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

			AAR APPRO			
		2. Date of Application				
4. Applicant:						
Address:						
6. Drawing No	7. La	8. Date of latest rev.				
9. Description of	Description of device:			10. Device ID No.		
CEDTIEICATIO	No The outliest desire		4h •	1	and souf-	
CERTIFICATIO	N: The subject device is latest revision of AA with drawing listed a	R Specification			A. The device confo	
11 D		Roli evic	TO: 1			
11. By:	<i>/</i> / <i></i> / <i></i> / <i></i>	, , , , ,	Title:			
	If device is changed	since latest ap	proval, fill in t	he following	blanks	
12. Reference Pre	evious Drawing	New Dra	nwing		If on Service Tria	
No.	Rev. Date	No.	Rev.	Date	S.T. No.	
No.	Rev. Date Rev. Date	No.	Rev.	Date	S.T. No.	
No.	Rev. Date	No.	Rev.	Date	S.T. No.	
	eded use supplemental sh					
15. Normal opera	ational effect of changes	of device:				
16. Drawing subi	nitted with this applicati	on:				
CERTIFICATIO	N: The above data is Appendix A. Th				cations for Tank Cars, ove.	
17. By:			Title:			
APPROVAL AAF	R Tank Car Committee:			of My	A D	
Approved: 7/29/20	20			Kennel !	Desey	
			(Sig	nature) on b	ehalf of Committee	