

# SANTA ROSA FIRE DEPARTMENT

## FIRE PREVENTION BUREAU

### INSPECTION CHECKLIST

July 1, 2010



## ABOVEGROUND STORAGE TANK MODIFICATION

Address:

Permit #:

Inspector:

Date Inspected:

Status:

Inspector:

Date Inspected:

Status:

A-Approved, R-Re-inspection Required

This Checklist outlines general requirements. Information contained herein applies to typical instances and may not address all circumstances.

#### FILE REVIEW

- |    |                          |                          |                        |
|----|--------------------------|--------------------------|------------------------|
|    | Y                        | N                        |                        |
| 1. | <input type="checkbox"/> | <input type="checkbox"/> | Approved plans on file |
| 2. | <input type="checkbox"/> | <input type="checkbox"/> | Permit Plus up to date |
| 3. | <input type="checkbox"/> | <input type="checkbox"/> | All fees are current   |

#### REQUIRED INSPECTIONS

- |    |                          |                          |   |
|----|--------------------------|--------------------------|---|
| 4. | <input type="checkbox"/> | <input type="checkbox"/> | Primary tank test                               |
| 5. | <input type="checkbox"/> | <input type="checkbox"/> | Secondary tank test                             |
| 6. | <input type="checkbox"/> | <input type="checkbox"/> | Primary piping and vapor recovery pressure test |
| 7. | <input type="checkbox"/> | <input type="checkbox"/> | Secondary Piping and vent pipe pressure test    |
| 8. | <input type="checkbox"/> | <input type="checkbox"/> | Modified equipment                              |
- \* Follow the manufactures recommended testing specifications for time and pressure

#### INSPECTION OBSERVATIONS

- |     |                          |                          |  |
|-----|--------------------------|--------------------------|--|
| 9.  | <input type="checkbox"/> | <input type="checkbox"/> | The description of the modification is clear   |
| 10. | <input type="checkbox"/> | <input type="checkbox"/> | An approved set of field plans are on site.  |
| 12. | <input type="checkbox"/> | <input type="checkbox"/> | Tanks labeled with capacity, tank number if applicable, contents, no smoking and NFPA diamond.                     |
| 13. | <input type="checkbox"/> | <input type="checkbox"/> | Exterior tank is protected from corrosion  |
| 14. | <input type="checkbox"/> | <input type="checkbox"/> | Tank is protected from impact  |
| 15. | <input type="checkbox"/> | <input type="checkbox"/> | Property use clearly identified (Gas, bulk storage, government, utility, residential, school, emergency generator) |
| 16. | <input type="checkbox"/> | <input type="checkbox"/> | Tank Contents are identified. (Gas diesel, kerosene waste, fuel oil, aviation, other)                              |
| 17. | <input type="checkbox"/> | <input type="checkbox"/> | Tank is in a condition to conduct modifications and required testing.  |

**Inspection Checklist**  
**AST Modification**

- |     | Y                        | N                        |   |
|-----|--------------------------|--------------------------|---|
| 18. | <input type="checkbox"/> | <input type="checkbox"/> | Tank meets applicable code requirements.  |
| 19. | <input type="checkbox"/> | <input type="checkbox"/> | Work has not been preformed which compromises the UL listing of the tank or components. |
| 20. | <input type="checkbox"/> | <input type="checkbox"/> | Is this modification due to an integrity inspection, system or part failure?            |

IF APPLICABLE

- |     |                          |                          |   |
|-----|--------------------------|--------------------------|---|
| 21. | <input type="checkbox"/> | <input type="checkbox"/> | Verify Monitoring method (Electronic, vapor/pressure, stick/visual) includes equipment used for monitoring secondary containment. |
| 22. | <input type="checkbox"/> | <input type="checkbox"/> | Verification tank is constructed and designed in accordance with nationally recognized standards                                  |
| 23. | <input type="checkbox"/> | <input type="checkbox"/> | Verify Seismic stability  |
| 24. | <input type="checkbox"/> | <input type="checkbox"/> | Verify crash protection   |
| 25. | <input type="checkbox"/> | <input type="checkbox"/> | Verify secondary Containment  |
| 26. | <input type="checkbox"/> | <input type="checkbox"/> | Verify Spill containment  |
| 27. | <input type="checkbox"/> | <input type="checkbox"/> | Verify overfill prevention (Ball float valves, automatic shutoff devices, overfill alarms).                                       |
| 28. | <input type="checkbox"/> | <input type="checkbox"/> | Verify fill port, pipe tank labeling  |
| 29. | <input type="checkbox"/> | <input type="checkbox"/> | Verify all piping is supported  |
| 30. | <input type="checkbox"/> | <input type="checkbox"/> | Verify locations of all connections are noted   |
| 31. | <input type="checkbox"/> | <input type="checkbox"/> | Verify tank venting   |
| 32. | <input type="checkbox"/> | <input type="checkbox"/> | If applicable are flame arrestors present   |
| 33. | <input type="checkbox"/> | <input type="checkbox"/> | Are anti siphon devices in place  |
| 34. | <input type="checkbox"/> | <input type="checkbox"/> | Is Fire Protection is in place (extinguishers, chemical system)   |
| 35. | <input type="checkbox"/> | <input type="checkbox"/> | Is Leak detection in place  |
| 36. | <input type="checkbox"/> | <input type="checkbox"/> | Has an SPCC plan been completed   |
| 37. | <input type="checkbox"/> | <input type="checkbox"/> | Has a Hazardous Materials Business Plan been submitted to Unidocs.org   |