2630-FM-BECB0501 Rev. 3/2019
Form

pennsylvania
DEPARTMENT OF ENVIRONMENTAL PROTECTION

FOR DEP USE ONLY
Reviewer_____ Date_____
Entered by_____Date_____

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF ENVIRONMENTAL CLEANUP AND BROWNFIELDS

UNDERGROUND STORAGE TANK FACILITY OPERATIONS INSPECTION REPORT FORM

FACILITY INFORMATION

ID Number _____ – _____
Name _____
Location _____
Address _____
Municipality _____
GPS Location Lat: _____ Long: _____

Representative Present During Inspection

Name _____
Phone _____
☐ Owner ☐ Operator ☐ Employee ☐ None

CERTIFIED INSPECTOR

Name _____
ID No. _____
Phone _____
E-mail _____

Date of First Site Visit (month/day/year)

_____

TANK OWNER (must be a person or an entity)

Name _____

TANK OPERATOR (if different than owner)

Name _____

Suspected or confirmed contamination observed Yes ☐ (notify proper region within 48 hours) No ☐

Improperly closed or unregistered tanks present Yes ☐ (provide comment) No ☐

Fire/safety permit(s) available (if required) Yes ☐ No ☐ N/A ☐

Fire/Safety Permit Number(s) _____ Issued By _____

Amended registration form required for (check all that apply):

☐ Added tanks ☐ Closed tanks ☐ Change of operational status (in or out of service)
☐ Change in substance stored ☐ Change of owner ☐ Change in tank size

Inspection summary.

Indicate the compliance status of each item below using the following codes: N = Noncompliant; C = Compliant. **Note: Yes, No, *, N/A, blanks, or any other markings are not acceptable statements for these fields.**

	Tank No.	Tank No.	Tank No.	Tank No.	Tank No.
Registration Certificate Display					
Tank Release Detection					
Tank Release Detection Testing					
Piping Release Detection					
Piping Release Detection Testing					
Overfill Prevention					
Overfill Prevention Testing					
Spill Prevention					
Spill Prevention Testing					
Financial Responsibility					
Walkthrough Inspections					
Tank Construction and Corrosion Protection					
Piping Construction and Corrosion Protection					
Operator Training					

I, the DEP Certified Inspector (IUM), have inspected the entire above referenced facility including examining manways, sumps, monitoring wells and dispensers. Based on my personal observation of the facility and documentation provided by the owner, I certify under penalty of law as provided in 18 PA C.S.A. Section 4904 (relating to unsworn falsification to authorities), that the information provided by me is true, accurate and complete to the best of my knowledge and belief.

_____ _____
Certified Inspector's Signature **Date**

As the representative of the owner or operator, I have reviewed the completed inspection report. I certify under penalty of law as provided in 18 PA C.S.A. Section 4904 (relating to unsworn falsification to authorities), that the information provided by me is true, accurate and complete to the best of my knowledge and belief.

_____ _____ _____
Signature **Title** **Date**

UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION REPORT FORM

Facility Name _____ **Date** _____ **Facility ID** _____ – _____

I. TANK SYSTEM INFORMATION. For each tank, fill in the required information using the codes on Page 2-1. Where multiple codes are allowed and used for a specific tank component, describe the arrangement in Section VIII (COMMENTS). (See FOI form instructions for details.)

		Tank No.	Tank No.	Tank No.	Tank No.	Tank No.
1.	Tank capacity (name plate gallons)					
2.	Substance currently stored (and grade)					
3.	Installation date (M/d/yyyy)					
4.	This drone tank is manifolded to tank number					
5a.	Stick reading of product level, in inches, at time of inspection					
5b.	Stick reading of water level, in inches, at time of inspection					
6.	Total secondary containment on this tank system					
7.	Tank construction and corrosion protection [1, 3]					
8a.	Primary (inner or single-wall) piping construction [1, 2]					
8b.	Secondary (outer) piping construction [1, 2]					
9a.	Number of tank top sumps [4]					
9b.	Number of tank top sumps tested tight [4]					
10a.	Number of transition sumps					
10b.	Number of transition sumps tested tight					
11a.	Number of connected dispensers					
11b.	Number of connected dispensers with pans					
11c.	Number of dispenser pans tested tight					
12a.	Piping joints/connections construction at tank [1, 6]					
12b.	Piping joints/connections construction at dispenser [1, 6]					
13.	Pump (product dispensing) system					
14a.	Number of spill containments (must be permanently installed)					
14b.	Number of spill containments tested tight					
15.	Overfill type (must be permanently installed)					
16.	Current registration certificate displayed/readily available					
17.	Stage I vapor recovery					
18.	Stage II vapor recovery					
19.	This tank supplies an emergency generator					
20.	Tank release detection					
21.	Piping small release detection (0.2 gph monthly or 0.1 gph annually)					
22.	Pressure (line 13 is C or D) piping line leak detector (LLD Function - 3 gph at 10 lbs psi or equivalent within 1 hr)					
23.	LLD function includes a positive turbine pump shutoff [5]					

[1] Use of codes indicating a component is Unknown should be accompanied with comments in Section VIII and must be marked Noncompliant for the appropriate tank system compliance status in the Inspection summary on Page 1.
[2] indicate manufacturer, model, and generation (if applicable) in Section VIII.
[3] indicate manufacturer and construction in Section VIII.
[4] at tank penetrations that have pipe that routinely contains or conveys product.
[5] LLD function must include positive turbine shutoff for piping systems installed after 11/10/2007 with pressurized piping systems.
[6] Use of code (X – None) or (99 – Other) should include comments in Section VIII.

Site drawing / manifold schematic (not master-drone system):

UNDERGROUND STORAGE TANK FACILITY OPERATIONS INSPECTION REPORT FORM
Tank System Component Codes

6. Total secondary containment
- Y Yes
- N No

7. Tank construction
- A Single-wall steel, unprotected
- B Single-wall, galvanic anodes
- C Impressed current protection
- E Single-wall fiberglass (FRP)
- F Double-wall fiberglass (FRP)
- G Double-wall Act 100 or equivalent
- H Single-wall Act 100 or equivalent
- I Steel with lined interior
- J Concrete
- O Double-wall, steel primary, galvanic anodes
- P Cathodically protected and lined
- V Double-wall Act 100 or equivalent with Anodes
- W Single-wall Act 100 or equivalent with Anodes
- N Unknown (must provide written comment)
- 99 Other (must provide written comment)

8a. Primary (inner or single-wall) piping construction
- A Bare steel (including only wrapped or coated)
- B Cathodically protected, metallic
- C Copper, unprotected
- D Fiberglass or rigid non-metallic
- E Flexible non-metallic
- F Unknown (must provide written comment)
- G No dispensing piping
- I Stainless Steel
- 99 Other (must provide written comment)

8b. Secondary (outer)piping construction
- N None (Single-walled piping)
- A Bare steel
- B Cathodically protected, metallic
- D Fiberglass or rigid non-metallic
- E Flexible non-metallic
- F Unknown (must provide written comment)
- G No dispensing piping
- I Poly-encased Stainless Steel
- 99 Other (must provide written comment)

12. Piping joints/connections
- A Unprotected metallic component(s) (including only wrapped or coated)
- B Cathodically protected, metallic
- F Unknown (must provide written comment)
- I Completely inside a containment sump
- M Completely jacketed with sealed boot
- N NO jacket, not in contact with the ground
- X None (must provide written comment)
- 99 Other (must provide written comment)

13. Pump (delivery) system
- A Suction, check valve at pump or siphon bar only
- B Suction, check valve at tank
- C Pressure
- D Gravity flow to dispenser/pump
- E None

15. Overfill type (if code S or B, ensure compatible with delivery method)
- S Drop tube shut off device
- A Overfill alarm (provide description and location in comment section)
- B Ball float valve
- E Filled in less than 25 gallon increments
- N None present or not usable

16. Current registration certificate display
- Y Properly displayed - manned
- R Readily available - unmanned
- N Not displayed

17. Stage I vapor recovery
- A Coaxial
- B 2 port
- N Not complete or none

18. Stage II vapor recovery
- A Complete balance system
- B Complete assist system
- C UG piping only; not complete
- D Decommissioned
- N None of the above

