**UST Operator Inspection - Utah  
YEAR**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Facility Name** | | | | | | | | | | | | **Facility ID** | | | | | | | | | | | | | | | | | |
| **Address** | | | **Primary Class B Operator** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **NAME(S) AND INITIALS OF PERSON(S) CONDUCTING MONTHLY INSPECTIONS:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please respond to **ALL** of the following questions with a **Y** (Yes), **N** (No), or **NA** (Not Applicable) answer. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Months of the Current Year** | | | | | **J** | | **F** | | **M** | | **A** | | | **M** | | **J** | | | **J** | | **A** | | **S** | | **O** | | **N** | | **D** |
| |  | | --- | | **Monthly Inspection – Release Detection** | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | Release detection equipment is operating with no alarms or other unusual operating conditions. | | | |  | |  | |  | |  | | |  | |  | | |  | |  | |  | |  | |  | |  |
| 2 | Records of release detection (tanks and piping) are reviewed and current. | | | |  | |  | |  | |  | | |  | |  | | |  | |  | |  | |  | |  | |  |
| |  | | --- | | **Monthly Inspection – Spill Prevention Equipment** | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 | Equipment is undamaged, intact and free from defects. | | | |  |  | |  | |  | | |  | |  | | |  | |  | |  | |  | |  | |  | |
| 4 | Equipment is free from debris, water, or product. | | | |  |  | |  | |  | | |  | |  | | |  | |  | |  | |  | |  | |  | |
| 5 | Fill Pipe is unobstructed. | | | |  |  | |  | |  | | |  | |  | | |  | |  | |  | |  | |  | |  | |
| 6 | Fill cap is un-broken and is securely on the fill pipe. | | | |  |  | |  | |  | | |  | |  | | |  | |  | |  | |  | |  | |  | |
| 7 | Double walled spill prevention equipment - Interstitial area is free from leaks. | | | |  |  | |  | |  | | |  | |  | | |  | |  | |  | |  | |  | |  | |
| **Initials of person performing Inspection.** | | | | |  |  | |  | |  | | |  | |  | | |  | |  | |  | |  | |  | |  | |
| |  |  |  | | --- | --- | --- | | **Annual Inspection – Containment Sumps** | **Date of annual Inspection** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8 | **Secondary Containment Sumps (STP, Dispenser and Transition)** | Visual Inspection of sump indicates no damage and it is free from debris, water and fuel. | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  |  | The penetration fittings for conduits and piping entering the STP Sumps are intact. | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| 9 | **Double Walled Sumps** | Interstitial area is free from leaks. | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| 10 | **Hand-held release detection equipment** | Hand-held release detection equipment (bailer, gauge stick, etc.) is serviceable and operable. | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| **I certify under penalty of law that I am the Class B Operator referenced above and that I am familiar with information on this form and that it is true, accurate and was completed in accordance with R311-203-7.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature of the Primary Class B Operator (**Sign this document after the last inspection of the Current Year)** | | | | | | | | | | | | | | | | | Date | | | | | | | | | | | | |
|  | | | | B Operator # | | | | | | | | | | | | |  | | | | | | | | | | | | |

**Comments/Follow up:**

**Turn over for record of Interstitial Monitoring visual inspections and Impressed Current rectifier checks.**

**UST Operator Inspection - Utah – Page 2 of 2**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **If you perform Interstitial Monitoring on your tanks and/or piping and use a visual check rather than sump or interstitial sensors for your monthly leak detection, complete the table to document the monthly visual checks.** | | | | | | | | | | | | | |
|  | **Months of the Current Year** | J | F | M | A | M | J | J | A | S | O | N | D |
| 1 | Visual check of the interstitial space of the double-walled tank indicated no release or unusual operating conditions. |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 | Visual check of piping (STP, dispenser and transition) containment sumps indicates normal function and no indication of water or leaked product. |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Impressed Current 60 Day Rectifier Check** | | | | | | | | | | | | |
| **Months of the Current Year** | **J** | **F** | **M** | **A** | **M** | **J** | **J** | **A** | **S** | **O** | **N** | **D** |
| **Show the date the Impressed Current system was inspected to ensure the equipment is running properly** |  |  |  |  |  |  |  |  |  |  |  |  |
| **Amperage reading from impressed current rectifier** |  |  |  |  |  |  |  |  |  |  |  |  |
| **Voltage reading from impressed current rectifier** |  |  |  |  |  |  |  |  |  |  |  |  |

**INSTRUCTIONS**

1. The monthly UST system inspections must be conducted by or under the direction of the Primary Class B UST Operator.

2. The Primary Class B UST Operator must alert the UST Owner or Operator of any condition discovered during the monthly visual inspection that may require follow-up actions.

3. The UST Owner or Operator must maintain a copy of the monthly inspection reports for the most recent 12 months. The records shall be maintained on-site or off-site at a readily available location.

**Ver. 4/14/2016**