

CHEVRON PRODUCTS COMPANY

CTIP - Exhibit C
Tank Truck & Tank Trailer Inspection Form

(A) General Information:

Vehicle Owner / Operator:

Company Name: _____ Telephone: _____
Mailing Address: _____

Unit / Equipment #: _____ Tank Manufacturer: _____
License # (or VIN): _____ Year Manuf.: _____

9 Owner's self inspection form (Exhibit C) on vehicle? (Y/N) _____ Dated when? _____ (must be within last 365 days)
Vapor Cert. current? (Y/N) _____ (must be within last 365 days) Tank Calibration Charts available? (Y/N) _____

Tank Vehicle Type: Semi-Trailer _____ Tank Truck _____ Full/Pull Trailer _____

8 Nameplate shows MC/DOT Spec. #: _____

Compartments: _____ Double Bulkheads between Comp. #s: _____

5 If any double bulkheads, None of the spaces between any compartments plugged? (Y/N) _____
Brand/Model 'On-board' Controller: _____

(B) Bottom Inspections:

	Comp. 1	Comp. 2	Comp. 3	Comp. 4	Comp. 5	Comp. 6
2a Product Adaptor - Brake Interlock Tested Okay? (Y/N)						
2b Vapor Adaptor - Brake Interlock Tested Okay? (Y/N)						

Overfill Socket(s): #Sockets: _____ Type Sockets (circle): Blue / Green / Red / Other

1c No Excessive Wear on Sockets used at Chevron? (Y/N) _____
7 Remote Emergency (valve control) Switch function okay? (Y/N) _____

(C) Top Inspections:

	Comp. 1	Comp. 2	Comp. 3	Comp. 4	Comp. 5	Comp. 6
Probe Mounted In <u>D</u> ome or <u>T</u> ank?:						
Probe Manufacturer (Brand / Tip Color):	/	/	/	/	/	/
1a Probe Passed 'Wet' Test? (Y/N)						

[I] Record measured 'Gross' probe installed Length (Inches)						
[II] If <u>D</u> ome, record Vertical 'Offset' (Inches); except Beall charts						
[III] Record probe lip sensing length (Inches)						
[IV] Actual 'Net' probe installed Length (Inches) [IV = I - II - III]						
[V] Calculated from Charts, Min. probe Length (Inches)						
1b Actual 'Net' probe Equal/Exceed Calc. Min. probe length? (Y/N)						
[VI] If Yes, leave Blank, if No, Additional probe length needed (Inches)						

Max. compartment capacity ("GSF") (top gallon on chart)						
Min. probe depth capacity [GSF gallons minus 60 gallons]						
Actual 'Net' probe capacity (gallons at Actual probe depth)						
1a5 Load Capacity ("Safe Fill") gallons [Enter into TAS]						
[VII] From Charts, Actual 'Net' total height (Inches)						
[VIII] From Charts, "Safe Fill" total height (Inches)						
[IX] Actual 'Net' Exceeds "Safe Fill" by 1/2 Inch [VII > VIII + 0.5]? (Y/N)						

4 Marker Rod? (Y/N) // If Yes, Bonded with cable? (Y/N)	//	//	//	//	//	//
4 Bonding Cable (if no Marker Rod)? (Y/N)						
3 Equipped with Spray Deflector? (Y/N/U)						
6 Inside of tank compartment Free of Loose Objects? (Y/N)						

(D) Domes properly closed after inspection process? (Y/N) _____

(E) Domes double checked after inspection to verify proper closure? (Y/N) _____

(Printed Name) (Signature)

(F) Inspection Company:

Company Name: _____ Telephone: _____
Mailing Address: _____
Performed by: _____ Date: _____
(Printed Name) (Signature)

Note: Rod numbers above correlate specific items with the CTIP Deficiency Report.