

***UNDERGROUND STORAGE TANK
OPERATOR CLASS A & B
TRAINING COURSE***

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**MODULE 1
OPERATOR
REQUIREMENTS AND
RESPONSIBILITIES**

OPERATOR TRAINING REQUIREMENTS

- PA Code Title 25 Chapter 245.436 became effective December 26, 2009
- Requires all facilities with regulated underground storage tanks to have at least one designated Class A, B, and C operators by August 8, 2012

CLASS A OPERATOR

- Assigned the primary responsibility of ensuring PADEP compliant operation of the regulated underground storage tank system(s) at all facilities
- Makes sure UST systems are properly installed, repairs are made correctly and in a timely manner, and that documentation of repairs/modifications are maintained
- Must understand the different operator classifications along with the responsibilities and training requirements that accompany them
- A Class A operator can train Class C operators; training to include:
 - Site specific training
 - Preparation of Class C training material
 - Documentation of training
 - Ensuring Class C training is kept up to date



CLASS B OPERATOR

- Understands day to day operations relating to compliance, monitoring, record keeping, maintenance, and spill prevention
- Ensures equipment used on the UST system is operational, third party certified, and capable of functioning with the specific system. This includes overfill & spill prevention, corrosion protection, and release detection equipment
- Must be familiar with their own duties and the duties of the Class C operators. Class B operators may also train Class C operators



CLASS C OPERATORS



- Class C operators are trained by the Class A or Class B operators
- Training is to be site specific at the facility where the Class C operator is working
- The main focus of a Class C operator is emergency procedures, such as:
 - Spill response and general site safety. (i.e. not allowing smoking at the pumps)
 - Making appropriate notifications for spills, alarms, etc.....
 - Location and operation of the emergency stop



MULTI-CLASS OPERATORS

- An 'A' operator is also a qualified 'B' and/or 'C' operator
- A 'B' operator is also a qualified 'C' operator



For a small facility, one person can fulfill all the required operator roles but....

OPERATOR RESPONSE REQUIREMENTS



- Class A or B operator must be available for immediate phone consultation during operating hours
- Class A or B operator must be able to be at the site within 24 hours
- Class C operator should always be at the site during operating hours

WHAT ABOUT UNMANNED FACILITIES?

- Class A and B response times are the same
- A Class C operator must be available immediately for phone consultation and be able to be onsite within 2 hours of being contacted
- Emergency contacts and procedures must be prominently displayed for all users of the site



OTHER OPERATOR OPTIONS

- Regulations do not specify that operator must be a direct employee
- Operator classes can be sub-contracted to a 3rd party that possesses the appropriate certification. If you are sub contracting your A operator then a signed contract must exist.
- PADEP certified individuals in the IUM and/or UMX and/or UMI category are automatically certified as an 'A' Operator (if an IUM is a facilities Class A operator they are not allowed to perform official FOI's at the site)

MODULE 2 FINANCIAL RESPONSIBILITY & TANK NOTIFICATIONS/REGISTRATION

FINANCIAL RESPONSIBILITY *USTIF*

- All regulated USTs must be insured through the Pennsylvania Underground Storage Tank Indemnification Fund (USTIF)

- The fund is administered by ICF, Inc., a third party consulting firm
- Heating oil tanks greater than 3,000 gallons can opt into the fund



USTIF FEES

1. All regulated USTs storing gasoline, gasohol, aviation fuel, new motor oil, hazardous substances, mixture, other, and diesel fuel tanks at farms pay 1.1 cents per gallon which is charged by the distributor at the time of delivery
2. All regulated USTs storing heating oil, diesel fuel, kerosene, used motor oil and unknown products are charged a fee of 8.25 cents per gallon of UST capacity paid annually

DOCUMENTATION

- 2018 Regulations now require the FOI inspector to review USTIF records
- This could include logging in to your USTIF account and showing the inspector you have a zero balance
- For records in category 1, this will be you BOL's/Invoices from your distributor(s)
- For records in category 2, it will be your annual invoice from USTIF

FILING USTIF CLAIMS

- Call (717) 787-0763 or (800) 595-9887 (IN PA) to report a claim
- Claims **must** be submitted within 60 days of the discovery of the release or they will be denied!!!
- PADEP & USTIF notifications are separate. Make sure you do **BOTH!**
- Deductibles:
 - **Corrective Action: \$5,000** per tank per occurrence
 - **3rd Party Liability: \$5,000** per tank per occurrence
- Coverage is \$1.5 million per occurrence

PA DEP FORMS

- 30 Day Closure/Installation Form: Submitted 30 days before the installation or permanent closure of a UST system. This should be signed by the tank owner and lists the DEP certified individual to perform the work.

2018 UPDATED FORM

2018 PM DEC09127 Rev. 12/2018 COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF ENVIRONMENTAL CLEANUP AND BROWNFIELD REDEVELOPMENT

DATE RECEIVED: _____

**UNDERGROUND STORAGE TANK SYSTEM
INSTALLATION / CLOSURE NOTIFICATION FORM**

NOTE: The appropriate regional office of the Department must receive notification of installation, change-in-service or permanent closure at least 30 days prior to beginning on-site activities. Report subsequent delays as soon as known.

I. Location of Tank System

Facility Name _____ Facility Identification Number _____

Street Address _____ City _____ State _____ Zip Code _____

Municipality _____ County _____

Contact Person _____ Phone Number () - _____

II. Owner of Tank System

Owner Name _____

Street Address _____ Phone Number () - _____

City _____ State _____ Zip Code _____

III. This notification is for:

☐ New installation ☐ Complete system replacement ☐ Partial system replacement

☐ Change-in-service ☐ Complete system closure ☐ Partial system closure

IV. Month/Day/Year of Proposed Installation / Closure _____ / _____ / _____

V. Certified Installer or Remover/Company Performing Tank Handling Activities

Certified Installer/Remover Name _____ Installer/Remover Certification Number _____

Street Address _____ Phone Number () - _____

City _____ State _____ Zip Code _____

Certified Company Name _____ Company Certification Number _____

VI. (For Closure) Contractor/Individual Performing Site Assessment Activities

Name of Contractor or Individual _____

Street Address _____ Phone Number () - _____

City _____ State _____ Zip Code _____

VII. (For Installation) Briefly Describe Underground Storage Tank System(s) to be Installed

Tank Size _____ Substance to be Stored _____ Tank Size _____ Substance to be Stored _____

VIII. Signature of Tank System Owner _____ Title _____ Date _____ / _____ / _____

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2018 PM DEC09127 Rev. 12/2018

IX. (For Closure) Description of Underground Storage Tank System(s) to be Closed
Complete for each tank undergoing closure. Include additional sheets as necessary.

DEP Tank ID Number _____

Total Capacity (gallons) _____

Substance(s) Stored _____

Throughput Operating _____

Life of Tank (Check All That Apply)

a. Petroleum

Unleaded Gasoline _____

Leaded Gasoline _____

Aviation Gasoline _____

Pure Ethanol _____ %

Blended Ethanol _____ %

Kerosene _____

Jet Fuel _____

Diesel Fuel _____

Biodiesel _____ %

Fuel Oil No. 1 _____

Fuel Oil No. 2 _____

Fuel Oil No. 4 _____

Fuel Oil No. 5 _____

Fuel Oil No. 6 _____

New Motor Oil _____

Used Motor Oil _____

Nonpetroleum Oil, Specify _____

Other, Specify _____

b. Hazardous Substance

Name of Principal _____

CERCLA Substance _____

AND _____

Chemical Abstract Service (CAS) No. _____

c. Unknown _____

Proposed Closure Method(s):

Tank

☐ N/A

Piping

☐ N/A

Dispenser

☐ N/A

Other _____

Describe Planned Closure Activities:

- 2 -

PA DEP FORMS

- **Registration Form:** This is used to register or remove tanks from PA DEP's system. It must be signed by an individual certified in the activity being claimed on the form as well as the tank owner. The exceptions to a certified individual signing is change of ownership & the owner making administrative changes.

2030-PM-DECB0514 Rev. 2/2017
FORM
Commonwealth of Pennsylvania
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF ENVIRONMENTAL CLEANUP AND BROWNFIELDS

STORAGE TANKS REGISTRATION / PERMITTING APPLICATION FORM

Before completing this form, read the step-by-step instructions provided in this application package.

DEP USE ONLY	
Client ID#	
Site ID#	
Account #	
Auth ID#	
APIS ID#	
Motor Fuel ID#	

Facility ID # _____

Facility Name _____

I. PURPOSE OF SUBMITTAL

INITIAL (Applies to First-Time Facility Registration)

☐ Register Tank(s) to be Used* ☐ Register Tank(s) to be Temporarily Out of Use

☐ Register Tank(s) to be Removed ☐ Register Tank(s) to be Closed in Place

AMENDED (Applies to Currently Registered Tank(s) or Existing Facility)

☐ Changed Owner Information ☐ Changed Contact Information

☐ Changed Facility Information ☐ Changed Facility Operator Information

☐ Changed to Currently In Use Tank(s)* ☐ Added Tank(s) to Existing Facility*

☐ Changed to Temporarily Out of Use Tank(s) ☐ Changed to Permanently Closed Tank(s)/Removed

☐ Changed Product ☐ Changed to Exempt Tank(s)

CHANGE OF OWNERSHIP

☐ Tanks Changed Ownership and Remain at Same Facility*

* For Underground Storage Tanks (UST), attach the UST Operator Training Documentation Form (2030-PM-DECB0514a) and copies of the Class A and Class B operator training certificates.

II. CURRENT OR NEW TANK OWNER / CLIENT INFORMATION

DEP Client ID# _____ Client Type/Code _____ Fee Kind (check one if applicable) ☐ Volunteer Fire Co/EMS Org ☐ State Govt ☐ Fed Govt

Organization Name or Registered Fictitious Name _____ Employer ID# (EIN) _____ DUL & B/Address/ID# _____

Individual Last Name _____ First Name _____ MI _____ Suffix _____ SSN _____

Additional Individual Last Name _____ First Name _____ MI _____ Suffix _____ SSN _____

Mailing Address Line 1 _____ Mailing Address Line 2 _____

Address Last Line - City _____ State _____ ZIP+4 _____ Country _____

Client Contact Last Name _____ First Name _____ MI _____ Suffix _____

Client Contact Title _____ Phone _____ Ext _____

E-mail Address _____ FAX _____

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FORM
III. SITE INFORMATION

DEP Site ID# _____ Site Name _____

EPA ID# _____ Estimated Number of Employees to be Present at Site _____

Description of Site _____

County Name _____ Municipality _____ City _____ Boro _____ Twp _____ State _____

County Name _____ Municipality _____ City _____ Boro _____ Twp _____ State _____

Site Location Line 1 _____ Site Location Line 2 _____

Site Location Last Line - City _____ State _____ ZIP+4 _____

Detailed Written Directions to Site _____

Site Contact Last Name _____ First Name _____ MI _____ Suffix _____

Site Contact Title _____ Site Contact Firm _____

Mailing Address Line 1 _____ Mailing Address Line 2 _____

Address Last Line - City _____ State _____ ZIP+4 _____

Phone _____ Ext _____ FAX _____ E-mail Address _____

NADCS Codes (Two- & Three Digit Codes - List All That Apply) _____ 6 Digit Code (Optional) _____

Site to Client Relationship _____

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Form

IV. FACILITY INFORMATION

DLP Storage Tank Facility ID# Facility Name Facility Kind

Facility Location Line 1 (if different than Site Location) Facility Location Line 2

Facility Location Last Line - City State ZIP+4

Latitude/Longitude Latitude Longitude

Point of Origin Degrees Minutes Seconds Degrees Minutes Seconds

Horizontal Accuracy Measure Feet Meters

Horizontal Reference Datum Code ☐ North American Datum of 1927
☐ North American Datum of 1983
☐ World Geodetic System of 1984

Horizontal Collection Method Code

Reference Point Code

Altitude Feet Meters

Altitude Datum Name ☐ The National Geodetic Vertical Datum of 1929
☐ The North American Vertical Datum of 1988 (NAVD88)

Altitude (Vertical) Location Datum Collection Method Code

Geometric Type Code

Data Collection Date

Source Map Scale Number Inches(s) = Feet
 Centimeter(s) = Meters

Harmable & Combustible Liquid Permit # (if applicable)

State or Municipality that Issued the Permit

FACILITY OPERATOR INFORMATION

☐ Same as Owner Identified in Section II. ☐ Different than Owner Identified in Section II; identified below.

DLP Client ID# Client Type / Code

Organization Name or Registered Fictitious Name Employer ID# (EIN) DUL & Bradstreet ID#

Individual Last Name First Name MI Suffix SSN

Additional Individual Last Name First Name MI Suffix SSN

Mailing Address Line 1 Mailing Address Line 2

Address Last Line - City State ZIP+4 Country

Client Contact Last Name First Name MI Suffix

Client Contact Title Phone Ext

E-mail Address FAX

2630-PM-BECB0514 Rev. 2/2017
Form

V. CHANGE OF OWNERSHIP INFORMATION

☐ All Tanks Changed Ownership at the Facility
☐ Some Tanks Changed Ownership at the Facility (List all applicable tank numbers in Section VI.)

