Environmental Health and Safety Office

Research Administration

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UNDERGROUND STORAGE TANK MONTHLY INSPECTION FORM

Date of Survey: _____

Conducted By: _____

Facility Name: _____

Phone Number: _____

This form is intended to assist in Emory's compliance with Underground Storage Tank (UST) regulations.

Instructions:
- Complete the inspection form and identify any corrective actions that are required.
- Following completion of this form, email it to chemwaste@emory.edu
- For any corrective actions, fill in the CA Completion Date upon completion.
- Keep this form available on-site for 3 years.

Item #	Item	Yes	No	N/A	Comments / Corrective Action (CA)	CA Completion Date
1.0	**INVENTORY CONTROL**					
1.1	The liquid measurement of the tank appears to be accurate.					
1.2	The tank is not filled over 95% of the tank capacity.					
2.0	**RELEASE DETECTION & CATHODIC PROTECTION**					
	Interstitial Monitoring					
2.1	The Interstitial Monitoring Log has been completed for the month.					
	Cathodic Protection					
2.2	The Cathodic Protection Rectifier Log has been completed for the month.					
	Automatic Tank Gauge (ATG)					
2.3	The ATG is on and seems to be functioning correctly.					
2.4	The ATG is not in warning or in alarm.					
2.5	The ATG printer has paper and is in working condition.					
2.6	The ATG is producing passing test results.					
2.7	A passing ATG report has been collected for the month & is filed.					
3.0	**SPILL & RELEASE PREVENTION**					
3.1	The spill bucket is free of debris and is in good repair.					
3.2	Any water in the spill bucket is free of a sheen.					

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3.3	The flapper valve on the drop tube is visible.					
3.4	There is no indication of free product or vapors in nearby soil.					
3.5	Operating and product dispensing conditions are normal.					
3.6	There is no indication of water in the tank.					