19. This tank supplies an emergency generator
- Y Yes
- N No

20. Tank release detection
- D Statistical Inventory Reconciliation (SIR)
- E Certified Automatic Tank Gauge (0.2 gph Leak Test)
- F Manual Tank Gauging (36 Hour), no TTT
- G44 Manual Tank Gauging, 44 Hours
- G58 Manual Tank Gauging, 58 Hours
- H Interstitial Monitoring (2 Walls)
- J Groundwater Monitoring
- K Vapor Monitoring
- N None

21. Piping small release detection (0.2/0.1 gph)
- B Annual Line Tightness Test (pressure)
- C Line Tightness Test - 3 years (suction)
- D Monthly Interstitial Monitoring (includes visual checking)
- E Groundwater Monitoring
- F Vapor Monitoring
- H None
- I Exempt (must provide written comment)
- J Statistical Inventory Reconciliation (SIR)
- K Electronic Line Leak Detector (0.1 or 0.2 gph test)

22. Piping line leak detection (3 gph within 1 hr.)
- A Mechanical Line Leak Detector
- H None
- K Electronic Line Leak Detector (3 gph test)
- L Continuous Interstitial Monitoring with alarm or pump shut off

23. Positive Turbine pump shutoff
- Y Yes
- N Not present

UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION REPORT FORM

Facility Name _____ **Date** _____ **Facility ID** _____ – _____

II. RELEASE DETECTION

Instructions: ***Check the box to indicate that a criterion has been met.***
Circle the box to indicate that a criterion has not been met.
Circle with "N/A" when a criterion is not applicable (provide comment).

Release Detection Recordkeeping:

- Records may be located at the facility or a readily available alternate site.
- The records include all of the information listed below for chosen release detection methods.
- The inspector has personally reviewed the records.
- If the facility is missing release detection records or if the facility has invalid and/or failing records, enter the dates and results in Section VIII.
- A test with an inconclusive result or failure is an indication of a (suspected) product release and must be investigated within 7 days. Enter the results of any suspected release investigations in Section VIII.
- An empty tank (no more than 1" of product and/or sludge) that is properly registered as temporarily out-of-use is not required to perform release detection. Indicate date emptied in comments.
- Recently installed tank systems must begin performing release detection immediately after receiving product. Indicate date of first product receipt in comments.

***Tank* System**	***Tank* System**	***Tank* System**	***Tank* System**	***Tank* System**

Tank Release Detection Recordkeeping:

tank release detection records for the last 12 months the system contained product are available	☐	☐	☐	☐	☐
tank release detection records are all valid and passing	☐	☐	☐	☐	☐
tank release detection records with invalid or failing reports were properly investigated and documented within 7 days, to confirm or disconfirm the occurrence of a release	☐	☐	☐	☐	☐
written certifications or performance claims for the tank release detection method(s) in use are available	☐	☐	☐	☐	☐
written documentation of all calibration, maintenance and repair of tank release detection equipment for the last year is available	☐	☐	☐	☐	☐
all tank release detection equipment is compatible with the substance stored	☐	☐	☐	☐	☐

Tank Release Detection Equipment Testing:

electronic and mechanical components of tank release detection equipment tested within the last year and documentation available	☐	☐	☐	☐	☐

tester name: _____ tester certification number: _____
date of last test: _____ result: _____

Piping Release Detection Recordkeeping:

piping release detection records for the last 12 months the system contained product are available	☐	☐	☐	☐	☐
piping release detection records are all valid and passing	☐	☐	☐	☐	☐
piping release detection records with invalid or failing reports were properly investigated and documented within 7 days, to confirm or disconfirm the occurrence of a release	☐	☐	☐	☐	☐
written certifications or performance claims for the piping release detection method(s) in use are available	☐	☐	☐	☐	☐
written documentation of all calibration, maintenance and repair of piping release detection equipment for the last year is available	☐	☐	☐	☐	☐
all piping release detection equipment is compatible with the substance stored	☐	☐	☐	☐	☐

Piping Release Detection Equipment Testing:

electronic and mechanical components of piping release detection equipment tested within the last year and documentation available	☐	☐	☐	☐	☐

tester name: _____ tester certification number: _____
date of last test: _____ result: _____

UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION REPORT FORM

Facility Name _____ **Date** _____ **Facility ID** _____ – _____

II. RELEASE DETECTION (continued)

Instructions: ***Check the box to indicate that a criterion has been met.***
Circle the box to indicate that a criterion has not been met.
Circle with "N/A" when a criterion is not applicable (provide comment).

