NOTICE OF DOCUMENT QUALITY

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

THE QUALITY OF THE FOLLOWING ORIGINAL PAPER DOCUMENT(S) WAS SUCH THAT ALL OR PORTIONS OF THE SCANNED IMAGE

MAY BE DIFFICULT TO READ OR ILLEGIBLE.

Some reasons for poor quality:

There are multiple densities per page, different types of ink, faded document, and some documents are different colors. Many of the photographs, charts, graphs, maps are of poor quality.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

28585 JS
2014.06.09/test results

Vapor Recovery Test Result Cover Sheet

(NOTICE: Submit Test Results to the appropriate TECQ regional office, and local program with jurisdiction, within 10 working days of test completion.)

Test of the Vapor Recovery System were conducted at the following location:

Facility Name: TIMEWISE #856 Facility ID Number: 28585

Facility Address: 3818 RED BLUFF

Facility City: PASADENA State: Zip Code: 77503

Facility Phone: 713-477-0020

Owner Name: LANDMARK INDUSTRIES Phone Number:

Vapor Recovery System installed:

System	UST or AST	Type of System[1]	Executive Order or Certification	Test Purpose[2]
Stage I			N/A	N/A
Stage II	UST	Gilbarco Vapor Vac	G-70-150-AE	CA

[1] Coaxial or Two-Point for Stage I, Balanc or Assist for Stage II.
[2] Test purposes are: CI= Initial Compliance, CA= Annual Compliance, CM= After Major Modification, or 3Y=3year.

The following Test were conducted at this facility:

Test Procedure Number	Name	Date Tested	Tester Name	Pass or Fail
TXP-101.1	Vapor Space Manifold			
TXP-102.1	Pressure Decay	06/09/14	Miguel Perez	Pass
TXP-103.1	Dynamic Backpressure			
TXP-104.1	Flow Rate	06/09/14	Miguel Perez	Pass
TXP-105.1	Liquid Removal Device			
TXP-106.1	V/L Ratio			
TP 201.5	CARB A/L Ratio	06/09/14	Miguel Perez	Pass
TP - 201.1E PV VALVE TEST				

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The tester arrived on-site at 11 : 00 (**AM** or PM **Highlight one**) and departed at 2 : 00 (AM or **PM Highlight one**).

There are a total of 4 pages containing test results attached to this test results cover sheet.

I certify that the above test, the results of which are attached to this notification, were conducted in accordance with the test procedures as outlined in the Vapor recovery Test Procedure Handbook, and the results submitted here are true and correct to the best of my knowledge.

Signature of Test Contractor Responsible Party: Date: June 11, 2014

Test Company Name: Training and Services Corp Phone Number: 281-934-3839

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Form 102-1:
Pressure Decay Test Data

Date of Test: 06/09/14

Facility Name: TIMEWISE #856 Facility ID Number: 28585

Test Company Name: Training and Services Corp

Type of Stage II System Installed: Gilbarco Vapor Vac Exec. Order: G-70-150-AE

Describe Manifolding of system (if any): Vents are manifolded below ground and is a multi-point stage I

Date and Time of last Bulk Delivery/Removal: 6 / 9 / 14 @ 8 : 00 AM

Time of last vehicle refueling prior to test: 11 : 00 Time Test Begun: 11 : 30

	Parameter (Indicate manifold status by circling tank numbers→)	Tank Number 1	2	3	4	Total
1	Product Grade	Unleaded	Super			---
2	Type of storage Tank (AST or UST)	UST	UST	UST	UST	BAL
3	Actual Tank Capacity, Gallons	11594	11594			23188
4	Gasoline Volume, Gallons	9034	6577			15611
5	Ullage, Gallons (item 3-item 4)	2560	5017			7577
6	Number of nozzles w/vapor return tied to tank					10
7	P/V Manufactures rated Cracking Pressure					2.5-6
8	P/V Pressure when Cracking Began					3.51
9	Time Required to Pressurize system, seconds					68
10	Nitrogen Flowrate **Highlight one**: SCFM or **SCFH**					300
11	Initial Test Pressure (Inches WC)					2.0
12	Pressure after 1 minute, (Inches WC)					1.98
13	Pressure after 2 minutes, (Inches WC)					1.96
14	Pressure after 3 minutes, (Inches WC)					1.95
15	Pressure after 4 minutes, (Inches WC)					1.93
16	Final Pressure after 5 minutes, (Inches WC)					1.94
17	Allowable Final Pressure (from Table or Equation)					1.87
18	Healy Systems (nozzle to Multi/Mini-Jet): Pass/Fail	ΔV=____	Piping Length=____ft		AΔV=___	
19	Test Status: Pass or Fail					Pass

