



## EQUIPMENT TESTING INFORMATION

4. Describe any material compatibility and/or permeability testing with oxygenated fuels done by your company or a third party, e.g., testing laboratory, university. Use a separate sheet for each equipment product.

- Equipment Name & Model No.:

\_\_\_\_\_

- Tester & Testing Date(s): \_\_\_\_\_

\_\_\_\_\_ Name of Testing Entity

\_\_\_\_\_ Test Date(s)

- Oxygenates Tested: (fill in table below)

Type of Additive or Alternative Fuel	Concentration in Gasoline		Test Duration	Test Temperature	Permeability	Compatibility
	Minimum % Tested	Maximum % Tested	hours or days	C°	cm/cm <sup>2</sup> /C°/atm	Properties Tested*
DIPE						
Ethanol						
ETBE						
Methanol						
MTBE						
TAME						
C <sub>3</sub> to C <sub>8</sub> Alcohols						

\*Indicate which properties were tested, including but not limited to solubility (SOL), absorption (ABS), changes in hardness (CIH), elongation at breaking point (EBP), stiffness (STF), corrosion rate (COR). Please attach any information you have on mechanical properties.

- **Testing Protocols/Standards.** Describe testing protocol(s) or standards followed and provide the name of the standard, if applicable:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

(attach additional information if necessary)

- **Performance Standards.** Describe any product and/or performance standards that the equipment meets or exceeds or that the equipment does not meet with regard to material compatibility and permeability of oxygenates.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

(attach additional information if necessary)

- **Warranties.** For which fuel blends and/or fuel additives and for what period of time does your company warranty this equipment? Please attach a copy of any applicable warranties.

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(attach additional information if necessary)

**ATTACHMENT B**

**Oxygenate Compatibility/Permeability  
Survey Form**