OWNERSHIP CHANGE TO: Client information is noted in Section II.

OWNERSHIP CHANGE FROM (previous owner information)

Name

Employer ID# (EIN) or SSN

Mailing Address Line 1

Mailing Address Line 2

Address Last Line - City State ZIP+4

Previous Facility ID#

DATE OF SALE/TRANSFER

SIGNATURE & CERTIFICATION OF PREVIOUS OWNER

Previous owner's signature is not available. An required, the "new" owner has attached a deed of transfer or other proof of ownership to this application. ☐ Yes ☐ No ☐ N/A

I have reviewed this form for submission to the Department. I certify under penalty of law as provided in 18 PA, C.S.A. §4902 (relating to false swearing) and 18 PA, C.S.A. §4904 (relating to unsworn falsification to authorities), that I have the authority to sign this Section for the transfer of permit or registration for the storage tanks listed herein. Further, I certify that all information provided in Section V is true, accurate and complete to the best of my knowledge and belief.

Type or Print Previous Owner Name

Previous Owner Signature Title Date

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Form

Facility ID# Facility Name

VI. STORAGE DESCRIPTION

Type or print legibly each regulated storage tank at this facility under your ownership.

Status Codes: C-Currently in Use E-Exempt R-Removed P-Closed In Place
Type Codes: M-Manufactured F-Field Constructed

A. ABOVEGROUND TANKS. List all new tanks. If amending information, list only those tanks being amended. Copy this page if more lines are needed.

Tank#	Prev Status	New Status	Type	Install Date (Mo/Day/Yr)	Change of Status Date (Mo/Day/Yr)	Capacity (Gallons)	Substance Code (Currently or Last Stored)	CERCLA Name (If Hazardous Substance) Substance Name (If Other Petroleum Substance or Petroleum Based Mixture)	CAS# (If Hazardous Substance)	Exempt Reference Code
A										
A										
A										
A										
A										
A										
A										
A										
A										

B. UNDERGROUND TANKS. List all new tanks. If amending information, list only those tanks being amended. Copy this page if more lines are needed.

Tank#	Prev Status	New Status	Type	Install Date (Mo/Day/Yr)	Change of Status Date (Mo/Day/Yr)	Capacity (Gallons)	Substance Code (Currently or Last Stored)	CERCLA Name (If Hazardous Substance) Substance Name (If Other Petroleum Substance or Petroleum Based Mixture)	CAS# (If Hazardous Substance)	Exempt Reference Code

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Form

Facility ID#

Facility Name

VII. ABOVEGROUND & UNDERGROUND NEW TANK INSTALLATION INFORMATION

The DEP Certified Installer should complete this section. New tanks listed in Section VI must also be listed in this Section. Write the Tank Number(s) and place an ☒ in the appropriate box for each component that was installed.

Tank Construction & Corrosion Protection (1)	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #
A. Unprotected Steel (Single Wall)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Cathodically Protected Steel (Galvanic)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Cathodically Protected Steel (Impressed Current)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Unprotected Steel (Double Wall)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Fiberglass (Single Wall)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Fiberglass (Double Wall)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. Steel W/Plastic or Fiberglass Jacket or Double Wall Act 100	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. Steel With FRP Coating (Act 100 or Equivalent)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Steel With Lined Interior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J. Concrete	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
O. Cathodically Protected Double Wall Steel (Galvanic)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
P. Cathodically Protected Steel With Liner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q. Double Bottom (AST's Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
R. Molded Plastic Form (AST's Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S. Stainless Steel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
T. Aluminum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
U. Fire Protected Double Wall AST	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
V. Steel with Plastic or Fiberglass Jacket or Double Wall Act 100 with Anodes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
W. Steel with FRP Coating (Act 100 or Equivalent) with Anodes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
X. Molded Plastic Form (Double Wall) (AST's Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Form

Facility ID#

Facility Name

Underground Piping Construction & Corrosion Protection (2)

	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #
A. Bare Steel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Cathodically Protected Metallic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Copper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Single Wall Fiberglass	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Single Wall Flexible (Non-Metallic)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Double Wall Metallic Primary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J. Double Wall Rigid (FRP) Primary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K. Double Wall Flexible Primary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
L. Trench Liner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aboveground Piping Construction & Corrosion Protection (3)	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #
A. Carbon Steel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Cathodically Protected Metallic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Copper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Single Wall Fiberglass	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Single Wall Flexible (Non-Metallic)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. PVC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. Double Wall - Metallic Primary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J. Double Wall - Rigid (FRP) Primary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K. Double Wall - Flexible Primary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
L. Stainless Steel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Product Delivery System (4)	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #
A. Suction: Check valve at pump	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Suction: Check valve at tank	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Gravity fed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Form

Facility ID#

Facility Name

	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #
Spill Prevention (6)										
UST Only										
Y. Installed and Liquid Tight										
N. None										
E. Fill In Less Than 25 Gallons (Exempt)										
Overfill Prevention (7)										
A. Overfill Alarm										
B. Ball Float Valve and No Air Eliminator										
E. Fill In Less Than 25 Gallons (Exempt)										
N. None										
S. Drop Tube Shutoff Device										
Y. Yes (AST only)										
Emergency Containment (16)										
ASTs Only										
E. Exempt										
N. No										
Y. Yes										
V. Underground Vault										
Secondary Containment (17)										
ASTs Only										
E. Exempt										
N. No										
Y. Yes										
V. Underground Vault										
Stage I Vapor Recovery (19)										
USTs and ASTs When Applicable										
A. Coax										
B. 2 Point										
N. None or Incomplete										

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Form

Facility ID#

Facility Name

	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #
Stage II Vapor Recovery (20)										
A. Complete Balance System										
B. Complete Assist System										
C. UG Piping Only										
N. None										
Tank-top Containment Sumps Present										
(Product Piping Only) (21)										
USTs Only										
N. None										
S. At some penetrations and liquid tight										
A. At all penetrations and liquid tight										
Under-dispenser Containment Present (22)										
USTs Only										
N. None										
S. At some dispensers and liquid tight										
A. Under all dispensers and liquid tight										
Line Leak Detector Shuts Off Pump (23)										
USTs Only										
N. No										
Y. Yes										

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Form

Facility ID# _____ Facility Name _____

VIII. ABOVEGROUND & UNDERGROUND TANK INFORMATION FOR PERMANENT CLOSURE

Write the Tank Number(s) and place an ☒ in the appropriate box for each tank that was removed or closed in place.

Items 2 & 3 below apply to large ASTs and all USTs	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #	Tank #
1. Contamination suspected or observed and notification of contamination form was submitted to the appropriate DEP regional office.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Closure document submitted to the appropriate DEP regional office.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Closure document kept on file by owner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Form

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. This registration is conditioned upon compliance with provisions of the Storage Tank and Spill Prevention Act of 1989, all applicable regulations, and with the requirements for obtaining and maintaining a permit required under this Act. I certify my responsibility for assuring the following permit requirements:

- Storage tank systems are in compliance with applicable administrative, technical and operational requirements as specified in Subchapter E for underground tanks or Subchapter F or G for aboveground tanks.
- Tank handling and inspection activities are performed by an individual possessing DEP certification in the appropriate category as required in Subchapters A and B.
- Underground storage tanks meet the applicable financial responsibility requirements of Subchapter H (relating to financial responsibility requirements).
- A Spill Prevention Response (SPR) Plan must be submitted to the appropriate DEP regional office for facilities that have aboveground storage tanks where the total capacity of all aboveground tanks is greater than 21,000 gallons.
- Other state and local permits required for operation of the tank system have been attained.

My signature represents to the Department that I own the storage tank(s) and am aware of the responsibilities and potential liabilities as an "owner" arising under the Storage Tank and Spill Prevention Act of 1989 and all applicable regulations. I am also advised that statements made on this registration is made subject to the penalties of 18 PA. C.S.A. Section 4904 relating to unsworn falsification to authorities.

Type or Print Owner Name _____

Owner Signature _____ Title _____ Date _____

Information & Invoices should be sent to:

☐ Tank Owner Contact
☐ Site Contact
☐ Facility Operator
☐ Other Responsible Party Identified Below

Organization Name or Registered Fictitious Name _____ Employer ID# (EIN) _____ Dun & Bradstreet ID# _____

Individual Last Name _____ First Name _____ MI _____ Suffix _____ SSN _____

Additional Individual Last Name _____ First Name _____ MI _____ Suffix _____ SSN _____

Mailing Address Line 1 _____ Mailing Address Line 2 _____

Address Last Line - City _____ State _____ ZIP+4 _____ Country _____

Contact Title _____ Phone _____ Ext. _____

E-mail Address _____

Client to Site (Facility) Relationship _____

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Form

X. INSTALLER / REMOVER CERTIFICATION

This section must be completed by the certified tank handler(s) who is responsible for the installation or removal from service of the aboveground and underground storage tank systems listed in Section VI. Tank modification activity must be submitted on a "Tank Modification Report" form.

SIGNATURE & CERTIFICATION OF INSTALLER(S) / REMOVER(S)
As the certified tank handler responsible for the tank handling activities in the category or categories listed, I certify that all tank handling activities were conducted in compliance with the design, installation and operation standards of the Storage Tank and Spill Prevention Act of 1989 and all applicable regulations. I also certify, under penalty of law as provided in 18 PA C.S.A. 4904 (relating to unsworn falsification to authorities), that the information provided therein is true, accurate and complete to the best of my knowledge and belief.

Tank#	Installer/Remover Name	Construction Standard	Individual Certification#	Certification Category	Company Certification#	Installer/Remover Signature	Date

XI. INSPECTOR CERTIFICATION

This section must be completed by the DEP Certified Tank Inspector(s) who is responsible for verifying the installation standards for field constructed tanks and aboveground tanks greater than 21,000 gallons listed in Section VI. (Type or Print legibly) A DEP Certified Inspector may also be responsible for inspecting existing ASTs which are entering regulated service for the first time with no tank handling activities.

SIGNATURE & CERTIFICATION OF INSPECTOR(S)
As the certified tank inspector responsible for verifying tank handling activities and construction standards, I certify that the tank(s) listed below are constructed to appropriate industry standards and, if applicable, to manufacturer's specifications; that the tank(s) have been tested as required by industry standards; and that the tank(s) meet or exceed applicable design and operating standards; and are in compliance with the requirements of the Storage Tank and Spill Prevention Act of 1989, and all applicable regulations. I also certify under penalty of law as provided in 18 PA C.S.A. 4904 (relating to unsworn falsification to authorities), that the information provided herein is true, accurate and complete to the best of my knowledge and belief.

Tank#	Inspector Name	Construction Standard	Individual Certification#	Certification Category	Company Certification#	Inspector Signature	Date

XII. SITE SPECIFIC INSTALLATION PERMIT NUMBER

If a site-specific permit was required for a new tank installation, write the tank number(s) and permit number(s) in the appropriate box.

Site-Specific Installation Permit	Tank#	Tank#	Tank#	Tank#	Tank#	Tank#	Tank#	Tank#	Tank#	Tank#	Tank#

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PA DEP FORMS

- **Registration Amendment:** Can be used to change facility or product information. It can also be used to register a facility as temporarily out of service (TOS). This only needs to be signed by the tank owner or owner representative.

[illegible]

PA DEP FORMS

- **Modification Report:** Completed by a DEP certified individual after a modification to the UST system is made. A copy should be retained by the owner/operator for all future inspections
- Almost any work that involves your fuel system, including excavation work above your fuel system requires a DEP certified individual.
- The DEP charges the certified individual for filing major modification reports.

Modification Types

Major

Any work involving excavation

Adding a new form of line release detection (ie.. Install tank monitor)

Adding/replacing anodes on a tank

Repairing a line leak

Minor

Adding a spike anode to a flex line

Replacing a leak detector

Replacing a flex hose

Replacing a drop tube

PA DEP FORMS

- **Facility Operations Inspection (FOI):** Completed every three years by a PA DEP certified inspector. Copies should be retained by the owner/operator. DEP generally sends an inspection reminder letter. The due date of the next inspection is also on the annual registration certificate
- This form is signed by both the inspector and the owner
- PADEP appears to take action based on the compliance status listed on page 1 – Keep your facilities in compliance to avoid a PADEP post inspection site visit

2018 UPDATED FORM

2018 FM DEC 0501a Rev. 12/2018

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF ENVIRONMENTAL CLEANUP AND BROWNFIELDS

UNDERGROUND STORAGE TANK FACILITY OPERATIONS INSPECTION REPORT FORM

FOR DEP USE ONLY
Reviewed: _____ Date: _____
Entered by: _____

FACILITY INFORMATION
ID Number: _____
Name: _____
Location: _____
Address: _____
Municipality: _____
GPS Location Lat: _____ Long: _____

Representative Present During Inspection
Name: _____
Phone: _____
☐ Owner ☐ Operator ☐ Employee ☐ None

CERTIFIED INSPECTOR
Name: _____
ID No.: _____
Phone: _____
E-mail: _____
Date of First Site Visit (month/day/year): _____

TANK OWNER (must be a person or an entity)
Name: _____
TANK OPERATOR (if different than owner)
Name: _____

Suspected or confirmed contamination observed
Improperly closed or unregistered tanks present: ☐ Yes ☐ No (notify proper region within 48 hours) ☐ No
Fire/safety permits available (if required): ☐ Yes ☐ No (provide comment) ☐ No
Fire/Safety Permit Number(s): _____

Amended registration form required for (check all that apply):
☐ Added tanks ☐ Closed tanks ☐ Change of operational status (in or out of service)
☐ Change in substance ☐ Change of owner ☐ Change in tank size

Inspection summary:
Indicate the compliance status of each item below using the following codes: N = Noncompliant, C = Compliant. Note: Yes, No, N/A, blanks, or any other markings are not acceptable statements for these fields.

