



Bridging the Biodiesel Gap	Procedure #
Storage tank monitoring and inspection form	

Storage tank cleaning and monitoring form

General Information

Circle one: Above Ground or UST

Facility Name:	
Tank location address:	City:
Zip Code:	Phone Number:
Tank Owner/Operator Address:	City:
Zip Code:	Phone Number:
Tank Number:	Construction Date:

Tank Cleaning

Last cleaned:	Method:	Results:
Sampled for contaminants?	Results:	



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Schedule inspection for contaminants:	Date:	Results:
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Tank Specifications

Manufacturer:	Contents:	Specific Gravity:
Material:	Top: Circle one: ASME/Conical/Flat Dimensions:	Bottom: Circle one ASME/Conical/Flat Dimensions:
Over all dimensions:	Capacity:	Fill height:
Product Heated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Maximum Operating Temperature(F)	
Single or Double wall?	Can you test for Humidity? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Visual Inspection Symbols: **Y**: yes **N**: no **S**: satisfactory **U**: unsatisfactory

Tank Shell	Condition	Comment
Bulging:		
Cracks:		
Discoloration:		



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Corrosion:		
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Foundation	Condition	Comment
Fittings:		
Pipes:		
Valves:		
Hose:		
Connections liquid tight:		
Valves liquid tight:		
Supports:		
Tank Label:		

Pump	Condition	Comment
Fittings:		



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Pipes:		
Valves:		
Hose:		
Connections liquid tight:		
Valves liquid tight:		

Inspection Date: _____

Prior Inspection Date: _____

Purpose of Inspection: _____

Type of Inspection: _____

Include drawings and certifications if applicable:

PREPARED BY: _____

SUPERVISOR _____

SIGNED: _____ **DATE:** _____

REMARKS: