

Oil

30 DAYS WALK THROUGH INSPECTION

UST Facility I.D. (RID) # 1633		Contact Number
Facility Name Coho		Contact email
Address 1245 S. Main St, Skiblat, MN		Date of Inspection 08/15/21
Operator on Duty Name		Name of the Person Conducting Inspection AKSHIT

Operator Training current	☐ Yes ☐ No	Operator Notified	☐ Yes ☐ No
Is Registration current with correct owner, operator etc.	☐ Yes ☐ No	Operator Notified	☐ Yes ☐ No
Release Detection Method	☒ RTG ☐ DIM ☐ IIR ☐ IC ☐ Other		
Make and Model	FFS T51001		
Does it have paper?	☒ Yes ☐ No	Operator Notified	☐ Yes ☐ No
Is it in Alarm mode?	☒ Yes ☐ No	Operator Notified	☐ Yes ☐ No
Interstitial Monitoring Sensor Status Normal	☒ Yes ☐ No	Operator Notified	☐ Yes ☐ No
Necessary Monthly Printout Taken	☒ Yes ☐ No	Operator Notified	☐ Yes ☐ No
Are Spill Buckets Clean and free from water, debris, product etc?	☒ Yes ☐ No	Operator Notified	☐ Yes ☐ No
Are the Spill Bucket in good condition and free of damage/cracks	☒ Yes ☐ No	Operator Notified	☐ Yes ☐ No
Is fill pipe cap tight and fill pipe free from any obstruction?	☒ Yes ☐ No	Operator Notified	☐ Yes ☐ No
Are Sumps Clean and free from water, debris, product etc?	☒ Yes ☐ No	Operator Notified	☐ Yes ☐ No
Under Dispenser Containments (UDC)	☒ Yes ☐ No	Operator Notified	☐ Yes ☐ No
Are UDCs clean and free from water, debris, product etc?	☒ Yes ☐ No	Operator Notified	☐ Yes ☐ No

NOTE: ALL LIQUID/DEBRIS OR WASTE MUST BE DISPOSED OFF ACCORDING TO EXISTING RULES AND REGULATIONS FOLLOWING PROPER PROCEDURE BY A CERTIFIED CONTRACTOR.

Operator on Duty Name _____ Signature _____ Date _____

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