	Tank No. 1	Tank No. 2	Tank No. 3	Tank No. 4	Tank No. 5
Registration Certificate Display					
Tank Release Detection					
Tank Release Detection Testing					
Piping Release Detection					
Piping Release Detection Testing					
Overfill Prevention					
Overfill Prevention Testing					
Spill Prevention					
Spill Prevention Testing					
Financial Responsibility					
Walkthrough Inspections					
Tank Construction and Corrosion Protection					
Piping Construction and Corrosion Protection					
Operator Training					

I, the DEP Certified Inspector (BME), have inspected the entire above referenced facility including examining manways, sumps, monitoring wells and dispensers. Based on my personal observation of the facility and documentation provided by the owner, I certify under penalty of law as provided in 18 PA C.S.A. Section 4004 (relating to unsworn falsification to authorities), that the information provided by me is true, accurate and complete to the best of my knowledge and belief.

Certified Inspector's Signature _____ **Date** _____

As the representative of the owner or operator, I have reviewed the completed inspection report. I certify under penalty of law as provided in 18 PA C.S.A. Section 4004 (relating to unsworn falsification to authorities), that the information provided by me is true, accurate and complete to the best of my knowledge and belief.

Signature _____ Title _____ Date _____

Page 1

2018 FM DEC 0501a Rev. 12/2018

UNDERGROUND STORAGE TANK FACILITY OPERATIONS INSPECTION REPORT FORM

Facility Name _____ **Date** _____ **Facility ID** _____

I. TANK SYSTEM INFORMATION: For each tank, fill in the required information using the codes on Page 2.1. Where multiple codes are allowed and used for a specific tank component, describe the arrangement in Section VIII (COMMENTS). (See FGI form instructions for details.)

	Tank No. 1	Tank No. 2	Tank No. 3	Tank No. 4	Tank No. 5	DPF Use
1. Tank capacity (name plate gallons)						
2. Substance currently stored (and grades)						
3. Installation date (mm/yyyy)						
4. This done tank is manifested to tank number						
5a. Stock reading of product level, in inches, at time of inspection						
5b. Stock reading of water level, in inches, at time of inspection						
6. Total secondary containment on this tank system						(118)
7. Tank construction and corrosion protection ^{1,2}						(11)
8a. Primary (inner or single-wall) piping construction ^{1,3}						(2)
8b. Secondary (outer) piping construction ^{1,3}						(PENG)
9a. Number of tank top sumps ⁴						(21)
9b. Number of tank top sumps tested light ⁴						
10a. Number of transition sumps						
10b. Number of transition sumps tested light						(PENG)
11a. Number of connected dispensers						
11b. Number of connected dispensers with pans						(22)
11c. Number of dispenser pans tested light						
12a. Piping/parts/connections construction at tank ^{1,4}						(PPLA)
12b. Piping/parts/connections construction at dispenser ^{1,4}						(PPLA)
13. Pump (product dispensing) system						(4)
14a. Number of spill containments (must be permanently installed)						(6)
14b. Number of spill containments tested light						(7)
15. Overfill type (must be permanently installed)						(7)
16. Current registration certificate displayed/readily available						(8)
17. Stage II vapor recovery						(118)
18. Stage II vapor recovery						(22)
19. This tank supplies an emergency generator						(PENG)

II. EVALUATE THE TANK SYSTEM RELEASE DETECTION METHODS CAREFULLY BEFORE FILLING IN THE FOLLOWING ROWS.

20. Tank release detection						(12)
21. Piping visual release detection (0.2 gph monthly or 0.1 gph annually)						(1)
22. Pressure (line 13 is C or D) piping line leak detector (LLD) function (1 gph at 50 lbs psi or equivalent within 1 hr)						(PENG)
23. LLD function includes a positive turbine pump shutoff ⁵						(23)

¹ Use of codes indicating a component is Unknown should be accompanied with comments in Section VIII and must be marked Noncompliant for the appropriate tank system compliance status in the Inspection summary on Page 1.
² Indicate manufacturer, model, and generation of appliances in Section VIII.
³ Indicate manufacturer and construction in Section VIII.
⁴ At tank penetrations that have pipe that routinely contains or conveys product.
⁵ LLD function can mean either the LLD function reported on line 22 or another LLD function used to provide positive turbine pump shutoff.
⁶ Use of codes (X - None) or (0) - Other should include comments in Section VIII.

Site drawing / manifold schematic (not master-draw system):

Page 2

2018 UPDATED FORM

2030.FM.BEC00501 Rev. 12/2018

2030.FM.BEC00501 Rev. 12/2018

UNDERGROUND STORAGE TANK FACILITY OPERATIONS INSPECTION REPORT FORM Tank System Component Codes

UNDERGROUND STORAGE TANK FACILITY OPERATIONS INSPECTION REPORT FORM

Facility Name _____ Date _____ Facility ID _____

6. Total secondary containment

Y Yes

N No

7. Tank construction

A Single wall steel, uncoated

B Single-wall, galvanneal alloy

C Impressed current protection

D Single-wall Boreglas (fibre)

E Double-wall Boreglas (fibre)

F Double-wall Ast 100 or equivalent

G Double-wall steel liner

H Concrete

I Fiberglass, steel primary, galvanneal alloy

J Cathodically protected and lined

K Double-wall Ast 100 or equivalent with Anodes

L Single wall Ast 100 or equivalent with Anodes

M Unknown (must provide written comment)

N Other (must provide written comment)

99 Other (must provide written comment)

99 Other (must provide written comment)

99 Other (must provide written comment)

99 Other (must provide written comment)

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99 Other (must provide written comment)

12. Piping listings/connections

A Uncoated metallic

B Component(s) (including only wrapped or coated)

C Cathodically protected, metallic

F Unknown (must provide written comment)

I Completely insulate a containment piping

M Completely jacketed with sealed joint

N No jacket, not in contact with the ground

X None (must provide written comment)

99 Other (must provide written comment)

99 Other (must provide written comment)

99 Other (must provide written comment)

99 Other (must provide written comment)

99 Other (must provide written comment)

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2018 UPDATED FORM

2030 FM DEC05094 Rev. 12/2010

2030 FM DEC05094 Rev. 12/2010

**UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION REPORT FORM**

Facility Name _____ Date _____ Facility ID _____

II. RELEASE DETECTION (continued)

Instructions: Check the box to indicate that a criterion has been met.
Circle the first to indicate that a criterion has not been met.
Circle with "N/A" when a criterion is not applicable (provide comment).

Release Detection Equipment (Tank and/or Piping)

- The inspector has personally reviewed the tank release detection equipment in use for each tank system.

Tank	Tank	Tank	Tank	Tank	Tank
System	System	System	System	System	System

Automatic Tank Gauging: (Tank only – code E)

ATG model _____
Does the automatic tank gauging contribute to tank release detection? ☐ Yes ☐ No
Probes and gauges without certification for use in hazardous areas _____

- when not specifically certified, the uphorn must be broken to property test equipment is operational

Manual Tank Gauging: (Tank only – code F, G44 or G58)

Tank capacity is 1,000 gallons or less
Installed on or before 11/19/2007
performed weekly
average 2 click readings before and after test
test length appropriate for each tank

- 44 hours, 501-1000 gallons, 44" diameter
- 60 hours, 1051-1000 gallons, 48" diameter

Installation is within standard (both weekly and monthly)

Interstitial Monitoring: (Tank code R describe monitoring equipment in comments)

Interstitial sensors properly placed per manufacturer's instructions
Monitoring tubes (secondary barrier) or ports are clearly marked and secured

Statistical Inventory Reconciliation: (Tank code D and/or Piping code J)

test vendor _____
data is collected according to the test vendor's instructions
analysis complete and valid results supplied to owner/operator within 30 day monitoring period

- valid reports include calculated leak rate, minimum detectable leak rate, leak threshold, probability of detection and probability of false alarm

Groundwater or Vapor Monitoring: (Tank code J and/or Piping code R or F, describe well locations and monitoring equipment in comments)

wells are located according to site evaluation, attach page with properly licensed evaluator authorization to the inspection report
wells are properly installed in accordance with site evaluation and regulations
monitoring wells are marked and secured

- test interval is sufficiently porous to allow effective detection at the monitoring wells
- substance tested meets regulatory requirements for type of monitoring

Groundwater Monitoring: (Tank only – code Piping code E)

monitoring devices can detect 1.0 inch of product loss in water
groundwater is within 20 feet of surface grade
wells are sealed from ground surface to the top of the filter pack

- causing a properly sealed, almost entire of product during all groundwater conditions

Vapor Monitoring: (Tank code K and/or Piping code F)

the monitoring device is not installed in accordance with manufacturer's instructions
background contamination will not interfere with vapor monitoring
vapor monitoring will detect increases in concentrations of stored substance

**UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION REPORT FORM**

Facility Name _____ Date _____ Facility ID _____

II. RELEASE DETECTION (continued)

Instructions: Check the box to indicate that a criterion has been met.
Circle the box to indicate that a criterion has not been met.
Circle with "N/A" when a criterion is not applicable (provide comment).

Release Detection Equipment (Piping)

- The inspector has personally reviewed the piping release detection equipment in use for each tank system.

Tank	Tank	Tank	Tank	Tank	Tank
System	System	System	System	System	System

Interstitial Monitoring: (Piping code A and L, describe monitoring equipment in comments)

Secondary in open, vertical tubing and allows a release to be detected by the detector
interstitial sensors properly placed per manufacturer's instructions
monitoring tubes or ports have been clearly marked and secured

Continuous Interstitial Monitoring: (Piping code L)

system is capable of detecting a 3.0 gpd or 10 pounds psi pressure release from any portion of the pipe system within 1 hour (phone values to submittable before release)

Piping Tightness (Leak Testing: Piping only – code B or C)

tester name _____ serial certification number _____
test vendor _____ serial _____
date of last test _____ result _____

test conducted at proper frequency

- conducted annually for pressurized piping not monthly monitoring
- conducted every 3 years for vented piping not meeting code requirements (below)

Mechanical Leak Detector: (PRESURIZED Piping only – code A)

Tank System	Tank System	Tank System	Tank System	Tank System	Tank System
manufacturer _____	_____	_____	_____	_____	_____
model _____	_____	_____	_____	_____	_____

Electronic Leak Detector: (PRESURIZED Piping only – code K)

Tank System	Tank System	Tank System	Tank System	Tank System	Tank System
manufacturer _____	_____	_____	_____	_____	_____
model _____	_____	_____	_____	_____	_____

electronic leak rate detector continuously monitors piping
date of last 1 gph test _____ 1 gph test result _____
is the electronic leak detector performing the monthly monitoring function? ☐ Yes ☐ No
date of last 0.2 gph test _____ 0.2 gph test result _____
is the electronic leak detector performing the annual monitoring function? ☐ Yes ☐ No
date of last 0.1 gph test _____ 0.1 gph test result _____

Exempt Suction System: (Suction piping only – code I)

NOTE: No further release detection required on piping meeting all these criteria.

the tank top is lower than the suction pump seal
the below grade piping aligns uniformly back to the tank
there is no more than one check valve in the piping
the check valve is located close to or inside the suction pump
the suction pump and/or applications can be readily determined, describe below
compliance is determined by _____

Page 4

Page 5

2018 UPDATED FORM

33A-FRM-EC0051a Rev. 12/2019

UNDERGROUND STORAGE TANK FACILITY OPERATIONS INSPECTION REPORT FORM

Facility Name _____	Date _____	Facility ID# _____
---------------------	------------	--------------------

I. EQUIPMENT TESTING

Instructions: Check the box to indicate that a criterion has been met.
Circle the day to indicate that a criterion has not been met.
Leave blank if no test was performed or unable to verify its applicability (provide comment).

