



Emergency Stop			
Equipment #	Location		Result
1	Behind Counter		● Pass

Leak Detector			
Equipment #	Grade	Pump Type	Result
004	Regular	Mechanical (MLLD)	● Pass
005	Plus	Mechanical (MLLD)	● Pass
006	Premium	Mechanical (MLLD)	● Pass

Precision Line Tightness Test			
Equipment #	Grade		Result
004	Regular		● Pass
005	Plus		● Pass
006	Premium		● Pass

Shear Valve			
Form Name			Result
Shear Valve			● Pass

UST / AST Monitor			
Form Name			Result
UST / AST Monitor			● Pass

Veeder Root TLS-450 PLUS Software Upgrade			
Form Name			Result
Veeder Root TLS-450 PLUS Software Upgrade			Completed

Byron Haydt

Mike Dellatore



**Comments:**



Testing was conducted in accordance with PEI/RP1200

Mike Dellatore



Tester's Name (print) \_\_\_\_\_ Tester's Signature \_\_\_\_\_

1 Behind Counter

## MECHANICAL AND ELECTRONIC LINE LEAK DETECTORS PERFORMANCE TESTS

Facility Name: Speedway	Owner: 7-Eleven Stores, Inc	
Address: 1677 Elmwood Avenue	Address:	
City, State, Zip Code: Brighton NY 14620	City, State, Zip Code:	
Facility I.D. #: 8-302449	Phone #: 5854421156	
Testing Company: Owl Services USA	Phone #: 800-646-3161	Date: 6/2/2026

This data sheet can be used to test mechanical line leak detectors (MLLD) and electronic line leak detectors (ELLD) with submersible turbine pump (STP) systems. See PEI/RP1200 Sections 9.1 and 9.2 for test procedures.

Line Number	004	005	006			
Product Stored	Regular	Plus	Premium			
Leak Detector Manufacturer	RedJacket	RedJacket	RedJacket			
Leak Detector Model	FX1V	FX1V	FX1V			
Type of Leak Detector	<input checked="" type="checkbox"/> MLLD <input type="checkbox"/> ELLD	<input checked="" type="checkbox"/> MLLD <input type="checkbox"/> ELLD	<input checked="" type="checkbox"/> MLLD <input type="checkbox"/> ELLD	<input type="checkbox"/> MLLD <input type="checkbox"/> ELLD	<input type="checkbox"/> MLLD <input type="checkbox"/> ELLD	<input type="checkbox"/> MLLD <input type="checkbox"/> ELLD

### MLLD (ALL PRESSURE MEASUREMENTS ARE MADE IN PSIG)

STP Full Operating Pressure	30	29	29			
Check Valve Holding Pressure	13	13	15			
Line Resiliency (ml) (line bleed back volume as measured from check valve holding pressure to 0 psig)	41.64	37.85	41.64			
Step Through Time in Seconds (time the MLLD hesitates at metering pressure before going to full operating pressure as measured from 0 psig with no leak induced on the line)	3	3	3			
Metering Pressure (STP pressure when simulated leak rate 3 gph at 10 psig)	19	29	20			
Opening Time in Seconds (the time the MLLD opens to allow full pressure after simulated leak is stopped)	3	3	4			
Does the STP pressure remain at or below the metering pressure for at least 60 seconds when the simulated leak is induced?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the leak detector reset (trip) when the line pressure is bled off to zero psig?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the STP properly cycle on/off under normal fuel system operation conditions?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

A "No" answer to either of the above questions indicates the MLLD fails the test.

### ELLD (ALL PRESSURE MEASUREMENTS ARE MADE IN PSIG)

STP Full Operating Pressure						
How many test cycles are observed before alarm/shutdown occurs?						
Does the simulated leak cause an alarm?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
A "No" answer to the above question indicates the ELLD fails the test.						
Does the simulated leak cause an STP shutdown?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<b>Test Results</b>	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail

**Comments:** Testing was conducted in accordance with PEI/RP1200

Tester Signature:

