Contact Number  Contact email  Date of Inspection OS-26-35  Name of the Person Conducting Inspection  Conducting Inspection  Oyes  Oyes  Oyes  Oyes  Oyes  OperatorNotified  Spill Ports  OperatorNotified  OperatorNotified  OperatorNotified  Spill Ports  OperatorNotified  OperatorNotified  Spill Ports  OperatorNotified  Spill Ports  OperatorNotified  OperatorNotified  OperatorNotified  OperatorNotified  Spill Ports  OperatorNotified  OperatorNotified	317-645-0215	Operator on Duty Name	NOTE: ALL LIQUID/DEBRIS OR WASTE MUST BE I	Are UDCs clean and free from water, debris, product etc		Are Sumps Clean and free from water, debris, product etc?		Is Fill pipe cap tight and fill pipe free from any obstruction?		Are the Spill Bucket in good condition and free of damage/cracks	Are Spill Buckets Clean and free from water, debris, product etc?		Necessary Monthly Printout Taken	Interstitial Monitoring Sensor Status Normal	Is it in Alarm mode?	Does it have paper?	Make and Model	Release Detection Method		Is Registration current with correct owner, operator etc.		Operator Training current		Operator on Duty Name  Jav-41546	11.	Name Torothon	UST Facility I.D.((FID) # 1987/	Temks Date
Operator Notified Oes	tanksdata@gmail.com	Signature	ER PROCEDUE BY A CERTIFIED	Cres	Dispenser Containments (UI	Cres	iping/STP Sump	0	Fill Por	D	Q g	Spill Buckets	9	Q Q	0	9	0D-12255		Release Detec	O <sub>Yes</sub>	stration/Notification	$\mathcal{C}$	Operator Traini	Name of the Conducting	Date of Inspection Q	Contact email	Contact Number	DIAL O TAY
			CONTRACTO	OperatorN	)	OperatorNotified Wes	)	OperatorNotified Oes	(	Operator Notified (X)es	OperatorNotified (C)es		OperatorNotified ()es	OperatorNotified () Yes	OperatorNotified (Xes			C	)	OperatorNotified (Xes	)	OperatorNotified (Xes	)	3	100			

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