|  |  |  |  |
| --- | --- | --- | --- |
| Facility Name |       | Facility ID# |       |
|  |
| Applicable Period |       |
|  |
| AnnualLeak Detection System Testing (Type) | Annual Test **Date** | **Result** (Attached) | **Repair and Date Completed** **(if applicable)** | Passing Re-Test **Date**(Results Attached) |
|       |       | [ ]  Pass [ ]  Fail  |       |       |
|  |
| Annual Automatic Line Leak Detection Test | Annual Test **Date** | **Result**(Attached) | **Repair and Date Completed** **(if applicable)** | Passing Re-Test **Date**(Results Attached) |
|       |       | [ ]  Pass [ ]  Fail  |       |       |
|  |
| 1/2/2017 Sump Testing Requirement | Test **Date** | **Result**(Attached) | **Repair and Date Completed** **(if applicable)** | Passing Re-Test **Date**(Results Attached) |
|       |       | [ ]  Pass [ ]  Fail  |       |       |
|  |
| Annual Sump Sensor Testing | Annual Test **Date** | **Result**(Attached) | **Repair and Date Completed** **(if applicable)** | Passing Re-Test **Date**(Results Attached) |
|       |       | [ ]  Pass [ ]  Fail  |       |       |
|  |
| 1/2/2017 Spill Bucket Testing Requirement (and every 5 years thereafter) | Test **Date** | **Result**(Attached) | **Repair and Date Completed** **(if applicable)** | Passing Re-Test **Date**(Results Attached) |
|       |       | [ ]  Pass [ ]  Fail  |       |       |

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|  |
| Annual Overfill Prevention Equipment Inspection & Test | Annual Inspection & Test **Date** | **Result**(Attached) | **Repair and Date Completed** **(if applicable)** | Passing Re-Test **Date**(Results Attached) |
|       |       | [ ]  Pass[ ]  Fail  |       |       |
|  |
| **If Applicable** |
|  |
| AnnualImpressed Current Cathodic Protection System Testing | Annual Test **Date** | **Result**(Attached) | **Repair and Date Completed** **(if applicable)** | Passing Re-Test **Date**(Results Attached) |
|       |       | [ ]  Pass [ ]  Fail  |       |       |
|  |
| Financial Responsibility Mechanism Annual Renewal **(Type)** | FR Term**(Start date – End Date**) | Complete Current FR Mechanism **Attached** | Certification of FRCurrent and complete | FR Registration in UST DMS is current and complete |
|       |       | [ ]  Yes[ ]  No | [ ]  No[ ]  Yes | [ ]  Yes[ ]  No |