Tester Name: Mike Dellatore

Speedway  
 1677 Elmwood Avenue  
 Brighton  
 NY 14620

Purpora Engineering  
 Petro-Tite Line Tightness Test Form

Work Visit # 187745  
 UST Registration #  
 8-302449

IDENTIFY EACH LINE AS TESTED	TIME (MILITARY)	LOG OF TEST PROCEDURES, AMBIENT TEMPERATURE, WEATHER, ETC.	PRESSURE		VOLUME			REMARKS
			PSI		READING		NET CHANGE	SIZE, LENGTH & TYPE OF LINE, #FLEX CONNECTORS, CONCLUSIONS
			BEFORE	AFTER	BEFORE	AFTER		
004	07:05	Connected line tester to: Shear						<b>Material</b> <u>Fiberglass</u>  <b>Wall Type</b> <u>Double</u>  <b>Line Length (feet)</b> <u>140</u>  <b>Diameter (inches)</b> <u>2</u>  <b>Pressure/Suction</b> <u>Pressure</u>  <b>Allowable Bleedback</b>  $(PL \times Ba) + (FC \times Bb(.006)) + B(.05) = N$  $( 140 * 0 )$ $+ ( 5 * 0.006 ) + 0.05 = 0.08$
Regular	07:10	Started line test		50		.0100		
	07:20	Line Test Continued	50	50	.0100	.0100	0	
	07:30	Line Test Continued	50	50	.0100	.0100	0	
	07:40	Line Test Continued	50	50	.0100	.0100	0	
	07:40	Bleed Back	50	0	.0100	.0580	0.048	

Tests were made on the above line systems in accordance with test procedures prescribed for as detailed on attached test charts with the results as follows:

Line Identification	Meets Criteria (Yes/No)	Net Volume Change Per Hour	Date Tested
004 Regular	Yes	0	6/2/2026

**CONTRACTOR CERTIFICATION**

Technician:  
 Mike Dellatore

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226f3e66

Certification # \_\_\_\_\_

Notes:

Speedway  
 1677 Elmwood Avenue  
 Brighton  
 NY 14620

Purpora Engineering  
 Petro-Tite Line Tightness Test Form

Work Visit # 187745  
 UST Registration #  
 8-302449

IDENTIFY EACH LINE AS TESTED	TIME (MILITARY)	LOG OF TEST PROCEDURES, AMBIENT TEMPERATURE, WEATHER, ETC.	PRESSURE		VOLUME			REMARKS
			PSI		READING		NET CHANGE	SIZE, LENGTH & TYPE OF LINE, #FLEX CONNECTORS, CONCLUSIONS
			BEFORE	AFTER	BEFORE	AFTER		
005	07:10	Connected line tester to: Shear						<b>Material</b> <u>Fiberglass</u>  <b>Wall Type</b> <u>Double</u>  <b>Line Length (feet)</b> <u>140</u>  <b>Diameter (inches)</b> <u>2</u>  <b>Pressure/Suction</b> <u>Pressure</u>  <b>Allowable Bleedback</b>  $(PL \times Ba) + (FC \times Bb(.006)) + B(.05) = N$  $( 140 * 0 )$ $+ ( 5 * 0.006 ) + 0.05 = 0.08$
Plus	07:15	Started line test		50		.0040		
	07:25	Line Test Continued	50	50	.0040	.0040	0	
	07:35	Line Test Continued	50	50	.0040	.0040	0	
	07:45	Line Test Continued	50	50	.0040	.0040	0	
	07:45	Bleed Back	50	0	.0040	.0580	0.054	

Tests were made on the above line systems in accordance with test procedures prescribed for as detailed on attached test charts with the results as follows:

Line Identification	Meets Criteria (Yes/No)	Net Volume Change Per Hour	Date Tested
005 Plus	Yes	0	6/2/2026

**CONTRACTOR CERTIFICATION**

Technician:  
 Mike Dellatore

226f3e66  
 Certification # \_\_\_\_\_

Notes:

Speedway  
 1677 Elmwood Avenue  
 Brighton  
 NY 14620

Purpora Engineering  
 Petro-Tite Line Tightness Test Form

Work Visit # 187745  
 UST Registration #  
 8-302449

IDENTIFY EACH LINE AS TESTED	TIME (MILITARY)	LOG OF TEST PROCEDURES, AMBIENT TEMPERATURE, WEATHER, ETC.	PRESSURE		VOLUME			REMARKS
			PSI		READING		NET CHANGE	SIZE, LENGTH & TYPE OF LINE, #FLEX CONNECTORS, CONCLUSIONS
			BEFORE	AFTER	BEFORE	AFTER		
006	07:15	Connected line tester to: Shear						<b>Material</b> <u>Fiberglass</u>  <b>Wall Type</b> <u>Double</u>  <b>Line Length (feet)</b> <u>140</u>  <b>Diameter (inches)</b> <u>2</u>  <b>Pressure/Suction</b> <u>Pressure</u>  <b>Allowable Bleedback</b>  $(PL \times Ba) + (FC \times Bb(.006)) + B(.05) = N$  $( 140 * 0 )$ $+ ( 5 * 0.006 ) + 0.05 = 0.08$
Premium	07:20	Started line test		50		.0240		
	07:30	Line Test Continued	50	50	.0240	.0240	0	
	07:40	Line Test Continued	50	50	.0240	.0240	0	
	07:50	Line Test Continued	50	50	.0240	.0240	0	
	07:50	Bleed Back	50	0	.0240	.0690	0.045	

Tests were made on the above line systems in accordance with test procedures prescribed for as detailed on attached test charts with the results as follows:

Line Identification	Meets Criteria (Yes/No)	Net Volume Change Per Hour	Date Tested
006 Premium	Yes	0	6/2/2026

**CONTRACTOR CERTIFICATION**

Technician:  
 Mike Dellatore  
 \_\_\_\_\_  
 226f3e66  
 Certification # \_\_\_\_\_

Notes:

## SHEAR VALVE OPERATION INSPECTION

Facility Name: Speedway	Owner: 7-Eleven Stores, Inc
Address: 1677 Elmwood Avenue	Address
City, State, Zip Code: Brighton NY 14620	City, State, Zip Code:
Facility I.D. #: 8-302449	Phone #: 5854421156
Testing Company: Owl Services USA	Phone #: 610-278-7203

This data sheet is for inspecting shear valves located inside dispensers. See PEI/RP1200 Section 10 for the inspection procedure.

Product Grade	Plus	Premium	Regular	Plus	Premium	Regular	Premium	Plus	Regular
Dispenser ID#	1/2	1/2	1/2	3/4	3/4	3/4	5/6	5/6	5/6
Shear Valve Type (Product/Vapor)	Product	Product	Product	Product	Product	Product	Product	Product	Product
1. Is the shear valve rigidly anchored to the dispenser box frame or dispenser island?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Is the shear section positioned between 1/2 inch above or below the top surface of the dispenser island?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Is the lever arm free to move?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
4. Does the lever arm snap shut the poppet valve?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
5. Can any product be dispensed when the product shear valve is closed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

A "No" to Lines 1-4 or a "Yes" for Line 5 indicates a test failure.

Test Results	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
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**Comments:**

Tester's Name (print) Mike Dellatore Tester's Signature  6/2/2026

Testing was conducted in accordance with PEI/RP1200

## SHEAR VALVE OPERATION INSPECTION

Facility Name: Speedway	Owner: 7-Eleven Stores, Inc
Address: 1677 Elmwood Avenue	Address
City, State, Zip Code: Brighton NY 14620	City, State, Zip Code:
Facility I.D. #: 8-302449	Phone #: 5854421156
Testing Company: Owl Services USA	Phone #: 610-278-7203

This data sheet is for inspecting shear valves located inside dispensers. See PEI/RP1200 Section 10 for the inspection procedure.

Product Grade	Plus	Premium	Regular						
Dispenser ID#	7/8	7/8	7/8						
Shear Valve Type (Product/Vapor)	Product	Product	Product						
1. Is the shear valve rigidly anchored to the dispenser box frame or dispenser island?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Is the shear section positioned between 1/2 inch above or below the top surface of the dispenser island?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Is the lever arm free to move?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
4. Does the lever arm snap shut the poppet valve?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
5. Can any product be dispensed when the product shear valve is closed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

A "No" to Lines 1-4 or a "Yes" for Line 5 indicates a test failure.