Release Detection Equipment (Tank and/or Piping):

- The inspector has personally reviewed the tank release detection equipment in use for each tank system.

Tank System	*Tank* System	*Tank* System	*Tank* System	*Tank* System

Automatic Tank Gauging: (Tank only – code E)

ATG manufacturer: _____ ATG model: _____
Does the automatic tank gauge perform continuous in-tank release detection? ☐ Yes ☐ No

probes and gauge software certified for manifolded tank systems ● when not specifically certified, the siphon must be broken to properly test	☐	☐	☐	☐	☐
equipment is operational	☐	☐	☐	☐	☐

Manual Tank Gauging: (Tank only – code F, G44 or G58)

tank capacity is 1,000 gallons or less	☐	☐	☐	☐	☐
tank installed on or before 11/10/2007	☐	☐	☐	☐	☐
performed weekly	☐	☐	☐	☐	☐
1/8th inch accuracy stick readings	☐	☐	☐	☐	☐
average 2 stick readings before and after test	☐	☐	☐	☐	☐
test length appropriate for each tank ● 36 hours minimum ● 44 hours, 551-1000 gallons, 64" diameter ● 58 hours, 551-1000 gallons, 48" diameter	☐	☐	☐	☐	☐
variation is within standard (both weekly and monthly)	☐	☐	☐	☐	☐

Interstitial Monitoring: (Tank code H; describe monitoring equipment in comments**)**

interstitial sensors properly placed (per manufacturer's instructions)	☐	☐	☐	☐	☐
monitoring wells (secondary barrier) or ports are clearly marked and secured	☐	☐	☐	☐	☐

Statistical Inventory Reconciliation: (Tank code D and/or Piping code J)

test vendor: version:

data is collected according to the test vendor's instructions	☐	☐	☐	☐	☐
analysis complete and valid results supplied to owner/operator within 30 day monitoring period ● valid reports include calculated leak rate, minimum detectible leak rate, leak threshold, probability of detection and probability of false alarm	☐	☐	☐	☐	☐

Groundwater or Vapor Monitoring: (Tank code J or K and/or Piping code E or F; describe well locations and monitoring equipment in comments**)**

wells are located according to site evaluation; attach page with properly licensed evaluator authentication to the inspection report	☐	☐	☐	☐	☐
wells are properly installed in accordance with site evaluation and regulations	☐	☐	☐	☐	☐
monitoring wells are marked and secured	☐	☐	☐	☐	☐
fill material is sufficiently porous to allow expeditious detection at the monitoring wells	☐	☐	☐	☐	☐
substance stored meets regulatory requirements for type of monitoring	☐	☐	☐	☐	☐

Groundwater monitoring: (Tank code J and/or Piping code E)

monitoring devices can detect 1/8 inch of product or less on water	☐	☐	☐	☐	☐
groundwater is within 20 feet of surface grade	☐	☐	☐	☐	☐
wells are sealed from ground surface to the top of the filter pack	☐	☐	☐	☐	☐
casing is properly slotted: allows entry of product during all groundwater conditions	☐	☐	☐	☐	☐

Vapor Monitoring: (Tank code K and/or Piping code F)

the monitoring device is not rendered inoperative by moisture	☐	☐	☐	☐	☐
background contamination will not interfere with vapor monitoring	☐	☐	☐	☐	☐
vapor monitors will detect increases in concentrations of stored substance	☐	☐	☐	☐	☐

UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION REPORT FORM

Facility Name _____ **Date** _____ **Facility ID** _____ – _____

II. RELEASE DETECTION (continued)

Instructions: ***Check the box to indicate that a criterion has been met.***
Circle the box to indicate that a criterion has not been met.
Circle with "N/A" when a criterion is not applicable (provide comment).

Release Detection Equipment (Piping):

	Tank System	*Tank* System	*Tank* System	*Tank* System	*Tank* System
• The inspector has personally reviewed the piping release detection equipment in use for each tank system.					

