

**APPLICATION FOR RENEWAL OF APPROVAL FOR PRESSURE RELIEF  
DEVICES, VALVES, CLOSURES, AND FITTINGS**

1. AAR APPROVAL No. E202133  
 2. Date of Application \_\_\_\_\_  
 3. Previous AAR Approval \_\_\_\_\_  
 4. Applicant: \_\_\_\_\_  
 5. Address: \_\_\_\_\_  
 6. Drawing No. \_\_\_\_\_ 7. Latest rev. \_\_\_\_\_ 8. Date of latest rev. \_\_\_\_\_  
 9. Description of device: \_\_\_\_\_ 10. Device ID No. \_\_\_\_\_

**CERTIFICATION:** The subject device is **unchanged** from the previous approval, and conforms with the latest revision of AAR Specifications for Tank Cars, Appendix A. The device conforms with drawing listed above.

11. By:  Title: \_\_\_\_\_

If device is **changed** since latest approval, fill in the following blanks

12. Reference Previous Drawing	New Drawing	If on Service Trial
No. _____ Rev. _____ Date _____	No. _____ Rev. _____ Date _____	S.T. No. _____
No. _____ Rev. _____ Date _____	No. _____ Rev. _____ Date _____	S.T. No. _____
No. _____ Rev. _____ Date _____	No. _____ Rev. _____ Date _____	S.T. No. _____

13. New drawing supersedes previous one  or does not obsolete it

CHANGES

REASONS FOR CHANGES

14. a. \_\_\_\_\_ a. \_\_\_\_\_  
 b. \_\_\_\_\_ b. \_\_\_\_\_  
 c. \_\_\_\_\_ c. \_\_\_\_\_  
 d. \_\_\_\_\_ d. \_\_\_\_\_

(if needed use supplemental sheet)

15. Normal operational effect of changes of device: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

16. Drawing submitted with this application: \_\_\_\_\_

**CERTIFICATION:** The above data is correct and conforms with AAR Specifications for Tank Cars, Appendix A. The device conforms with drawing listed above.

17. By: \_\_\_\_\_ Title: \_\_\_\_\_

APPROVAL AAR Tank Car Committee:



Date Approved: 7/27/2020

(Signature) on behalf of Committee