

Test and Inspection Report in Accordance with CSA B620

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Facility Name:	Dandy Oil Products Ltd		
Address	15 Challenger Crescent Sherwood Park AB T8H 2J6		
Telephone	(780) 452-1104	Facility Registration No.	25.0960
Tank Owner	937083 Alberta Ltd		
Address	15630 118 Ave Edmonton Alberta T5V 1C4		
Telephone	(780) 452-1102		

OWNERS SERIAL No.: 401
 MANUFACTURE Columbia
 MFR DATE March/2006 MATERIAL 5454 H32
 Original Certification Date: March/2010
 SERIAL No. 2C9LEA25861026064
 TANK SPEC TC 406
 COMP. CAPACITY 1 14,000 IG/L 2 5,000 IG/L 3 14,000 IG/L
 4 IG/L 5 IG/L

TESTS PERFORMED "V" ☒ "K" ☒ "U/C" ☐

EXTERNAL VISUAL INSPECTION "V"

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

Inspector Jesse Underwood

Signature _____

Date May-1-2012

UPPER COUPLER INSPECTION "U/C"

(QC Manual Reference 12.1.5 and 12.1.6)

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

Inspector _____

Signature _____

Date _____

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LEAKAGE TEST "K" (QC Manual Reference 12.3)

Test Pressure 3 PSI (80% of MAWP Min.) Test Medium Air

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

Description of defects found and methods used to repair

Replaced leaking/suspecting vic clamps on #1,2,3
piping at API valves

Tank Tester Jesse Underwood Signature _____ Date May-1-2012

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 ☐