Interstitial Monitoring: (Piping code D and L; describe monitoring equipment in comments**)**

Secondary is open, enters sump and allows a release to be detected	☐	☐	☐	☐	☐
interstitial sensors properly placed (per manufacturer's instructions)	☐	☐	☐	☐	☐
monitoring wells or ports (when used) are clearly marked and secured	☐	☐	☐	☐	☐

Continuous Interstitial Monitoring: (Piping code L)

system is capable of detecting a 3.0 gph at 10 pounds psi line pressure release from any portion of the piping system within 1 hour (shear valves to submersible turbine pump)	☐	☐	☐	☐	☐

Piping Tightness (Line) Testing: (Piping only – code B or C)

tester name: _____ tester certification number: _____
test vendor: _____ version: _____
date of last test: _____ result: _____

test conducted at proper frequency ● conducted annually for **pressurized** piping without monthly monitoring ● conducted every 3 years for **suction** piping not meeting code I requirements (below)	☐	☐	☐	☐	☐

Mechanical Line Leak Detector: (PRESSURIZED Piping only – code A)

	Tank System	Tank System	Tank System	Tank System	Tank System
manufacturer					
model					

Electronic Line Leak Detector: (PRESSURIZED Piping only – code K)

	Tank System	Tank System	Tank System	Tank System	Tank System
manufacturer					
model					

	Tank System	*Tank* System	*Tank* System	*Tank* System	*Tank* System
electronic line leak detector continuously monitors piping	☐	☐	☐	☐	☐

date of last 3 gph test: 3 gph test result:
Is the electronic leak detector performing the "monthly" monitoring function? ☐ Yes ☐ No
date of last 0.2 gph test: 0.2 gph test result:
Is the electronic leak detector performing the "annual" monitoring function? ☐ Yes ☐ No
date of last 0.1 gph test: 0.1 gph test result:

Exempt Suction System: (SUCTION piping only – code I)
NOTE: No further release detection required on piping meeting all these criteria.

the tank top is lower than the suction pump inlet	☐	☐	☐	☐	☐
the below grade piping slopes uniformly back to the tank	☐	☐	☐	☐	☐
there is no more than one check valve in the piping	☐	☐	☐	☐	☐
the check valve is located close to or inside the suction pump	☐	☐	☐	☐	☐
compliance with above specifications can be readily determined; describe below:	☐	☐	☐	☐	☐

compliance is determined by: _____
_____
_____

UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION REPORT FORM

Facility Name _____ **Date** _____ **Facility ID** _____ – _____

III. EQUIPMENT TESTING

Instructions: ***Check the box to indicate that a criterion has been met.***
Circle the box to indicate that a criterion has not been met.
Circle with "N/A" when a criterion is not applicable (provide comment).

	Tank System	*Tank* System	*Tank* System	*Tank* System	*Tank* System

Overfill Prevention Testing:

overfill testing conducted within the last 3 years and documentation available		☐	☐	☐	☐	☐
tester name:	date of last test:	result:				

Spill Containment Testing:

spill containment testing conducted within the last 3 years and documentation available		☐	☐	☐	☐	☐
tester name:	date of last test:	result:				
OR						
spill containment is double-walled		☐	☐	☐	☐	☐
both walls of spill containment are monitored at least monthly and documentation available		☐	☐	☐	☐	☐
OR						
tank filled in less than 25 gallon increments		☐	☐	☐	☐	☐

Containment Sump Testing: (Piping release code D and/or L):

containment sump testing conducted within the last 3 years and documentation available		☐	☐	☐	☐	☐
tester name:	date of last test:	result:				
OR						
containment sump(s) is/are double-walled		☐	☐	☐	☐	☐
both walls of sump(s) are monitored at least annually		☐	☐	☐	☐	☐

IV. ON-SITE INSPECTION

Water and Maintenance Check:

water in tank did not exceed tank manufacturer's recommendations, product supplier's guidelines, or 2 inches of accumulation in the bottom of the tank	☐	☐	☐	☐	☐
spill prevention equipment is clean and dry	☐	☐	☐	☐	☐
tank top containment sumps are clean and dry	☐	☐	☐	☐	☐
transition containment sumps are clean and dry	☐	☐	☐	☐	☐
under dispenser containment sumps are clean and dry	☐	☐	☐	☐	☐