Comments:

Form 104-1:
Gasoline Flow Rate Performance Data

Date of Test:: 06/09/14

Facility Name: TIMEWISE #856 Facility ID Number: 28585

Nozzle Number	Gas Grade	Measured Values		Calculated	Pass or Fail
		Gallons Dispensed [3]	Seconds Elapsed (S)	Flowrate	
7	Unleaded	5	35.18	8.53	Pass
7	Super	5	34.89	8.6	Pass

1 Calculate as per equation in § 11 above, or use the values in Table 1.
2 Pass or Fail dependent on values calculated compared with values given in the Executive Order.
3 Gallons recorded should not include the one gallon dispensed prior to beginning the stopwatch.

Stage II Vapor Recovery Test Procedure:

A/L Data Reporting

Figure 3

Date of Test: 06/09/14

Facility Name: TIMEWISE #856

TNRCC PST Division Facility ID Number: 28585

Test Contractor Name: Training and Services Corp

Vapor Recovery Tester Registration #:

Dispenser Number	Nozzles Number	Nozzle Model and Serial #	Product Grade	Gallons Dispensed	Time in Seconds	Dispensing Rate gpm	Ending RM Value	Initial RM Value	Meter Vapor acf	A/L	Pass/Fail
1/2	1	Healy 708 4411-0026	U	4.76	32.67	8.74	81.60	81.00	0.6	0.94	Pass
	1	Healy 708 4411-0026	S	4.75	32.29	8.83	82.20	81.60	0.6	0.94	Pass
	2	Healy 708 1412-0014	U	4.76	33.57	8.51	82.80	82.20	0.6	0.94	Pass
	2	Healy 708 1412-0014	S	4.76	34.22	8.35	83.44	82.80	0.64	1.01	Pass
3/4	3	Healy 708 1412-0037	U	4.74	35.54	8	84.14	83.50	0.64	1.01	Pass
	3	Healy 708 1412-0037	S	4.75	33.28	8.56	84.80	84.20	0.6	0.94	Pass
	4	Healy 708 2512-0031	U	4.76	35.16	8.12	85.44	84.80	0.64	1.01	Pass
	4	Healy 708 2512-0031	S	4.75	33.04	8.63	86.12	85.50	0.62	0.98	Pass
5/6	5	Healy 708 3212-0093	U	4.76	34.61	8.25	86.80	86.20	0.6	0.94	Pass
	5	Healy 708 3212-0093	S	4.75	33.74	8.45	87.44	86.80	0.64	1.01	Pass
	6	Healy 708 1012-0007	U	4.76	34.78	8.21	92.46	91.80	0.66	1.04	Pass
	6	Healy 708 1012-0007	S	4.75	32.65	8.73	93.14	92.50	0.64	1.01	Pass
7/8	7	Healy 708 1012-0031	U	4.76	36.41	7.84	93.80	93.20	0.6	0.94	Pass
	7	Healy 708 1012-0031	S	4.75	34.37	8.29	94.40	93.80	0.6	0.94	Pass
	8	Healy 708 1012-0034	U	4.75	38.45	7.41	94.98	94.40	0.58	0.91	Pass
	8	Healy 708 1012-0034	S	4.76	33.31	8.57	95.66	95.00	0.66	1.04	Pass
9/10	9	Healy 708 3012-0100	U	4.75	34.33	8.3	96.36	95.70	0.66	1.04	Pass
	9	Healy 708 3012-0100	S	4.75	32.46	8.78	97.06	96.40	0.66	1.04	Pass
	10	Healy 708 1412-0092	U	4.76	33.10	8.63	97.70	97.10	0.6	0.94	Pass
	10	Healy 708 1412-0092	S	4.75	34.82	8.18	98.30	97.70	0.6	0.94	Pass

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

PST ST2/ 28585 /S

6-11-2013 Test Results

Vapor Recovery Test Result Cover Sheet

(NOTICE: Submit Test Results to the appropriate TECQ regional office, and local program with jurisdiction, within 10 working days of test completion.)

