Evaluation Period of Internal Vapor Valves
Extended until 6-30-2004

As you may be aware, the Air Resources Board (ARB) Enforcement Division enforces all requirements of the Cargo Tank Vapor Recovery Certification and Test Procedures. One of the requirements contained in the Certification and Test Procedures is that after the annual certification test, the cargo tank shall be maintained in compliance with the year round leak rate requirements.

The ARB needs to control the gasoline vapor emissions emitted to the atmosphere from cargo tanks because it contributes to photochemical smog and adverse health effects.

Industry has advised the ARB that some of the vapor recovery components, such as internal vapor valves, used on cargo tanks are defective and are causing the cargo tank to leak more than the allowable limit. Enforcement Division staff will be conducting inspections throughout the state to determine the magnitude of the situation.

Therefore, if your cargo tank is issued a Notice of Violation, and the violation is solely due to a defective internal vapor valve, the ARB is willing to waive penalty for the violation if a detailed description of failure and the defective internal vapor valve is returned to the ARB for our evaluation. The waiving of the penalty is at the discretion of the ARB and will expire on 6-30-2004.

If you wish to participate in this program you must notify the ARB of the location, date, and time when the cargo tank will be repaired. An ARB representative will then witness the defective vapor valve being reworked and then take possession of it for our evaluation.

Please complete the reverse of this Advisory and submit it to the Air Resources Board with the defective internal vapor valve. If you wish to participate or you have any questions regarding this advisory, please contact my staff at 916-322-3951.

James R. Ryden, Chief
Enforcement Division
California Air Resources Board
P.O. Box 2815
Sacramento, CA 95812
NOTIFICATION OF DEFECTIVE INTERNAL VAPOR VALVE

CARGO TANK OWNER/OPERATOR INFORMATION

Owner /Operator Name: ___________________________ Phone: ( ) ______________________

Company Name: ________________________________________________________________

Mailing Address:________________________________________________________________

City State Zip Code

Notice of Violation / / Date Removed From Service / / ______

Mo  Day  Year  Mo  Day  Year

I hereby certify under penalty of perjury that all the information submitted herein is true and correct.

Printed Name Signature Title Date

Detailed explanation of defective internal vapor valve failure: ____________________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

TESTING INFORMATION

Test Company Name: ___________________________ Phone: ( ) ______________________

Mailing Address:________________________________________________________________

City State Zip Code

ANNUAL TEST Pressure Change_______ Vacuum Change_______Internal Vapor Valve_______

I hereby certify under penalty of perjury that all Testing Information submitted herein is true and correct and that the tank described above has been tested in accordance with the procedures set forth by the California Air Resources Board and to the accuracy of the tests.

Date of Test Test Conducted By ________________________

Printed Name Signature