

Oregon Department of Environmental Quality

Underground Storage Tank Installation Check List

DEQ FACILITY NUMBER: 11481

DEQ FACILITY ADDRESS: 1264 Hwy. 18
Otis, Oregon

This check list must be filled out by the DEQ licensed Supervisor and submitted as part of the installation record in accordance with OAR Chapter 340, Divisions 150 and 160. A new installation must be inspected a minimum of three times and all the requested information provided to the DEQ. (Where a specific item is "NOT APPLICABLE" to the situation, please check the N/A box.) If this form is used by DEQ inspectors, it will be for oversight purposes. DEQ inspectors may not be on site for the entire installation. The licensed UST Service Provider must have a DEQ licensed Supervisor on site during all of the following operations. This checklist must be signed by an executive officer of the UST Service Provider firm and by the licensed UST Supervisor.

FIRST INSPECTION - PRIOR TO PLACEMENT OF THE UNDERGROUND STORAGE TANK INTO THE EXCAVATION.

1. The tank installer is licensed by DEQ as a UST Service Provider. DEQ Service Provider License number: 14319

2. Facility has submitted the DEQ permit application 30-day prior to the installation with the appropriate permit fees. Date submitted: submitted by Pettijohn

3. The DEQ Regional Office was notified 72 hours in advance of the installation. Date Notified: 9-14-95

4. Has any soil hydrocarbon fuel contamination been observed? If so, was it reported to DEQ? Reported to: _____
Phone number: _____

5. Tank and piping materials comply with 40 CFR 280.20 as modified by OAR Chapter 340, Division 150.

6. Manufacturer's specification for preinstallation practices have been followed.

7. Any detected damage has either been repaired or replaced in a manufacturer approved manner prior to placement in the excavation.

8. Tanks have been pressure tested and satisfy API #1615 specifications.

9. Tank excavation complies with the standards of API #1615 or PEI/RP 100-90.

10. Backfill materials fulfill the tank manufacturer's recommendations.

11. Electrical continuity exists between the anode and lead wire.

12. Anode locations are such to provide sufficient current distribution for cathodic protection.

Yes	No	Unknown	N/A
X			
X			
			X
			X
			X
			X
			X
			X
			X
			X

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13. In areas subject to a high water table or flooding, provisions have been made to insure proper anchoring of tanks (full or empty) in accordance with the manufacturer's specifications.

14. The above conditions are in compliance and the tanks may be placed into the excavations without any violations.

Yes	No	Unknown	N/A
			✓
			✓

Licensed UST Supervisor's Signature

Inspection Date _____

Print Name Wiley M. Fretwell

Supervisor's License Number 12150

SECOND INSPECTION - AFTER PLACEMENT OF THE UNDERGROUND STORAGE TANK, BUT PRIOR TO BACKFILLING.

15. Tank placement was done in accordance with the manufacturer's specifications.

16. Tank was not damaged during installation.

Yes	No	Unknown	N/A
			✓
			✓
			✓
			✓
			✓
			✓
			✓
			✓
			✓
			✓

SACRIFICIAL ANODE SYSTEMS

17. Anodes, dielectric bushings, coatings did not incur any damage during installation.

18. Damage to anode connections, coatings or tanks have been repaired in accordance with the manufacturer's specifications.

19. Necessary prepacking on each anode has been removed or kept intact according to manufacturer's instructions and/or each anode has been properly placed in its prepackaged backfill material.

IMPRESSED CURRENT SYSTEMS

20. High silicon iron, graphite or platinum anodes have not been damaged and the associated lead wires and insulation are intact.

21. Anodes have been installed according to the manufacturer's specifications.

22. The negative terminal of the rectifier has been connected to the structure and the positive terminal to the anodes.

23. Continuity of the wire has been tested.

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25. A cathodic protection test station is installed.

Yes	No	Unknown	N/A
			/
			/

Licensed UST Supervisor's Signature

Inspection Date _____

Print Name _____

Supervisor's License Number _____

THIRD INSPECTION - PRIOR TO PLACEMENT INTO ACTIVE SERVICE
AND AFTER BACKFILLING.

37. All dielectric bushings and fittings are compatible with the liquid stored and the operating pressure of the tank system.

Yes	No	Unknown	N/A
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38. Protection has been provided for those gauges, monitoring devices, and other systems which, when subject to failure by corrosion, would cause a release or impair the operation of a monitoring system.
39. All piping slopes at an incline towards the tanks.
40. Adequate clearance has been provided between piping and trench walls, conduit, monitoring well, utilities, nearby structures, and other system components following NFPA, API or PEI standards.
41. Piping joints have been assembled in accordance with the piping and sealant manufacturer's preparation, application and assembly instructions.
42. All piping installment requirements specified by the manufacturer have been followed and implemented.
43. Assembled piping shows no evidence of leakage at any connection of flexible connectors under both pressure testing and normal conditions.
44. Both overfill protection and leak detection monitoring system requirements of OAR 340-150-001 through 150 have been met and are functioning properly.
45. Tank deflection measurements for FRP tanks have been remeasured at this point and remain within the acceptable limits of the manufacturer's specifications.
46. Installed cathodic protection systems have been tested at this point and are providing adequate protection.
47. Internal and external monitoring and gauging systems are working properly.
48. The above conditions are in compliance and have been installed properly in accordance with OAR Chapter 340, Division 150.
49. Two copies of the as built drawings of the installation have been provided with this checklist and sent to DEQ.

Yes	No	Unknown	N/A
			✓
			✓
			✓
			✓
			✓
			✓
			✓
			✓
			✓
			✓
			✓

Licensed UST Supervisor's Signature _____

Date _____

Print Name _____

Supervisor's License Number _____

Installer's Oath: I certify that the information concerning the installation provided on this checklist is true to the best of my belief and knowledge.

Installer: _____

Date _____

Position: _____

Company: _____

Date _____

Executive Officer Signature - UST Service Provider Firm

Print Name _____

Owner's Financial Responsibility Information Section

The tank owner has financial responsibility, if applicable, in accordance with OAR 340-150-004. Please specify:

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Method: _____

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Insurer: _____

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Policy Number: _____

ENVIRONMENTAL CLEANUP DIVISION

DEQ Mailing Address:

This form must be mailed to DEQ 30 days after the installation is completed.

Department of Environmental Quality
HSW - UST Compliance Section
811 S.W. Sixth Avenue
Portland, OR 97204

For information, call the Underground Storage Tank program, toll free in Oregon at 1-800-452-4011 or (503) 229-5733.

DEQ Inspections

This form may be used by DEQ inspectors for oversight purposes. A DEQ inspector is not required to inspect the installation. A DEQ inspector may not be on site during all of the inspection times listed on this form. In the case of an oversight inspection, the DEQ inspector should check all boxes that are appropriate for the inspection(s) and forward a copy to headquarters for the facility file.

DEQ Inspector's Signature _____

Inspection Date(s) _____

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