

SMALL OFF-ROAD ENGINE FUEL TANK CERTIFICATION APPLICATION

MLD/QMB-812 (REV. 10/2020) PAGE 1 OF 4

APPLICANT INFORMATION

| |
|-----------------|
| Applicant Name: |
|-----------------|

CONSULTANT CONTACT INFORMATION

| | |
|----------------|--------|
| Contact Name: | Title: |
| Contact Email: | |

APPLICANT CONTACT INFORMATION

| | |
|--------------------|----------|
| Contact Name: | Title: |
| Contact Telephone: | Address: |

TEST MODEL INFORMATION

| | |
|--|---|
| Tested Model/Part Number: | |
| Test Procedure: <input type="checkbox"/> TP-901, last amended May 6, 2019 | |
| Engine Displacement Category <input type="checkbox"/> ≤ 80 cc <input type="checkbox"/> > 80 cc | Internal Surface Area ¹ (m ²): |
| Total Fuel Capacity (L): | Nominal Capacity (L): |
| Barrier Technology: | Barrier Specifications: |
| Criteria used to determine which fuel tank is expected to exhibit the highest permeation rate relative to the applicable permeation emission standard: | |

NOTES: Internal surfaces are those surfaces that are subjected to liquid fuel or fuel vapor under normal operating conditions and have an opposing surface through the wall section that is exposed to the atmosphere. Internal webs and strengthening structures not in communication with the atmosphere are not considered internal surfaces for the purposes of this testing. Do not include the area of the fuel cap or any other openings.

SMALL OFF-ROAD ENGINE FUEL TANK CERTIFICATION APPLICATION

DURABILITY DEMONSTRATION INFORMATION

PRESSURE TEST

| | |
|--|----------------------|
| Start Date (MM/DD/YY): | End Date (MM/DD/YY): |
| Duration (days): | Temperature: |
| Rate (seconds/cycle): | Number of Cycles: |
| <input type="checkbox"/> Performed without fuel and before any preconditioning | |

DESIGN LIMIT

| | |
|--------------------------------|--------------------------------|
| Maximum Pressure (psi or kPa): | Minimum Pressure (psi or kPa): |
|--------------------------------|--------------------------------|

SLOSH TEST

| | |
|------------------------|----------------------------|
| Start Date (MM/DD/YY): | End Date (MM/DD/YY): |
| Fuel Fill Amount (L): | Angle Deviation (degrees): |
| Rate (seconds/cycle): | Number of Cycles: |

If using a laboratory sample orbital shaker table, provide the following:

| | |
|---------------------------|----------------------------|
| Centripetal Acceleration: | Frequency (cycles/second): |
| Number of Cycles: | |

ULTRAVIOLET (UV) RADIATION EXPOSURE

| | |
|------------------------|----------------------|
| Start Date (MM/DD/YY): | End Date (MM/DD/YY): |
| Duration (hours): | |

LIGHT SOURCE

| | |
|---|---|
| <input type="checkbox"/> Natural Sunlight | <input type="checkbox"/> UV light, Intensity (W/m ²): |
|---|---|

FUEL CAP INSTALLATION CYCLES

| |
|--------------------------|
| Number of ON/OFF Cycles: |
|--------------------------|

SMALL OFF-ROAD ENGINE FUEL TANK CERTIFICATION APPLICATION

PRECONDITIONING INFORMATION

| | |
|---|--------------------------|
| Duration (days): | |
| Start Date(MM/DD/YY): | End Date (MM/DD/YY): |
| Temperature: | Fuel Fill Amount (L): |
| Fuel Refresh Dates (MM/DD/YY): | Fuel Refresh Amount (L): |
| Fuel: <input type="checkbox"/> LEV III certification gasoline <input type="checkbox"/> The gasoline defined in 40 CFR Part 1060.520(e) | |

SEALING INFORMATION

| | |
|---|-----------------------|
| Date and Time (MM/DD/YY HH:MM): | Fuel Fill Amount (L): |
| Fuel: <input type="checkbox"/> LEV III certification gasoline <input type="checkbox"/> The gasoline defined in 40 CFR Part 1060.520(e) | |
| Description of sealing method: | |

PERMEATION TEST INFORMATION

| | |
|---------------------------------------|-------------------------------------|
| Start Date and Time (MM/DD/YY HH:MM): | End Date and Time (MM/DD/YY HH:MM): |
| Duration (days): | Temperature: |

Permeation Rates (g/m²/day):

| |
|---|
| 1. |
| 2. |
| 3. |
| 4. |
| 5. |
| Test Method: <input type="checkbox"/> Gravimetric <input type="checkbox"/> Flame Ionization Detector (FID) |