	Tank System	Tank System	Tank System	Tank System	Tank System
Overall Prevention Testing: Conduct testing conducted within the last 3 years and documentation available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
tester name _____	_____	date of last test _____	_____	result _____	_____
Spill Containment Testing: Spill containment testing conducted within the last 3 years and documentation available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
tester name _____	_____	date of last test _____	_____	result _____	_____
spill contained in double-walled _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
both walls of spill containment are monitored at least monthly and documentation available _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
tank filled in less than 30 days with water _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Containment Pump Testing: (Piping release code # and/or L) containment pump testing conducted within the last 3 years and documentation available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
tester name _____	_____	date of last test _____	_____	result _____	_____
containment pumps (#) none double-walled _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
both walls of pump(s) are monitored at least annually _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

IV. ON-SITE INSPECTION

A. Water and Wastewater Check:

water in tank did not exceed tank manufacturer's recommendations, product supplier's guidelines, or level of accumulation in the bottom of the tank _____

spill prevention equipment is clean and dry _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
tank lip containment sumps are clean and dry _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
transfer container sumps are clean and dry _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
under dispenser containment sumps are clean and dry _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B. UIM Record Review:

Financial Responsibility:
records showing the system continuously participated in USTIF are available (paid USTIF providers and/or fast delivery programs may be USTIF too) _____

Walkthrough Inspections:
walkthrough inspection reports for the last 12 months of the system contained product _____
monthly and annual walkthrough inspections completed each required equipment inspection noted during the walkthrough inspection were appropriately documented _____

Historical Records:
records documenting the underground tank system installation _____
records documenting underground tank system modification and upgrade activities _____

Modification Reports (if more room is needed, please consult the chart in the comments section):

date of modification report _____	task type completed impacted _____	certified tank handler _____	tasks system modified _____
-----------------------------------	------------------------------------	------------------------------	-----------------------------

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303 FM BEC0050a Rev. 12/2015

UNDERGROUND STORAGE TANK FACILITY OPERATIONS INSPECTION FORM

Facility Name _____ Date _____ Facility ID _____

IX. CORROSION PROTECTION COMPLIANCE CRITERIA

- The UST Cathodic Protection System Evaluation Form(s) (303 FM BEC0010) must be attached to this report for the two most recent corrosion protection tests, if testing was conducted after December 22, 2015.
 - Instructions: Check the box to indicate that a criterion has been met.
 - Check the box to indicate that a criterion has not been met.
 - Check with "NR" where there is no applicable provision (comment):

	Test System	Test System	Test System	Test System	Test System
Lined Tanks: (Tank only – code)					
tank inspected and lined according to national standard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
tank initially inspected 10 years after lining and every 5 years thereafter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
code inspected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Galvanic and Impressed Cathodic Protection: (Tank code B, C, O, P, V or W and/or Piping)					
tank structure to soil potential is equal to or more negative than -450 mV _g	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
meets other nationally recognized protection standard: specify _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
most recent tank CP survey _____ (date)					
pipelines tank CP survey _____ (date)					
pipelines structure to soil potential is equal to or more negative than -650 mV _g	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
meets other nationally recognized protection standard: specify _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
most recent pipelines CP survey _____ (date)					
most recent pipelines CP survey _____ (date)					
Impressed Current Design and Rectifier Output: (Tank code C or P and/or Piping)					
system was designed by a corrosion expert	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
system is turned on and functioning within design limits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
any system of a 10% of the retail average ampdraw has been properly investigated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(turnover is function of tank size, soil resistivity, plus and/or nature when retail facilities)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
recorded at least once every 60 days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
60 days prior	volts	amps	runtime:	date	
120 days prior	volts	amps	runtime:	date	

If Cathodic Protection or supplemental anodes were added to an existing tank system, fill in the following information (Information is **Required** for Compliance):

Date installed: _____ Date installed: _____

Assessment Method: _____

VI. Operator Training

☐ list of trained operators designates a class A operator and they have their Class A operator training certificate

☐ list of trained operators designates a class B operator and they have their Class B operator training certificate

☐ list of trained operators designates class C operator(s) and the date of their initial training (last refreshers within the previous 12 months)

☐ all trainings and notification procedures are readily available for class C operators at retail facilities OR are posted in a location visible to the storage tank user at non-retail facilities

DESCRIPTIVE INFORMAL TRAINING PROVIDED FOR OWNER, CLASS A AND CLASS B OPERATORS – see instructions.

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2018 UPDATED FORM

2/20 FM REC050504 Rev. 12/2018

**UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION REPORT FORM**

Facility Name _____
Date _____
Facility ID _____

VIII. COMMENTS INCLUDING ACTIONS TO BRING INTO COMPLIANCE (Attach additional sheets where necessary)

Task Manufacturer	Task Construction (i.e. Double-walled Act 100 with Anodes)	
Piping Manufacturer	Piping Model/Brand	Piping Generation (if applicable)

Page 8

2018 UPDATED FORM

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION		2020 FM DEC0002 12/2018 BUREAU OF ENVIRONMENTAL CLEANUP AND BROWNFIELDS		2020 FM DEC0002 12/2018 FACILITY I.D. NUMBER	
NOTIFICATION OF RELEASE (Owners and Operators)		FACILITY I.D. NUMBER		FACILITY I.D. NUMBER	
NOTIFICATION OF CONTAMINATION (Certified Installers and Inspectors)					
INFORMATION FOR OWNERS AND OPERATORS (OIO)					
The Storage Tank Program's Corrective Action Process (CAP) regulations establish requirements for owners and operators of storage tank systems and storage tank facilities to report confirmed releases and, in certain cases, suspected releases.					
Suspected Release Reporting: Upon the completion of a suspected release investigation from which it could not be determined whether a release has occurred, the owner or operator must, within 15 days of the indication of the suspected release, complete and submit this form to the appropriate regional office of the Department (Subsections 245.305(a)(2)).					
Confirmed Release Reporting: The owner or operator must notify the appropriate regional office of the Department by telephone as soon as practicable, but no later than 24 hours, after the confirmation of a release (Subsections 245.305(a) and (b)). Within 15 days of that telephone notification, the owner or operator must complete and submit this form to the appropriate regional office of the Department, to each municipality in which the release occurred, and to each municipality where that release has impacted environmental media or water supplies, buildings, or sewer or other utility lines (Subsections 245.305(c) and (e)). And if eggs insects to environmental media or water supplies, buildings, or sewer or other utility lines are discovered after that initial written notification, the owner or operator must, within 15 days of the discovery of the eggs impact, complete and submit this form to the Department and to each inspected municipality (Subsections 245.305(d) and (e)).					
INFORMATION FOR CERTIFIED INSTALLERS AND INSPECTORS (IIO)					
In accordance with the Storage Tank Program's certification regulations, certified installers and inspectors must complete and submit this form to the Department within 48 hours of observing any of the following while performing services as a certified installer or inspector: a release of a regulated substance; suspected or confirmed contamination of soil, surface or groundwater from regulated substances; or a regulated substance in a containment structure or facility (Subsections 245.132(a)(4) and 245.132(a)(5)).					
INSTRUCTIONS					
Record the storage tank facility I.D. number at the top right-hand corner of each page of this form.					
Owners and Operators (OIO): Indicate if this is an initial or follow-up notification by marking the appropriate box found in the top right-hand corner of this page.					
<ul style="list-style-type: none"> To report a Suspected Release, complete all information in Sections I, II, III, IIC, IV, V, VII and IX. To report a Confirmed Release, complete all information in Sections I, II, III, IIC, IV, VI or VII, VIII, and IX. Attach a copy of the failed, valid tightness test results, if applicable. 					
Certified Installers and Inspectors (IIO): Complete all information in Sections I, II, III, IIC, IV or VI or VII, VIII, and IX. Attach a copy of the failed, valid tightness test results, if applicable.					
PLEASE SEND COMPLETED ORIGINAL FORM TO:					
PA Department of Environmental Protection Environmental Cleanup and Brownfields Program Storage Tank Section (and the appropriate address, below, depending on where the FACILITY is located):					
Northwest Region 230 Chestnut Street Machelle, PA 16833-3481 PHONE: 814-332-6945 / 800-373-3398 FAX: 814-332-6121 Counties: Butler, Clinton, Crawford, Elk, Erie, Forest, Jefferson, Lawrence, McKean, Mercer, Venango, Warren		North-Central Region 208 W. Third Street, Suite 101 Williamsport, PA 17701 PHONE: 570-327-3636 FAX: 570-327-3420 Counties: Bradford, Cameron, Centre, Clarifield, Clinton, Columbia, Lycoming, Monroe, Northumberland, Potter, Snyder, Sullivan, Tioga, Union		Northeast Region 2 Public Square Wilkes-Barre, PA 18701-1915 PHONE: 570-620-2511 FAX: 570-620-4907 Counties: Carbon, Lackawanna, Lehigh, Luzerne, Monroe, Northampton, Pike, Schuylkill, Susquehanna, Wayne, Wyoming	
Southwest Region 400 Waterford Drive Pittsburgh, PA 15222 PHONE: 412-442-4000 FAX: 412-442-4194 Counties: Allegheny, Armstrong, Beaver, Cambria, Fayette, Greene, Indiana, Somerset, Washington, Westmoreland		South-Central Region 900 Elmerton Avenue Harrisburg, PA 17110 PHONE: 717-705-4705 / 866-425-4009 FAX: 717-705-4830 Counties: Adams, Bedford, Berks, Blair, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Juniata, Lancaster, Lebanon, Mifflin, Perry, York		Southeast Region 2 East Main Street Norristown, PA 19401 PHONE: 484-250-5900 FAX: 484-250-5961 Counties: Bucks, Chester, Delaware, Montgomery, Philadelphia	

2018 UPDATED FORM

2020 FM DEC0002 12/2018		FACILITY I.D. NUMBER	
V. INTERIM REMEDIAL ACTIONS (OIO Only)			
Indicate the Interim Remedial Actions Planned, Initiated or Completed (Mark All That Apply (X))			
Regulated Substance Removed from Storage Tanks	Planned	Initiated	Completed
Fire, Explosion and Safety Hazards Mitigated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contaminated Soil Excavated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Free Product Recovered	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water Supplies Identified and Sampled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Temporary Water Supplies Provided	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (Specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VI. SUSPECTED RELEASE / CONTAMINATION INFORMATION (Both OIO and IIO)			
Date the Indication of a Suspected Release / Contamination was Observed: m / d / y			
Indication of Suspected Release / Contamination (Mark All That Apply (X))			
<input type="checkbox"/> Unusual Level of Vapors	<input type="checkbox"/> Containment Sump Test Failure		
<input type="checkbox"/> Erratic Behavior of Product Dispensing Equipment	<input type="checkbox"/> Spill Prevention Equipment Test Failure		
<input type="checkbox"/> Release Detection Results Indicate a Release	<input type="checkbox"/> Other (Specify)		
<input type="checkbox"/> Discovery of Holes in the Storage Tank			
VII. CONFIRMED CONTAMINATION INFORMATION (IIO Only)			
Date the Confirmed Contamination was Observed: m / d / y			
Extent of Confirmed Contamination (Mark All That Apply (X))			
<input type="checkbox"/> Product Stained or Product Saturated Soil or Buckle	<input type="checkbox"/> Free Product or Sheen on the Ground Water Surface		
<input type="checkbox"/> Pounded Product	<input type="checkbox"/> Free Product or Sheen on Surface Water		
<input type="checkbox"/> Free Product or Sheen on Pounded Water	<input type="checkbox"/> Other (Specify)		
VIII. ADDITIONAL INFORMATION (Both OIO and IIO)			
Provide any additional, relevant, available information concerning the release or contamination. If reporting a confirmed release, include specific details about the source and cause of the release, the affected environmental media, and any impacts to water supplies, buildings, or sewer or other utility lines. Owners or Operators reporting a suspected release should describe what procedures were followed to investigate the indication(s) of the suspected release noted in Section VI. Provide both DEP-assigned and owner/operator-assigned tank number(s), where applicable. Use additional 8 1/2" x 11" sheets of paper, if necessary.			

2020 FM DEC0002 12/2018		FACILITY I.D. NUMBER	
IX. CERTIFICATION (Both OIO and IIO)			
OWNER OR OPERATOR CERTIFICATION			
I, _____ (Print Name) hereby certify, under penalty of law as provided in 18 Pa. C.S.A. §404 (relating to unsworn falsification to authorities) that I am the owner or operator of the above referenced storage tank facility and that the information provided by me in this notification is true, accurate and complete to the best of my knowledge and belief.			
Signature of Owner or Operator		Date	
CERTIFIED INSTALLER CERTIFICATION			
I, _____ (Print Name) hereby certify, under penalty of law as provided in 18 Pa. C.S.A. §404 (relating to unsworn falsification to authorities) that I am the certified installer who performed tank handling activities of the above referenced storage tank facility and that the information provided by me in this notification is true, accurate and complete to the best of my knowledge and belief.			
Signature of Certified Installer		Date	
Installer Certification Number		Company Certification Number	
CERTIFIED INSPECTOR CERTIFICATION			
I, _____ (Print Name) hereby certify, under penalty of law as provided in 18 Pa. C.S.A. §404 (relating to unsworn falsification to authorities) that I am the certified inspector who performed inspection activities at the above referenced storage tank facility and that the information provided by me in this notification is true, accurate and complete to the best of my knowledge and belief.			
Signature of Certified Inspector		Date	
Inspector Certification Number		Company Certification Number	

WHEN DO I REPORT?

OWNER & OPERATORS

- Any spill to soil or a waterway is reportable, this includes storm sewers
- A spill to an impervious surface in quantities greater than 25 gallons
- A spill to an impervious surface in quantities less than 25 gallons if you don't meet all 3:
 - Have control of over the release
 - The release is completely contained
 - The total volume of the release is recovered and removed within 24 hours of the release
- A release to a containment sump higher than the bottom of the first penetration
- After a failed or inconclusive investigation of a suspected release

If you make a notification of release to the PADEP you should also notify USTIF



§ 245.304. Investigation and reporting of suspected releases.

