CARGO TANK VAPOR RECOVERY CERTIFICATION

The Air Resources Board is responsible for the gasoline cargo tank vapor recovery certification program. Health and Safety Code Section 41962 (g) provides that no person shall operate, or allow the operation of, a tank vehicle transporting gasoline and required to have a vapor recovery system, unless the system has been certified by the state board and is installed and maintained in compliance with the state board's requirements for certification. Air Pollution Control District rules will require a vapor recovery system on a gasoline cargo tank and accordingly the system must be certified.

At the present time, pursuant to Health and Safety Code Section 41962 (e), the California Highway Patrol (CHP) administers the annual certification program for cargo tanks used on the highway and subject to their regulations. However, those cargo tanks not used on the highway or not subject to CHP regulations and are required to have vapor recovery systems by district rule, such as aircraft refuelers, military cargo tanks, etc., must be certified by the Air Resources Board.

Therefore, if your Air Pollution Control District rules require a vapor recovery system on your cargo tank and the cargo tank is not specifically exempt, application for vapor recovery certification for these type of cargo tanks is made to the Air Resources Board, Compliance Division. The testing and certification process is conducted according to the Air Resources Board's "Certification and Test Procedures for Vapor Recovery Systems of Gasoline Delivery Tanks." Enclosed is a copy of the Cargo Tank Vapor Recovery Certification Application Form for your use if needed.

To determine if your cargo tank requires a vapor recovery system and needs to be certified, you should contact your local Air Pollution Control District. A list of telephone numbers for the districts which have vapor recovery requirements for cargo tanks such as this type is enclosed. If you have any questions regarding this Advisory, please contact Robert Fricker at (916) 327-1524 or Bob Leonard at (916) 322-6034.

Enclosures

James J. Morgester, Chief
Compliance Division
California Air Resources Board
Post Office Box 2815
Sacramento, CA 95812
## District Phone Numbers

### Multi-County Districts
- Bay Area (415) 771-6000
- Feather River (916) 634-7659
- Great Basin (619) 872-8211
- Monterey Bay (408) 647-9411
- North Coast (707) 443-3093
- Northern Sierra (916) 265-1398
- South Coast (909) 396-2000
- Yolo-Solano (916) 757-3650
- San Joaquin Val (209) 497-1000

### County APC Districts
- Amador (209) 223-6406
- Butte (916) 891-2882
- Calaveras (209) 754-6399
- Colusa (916) 458-5891
- El Dorado (916) 621-6662
- Glenn (916) 934-6500
- Imperial (619) 339-4606
- Kern (805) 861-2593
- Lake (707) 263-7000
- Lassen (916) 257-8311 x110
- Mariposa (209) 966-0200
- Mendocino (707) 463-4354
- Modoc (916) 233-6401
- No.Sonoma (707) 433-5911
- Placer (916) 889-7130
- Sacramento (916) 386-6650
- San Bernardino (619) 243-8920
- San Diego (619) 694-3307
- San Luis Obispo (805) 781-5912
- Santa Barbara (805) 961-8800
- Shasta (916) 225-5674
- Siskiyou (916) 842-8029
- Tehama (916) 527-3717
- Tuolumne (209) 533-5693
- Ventura (805) 645-1400

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* Districts which have vapor recovery requirements for cargo tanks used off highway

February 18, 1993
CARGO TANK VAPOR RECOVERY
CERTIFICATION APPLICATION FORM

Company Name __________________________ Tel. No. ( ) ____________

Name of Owner/Operator ________________________________________

Mailing Address
(No./Street or P.O.Box) __________ (City) __________ (Zip)

Cargo Tank Information
Cargo Tank Unit or Serial Number CT __ ______ Equipment No. ________ Serial Number ________

Manufacturer __________________________ Capacity of Tank __________________________
Number of Compartments __________________________

Vehicle Type: Truck ______ Trailer ______ License or VIN Number ____________

Air pollution control district where cargo tank operated __________________________

I hereby certify under penalty of perjury to the accuracy of the above information
Owner/Operator Signature __________________________

Tester Information
Date of Test ________________ Tel. No. ( ) ____________

Company Name __________________________

Address (No. and Street) __________________________ (City) __________ (Zip)

Test Information:
Pressure Change ________ Vacuum Change ________

Internal Vapor Valve Test ________

I hereby certify under penalty of perjury, that the tank described above has been tested in accordance with the certification and test procedures set forth by the California Air Resources Board, and to the accuracy of the results.

Test Conducted By __________________________
(Please Print Name)

Signature of person conducting test __________________________

PLEASE RETURN THIS COMPLETED FORM WITH FEES OF $65.00 TO THE ADDRESS ABOVE

*Complete Reverse Side of Form*
PLEASE NOTE, applicants requesting cargo tank vapor recovery certification shall advise the Air Resources Board by calling one of the telephone numbers listed on the application form and give notification of the date, time and location of the testing at least two working days prior to the testing. This condition is required in order that the testing may be witnessed by the discretion of the Air Resources Board.

Date of Call:__________________________

Time of call:__________________________

Number called:________________________