place	<input type="checkbox"/>	<input type="checkbox"/>
Inspector		
Date		

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LEAKAGE TEST "K" (QC Manual Reference 12.3)

Test Pressure 3 psi (80% of MAWP Min.) Test Medium pneumatic

Item Tested	Pass	Fail	Item Tested	Pass	Fail
Compartment No. 1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Compartment No. 1 piping	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Compartment No. 2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Compartment No. 2 piping	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Compartment No. 3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Compartment No. 3 piping	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Compartment No. 4	<input type="checkbox"/>	<input type="checkbox"/>	Compartment No. 4 piping	<input type="checkbox"/>	<input type="checkbox"/>
Compartment No. 5	<input type="checkbox"/>	<input type="checkbox"/>	Compartment No. 5 piping	<input type="checkbox"/>	<input type="checkbox"/>

Tank Tester Bruce H. Binger

Date May 27/11

PRESSURE TEST "P" (QC Manual Reference 12.4)

Test Pressure (Tank) 3 psi

(Refer to Table 7.3 of CSA B620-2003 for appropriate test pressure)

Test Pressure (Piping) 3 psi (80% Tank Test) Test Medium pneumatic

Item Tested	Pass	Fail	Item Tested	Pass	Fail
Compartment No. 1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Compartment No. 1 piping	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Compartment No. 2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Compartment No. 2 piping	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Compartment No. 3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Compartment No. 3 piping	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Compartment No. 4	<input type="checkbox"/>	<input type="checkbox"/>	Compartment No. 4 piping	<input type="checkbox"/>	<input type="checkbox"/>
Compartment No. 5	<input type="checkbox"/>	<input type="checkbox"/>	Compartment No. 5 piping	<input type="checkbox"/>	<input type="checkbox"/>

Tank Tester Bruce Mucke

Date May 27/11

Description of defects found and methods used to repair

Tank successfully retested after weld repair YES ☐ NO ☐ N/A ☐

Written repair weld inspection report attached YES ☐ NO ☐ N/A ☐

TANK DISPOSITION Removed from Service ☐

Safety Mark (Specification Indication) removed YES ☒ NO ☐

Returned to Service ☒

Tank markings applied (QC Manual Reference Section 15) YES ☒ NO ☐