

30 DAYS WALK THROUGH INSPECTION

Thanks Data

UST Facility I.D. (FID) #	50186	Contact Number	
Facility Name	Amoco	Contact email	
Address	1338 W. Sample St,	Date of Inspection	04-26-25
Operator on Duty Name	Paul Sed, 2M-46619	Name of the Person Conducting Inspection	Noton Singh

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	☒ ATG ☐ CIM ☐ SIR	Operator Notified	☐ Yes ☐ No
Make and Model	VR-TL2335DR	Operator Notified	☐ Yes ☐ No
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
Piping/STP Sumps	☒ 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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