Test Results	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
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**Comments:**

Tester's Name (print) Mike Dellatore Tester's Signature  6/2/2026

Testing was conducted in accordance with PEI/RP1200

**AUTOMATIC TANK GAUGE  
OPERATION INSPECTION**

Facility Name: Speedway	Owner: 7-Eleven Stores, Inc
Address: 1677 Elmwood Avenue	Address:
City, State, Zip Code: Brighton NY 14620	City, State, Zip Code:
Facility I.D. #: 8-302449	Phone #: 5854421156
Testing Company: Owl Services USA	Phone #: 800-646-3161 Date: 6/2/2026

This procedure is to determine whether the automatic tank gauge (ATG) is operating properly. See PEI/RP1200 Section 8.2 for the inspection procedure. This procedure is applicable to tank level monitor probes that touch the bottom of the tank when in place.

Tank Number	004	005	006	
Product Stored	Regular	Plus	Premium	
ATG Brand and Model	Veeder Root TLS-450 Plus	Veeder Root TLS-450 Plus	Veeder Root TLS-450 Plus	
1. Tank Volume, gallons	11627	9728	9728	
2. Tank Diameter, inches	92	92	92	
3. The ATG probe was removed from the tank and inspected for damage and residual buildup.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Float moves freely on the stem without binding?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Fuel float level agrees with the value programmed into the console?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Water float level agrees with the value programmed into the console?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Inch level from bottom of probe when 90% alarm is triggered.	82	82	82	
8. Inch level at which the overfill alarm activates corresponds with value programmed in the gauge?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Inch level from the bottom when the water float first triggers an alarm.	1	1	1	
10. Inch level at which the water float alarm activates corresponds with value programmed in the gauge?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

If any answers in Lines 3, 4, 5, or 6 are "No," the system has failed the test.

If internal ATG battery backup is present, was it functional per manufacturer's specifications.  Yes  No  None

<b>Test Results</b>	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
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**Comments:**

Tester's Name (print) Mike Dellatore

Tester's Signature



## LIQUID SENSOR FUNCTIONALITY TESTING

Facility Name: Speedway	Owner: 7-Eleven Stores, Inc	
Address: 1677 Elmwood Avenue	Address:	
City, State, Zip Code: Brighton NY 14620	City, State, Zip Code:	
Facility I.D. #: 8-302449	Phone #: 5854421156	
Testing Company: Owl Services USA	Phone #: 800-646-3161	Date: 6/2/2026

This procedure is to determine whether liquid sensors located in the interstitial space of UST systems are able to detect the presence of water and fuel. See PEI/ RP1200 Section 8.3 for the test procedure.

Sensor Location	004 STP Sump	005 STP Sump	006 STP Sump				
Product Stored	Regular	Plus	Premium				
Type of Sensor	<input type="checkbox"/> Discriminating <input checked="" type="checkbox"/> Non-discriminating	<input type="checkbox"/> Discriminating <input checked="" type="checkbox"/> Non-discriminating	<input type="checkbox"/> Discriminating <input checked="" type="checkbox"/> Non-discriminating	<input type="checkbox"/> Discriminating <input type="checkbox"/> Non-discriminating	<input type="checkbox"/> Discriminating <input type="checkbox"/> Non-discriminating	<input type="checkbox"/> Discriminating <input type="checkbox"/> Non-discriminating	<input type="checkbox"/> Discriminating <input type="checkbox"/> Non-discriminating
Test Liquid	<input checked="" type="checkbox"/> Water <input type="checkbox"/> Product	<input checked="" type="checkbox"/> Water <input type="checkbox"/> Product	<input checked="" type="checkbox"/> Water <input type="checkbox"/> Product	<input type="checkbox"/> Water <input type="checkbox"/> Product	<input type="checkbox"/> Water <input type="checkbox"/> Product	<input type="checkbox"/> Water <input type="checkbox"/> Product	<input type="checkbox"/> Water <input type="checkbox"/> Product
Is the ATG console clear of any active alarms regarding any leak sensors? If the sensor is in alarm and functioning, indicate why.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the sensor alarm circuit operational?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has sensor been inspected and in good operating condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
When placed in the test liquid, does the sensor trigger an alarm?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
When an alarm is triggered, is the sensor properly identified on the ATG console?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Any "No" answers indicates a test failure.