(a) The owner or operator of a storage tank system or storage tank facility shall initiate and complete an investigation of a suspected release of a regulated substance as soon as practicable, but no later than 7 days after the indication of a suspected release. An indication of a suspected release includes one or more of the following conditions:

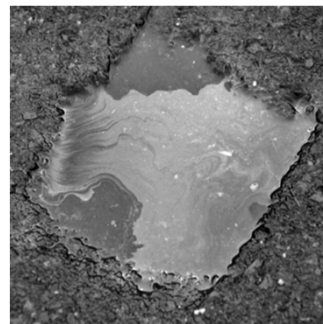
- (1) The presence of a regulated substance or an unusual level of vapors from a regulated substance outside of storage tank system components designed to routinely contain or convey product, at or near a storage tank facility.
- (2) Evidence of a regulated substance or vapors in soils, basements, sewer lines, utility lines, surface water or groundwater in the surrounding area.
- (3) Unusual operating conditions, indicative of a release, such as the erratic behavior of product dispensing equipment.
- (4) The sudden or unexpected loss of a regulated substance from a storage tank system or the unexplained presence of water in a storage tank system.
- (5) Test, sampling or monitoring results, including the sounding of an alarm, from a release detection method which indicate a release.
- (6) The discovery of holes in or damage to a storage tank system during activities such as inspection, repair or removal from service.
- (7) Other events, conditions or results which may indicate a release.

WHEN DO I REPORT?

INSTALLERS & INSPECTORS

- A release (any release regardless of gallons or where it occurred)
- Suspected or confirmed contamination
- A regulated substance observed in a containment structure or facility (make sure your sumps are clean and dry)
- Certified individual performing testing must report a failed test (sump, overflow, spill prevention testing)

A reputable certified company should also remind the owner to call USTIF



HOW DO I REPORT?

NOTICE OF RELEASE

(OWNERS & OPERATORS)

- Verbal notification to the PADEP (and any affected utilities) within 24 hours by owner/operator
- Written notification by owner/operator filed within 15 days to the appropriate regional office and local municipality (Notification of Reportable Release Form)

NOTICE OF CONTAMINATION

(INSTALLERS & INSPECTORS)

- If a certified individual is performing a regulated activity at a facility they are required to report
- A certified individual must submit a written notification within 48 hours (Notification of Contamination Form)
- Make sure to clean your sumps/spill buckets prior to inspection (A certified inspector must make a notification of contamination if we see water/fuel in a sump)

PA DEP FORMS

- All forms, instructions and regulations can be found at:

www.dep.pa.gov

Keyword: Storage Tanks

Or

On the USB drive provide to you as part of this class

RECORDKEEPING REQUIREMENTS

- Records are to be maintained onsite or at a readily available alternative site
- Records are divided into two different types:
 - Permanent (life of the system and/or component plus 1 year)
 - Temporary



PERMANENT RECORDS EXAMPLES

- Corrosion expert's design of your impressed current system, including the site assessment
- Tank system installation, modification and upgrade documents
- Tank system assessment records prior to an upgrade
- Installation testing and commissioning reports required for corrosion protection systems
- UST system repairs, including those in response to a release
- Tank lining evaluation reports
- Department approval for a variance or alternative leak detection method
- Tank closure report

TEMPORARY RECORDS EXAMPLES

- Tank registration certificate
- Tank and pipe release detection records for the past 12 months
- The last annual check/test/maintenance records of leak detection equipment which verify proper functionality
- The last three impressed current system readings (required every 60 days)
- The last 2 CP surveys for CP systems
- The last sump testing records (required every 3 years)
- The previous 12 months of visual inspection logs
- The previous annual inspection log

MODULE 1 & 2 REVIEW

- How many of each operator class must each company have?
One. A company is required to have at least one Class A, B & C operator
- Who can train a companies Class C operator(s)?
The class A and B operators
- What is the primary focus of the class C operators training?
Emergency procedures
- At a manned facility when should a class C operator be onsite?
During operating hours
- How many hours until a class A or B operator must be onsite after an emergency?
Within 24 Hours





MODULE 1 & 2 REVIEW

- USTIF claims must be submitted within how many days of discovering the release?
60 Days
- How much is the USTIF deductible per tank, per occurrence?
Two at \$5,000.00/ea. - 3rd party liability & corrective action.
- For record keeping purposes, records fall into two categories, what are they?
Permanent & Temporary
- How many hours until you must verbally notify DEP about a spill?
24 hours
- How many days are before you must submit a written notification of contamination form?
15 Days

MODULE 3 SITE SAFETY & EMERGENCY PROCEDURES

HEALTH AND SAFETY

- Hazards
- Safety Equipment
- Safety Training
- Emergency Procedures/Contacts
- Safety Inspections and Checklists

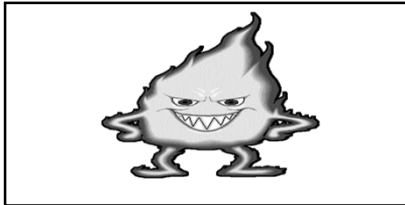
	<h3>HAZARDS</h3> <ul style="list-style-type: none"> • Traffic • Fire • Explosion • Chemical Exposure • Weather • Asphyxiation • Other people 	 <p>Toxic</p>
 <p>Highly flammable</p>		

THE FIRE TRIANGLE

3 fire components:

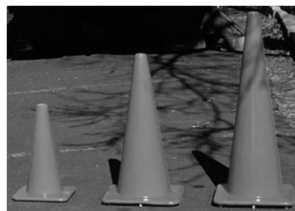
1. Fuel Source
2. Oxygen
3. Ignition Source

A fire can **not** occur unless all three are present. The one most under your control is the ignition source.



PERSONAL SAFETY EQUIPMENT

- Proper footwear
- Safety vest for doing work in the parking lot and/or fueling area
- Safety cones
- All relevant safety contact information should be readily available and part of your emergency procedures
- Communication device



SITE SAFETY EQUIPMENT

- Bollards & island forms – Protection of the dispensers
- Swivels – Protects the hose from twisting and kinking
- Break-aways and shear valves – Help to prevent spills/fire when a dispenser is hit or when a customer drives off with the nozzle still in his tank
- Nozzles – Help prevent spills
- E-stop – Kills power to the fueling area to help prevent fires
- Intercom – Used to communicate with the customer
- Snuffer and fire extinguishers – Used to fight fires

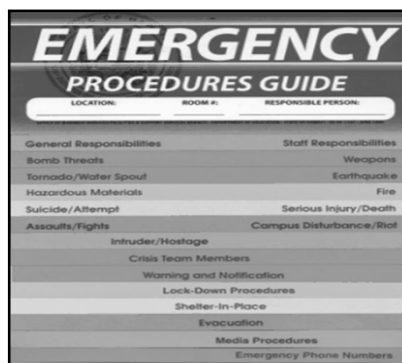
SAFETY TRAINING AND DOCUMENTATION

Your safety training should be part of your Class C operator training

- All employees who work at a facility utilizing a UST system should receive training on the hazards that they will encounter, prevention measures, and emergency procedures
- Training should cover necessary safety equipment and proper use of that equipment
- Emergency procedures and contacts
- Training should cover any site specific issues, ie.. Location of the fire extinguisher, emergency exits, E-stop, etc..

EMERGENCY PROCEDURES

- Emergency Procedures must be posted at every regulated UST facility by June 28, 2010
 - Unattended – Post in location visible to people using the fueling system
 - Attended – Keep at location near the attendant
- Where is the location of the Emergency Stop and how is it operated? Also include the location of exits, spill kits, and fire extinguishers
- Emergency procedures should include appropriate emergency contacts and a list of what notifications need to be made



SAFETY INSPECTIONS & CHECKLISTS



- What site specific items are checked weekly and/or daily at your facility?
- What is required by regulations and what is a good idea for general safety?
- Who is responsible for performing the inspection
- How are the results being documented and how is this documentation being stored?

WORKGROUP #1

- Divide into groups based on facility types:
 - Attended (C-store/repair garage)
 - Unattended sites (Retail/fleet/municipal)

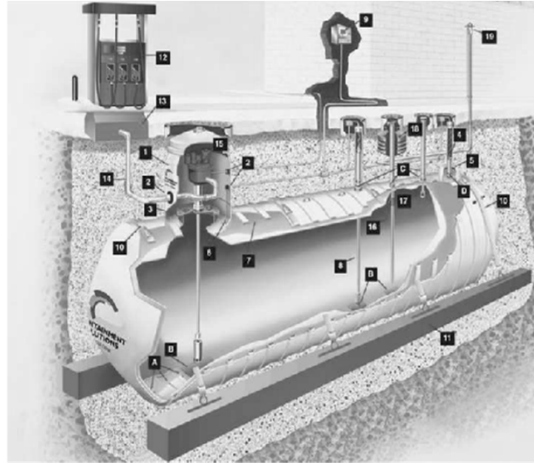
Unattended sites get a 10 min break while Attended sites go over Class C training requirements

Attended sites get a 10 min while unattended sites go over Class C training requirements

MODULE 4 TANK COMPONENTS AND PRODUCT COMPATIBILITY

COMPONENTS OF A FUEL SYSTEM

- A. Flow Channels
- B. Tank Bottom Deflector Plates
- C. Primary Tank Fittings
- D. Monitoring Fitting
- 1. Turbine Enclosure
- 2. Fitting Kits for Turbine Enclosure
- 3. Secondary Containment Collar
- 4. Reservoir Sensor
- 5. Fiberglass Reservoir (replaces monitoring fitting)
- 6. Containment Collar Sensor
- 7. Monitoring Fluid with Color Tracer
- 8. Electronic Inventory Gauge
- 9. Electronic Control Panel
- 10. Split-Strap Anchor System
- 11. Deadman Anchor
- 12. Dispenser
- 13. Dispenser Sump
- 14. Double-Wall Pipe
- 15. Submersible Pump
- 16. Fill Tube with Overfill Shut-Off
- 17. Ball Float Valve
- 18. Overfill Spill Container
- 19. Primary Tank Vent



EQUIPMENT CATEGORIES

Venting & Vapor Recovery

All tanks must be vented. The vent riser should be made of steel and extend 12' in the air (3' above rooflines)

Stage I - Required on all gas tanks over 2,000 gallons. This is the process of the recovery of vapors from the tank back to the delivery truck.

- Two point connection

- Coaxial connection

Stage II - Was required for gas tanks in certain areas of the State. This is the process of the recovery of vapors from the customers vehicles back to the tank. If a station has Stage II, they must maintain it until it is properly decommissioned per PADEP standards.

Spill & Overfill Protection

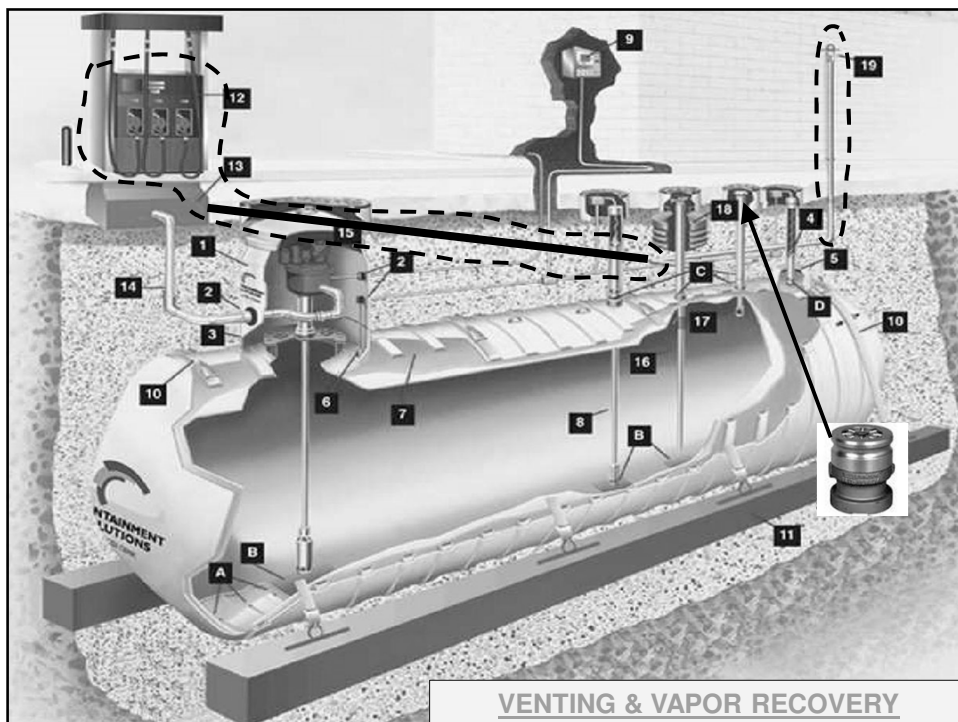
Required on all tanks receiving deliveries of 25 gallons or more at a time

