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

			 AAR APPROVAL No. E202131 Date of Application					
4.	Applicant:							
5.	Address:							
6.	Drawing No.	7. La	8. D	8. Date of latest rev.				
9.	Description of device:				10. Device ID No			
CE	RTIFICATIO	latest re	evision of AA awing listed a	R Specificatio bove.	ns for Tank C	ars, Appendiz	l, and conforms with x A. The device confor	
11.	By:		Fj=te-f=-	Bali evica	Title:			
		If devic	ce is changed	since latest ap	proval, fill in t	the following	blanks	
12.	Reference Pre	vious Dra	wing	New Dra	wing		If on Service Trial	
						Date	S.T. No	
	No.	Rev.	Date	No.	Rev.	Date	S.T. No.	
	No.	Rev.	Date	No.	Rev.	Date	S.T. No.	
14.								
					d			
	(if nee	ded use su	pplemental sh	neet)				
15.	Normal opera	tional effe	ct of changes	of device:				
16.	Drawing subr	nitted with	this applicati	on:				
		NT TTI	e above data i	s correct and c	conforms with		cations for Tank Cars,	
CE	RTIFICATIO			e device confo	orms with drav	ving listed ab	ove.	
	RTIFICATIO	Ap	pendix A. Th			-		
17.		Ap	pendix A. Th					
17. AP	By: PROVAL AAR	Ap	pendix A. Th				Dorsey	
17. AP	Ву:	Ap	pendix A. Th			Kinnet I		

Form AAR 4-7 8/1/2014