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

		2. Date of Application				
4 4 1:						
4. Applicant:						
5. Address:						
6. Drawing N	07.	Latest rev	8. D	ate of latest re	ev	
9. Description	of device:		10. Device ID No			
CEDTIFICAT	ION. The soliter desire	:	C 41			
CERTIFICAT	ION: The subject device				A. The device confo	
	with drawing listed		ons for Tank C	ars, Appendiz	A. The device come	
	with drawing fisted	above.				
11. By:			Title:			
	If device is change	d since latest ap	pproval, fill in t	he following	blanks	
12. Reference	Previous Drawing	New Dra	awing		If on Service Tria	
No.	Rev. Date	No.	Rev	Date	S.T. No	
No.		No	Rev	Date	S.T. No.	
No.	Rev Date	No	Rev	Date	S.T. No.	
	CHANGES			REASONS FOR CHANGES		
14. a.			9			
	needed use supplemental		_ u			
(11	necessary and supplemental					
15. Normal op	perational effect of change	es of device:				
16. Drawing s	ubmitted with this applica	ation:				
ODDINE A	TON. The state of the			A A D. C 'C'	odiono for Total O	
CERTIFICAT		The device conf		_	cations for Tank Cars, ove.	
17. By:	Policie		Title:			
APPROVAL A	AR Tank Car Committee	:		04.00		
				Kenne Al	Dersey	
Approved: 6/2	5/2021) while		
7 1pp10 vcu			(Sis	enature) on h	ehalf of Committee	