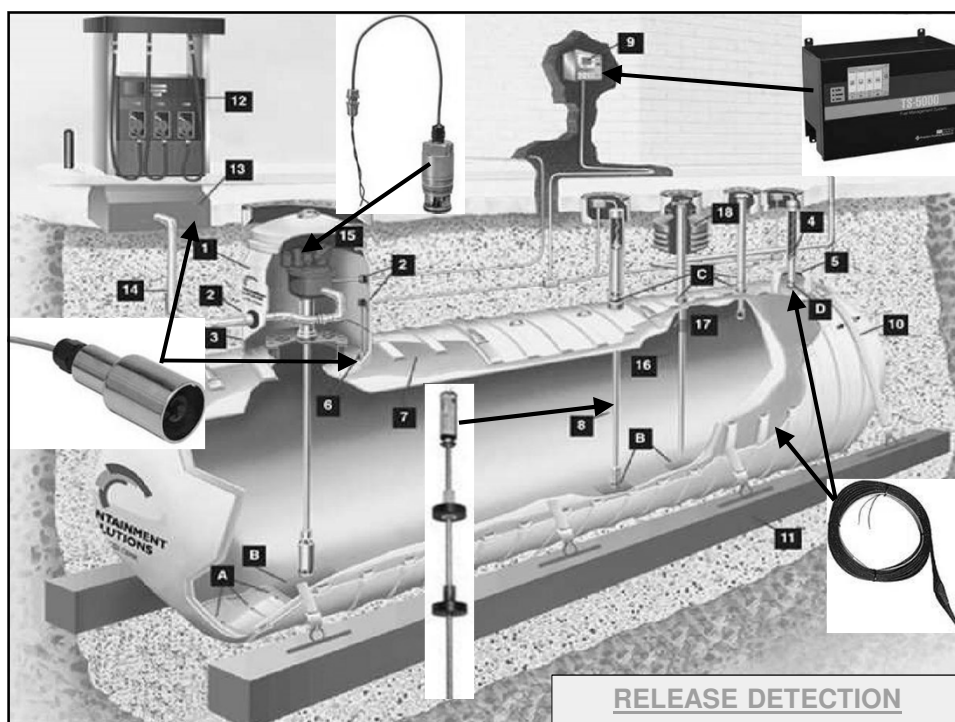
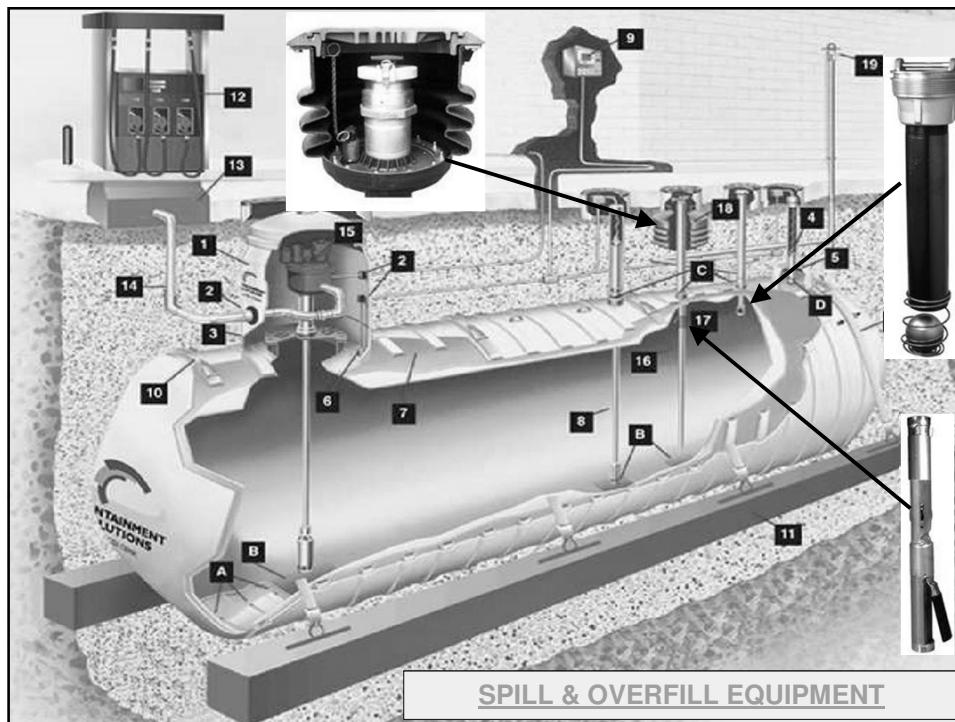
Secondary Containment

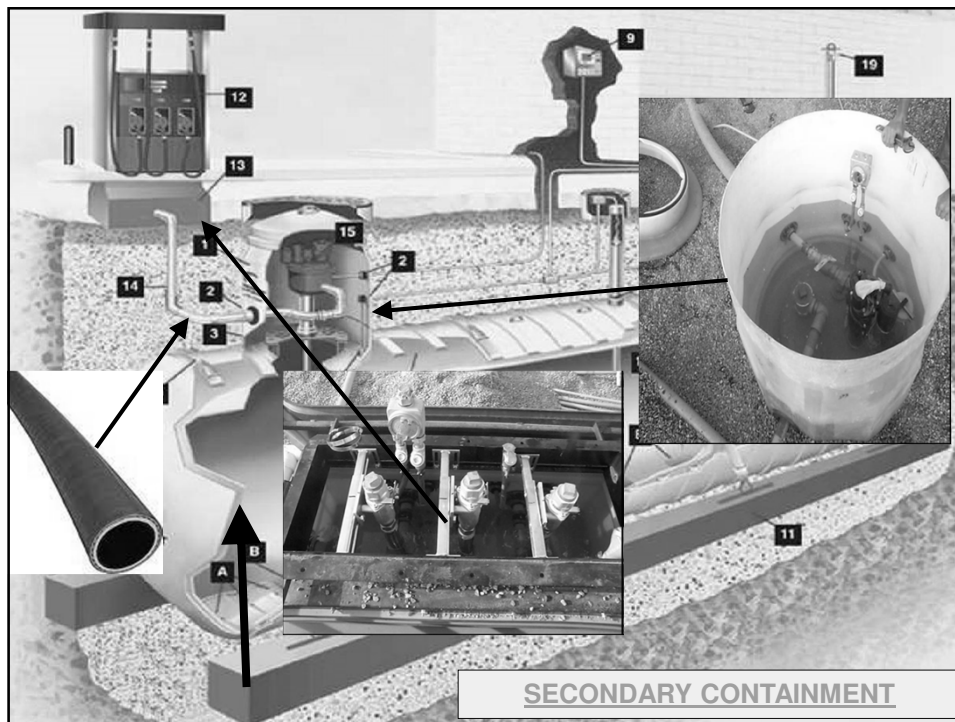
Required on all tanks and lines

Release Detection

Required on all tanks and lines this







SECONDARY CONTAINMENT SUMPS

- Used to contain releases from double-wall piping and isolate piping components
- New DEP regulations now require containment sumps to be tested upon installation or modification (including piping replacement)
- Testing is commonly performed by flooding the containment area with water and monitoring the level for at least one hour. (called hydrostatic testing)
- Water Level should be at least 4" above highest sump penetration

SUMP TESTING

- 4 possible kinds of sumps:
 - 1 - Dispenser (sometimes called UDC) – Required for new sites
 - 2 – Tank (sometimes called submersible sump) – Required for new sites
 - 3 – Spill buckets (sometimes called catch basins) – Required for new sites
 - 4 – Transition – Optional, usually found at retrofits
- All sumps must be tested upon installation or repair, then every 3 years



Testing is commonly performed by flooding the containment area with water and monitoring the level for at least one hour. (called hydrostatic testing)

Water Level should be at least 4" above highest sump penetration



TANK COMPONENTS & PRODUCT COMPATIBILITY

- Product compatibility means making sure that all components of your fuel system is compatible with the product being stored and dispensed
- This is much more critical with it comes to high concentration blends of fuel such as E85, E100 and even 100% bio-diesel
- Every component in a UST system must be UL listed for the product that is being stored & dispensed in that system
- UL ratings are available through the manufacturer of the specific component
- This is something that should be taken into account when changing products in a tank system

CHANGING PRODUCT - TIPS

- What if you want to change regulated products in a UST system?
- Ensure that the system is capable (UL listed) for the new product & if it is an older tank system
HAVE THE TANK THOROUGHLY CLEANED!!!!
- This is especially important when switching from conventional gas to an ethanol blend and from conventional diesel to biodiesel
- Stickers are required on dispensers informing customers of the fuel and its contents
- Water should never be in a tank in the first place. Biodiesel and ethanol blended gasoline are more sensitive to water, possibly causing phase separation or bacterial/fungal growth.

CHANGING PRODUCT - PAPERWORK

- Changing product grades **does not** require DEP notification. i.e.... regular to super, or from conventional to ethanol (10% and less) or from diesel to bio-diesel (5% and less).
- Changing regulated product types **does** require DEP notification using either the registration form or the registration amendment form. i.e.... from gas to diesel or from kerosene to ethanol.
 - If changing to Ethanol >10% or Bio-diesel >5% then a Alternative Fuels Compatibility form must also be submitted.
- Changing from a regulated product to an unregulated product requires a tank closure. i.e.... from gas to heating oil.

MODULE 3 & 4 REVIEW

- By June 28th 2010, what must be posted at each facility with a regulated UST?

Emergency procedures

- The fire triangle is composed of what 3 elements?

Fuel, oxygen and ignition source

- What device helps prevent spills/fires if a dispenser is hit?

Shear valve

- What are the three main items that need to be on your emergency procedures?

Location and operation of the emergency stop

A list of emergency contacts

Notifications that need to be made

MODULE 3 & 4 REVIEW

- What form is required to change regulated product types in a tank?

Registration form or Registration amendment form

- Stickers are required on dispensers to inform customers of fuel type and _____.

Blend ratio

- DEP regulations of 12/22/2018 now require sump testing at what frequency?

Upon installation, repair or replacement, then every 3 years

- All equipment in a UST system must be compatible and _____ listed for the product being stored and dispensed.

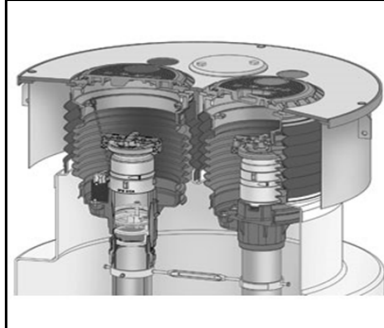
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MODULE 5 SPILL & OVERFILL PREVENTION

SPILL CONTAINMENT

- Required on all UST systems filled in amounts greater than 25 gallons
- Spill containment devices are often referred to as spill buckets or catchment basins
- They should have sufficient capacity (~5 gallons) to capture a small amount of product released from a delivery hose and be placed around ports where product is transferred into the UST system (fill ports only, not required at vapor recovery ports)
- Newly installed or modified/replaced spill buckets must be tested (hydrostatic test) at install to show they are liquid tight, then are tested every three years
- The test records should be retained until the unit is retested

SPILL CONTAINMENT



OVERFILL PREVENTION

- Automatically shut off flow into the tank when the tank is no more than 95% full.
- OR
- Alert the transfer operator when the tank is no more than 90% full by restricting the flow into the tank or triggering a high-level alarm.
 - Three main types: overfill drop tube, ball float and overfill alarm.
 - There are two types of deliveries that UST systems receive.
 1. Pressurized
 2. Gravity
 - **THE OVERFILL PREVENTION DEVICE / METHOD MUST BE COMPATIBLE WITH THE DELIVERY METHOD!!!!**

OVERFILL PREVENTION- DROP TUBE SHUTOFF DEVICES

- These are commonly referred to as “flappers”
- Action point should be 95% of the tanks capacity at the highest. They can be set lower.
- Most drop-tube shutoff devices are only capable of stopping gravity deliveries.
- Different devices must be used for pressurized deliveries.



