## Recommended Practices for the Inspection and Maintenance of UST Systems

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## APPENDIX A-2: SAMPLE FORM FOR ANNUAL LEAK DEVICE INSPECTION CHECKLIST

Go to www.pei.org/RP900 for an electronic version of this form.

Category	escription			N/A	Tank 1	Tank 2	Tank 3	Tank 4
Leak Detection Device. Describe location (e.g., interstitial, STP, fill, dispenser) on this row:			7.7					
Liquid Sensor	Sensor tested and functional	TEST DATE:	7.7.1					
	Sensor properly mounted at the bottom of the containment sump or pan (containment sump or pan sensor only)		7.7.3					
	Sensor properly mounted at the bottom of double-walled tank (double-walled tank sensor only)		7.7.4					
Discriminating Sensor	Sensor tested and functional	TEST DATE:	7.7.1					
			7.7.3					
	Sensor properly mounted at the bottom of double-walled tank (double-walled tank sensor only)		7.7.4					
Hydrostatic Sensor	Sensor tested and functional	TEST DATE:	7.7.1					
	Hydrostatic sensor properly positioned		7.7.5					
Vacuum/Pressure Sensor	Sensor tested and functional	TEST DATE:	7.7.1					
	Alarm sounds when pressure or vacuum is released	TEST DATE:	7.7.2					
	Entire interstitial space under pressure or vacuum (closed double-walled piping system only)	TEST DATE:	7.7.7					
Visually Monitored Double-Walled Sump	Leak detection device is within recommended limits		7.7.6					
Dispenser Pan Float Mechanism	Sensor tested and functional	TEST DATE:	7.7.1					
	Dispenser pan float mechanism free to move and properly adjusted	TEST DATE:	7.7.8					
DESCRIBE ANY	DEFICIENCIES HERE:							