Exhibit 7
NOZZLE BAG TEST PROCEDURE

Verification of the integrity of the vapor valve shall be performed on installed nozzles by use of the following test.

Note: The following procedure requires that all nozzles on a dispenser be bagged at the same time. Bagging only one nozzle on a dispenser during this procedure may bias the results toward compliance.

a. Seal all nozzles on a dispenser in plastic bags, using tape or other means to secure the bag around the base of the nozzle (see Figure 7-1). Any plastic bag large enough to enclose the nozzle and having a thickness of no greater than 2 mils can be used.

b. Initialize the dispenser for fueling as follows:

   1. Inform the station operator that you are running a test and ask the operator to initialize the dispenser; or

   2. Swipe a credit card in the dispenser card reader.

c. Activate the Healy vacuum pump by lifting one of the nozzles off the dispenser holster and selecting a grade of fuel. **Do not dispense any fuel**.

d. With the dispenser initialized and the vacuum pump activated, observe all bagged nozzles for 30 seconds. Any nozzle where the bag can be seen visually collapsing has a defective vapor valve and the dispenser shall be removed from service immediately.

e. Record the test results on the “Nozzle Bag Test Results” form provided in this Exhibit. Districts may require use of an alternate form, provided that the alternate form includes the same minimum parameters.

f. Remove the bags from all the nozzles tested and disengage the dispenser by returning the nozzles to the dispenser holsters.

g. Repeat steps **a** through **f** for each dispenser.

FIGURE 7-1

Typical Example of Bagging a Nozzle

NOZZLE BAG TEST RESULTS

SOURCE INFORMATION		TEST COMPANY INFORMATION	
Facility (DBA) / Site Address:	Facility Representative / Title:	Test Company Name / Address	# of Nozzles:_____ # Nozzles Tested:_____ # Nozzles Passed:_____ # Nozzles Failed: _____ # Nozzles not Tested: _____
Print Name	Print Name	Print Name	
Street Address	Title ( )	Street Address	
City Zip	Phone No.	City Zip	
District Inspector:	☐ P / O ☐ S / A ☐ A / C Number:	Date of Test:	Time of Test:

Dispenser	Gas Grade	Nozzle Type	Bag Collapse after 30 Seconds?
			☐Yes ☐No
			☐Yes ☐No
			☐Yes ☐No
			☐Yes ☐No
			☐Yes ☐No
			☐Yes ☐No
			☐Yes ☐No
			☐Yes ☐No
			☐Yes ☐No
			☐Yes ☐No
			☐Yes ☐No
			☐Yes ☐No
			☐Yes ☐No
			☐Yes ☐No
			☐Yes ☐No
			☐Yes ☐No
			☐Yes ☐No
			☐Yes ☐No