OVERFILL PREVENTION DROP- TUBE SHUTOFF DEVICES

Advantages

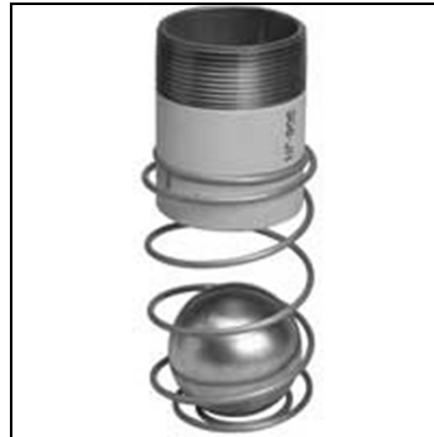
- Easily verified
- Hopefully an easy install (no power needed)

Disadvantages

- Easily bypassed by delivery driver
- Must be changed if the customer switches delivery methods

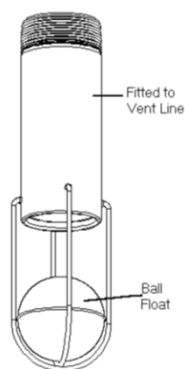
BALL FLOAT VALVES

- Works on the theory that if air can't exit the tank, fuel can't go in
- Action point must be set at 90% or less of the tank's capacity
- Can only be used if they are currently installed and in proper working order
- Can not be installed new and can't be repaired/replaced if existing

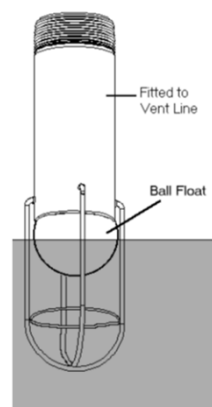


BALL FLOAT VALVE

OPEN



CLOSED



BALL FLOAT VALVES

Advantages

- Low cost

Disadvantages

- Not easily verified
- No one knows if/when it breaks
- Tank can be damaged if it receives a pressurized delivery
- Can be very difficult to remove
- **Cannot not be used on systems with remote fills, coaxial vapor recovery, and suction systems with an air eliminator**

EXTERNAL OVERFILL ALARMS

- Audible and/or visual alarm that notifies the driver when the tank is 90% full
- It must be audible and/or visible to the driver while he or she is making the delivery



EXTERNAL OVERFILL ALARMS

Advantages

- Can be used in all applications
- Easily tested

Disadvantages

- Expensive
 - The annunciator is an add on to the ATG
 - Additional wiring/building penetration
- Does not physically restrict the delivery

MODULE 6 RELEASE DETECTION

RELEASE DETECTION REGULATION REQUIREMENTS

Tank

- 0.2gal/hr monthly test
- Interstitial monitoring
- Interstitial monitoring is required on all USTs installed after November 10, 2007

Pressurized Piping

- 0.2gal/hr monthly test or 0.1gal/hr annual test
- 3.0gal/hr continuous form of release detection which must be tested annually
- Pressurized piping installed after Nov 10, 2007 must have positive shutdown on the 3.0gal/hr method & interstitial monitoring

RELEASE DETECTION REGULATION REQUIREMENTS

American Suction Style Piping

(check valve at both ends or just at the tank end)

- Tightness test every three years
- or
- Monthly monitoring of containment sumps at both ends

European or Safe Suction Style

(check valve at dispenser end only)

- This type of system is exempt from line release detection

RELEASE DETECTION REGULATION REQUIREMENTS

If a release is ever suspected, an investigation should be completed as soon as possible but no later than

7 days!!!

If the results of your investigation are inconclusive or show that there was a release, you must then follow the notification of release requirements

TANK INTERSTITIAL MONITORING

- Interstitial monitoring is monitoring the space between the two walls of double wall tanks for signs of a release (*liquid*)
- Must be performed at least once a month
- This can be done by manually sticking the interstice and logging the results or...
- With a sensor between the two walls where a status report is printed or the alarm status is manually logged
- Interstitial monitoring has two main benefits:
 - It is not affected by manifolded systems
 - It is not affected by inventory levels

AUTOMATIC TANK GAUGING

- Automatic tank gauging uses the probe in the tank to perform a 0.2gal/hr test
- This can be done in two ways
 - Static testing is when the fuel is monitored for one period of time over a 2-5 hour period. The tank must not be in operation during this time and this method can not be used on manifolded systems.
 - Continuous monitoring is when the probe tests for smaller amounts of time, while the system is not operating. It compiles the data over time and gives test results. This is a software upgrade for most ATGs (SCALD- Incon; CSLD-Veeder Root). The upgrade makes the ATG able to test manifolded systems. It performs better for sites that operate 24 hours a day and sites that frequently have low volumes in their tanks.

STATISTICAL INVENTORY RECONCILIATION (SIR)

- This must be done through an approved third party vendor
- **Daily** stick readings, sales volumes, and delivery receipts must be very well kept and submitted to the vendor every month
- They compile the data and send a test result
- In addition to providing a monthly 0.2gal/hr tank test, SIR also provides a monthly 0.2gal/hr piping test

The 2018 regulations changes now state that the SIR results are due from your vendor immediately at the end of your 30 day test period

LESS COMMON TANK RELEASE DETECTION METHODS

- **Manual tank gauging**
 - Only can be used on tanks with a max capacity of 1,000 gal.
 - Procedure for testing must be followed, see section 245.444 for details
 - EPA has a free booklet that can be used for learning how to do manual tank gauging (search for EPA 510-B-93-005)
- **Vapor or Liquid monitoring**
 - Requires sensors around the tanks in the observation wells
 - Very uncommon method, only 1 site in the state uses this method

PRESSURIZED PIPING RELEASE DETECTION

- UST systems utilizing pressurized piping are required to have two forms of piping release detection
- The first is a continuous 3.0gal/hr form. A 3.0gal/hr leak would need to be picked up within one hour. This is the “big leak” form.
- The second is a monthly 0.2gal/hr form. A 0.2gal/hr leak must be picked up within a month. This is the “small leak” form.
- A 0.1gal/hr annual test can be substituted for 0.2gal/hr monthly testing

CONTINUOUS 3.0GAL/HR PIPING RELEASE DETECTION

- **Leak Detectors:** Leak detectors are installed in the submersible pump and monitor pressure inside the line to check for leaks. In the event a leak is detected, they can restrict or shut off the flow of product.
- **There are two types:**
 - **Mechanical (MLLD)** – Can only restrict product flow
 - **Electronic (ELLD)** – Can completely stop the flow of product (positive shutoff)
- **All leak detectors must be tested annually by a certified individual**



CONTINUOUS 3.0GAL/HR PIPING RELEASE DETECTION



- **Compliance via sensor:** This can only be performed at facilities with double wall piping and containment sumps at both ends.
- **A monthly sensor status report must be printed and kept for at least a year.**
- **When using sensors for continuous 3.0gal/hr piping release detection, the sensors must be tested annually!**

MONTHLY 0.2GAL/HR PIPING RELEASE DETECTION

- This can be done with electronic line leak detectors (Elld's) or SIR
 - Elld's if connected to the tank monitor will require a monthly pass print out for record keeping
 - Stand alone Elld's will require monthly manual logging of a 'pass'
- SIR follows the same procedures as tank release detection

0.1GAL/HR ANNUAL PIPING RELEASE DETECTION

- A 0.1gal/hr annual test can be substituted for monthly 0.2 gal/hr testing. There are two ways of achieving this
 1. Some electronic line leak detectors can perform a 0.1 gph test. A passing test print out must be retained
 2. An annual line test meets the 0.1gal/hr requirement. This must be performed by a PA DEP UTT certified individual (the annual line test is typically done when you have mechanical leak detectors)

PIPING RELEASE DETECTION

UNMANNED FACILITY EXCEPTION

- All unmanned facilities with pressurized piping, regardless of when it was build, must have a continuous 3.0gal/hr form of piping release detection that automatically shuts off or restricts the flow of product in the event of a release

In other words, you can't use sensors in the sumps tied to just an alarm for your large form of LRD.

RELEASE DETECTION RECORD KEEPING

- Release detection records must be maintained for at least the previous 12 months
- All release detection equipment must be third party certified and the certification is a record that you should have

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- **2018 regulations now require:**
- Monthly visual checks of your spill prevention equipment, fill pipe, fill cap and release detection equipment – This must be documented and retained for the previous 12 months
- Annual visual inspection of all containment sumps for damage and liquid/debris – This must be documented and retained until the next annual inspection



RELEASE DETECTION RECORD KEEPING

§ 245.438. Periodic operation and maintenance walk-through inspections.

(a) To properly operate and maintain spill prevention and release detection equipment part of underground storage tank systems, no later than December 22, 2019, owners and operators shall conduct walk-through inspections at a minimum of every 30 days, with the exception of spill prevention equipment at underground storage tank systems receiving deliveries at intervals greater than every 30 days, which may be checked prior to each delivery. The walk-through inspection shall include, at a minimum, all of the following:

- (1) For spill prevention equipment:
 - (i) Visually check for damage.
 - (ii) Remove liquid or debris.
 - (iii) Check for and remove obstructions in the fill pipe.
 - (iv) Check the fill cap to make sure it is securely on the fill pipe.

(v) For double-walled spill prevention equipment with interstitial monitoring, check for a leak in the interstitial area.

- (2) For release detection equipment:

(i) Check to make sure the release detection equipment is operating with no alarms or other unusual operating conditions present.

(ii) Ensure records of release detection testing are reviewed and current.

(b) To properly operate and maintain containment sumps and handheld release detection equipment part of underground storage tank systems, no later than December 22, 2019, owners and operators shall conduct walk-through inspections at a minimum of every 12 months that include, at a minimum, all of the following:

- (1) For containment sumps:
 - (i) Visually check for damage and the presence of liquid or debris.

(ii) Remove liquid or debris.

(iii) For double-walled sumps with interstitial monitoring, check for a leak in the interstitial area.

(2) For handheld release detection equipment, check devices such as tank gauge sticks or groundwater bailers for operability and serviceability.

(c) Owners and operators of underground storage tank systems shall ensure operation and maintenance walk-through inspections required under this section are performed in accordance with one of the following criteria, unless the Department determines that a more stringent requirement is necessary to avoid releases of regulated substances from underground storage tank systems:

- (1) Requirements developed by the manufacturer.
- (2) Code of practice developed by a Nationally recognized association or independent testing laboratory.
- (3) Requirements determined by the Department to be no less protective of human health and the environment than the requirements in paragraphs (1) and (2).



Monthly visual inspection requirements:

- ATG
- Spill Buckets



Annual visual inspection requirements:

- Sumps (all sumps, regardless of anything, meaning if it is a sump you must do an annual visual inspection)

MODULE 5 & 6 REVIEW

- UST's filled in increments of _____ gallons or less are exempt from _____ & _____?

25 gallons are exempt from spill and overfill prevention

- Why can't a ball float be used with pressurized deliveries?

When the ball closes, the pressurized delivery can rupture the tank

- How can a delivery driver bypass an overfill drop tube?

By breaking off the tank stick in order to block the flapper valve from closing

- What can't an overfill alarm do?

Restrict the delivery

- What are the three types of overfill prevention equipment?

Drop tube shut off devices

Ball floats

Overfill alarms

MODULE 5 & 6 REVIEW

- Release detection records must be maintained for how long?
12 months – one pass per tank/line per month for the last 12 months
- For your small form of line release detection your monthly leak test should be at a leak rate of _____ gallons per hour ?
0.2 gph (or one annual test at .1gph)
- Your large form of line release detection is a continuous method able to detect a leak rate of _____ gallons per hour?
3 gph
- Facilities built after 11/10/2007 with complete secondary line containment must perform what monthly?
Interstitial monitoring
- Within 7 days of a failed release detection test an owner must do what?
Investigate

MODULE 7 CATHODIC PROTECTION SYSTEMS

CATHODIC PROTECTION – WHAT IS REQUIRED?

- DEP requires that any component of a UST system that is in contact with soil and/or back fill that routinely contains product must be protected from corrosion

So what is corrosion?

- Corrosion results from an electric current which is caused by contact between metal surfaces, water, and the chemicals present in soils and water
- Cathodic protection is one of several methods for protecting underground tanks and pipelines from corrosion
- Other common names: CP, corrosion protection, STIP-3 or STIP-3 Testing

POSSIBLE PETROLEUM EQUIPMENT REQUIRING CATHODIC PROTECTION

- Tanks
- Lines
- Flex hoses
- Tank top fittings

CATHODIC PROTECTION – HOW IT WORKS

Two types of cathodic protection systems

Galvanic (Sacrificial)

Uses the difference in energy levels between the steel tank (hard metal) and zinc or magnesium anodes (soft metal) to create current flow. This causes corrosion to occur on the softer metal. This is typically a factory installed option.

Impressed Current (ICCP)

Uses an outside power source called a rectifier to create current flow. These systems are designed by a corrosion engineer/expert and are typically used to protect large quantities of metal or added to tanks/lines that were not factory protected with galvanic.

- Regardless of the type of CP system you have, it works by managing the flow and direction of the current which controls corrosion.

ALTERNATIVE TO CP SYSTEMS

- In addition to the two types of CP systems used to prevent corrosion there is another way to meet DEP's requirement for corrosion protection and that is:
 - Isolating the component from the soil and/or back fill.

GALVANIC PROTECTION SACRIFICIAL SYSTEM

- A sacrificial anode protects steel by managing the flow of electrical currents from the equipment
- The sacrificial anode(s) are attached to the component that is to be protected
- The anodes are a softer metal than what is being protected, typically they are made of zinc or magnesium
- Electrons exit the system through the anode
- The anode corrodes instead of the tank

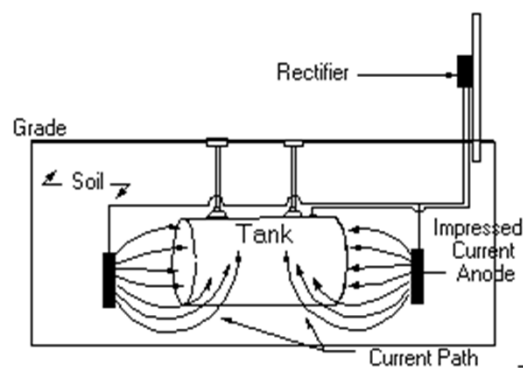
GALVANIC SYSTEM



IMPRESSED CURRENT SYSTEM

- This type of system uses anodes attached to a rectifier to introduce a negative DC current to the soils around the objects to be protected. It is through the current introduction that corrosive forces are transferred to the anode.
- ICCP systems typically protect large steel structures or are used at facilities that did not come with factory installed galvanic CP systems.
- These systems are designed by a corrosion expert, typically someone holding NACE certification, and require a site survey be completed prior to installation.

