



Stage I - System Testing

☐ Unwitnessed ☐ Partially Witnessed ☒ Witnessed State Inspector: Steve Scotton
☒ Complete Test ☐ Retest (Complete) ☐ Retest (Partial) State ID: 0110819 / 199708016

Facility Information		Testing Firm Information	
Name: <u>Vernondale Store</u>		Company Name: <u>Gaftek</u>	
Address: <u>1526 Route 114</u>		Tester Name: <u>Matt Beauregard</u>	
City/State: <u>North Sutton, NH</u>		City/State: <u>Epsom NH</u>	
Zip: <u>03260</u>	Tel.: <u>603-927-4256</u>	Zip: <u>03234</u>	Tel.: <u>603-736-5898</u>

Stage I Equipment					
Type:	<input type="checkbox"/> Coax	<input type="checkbox"/> Two Point	<input checked="" type="checkbox"/> Manifold	<input type="checkbox"/>	Number of P/V caps: <u>1</u>
P/V Cap Test:	1	2	3	4	5
P	4.04				
V	7.11				

☐ 2" Vapor Recovery Piping
☒ 3" Vapor Recovery Piping

Test Results and Comments				
Tank #:	1	2	3	4
1 Product Grade	RNL			
2 Actual Tank Capacity (Gallons)	12K			
3 Gallons Present	3,000			
4 Ullage (Gallons)	9,000			
5 Initial Pressure (inches H ₂ O)	10.00			
6 Start Time	10:20			
7 Pressure after 1 minute				
8 Pressure after 2 minutes				
9 Pressure after 3 minutes				
10 Pressure after 4 minutes				
11 Final Pressure after 5 minutes	9.89			
12 Allowable Final Pressure	9.56			

☒ Passed Test ☐ Failed Test - Reason(s): _____

Technician Name: Matt Beauregard Date: 7.14.17