



AIR POLLUTION CONTROL DISTRICT
COUNTY OF SAN DIEGO
10124 OLD GROVE ROAD
SAN DIEGO CA 92131
 PHONE (858) 586-2600 FAX (858) 586-2651

APCD USE ONLY
SECTOR
ID#
NOV#

FILLNECK VAPOR PRESSURE REGULATION TEST
ARB EO G-70-187, EXHIBIT 5 , HEALY 400 ORVR NOZZLES ONLY

Facility Name: _____ **A/C or PO Number:** _____ **Time of Test:** _____
(Record exact time of test in order to demonstrate proper test sequencing as required in Attachment A)

Vacuum Integrity Test: Exb.4 Date: _____ Time: _____ Pass <input type="checkbox"/> Fail <input type="checkbox"/> <small>(must pass prior to Fillneck test)</small>	System Operating Vacuum: _____ "w.c.	Results: Total nozzles on site: _____ Total number of nozzles tested: _____ Total number of nozzles not tested: _____ Total number of nozzles passed: _____ Total number of nozzles failed: _____
Test Gauge: Make/Model: _____ Serial #: _____ Calibration date: _____		

Nozzle#	Pressure/vac."w.c. @ 2.1 gal.	Pressure/vac."w.c. @ 3.0 gal.	Pressure/vac. ("w.c. @ 4.0 gal.	Pass/Fail