Test of the Vapor Recovery System were conducted at the following location:

Facility Name: TIMEWISE #856 Facility ID Number: 28585

Facility Address: 3818 RED BLUFF

Facility City: PASADENA State: Zip Code: 77503

Facility Phone: 713-477-0020

Owner Name: LANDMARK INDUSTRIES Phone Number:

Vapor Recovery System installed:

System	UST or AST	Type of System[1]	Executive Order or Certification	Test Purpose[2]
Stage I			N/A	N/A
Stage II	UST	Gilbarco Vapor Vac	G-70-150-AE	CA

[1] Coaxial or Two-Point for Stage I, Balance or Assist for Stage II.
[2] Test purposes are: CI= Initial Compliance, CA= Annual Compliance, CM= After Major Modification, or 3Y=3year.

The following Test were conducted at this facility:

Test Procedure Number	Test Procedure Name	Date Tested	Tester Name	Pass or Fail
TXP-101.1	Vapor Space Manifold			
TXP-102.1	Pressure Decay	06/11/13	Miguel Torres Perez	Pass
TXP-103.1	Dynamic Backpressure			
TXP-104.1	Flow Rate	06/11/13	Miguel Torres Perez	Pass
TXP-105.1	Liquid Removal Device			
TXP-106.1	V/L Ratio			
TP 201.5	CARB A/L Ratio	06/11/13	Miguel Torres Perez	Pass
TXP-107.1	Healy Booted Nozzle			

The tester arrived on-site at 8 : 40 (**AM** or PM **Highlight one**) and departed at 12 : 00 (AM or **PM Highlight one**).

There are a total of 4 pages containing test results attached to this test results cover sheet.

I certify that the above test, the results of which are attached to this notification, were conducted in accordance with the test procedures as outlined in the Vapor recovery Test Procedure Handbook, and the results submitted here are true and correct to the best of my knowledge.

Signature of Test Contractor Responsible Party: Date: June 17, 2013

Test Company Name: Training and Services Corp Phone Number: 281-934-3839

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REGION 12

Form 102-1:
Pressure Decay Test Data

Date of Test: 06/11/13

Facility Name: TIMEWISE #856 Facility ID Number: 28585

Test Company Name: Training and Services Corp

Type of Stage II System Installed: Gilbarco Vapor Vac Exec. Order: G-70-150-AE

Describe Manifolding of system (if any): Vents are manifolded below ground and is a multi-point stage I

Date and Time of last Bulk Delivery/Removal: 6 / 10 / 13 @ 4 : 45 PM

Time of last vehicle refueling prior to test: 9 : 00 Time Test Begun: 9 : 30

	Parameter (Indicate manifold status by circling tank numbers→)	Tank Number 1	2	3	4	Total
1	Product Grade	Unleaded	Super			---
2	Type of storage Tank (AST or UST)	UST	UST	UST	UST	BAL
3	Actual Tank Capacity, Gallons	11594	11594			23188
4	Gasoline Volume, Gallons	8030	8182			16212
5	Ullage, Gallons (item 3-item 4)	3564	3412			6976
6	Number of nozzles w/vapor return tied to tank					10
7	P/V Manufactures rated Cracking Pressure					2.5-6
8	P/V Pressure when Cracking Began					3.22
9	Time Required to Pressurize system, seconds					54
10	Nitrogen Flowrate **Highlight one**: SCFM or **SCFH**					300
11	Initial Test Pressure (Inches WC)					2.0
12	Pressure after 1 minute, (Inches WC)					1.99
13	Pressure after 2 minutes, (Inches WC)					2.00
14	Pressure after 3 minutes, (Inches WC)					1.99
15	Pressure after 4 minutes, (Inches WC)					1.98
16	Final Pressure after 5 minutes, (Inches WC)					1.97
17	Allowable Final Pressure (from Table or Equation)					1.85
18	Healy Systems (nozzle to Multi/Mini-Jet): Pass/Fail	△V=____	Piping Length=_____ft		A△V=___	
19	Test Status: Pass or Fail					Pass

Comments:

Form 104-1:
Gasoline Flow Rate Performance Data

Date of Test:: 06/11/13

Facility Name: TIMEWISE #856

Facility ID Number: 28585

Nozzle Number	Gas Grade	Measured Values		Calculated	Pass or Fail
		Gallons Dispensed [3]	Seconds Elapsed (S)	Flowrate	
7	Unleaded	5	36.12	8.31	Pass
7	Super	5	35.89	8.36	Pass

1 Calculate as per equation in § 11 above, or use the values in Table 1.
2 Pass or Fail dependent on values calculated compared with values given in the Executive Order.
3 Gallons recorded should not include the one gallon dispensed prior to beginning the stopwatch.

Stage II Vapor Recovery Test Procedure:

A/L Data Reporting

Figure 3

Date of Test: 06/11/13

Facility Name: TIMEWISE #856

TNRCC PST Division Facility ID Number: 28585

Test Contractor Name: Training and Services Corp

Vapor Recovery Tester Registration #:

Dispenser Number	Nozzles Number	Nozzle Model and Serial #	Product Grade	Gallons Dispensed	Time in Seconds	Dispensing Rate gpm	Ending RM Value	Initial RM Value	Meter Vapor acf	A/L	Pass/Fail
1/2	1	Healy 708 4411-0026	U	4.75	33.33	8.55	48.08	47.50	0.58	0.91	Pass
	1	Healy 708 4411-0026	S	4.76	32.36	8.83	48.68	48.10	0.58	0.91	Pass
	2	Healy 708 1412-0014	U	4.74	34.32	8.29	49.30	48.70	0.6	0.95	Pass
	2	Healy 708 1412-0014	S	4.76	33.36	8.56	49.90	49.30	0.6	0.94	Pass
3/4	3	Healy 708 1412-0037	U	4.74	38.82	7.33	50.62	50.00	0.62	0.98	Pass
	3	Healy 708 1412-0037	S	4.75	33.30	8.56	51.22	50.62	0.6	0.94	Pass
	4	Healy 708 2512-0021	U	4.76	37.84	7.55	51.94	51.30	0.64	1.01	Pass
	4	Healy 708 2512-0021	S	4.75	33.15	8.6	52.56	51.94	0.62	0.98	Pass
5/6	5	Healy 708 3212-0003	U	4.74	34.25	8.3	53.22	52.60	0.62	0.98	Pass
	5	Healy 708 3212-0003	S	4.76	33.34	8.57	53.88	53.22	0.66	1.04	Pass
	6	Healy 708 1012-0037	U	4.75	35.25	8.09	59.22	58.60	0.62	0.98	Pass
	6	Healy 708 1012-0037	S	4.75	32.05	8.89	59.84	59.22	0.62	0.98	Pass
7/8	7	Healy 708 1012-0031	U	4.76	37.51	7.61	60.48	59.90	0.58	0.91	Pass
	7	Healy 708 1012-0031	S	4.74	33.78	8.42	61.10	60.50	0.6	0.95	Pass
	8	Healy 708 1012-0032	U	4.76	35.18	8.12	61.78	61.10	0.68	1.07	Pass
	8	Healy 708 1012-0032	S	4.75	33.11	8.61	62.40	61.80	0.6	0.94	Pass
9/10	9	Healy 708 1412-0038	U	4.76	37.02	7.71	63.06	62.40	0.66	1.04	Pass
	9	Healy 708 1412-0038	S	4.76	33.00	8.65	63.74	63.10	0.64	1.01	Pass
	10	Healy 708 1412-0002	U	4.74	36.79	7.73	64.40	63.80	0.6	0.95	Pass
	10	Healy 708 1412-0002	S	4.76	35.44	8.06	66.64	66.00	0.64	1.01	Pass