

ABOVEGROUND STORAGE TANK MONTHLY VISUAL INSPECTION FORM

Facility name		Inspection Date
Street address	City	ZIP

Use either this form or its equivalent to document monthly visual inspections required by §3-5 of Colorado's Storage Tank Regulations. Keep these records at least 12 months. However, it is advisable to keep records indefinitely, since they may be required as part of the compliance review concerning a claim for reimbursement from the Petroleum Storage Tank Fund.

1. Visible leaks on tanks, tank seams, connections, fittings or valves? No Yes **Number of tanks inspected** _____
 If "yes," identify tank & describe leak. Record action taken to correct problem and date done.

2. Visible leaks on aboveground piping, pipe seams, connections, fittings, flanges, threaded connections, pumps or valves? No Yes
 If "yes," identify & describe leak. Record action taken to correct problem and date done.

3. Is overfill prevention equipment in good operating condition? No Yes Not applicable
 If "no," identify tank. Record action taken to correct problem and date done.
Verify operation of overfill prevention equipment according to the equipment manufacturer's instructions. Verify operation of audible alarm if it can be tested.

4. If double-walled tank:
A. Is interstice free of liquid? No Yes
 If "no," identify tank. Record action taken to correct problem and date done.

B. Is interstitial monitoring equipment operating properly? No Yes Not applicable
 If "no," identify tank. Record action taken to correct problem and date done.
Verify operation of interstitial monitoring equipment according to the equipment manufacturer's instructions.

5. Secondary containment system free of tank product or other liquids/debris, such as rainwater, snowmelt, dirt, leaves, trash, etc.) No Yes Not applicable
 If "no," identify tank. Record action taken to correct problem and date done.

6. Are concrete surfaces and ground free of any evidence of new leakage or spillage? No Yes
 If "no," describe. Record action taken to correct problem and date done.

Signed	Date
---------------	-------------

**REPORT SUSPECTED OR CONFIRMED LEAKS TO THE DIV. OF OIL & PUBLIC SAFETY WITHIN 24 HOURS:
303-318-8547**