

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

1. AAR APPROVAL No. E202132
 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