

Tanks Data

30 DAYS WALK THROUGH INSPECTION

UST Facility I.D. (FID) #	25595	Contact Number	
Facility Name	Medic	Contact email	
Address	29026 County Road 20	Date of Inspection	3/12/25
Operator on Duty Name	Elkhart Jo 6517	Name of the Person Conducting Inspection	AKIT

Operator Training current	☐ Yes	☐ No	Operator Notified	☐ Yes	☐ No
Is Registration current with correct owner, operator etc.	Registration/Notification Form		Operator Notified	☐ Yes	☐ No
Release Detection Method	Release Detection		Operator Notified	☐ Yes	☐ No
Make and Model	ATG		Operator Notified	☐ Yes	☐ No
Does it have paper?	Yes		Operator Notified	☐ Yes	☐ No
Is it in Alarm mode?	Yes		Operator Notified	☐ Yes	☐ No
Interstitial Monitoring Sensor Status Normal	Yes		Operator Notified	☐ Yes	☐ No
Necessary Monthly Printout Taken	Yes		Operator Notified	☐ Yes	☐ No
Are Spill Buckets Clean and free from water, debris, product etc?	Yes		Operator Notified	☐ Yes	☐ No
Are the Spill Bucket in good condition and free of damage/cracks	Yes		Operator Notified	☐ Yes	☐ No
Is Fill pipe cap tight and fill pipe free from any obstruction?	Yes		Operator Notified	☐ Yes	☐ No
Are Sumps Clean and free from water, debris, product etc?	Yes		Operator Notified	☐ Yes	☐ No
Are UDCs clean and free from water, debris, product etc?	Yes		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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