FORM 6: DRUM SITE INSPECTION CHECKLIST

Instructions: One inspection checklist per drum site. (*) designates an item in nonconformance/unsatisfactory status; provide action in comment section to resolve problem and notify Environmental Protection Specialist if any significant deficiencies are identified. Regulatory Driver: 40 CFR 112

Frequency: Monthly

Date: _____ Drum Site Name:_____ Location: _____ Quantity of Drums: _____ Volume of Drums: ____ Content: ____

STI SP001 Portable Container Monthly Inspection Checklist Inspection Guidance:

- For equipment not included in this Standard, follow the manufacturer recommended inspection/testing schedules and procedures.
- The periodic AST Inspection is intended for monitoring the external AST condition and its containment structure. This visual inspection does not require a Certified Inspector. It shall be performed by an owner's inspector who is familiar with the site and can identify changes and developing problems.
- (*) designates an item in a non-conformance status. This indicates that action is required to address a problem.
- Non-conforming items important to tank or containment integrity require evaluation by an engineer experienced in AST design, a Certified Inspector, or a tank manufacturer who will determine the corrective action. Note the non-conformance and corresponding corrective action in the comment section.

Retain the completed checklists for 36 months.

Item	Area:		Area:		Area:		Area:	
1.0 AST Containment/Storage	e Area				l			
1.1 ASTs within designated storage area?	Yes	No*	Yes	No*	Yes	No*	Yes	No*
1.2 Debris, spills, or other fire hazards in containment or storage area?	Yes*	No	Yes*	No	Yes*	No	Yes*	No
1.3 Water in outdoor secondary containment?	Yes*	No	Yes*	No	Yes*	No	Yes*	No
1.4 Drain valves operable and in a closed position?	Yes	No*	Yes*	No	Yes*	No	Yes*	No
1.5 Egress pathways clear and gates/doors operable?	Yes	No*	Yes*	No	Yes*	No	Yes*	No
2.0 Leak Detection								
2.1 Visible signs of leakage around the container or storage area?	Yes*	No	Yes*	No	Yes*	No	Yes*	No
3.0 Container								
3.0 Noticeable container distortions, buckling, denting or bulging?	Yes*	No	Yes*	No	Yes*	No	Yes*	No

() designates an item in non-comormance status. This	s mulcales that action is required to address a problem.	
Comments:		
Inspector:		
Signature:	Date:	
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