SCHEMATIC & COMPONENTS OF AN ICCP SYSTEM



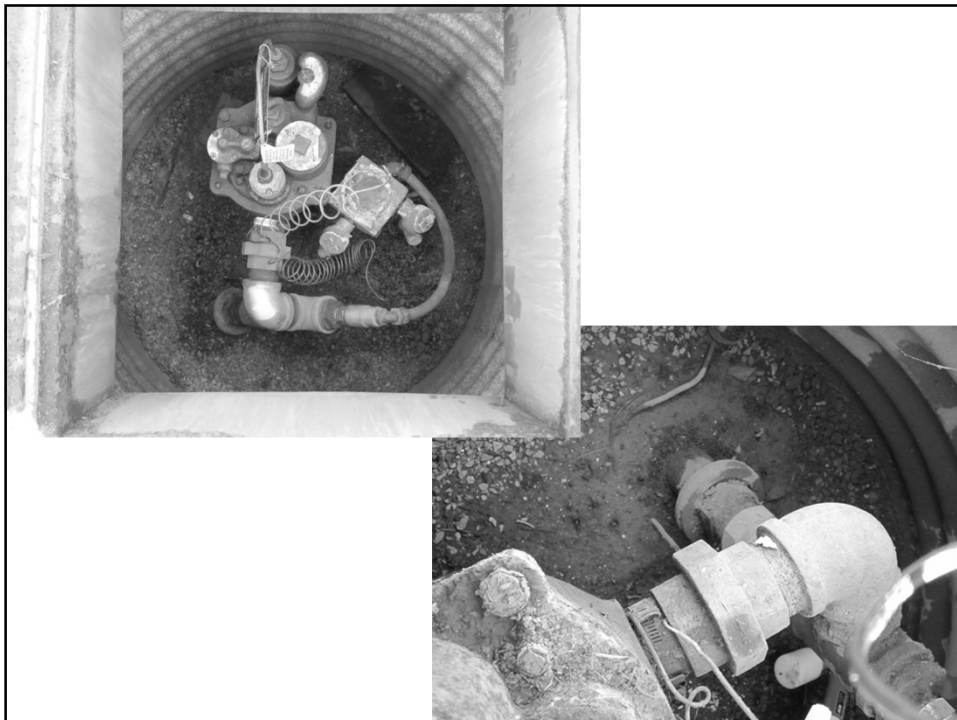
Anodes



Rectifier

CATHODIC PROTECTION UPGRADES/REPAIRS

- Anodes can be added to equipment if needed, but:
- An approved method must be followed when adding supplemental protection to a UST, this will involve a NACE certified corrosion expert to size the anode properly.
- A spike anode may be added to a flex hose to properly protect them from corrosion. This does not require a NACE certified individual.
- Adding anodes to soil safe brand flex connectors does not make them compliant.



CP TESTING AND RECORD KEEPING REQUIREMENTS

Galvanic Systems:

- Must be tested upon installation or repair
- Must be tested 6 months after installation or repair
- Must be tested every 3 years thereafter

Impressed Current Systems:

- Same as above for installation or repair
- Must record rectifier volt & amp readings every 60 days

Records:

- Must keep last 3 sets of rectifier readings for ICCP systems (temp. record)
- Must keep last the last two sets of CP test results (temp record)
- Must keep the initial site survey for ICCP systems (permanent record)

MODULE 7A 2018 REGULATION CHANGES (THAT DIDN'T FIT ANYWHERE ELSE IN THE PRESENTATION)

2018 REGULATION CHANGES

- Annual testing of all electronic and mechanical components of release detection equipment
 - Ie... leak detectors, sensors, lines
- Every 3 year testing of:
 - Sumps (dispenser, tank, spill buckets & transition)
 - Spill prevention equipment
 - Overfill equipment
- Testing must be done by a PADEP certified individual possessing the correct certification – The big change here is that owners are no longer able to do the ‘official’ test of their sensor, but you can test the sensors as part of your monthly or annual visual inspection

1. Tank systems installed on or before 12/22/2018, have 1 year before requirement, then;
2. Due date based on FOI due date but no later than December 21, 2021, whichever comes first.

Tank systems installed after 12/22/2018, must test at installation.

2018 REGULATION CHANGES WHAT DO I HAVE TO DO RIGHT NOW?

- Monthly log file of:
 - Monthly physical check of all spill buckets
 - Looking for clean and dry
 - Verify no tank stick left in drop tube
 - Verify fill cap is tight
 - Verify no cracks in spill bucket, plow ring is ok, lid fits
 - Monthly physical check of your ATG
 - Is it functioning; powered on and no alarms
- Consolidate your DEP records per site for inspections
 - Initial tank registration paperwork
 - Modification reports
 - Verify you can prove USTIF payment types
 - Throughput = Invoice from supplier showing USTIF Fees
 - Capacity = Paid annual USTIF invoice or login to your USTIF account (if you have one setup on the portal) showing a zero balance

2018 REGULATION CHANGES

- Certain non-regulated tanks are now regulated and vice versa, see sections 245.403(c) & (d) for a listing. These are tanks that are typically installed at industrial facilities.
- Generator tanks are losing their release detection exemptions per the schedule below:

Underground storage tank systems that store fuel solely for use by emergency power generators must now perform release detection.

Phase in as follows:

1. USTs installed on or before 11/10/2007
 - a. No later than 12/21/2020
2. USTs installed after 11/10/2007
 - a. No later than 12/22/2019
3. USTs installed after 12/22/2018
 - a. At installation

2018 REGULATION CHANGES (MORE ON GENERATORS)

- If a generator has a return line, then the line is considered to be an American suction line and will need to perform line tightness testing every 3 years or must perform monthly interstitial monitoring
- Line release detection for generators is exempt from having to implement positive shutoff

WORKSHEET COMPLETION

- Break into company groups
- Apply knowledge to complete worksheet section on fuel components

Product		Tank #		Test Frequency (in Months)		Tank #	
		Quantity or Certified Info.	Size			Quantity or Certified Info.	Gas
Capacity:			10,000				10,000
Year Tanks Installed:			1998				1998
Year Lines Installed:			1998				2009
			Method of Compliance				Method of Compliance
Tank Release Detection:	1	O	ATG - Vender Root, keep last 12 months	1	O	ATG - Vender Root, keep last 12 months	
Line Release Detection (Small):	12	C	Annual .01 line test, Keystone calls us to setup testing date	1	C	Sensors - Print out sensor status report monthly	
Line Release Detection (Large):	12	C	MLSD - Vaporless, annual testing	12	C	MLSD - Annual testing is covered under release detection equipment testing	
Spill Prevention Equipment Testing:	36	C	Required - Must use certified tester, next test due xx/xx/2020	36	C	Required - Must use certified tester, next test due xx/xx/2020	
Overflow Prevention Equipment Testing:	12	C	Required - Must use certified tester, next test due xx/xx/2020	12	C	Required - Must use certified tester, next test due xx/xx/2020	
Release Detection Equipment Testing:	12	C	Required - Must use certified tester, next test due xx/xx/2020	12	C	Required - Must use certified tester, next test due xx/xx/2020	
Containment Sump Testing (only required if using int. monitoring as either form of line release detection):	NA	NA	NA - Lines installed pre 1/1/2007	36	C	Required - Must use certified tester, next test due xx/xx/2020	
CP - Tank:	36	C	Required - Must use certified tester, next test due xx/xx/2020	NA	NA	NA - Single wall fiberglass tank	
CP - Line End at Tank:	NA	NA	NA - Inside tank sump	NA	NA	NA - Inside tank sump	
CP - Line End at Dispensers:	36	C	Required - Keystone calls us to setup testing date	NA	NA	NA - Inside tank sump	
ICCP Volt/Amp Readings:	NA	NA	NA - Galvanic CP	NA	NA	NA - No CP on this tank system	
Class C Operator Training:	12	O	Train at hire, then train all employees every October	12	O	Same as Tank 001	
Spill Prevention & Release Detection Check:	1	O	Visual inspection with manual log file, keep last 12 months	1	O	Same as Tank 001	
Containment Sump Check (all sumps):	12	O	Visual inspection with manual log file, keep last 12 months	12	O	Same as Tank 001	

This is an example of completed columns from the site worksheet

MODULE 8 TEMPORARY AND PERMANENT CLOSURE OF REGULATED UST SYSTEMS

TEMPORARILY OUT OF SERVICE T.O.S.

- Makes facilities that are not being used safer
- Useful for facilities awaiting sale or saving for permanent closure



REQUIREMENTS FOR TEMPORARY CLOSURE – USING A CERTIFIED CONTRACTOR

- Tanks must be emptied (less than 1" of substance)
- Lines must be emptied and capped or blinded
- Secure tank against unauthorized entry
- Contractor submits a registration form to DEP
 - Includes documentation of proper product disposal
 - Includes certified individuals signature for modifying the system



REQUIREMENTS FOR TEMPORARY CLOSURE – BY OWNER (ONLY GOOD FOR 3 MONTHS)

- Tanks must be emptied (less than 1" of substance)
 - Secure tank against unauthorized entry
 - Submit a registration Amendment Form to DEP
 - Include documentation of proper product disposal
 - IUM/UMX certification of disposal
 - Manifest of pump out & disposal
- At the end of 3 months then a proper TOS must occur



TEMPORARY CLOSURE RESULTS

- USTs in temporary closure are exempt from release detection requirements
- Annual registration and insurance fees must still be paid
- Corrosion protection must be maintained
- Tank must be vented
- Facility operations inspections (FOI) must be completed every 3 years by a DEP certified inspector

TEMPORARY CLOSURE TIME LIMITS

- A noncompliant UST has a 12 month (1 year) temporary closure time period
- A compliant UST has a 36 month (3 year) temporary closure time period
- Time limits can be shortened at the discretion of DEP
- At the end of a temporary closure time limit the tank must be permanently closed or returned to service operating, fully compliant

PERMANENT UST CLOSURE

Two Different Types

- Closure by Removal
- Closure by Close-in-Place

No matter which one you choose:
A PA DEP Certified individual/company
must be used to permanently close a UST
system

CLOSURE IN PLACE

- Removal is always preferred though circumstances can sometimes make removal impossible
- Sampling is still required
- Closure in place is almost always more expensive than removal



CLOSURE IN PLACE

- All product must be removed and the tank must be thoroughly cleaned before a solid, inert material can be added to fill the tank as much as possible



CLOSURE IN PLACE DISADVANTAGES

- More Expensive
- More Time
- Difficult to Sample
- The tank(s) may cause issues v

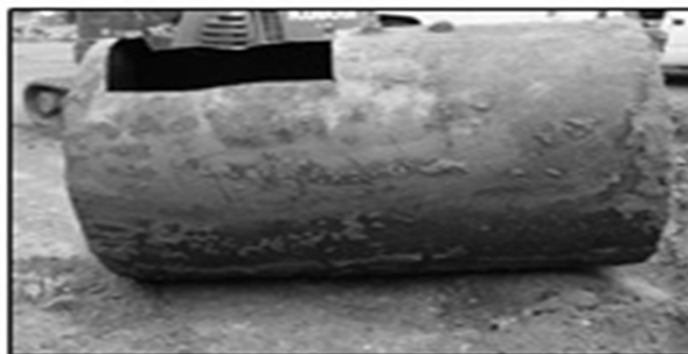


TANK REMOVAL



CLOSURE BY REMOVAL

- The tank is removed from the ground and dismantled safely
- Samples can easily be taken from under the tank



UST CLOSURE REPORT

- A closure report must be created after the permanent closure of any regulated UST.
- Closure reports should include: site information, tank information, sampling maps, sample results, the name of the certified individual/company performing the closure, and all waste manifests (tanks, piping, product, etc.
- If contamination is suspected or confirmed, the closure report must be submitted to PA DEP.
- Closure reports must be kept by the owner for 3 years.

MODULE 7 & 8 REVIEW

- A rectifier must have its readings logged every how many days?
60 days
- Cathodic protection must be tested within _____ months of installation/repair and every _____ years after?
6 months & 3 years
- Any component of a UST system that comes in contact with soil/back fill must be protected from what?
Corrosion
- What brand of flex hose does not have continuity between both metallic ends?
Soilsafe
- In addition to CP systems, what is another method of protecting metallic components from corrosion?
Physically isolate the component from soil and/or backfill

MODULE 7 & 8 REVIEW

- A tank is considered empty if it has _____?
Less than 1" of product
- A UST in temporary closure is exempt from what? And not exempt from what?
Tank and line release detection
Cathodic protection testing
- How long can a compliant tank system be in TOS? How long can a non-compliant tank system be in TOS?
3 years
1 year
- How long must a tank owner keep a tank closure report if no contamination was encountered?
3 years

QUESTIONS BEFORE THE TEST