V. IUM Record Review:

Financial Responsibility:

records showing the system participates in USTIF are available (paid USTIF invoices and/or fuel delivery receipts with USTIF fee)	☐	☐	☐	☐	☐

Walkthrough Inspections:

walkthrough inspection records for the last 12 months the system contained product	☐	☐	☐	☐	☐
monthly and annual walkthrough inspections cover all required equipment	☐	☐	☐	☐	☐
deficiencies noted during the walkthrough inspections were properly addressed	☐	☐	☐	☐	☐

Historical Records:

records documenting the underground tank system installation	☐	☐	☐	☐	☐
records documenting underground tank system modification and upgrade activities	☐	☐	☐	☐	☐

Modification Reports (if more room is needed, please continue the chart in the comments section):

date of modification report	tank system component(s) impacted	certified tank handler	tank systems modified				
			☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐

UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION REPORT FORM

Facility Name _____ **Date** _____ **Facility ID** _____ – _____

VI. CORROSION PROTECTION COMPLIANCE CRITERIA

- The UST Cathodic Protection System Evaluation Form(s) (2630-FM-BECB0610) must be attached to this report for the two most recent corrosion protection tests, if testing was conducted after December 22, 2018.

Instructions: ***Check the box to indicate that a criterion has been met.***
Circle the box to indicate that a criterion has not been met.
Circle with "N/A" when a criterion is not applicable (provide comment).

Tank System	*Tank* System	*Tank* System	*Tank* System	*Tank* System

Lined Tanks: (Tank only – code I)

tank inspected and lined according to national standard date lined: _____	☐	☐	☐	☐	☐
tank initially inspected 10 years after lining and every 5 years thereafter dates inspected: _____	☐	☐	☐	☐	☐

Galvanic and Impressed Cathodic Protection: (Tank code B, C, O, P, V or W and/or Piping; this section is **required** for Impressed Current CP**)**

tank structure to soil potential is equal to or more negative than -850 mV, **or** meets other nationally recognized protection standard: specify: _____	☐	☐	☐	☐	☐
most recent tank CP survey (date) _____					
previous tank CP survey (date) _____					
pipe/flex structure to soil potential is equal to or more negative than -0850 mV, **or** meets other nationally recognized protection standard: specify: _____	☐	☐	☐	☐	☐
most recent **pipe/flex** CP survey(date) _____					
previous **pipe/flex** CP survey (date) _____					

Impressed Current Design and Rectifier Output: (Tank code C or P and/or Piping)

system was designed by a corrosion expert	☐	☐	☐	☐	☐
system is turned on and functioning within design limits	☐	☐	☐	☐	☐
any variation of ± 10% of the initial amperage readings have been properly investigated	☐	☐	☐	☐	☐
documentation of last three amp readings (plus volt and runtime when meters available), recorded at least once every 60 days:	☐	☐	☐	☐	☐

most recent:	volts:	amps:	runtime:	date:
60 days prior:	volts:	amps:	runtime:	date:
120 days prior:	volts:	amps:	runtime:	date:

If Cathodic Protection or supplemental anodes were added to an existing tank system, fill in the following (Information is Required for Compliance):

Date assessed: _____ Date installed: _____

Assessment Method: _____

VII. Operator Training

- ☐ list of trained operators designates a class A operator and they have their Class A operator training certificate
- ☐ list of trained operators designates a class B operator and they have their Class B operator training certificate
- ☐ list of trained operators designates class C operator(s) and the date of their initial training or last refresher is within the previous 12 months
- ☐ written instructions and notification procedures are readily available for class C operators at retail facilities OR are posted in a location visible to the storage tank user at non-retail facilities

DESCRIBE INFORMAL TRAINING PROVIDED FOR OWNER, CLASS A AND/OR CLASS B OPERATORS – see instructions.

_____
_____
_____
_____
_____

UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION REPORT FORM

Facility Name _____ **Date** _____ **Facility ID** _____ – _____

VIII. COMMENTS INCLUDING ACTIONS TO BRING INTO COMPLIANCE (Attach additional sheets where necessary)

Tank Manufacturer	**Tank Construction** (i.e. Double-walled Act 100 with Anodes)

Piping Manufacturer	**Piping Model/Brand**	**Piping Generation (if applicable)**