

## STI SP001 ANNUAL ABOVEGROUND STORAGE TANK INSPECTION CHECKLIST

For use of this form, see the Spill Prevention, Control, and Countermeasures (SPCC) Plan; proponent is DPW-ENRD

DATE

CONTAINER ID  
INSPECTOR

	ITEM	STATUS	COMMENTS
<b>1.0 TANK CONTAINMENT</b>			
1.1	Containment structure in satisfactory condition?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
1.2	Drainage pipes/valves fit for continued service?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA	
<b>2.0 TANK FOUNDATION AND SUPPORTS</b>			
2.1	Evidence of tank settlement or washout?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
2.2	Cracking or spalling of concrete pad or ring wall?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
2.3	Tank supports in satisfactory condition?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
2.4	Water able to drain away from tank?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
2.5	Grounding strap secured and in good condition?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA	
<b>3.0 CATHODIC PROTECTION</b>			
3.1	CP system functional?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA	
3.2	Rectifier reading:		
<b>4.0 TANK EXTERNAL COATING</b>			
4.1	Evidence of paint failure?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>5.0 TANK SHELL/HEADS</b>			
5.1	Noticable tank/shell distortions, buckling, denting, or bulging?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
5.2	Evidence of shell/head corrosion or cracking?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>6.0 TANK MANWAYS, PIPING AND EQUIPMENT WITHIN SECONDARY CONTAINMENT</b>			
6.1	Flanged connection bolts tight and fully engaged with no sign of wear or corrosion?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA	
<b>7.0 TANK ROOF</b>			
7.1	Standing water on tank roof?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
7.2	Evidence of coating cracking, crazing, peeling, blistering?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
7.3	Holes in roof?	<input type="checkbox"/> YES <input type="checkbox"/> NO	

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<b>8.0 VENTING</b>			
8.1	Vents free of obstructions?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
8.2	Emergency vent operable? Lift as required.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>9.0 INSULATED TANKS</b>			
9.1	Insulation missing?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
9.2	Are there noticable areas of moisture on the insulation?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
9.3	Mold on insulation?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
9.4	Insulation exhibiting damage?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
9.5	Is the insulation sufficiently protected from water intrusion?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>10.0 TANK EQUIPMENT</b>			
10.1	Is interstitial leak detection in good condition? Are windows on sight gauges clear?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
10.2	Has secondary containment been checked for liquid? Notate any findings.	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA	
10.3	Does the tank liquid level sensing device operate as required?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
10.4	Are overfill prevention devices in proper working condition?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA	
<b>11.0 ELECTRICAL EQUIPMENT</b>			
11.1	Are tank grounding lines in good condition?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA	
11.2	Has grounding line been tested?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA	
11.3	Resistence reading:		
11.4	Is electrical wiring for control boxes/lights in good condition?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA	