Sample Walkthrough Inspection Checklist

Date Of Inspection							
Required Every 30 Days (exception: if your UST system receives deliveries at intervals greater than 30 days, you may check your spill prevention equipment prior to each delivery.							
Visually check spill prevention equipment for damage. Remove liquid or debris.							
Check for and remove obstructions in fill pipe.							
Check fill cap to ensure it is securely on fill pipe.							
For double-walled spill prevention equipment with interstitial monitoring, check for a leak in the interstitial area.							
Check release detection equipment to ensure it is operating with no alarms or unusual operating conditions present.							
Review and keep current release detection records.							
Required Annually							
Visually check containment sumps for damage and leaks to the containment area or releases to the environment.							
Remove liquid in contained sumps or debris.							
For double-walled containment sumps with interstitial monitoring, check for leaks in the interstitial area.							
Check hand-held release detection equipment, such as groundwater bailers and tank gauge sticks, for operability and serviceability.							
Recommended Activities							
Fill and monitoring ports: Inspect all fill or monitoring ports and other access points to make sure that the covers and caps are tightly sealed and locked.							
Spill and overfill response supplies: Inventory and inspect the emergency spill response supplies. If the supplies are low, restock the supplies. Inspect supplies for deterioration and improper functioning.							
Containment sump areas: Look for significant corrosion on the UST equipment.							
Dispenser hoses, nozzles, and breakaways: Inspect for loose fittings, deterioration, obvious signs of leaks, and improper functioning.							

Your initials in each box below the date of the inspection indicate the device or system was inspected and satisfactory on that date.

In the following table, explain actions taken to fix issues.

Date	Action Taken

Keep this record for at least one year after last inspection date on the form.

Sample Annual Release Detection Testing Recordkeeping Form

Date(s) of annual release detection operation test: _____

Component Tested	Name Of Tester	Meets Criteria? (Y/N)	Needs Action? (Y/N)	Action Taken To Correct Issue
Automatic tank gauge and other controllers: test alarm; verify system configuration; test battery backup.				
Probes and sensors: inspect for residual buildup; ensure floats move freely; ensure shaft is not damaged; ensure accessible cables are free of kinks and breaks; test alarm operability and communication with controller.				
Automatic line leak detector: test to ensure device can detect 3 gallons per hour at 10 pounds per square inch (or equivalent) within one hour by simulating a leak.				
Vacuum pumps and pressure gauges: ensure proper communication with sensors and controller.				
Hand-held electronic sampling equipment associated with groundwater and vapor monitoring: ensure proper operation.				
Other Components Tested:				

Notes:

_____ _____

Release Detection Tester Signature **Date**

Keep this record for three years.

Sample Recordkeeping Form For Liquid Tightness Tests For Spill Buckets And Containment Sumps (For Use By A Qualified Tester)

Test Date: ____/____/____ Facility Name/ID: _____

Tank number					
Product stored					
Spill bucket/containment sump ID					
Spill bucket/containment sump manufacturer					
Liquid or debris removed from bucket/sump?* (circle one)	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No
Visual inspection (no cracks, loose parts, or separation) (circle one)	Pass / Fail	Pass / Fail	Pass / Fail	Pass / Fail	Pass / Fail
Starting water or vacuum level					
Test start time					
Ending water or vacuum level					
Test end time					
Test duration					
Water or vacuum level change					
Test results (circle one)**	Pass / Fail	Pass / Fail	Pass / Fail	Pass / Fail	Pass / Fail
Comments					

* All liquids and debris must be disposed of properly.
** Pass or fail criteria are based on the method used for testing. For example, EPA allows the Petroleum Equipment Institute's Recommended Practice 1200 to be used for this testing. This code of practice contains information about the pass or fail criteria.

Notes:

Testing company:_____

Tester's name:_____

Tester's signature:_____

Keep this record for three years.

Sample Recordkeeping Form For Overfill Equipment Inspections (For Use By A Qualified Inspector)

Inspection Date: ____/____/____
Facility Name/ID: _____

Tank number					
Product stored					
Overfill equipment manufacturer					
Type (circle one)	Automatic shutoff device Ball float valve Overfill alarm	Automatic shutoff device Ball float valve Overfill alarm	Automatic shutoff device Ball float valve Overfill alarm	Automatic shutoff device Ball float valve Overfill alarm	Automatic shutoff device Ball float valve Overfill alarm
Automatic Shutoff Device Inspection					
Drop tube removed from tank?	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No
Drop tube and float mechanisms are free of debris?	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No
Float moves freely without binding and poppet moves into flow path?	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No
Bypass valve in the drop tube (if present) is open and free of blockage?	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No
Flapper is adjusted to shut off flow at 95% capacity?	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No
Overfill Alarm Inspection					
Electronic device and probe are operating properly?	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No
Alarm activates at 90% capacity or within one minute of overfill?	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No
Alarm can be heard or seen from where the tank is fueled?	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No
Ball Float Valve Inspection					
Tank top fittings are vapor-tight and leak-free?	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No
Ball float cage free of debris?	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No
Ball is free of holes and cracks and moves freely in cage?	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No
Vent hole in pipe is open and near top of tank?	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No
Ball float pipe is proper length to restrict flow at 90% capacity?	Yes / No	Yes / No	Yes / No	Yes / No	Yes / No
Inspection Results (Circle One) (No to any question indicates a test failure.)	**Pass / Fail**	**Pass / Fail**	**Pass / Fail**	**Pass / Fail**	**Pass / Fail**
Comments					

Inspecting company: _____ Inspector's signature: _____
Inspector's name: _____

Keep this record for three years.