<b>Test Results</b>	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
---------------------	--	--	--	---	---	---	---

**Comments:**

Tester's Name (print) Mike Dellatore      Tester's Signature 

## LIQUID SENSOR FUNCTIONALITY TESTING

Facility Name: Speedway	Owner: 7-Eleven Stores, Inc	
Address: 1677 Elmwood Avenue	Address:	
City, State, Zip Code: Brighton NY 14620	City, State, Zip Code:	
Facility I.D. #: 8-302449	Phone #: 5854421156	
Testing Company: Owl Services USA	Phone #: 800-646-3161	Date: 6/2/2026

This procedure is to determine whether liquid sensors located in the interstitial space of UST systems are able to detect the presence of water and fuel. See PEI/ RP1200 Section 8.3 for the test procedure.

Sensor Location	004 Tank Interstitial	005 Tank Interstitial	006 Tank Interstitial				
Product Stored	Regular	Plus	Premium				
Type of Sensor	<input type="checkbox"/> Discriminating <input checked="" type="checkbox"/> Non-discriminating	<input type="checkbox"/> Discriminating <input checked="" type="checkbox"/> Non-discriminating	<input type="checkbox"/> Discriminating <input checked="" type="checkbox"/> Non-discriminating	<input type="checkbox"/> Discriminating <input type="checkbox"/> Non-discriminating	<input type="checkbox"/> Discriminating <input type="checkbox"/> Non-discriminating	<input type="checkbox"/> Discriminating <input type="checkbox"/> Non-discriminating	<input type="checkbox"/> Discriminating <input type="checkbox"/> Non-discriminating
Test Liquid	<input checked="" type="checkbox"/> Water <input type="checkbox"/> Product	<input checked="" type="checkbox"/> Water <input type="checkbox"/> Product	<input checked="" type="checkbox"/> Water <input type="checkbox"/> Product	<input type="checkbox"/> Water <input type="checkbox"/> Product	<input type="checkbox"/> Water <input type="checkbox"/> Product	<input type="checkbox"/> Water <input type="checkbox"/> Product	<input type="checkbox"/> Water <input type="checkbox"/> Product
Is the ATG console clear of any active alarms regarding any leak sensors? If the sensor is in alarm and functioning, indicate why.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the sensor alarm circuit operational?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has sensor been inspected and in good operating condition?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
When placed in the test liquid, does the sensor trigger an alarm?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
When an alarm is triggered, is the sensor properly identified on the ATG console?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Any "No" answers indicates a test failure.

<b>Test Results</b>	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
---------------------	--	--	--	---	---	---	---

**Comments:**

Tester's Name (print) Mike Dellatore Tester's Signature 



# Veeder Root TLS-450 PLUS Software Upgrade

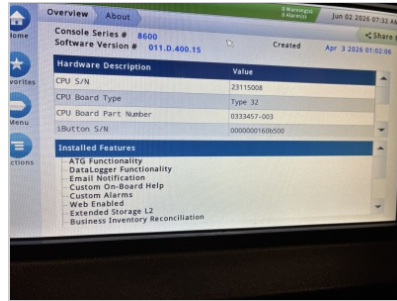
## SECTION 1

Did you complete the TLS-450 PLUS software update?

Yes

ATTACHMENTS

Photo of the Veeder Root TLS-450 PLUS screen showing the new software version?



Did you verify that the monitor equipment in Work Fossa is a TLS-450 PLUS console?

Yes

ATTACHMENTS

Enter the serial number of the ATG here. Also, confirm that the correct serial number is in the monitor equipment in the Work Fossa system.

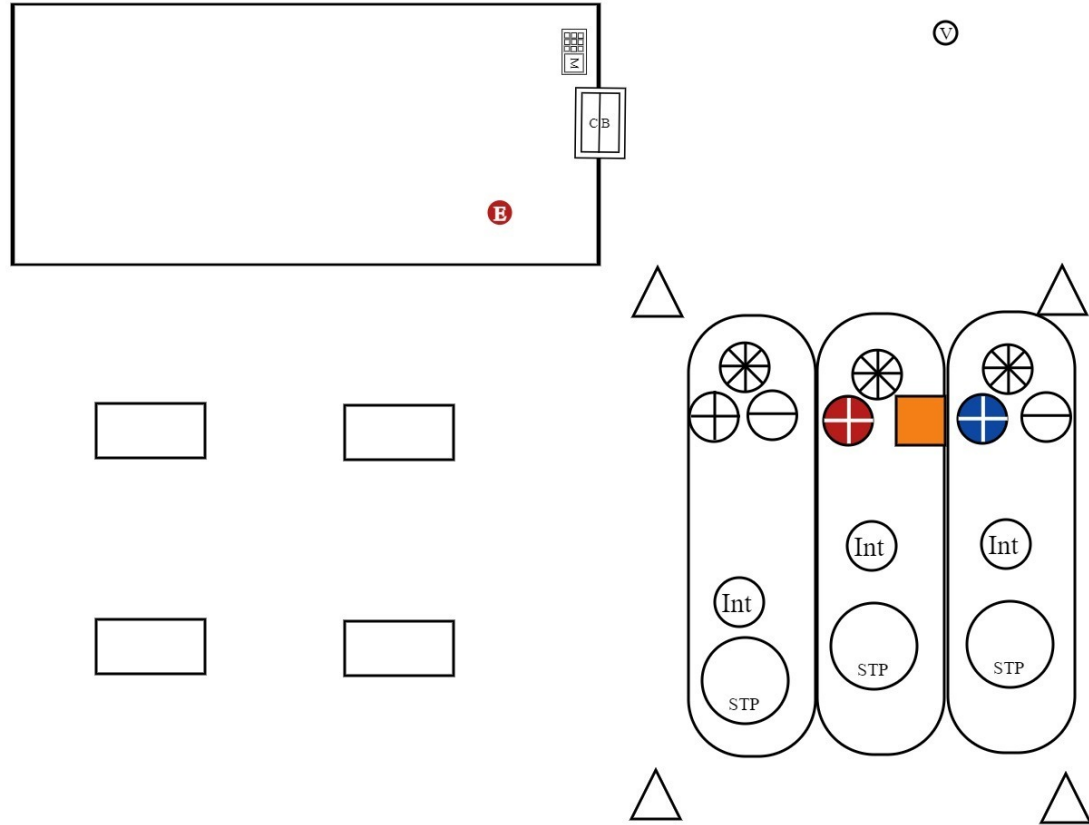
Y09291876514010

ATTACHMENTS



# Diagram - Site Diagram (v1)

- |  |                  |  |                 |  |               |  |                 |
|--|------------------|--|-----------------|--|---------------|--|-----------------|
|  | Observation Well |  | STP             |  | Store / Kiosk |  | Fiberglass Tank |
|  | Regular Fill     |  | Vent            |  | Dispenser     |  |                 |
|  | Dry Break        |  | Circuit Breaker |  | E-Stop        |  |                 |
|  | ATG              |  | Monitor Console |  | Premium Fill  |  |                 |
|  | Extractor        |  | Interstitial    |  | Plus Fill     |  |                 |





Crompco LLC  
1815 Gallagher Rd  
Plymouth Meeting, PA 19462

7-Eleven Stores, Inc  
Location #44932

1677 Elmwood Avenue  
Brighton, NY 14620  
+1 585-442-1156

W-185168 Visit #187745 6/02/2026

## Visit Verification

CUSTOMER  
7-Eleven Stores, Inc

LOCATION  
#44932  
1677 Elmwood Avenue  
Brighton, NY 14620

CONTACT  
7-Eleven Stores, Inc

SCHEDULED  
06/02/2026 12:00am (EDT)

ASSIGNED TO  
Byron Haydt, Mike Dellatore

SERVICE REASON  
Compliance

### PRODUCTS & SERVICES

Item	Qty
<b>Combos</b>	
All Lines and Leak Detectors	3.00
<b>Expenses</b>	
Fuel Surcharge	1.00
<b>Products</b>	
Wire VEEDER ROOT 10 ft Probe Cable [1151]	1.00
CAP ATG Cap and adaptor for Tank Monitor 1/2 in. Thread Port Hole and cable conn. EVR approved. [4130]	1.00
Epoxy kit 3M epoxy kit - wire connector seal pack - (old part 80-6114-6845-7)	1.00
<b>Services</b>	
Monitor System Inspection Automatic Tank Gauging System / Monitor System Inspection	1.00
All Shear Valves	3.00
Emergency Stop Inspection	1.00
Veeder Root TLS-450 PLUS Software Upgrade	1.00

### CONFIRMATION

By signing this verification you are agreeing that we have performed and/or provided services and parts listed above.

Approver's Name  
manager

Email

Signature Status  
Nobody available to sign