

SPCC MONTHLY PHYSICAL INSPECTION LOGSHEET	
Location _____ Bldg # _____ <i>Date Inspected</i> _____	
Tank ID # _____ Tank Type (please check) AST _____, AST with Berm _____, Transformer _____	
<u>Inspection Checklist</u>	<u>Tank Observations:</u>
Inspect valves & piping for evidence of leakage.	
Inspect metal surface of tank & supports for corrosion	
Check for leaks at base of tank	
Check secondary containment (berms) if present for leaks, cracks, etc.	
Is berm drain valve in closed position?	
Containment cleaned & pumped (as needed basis).	
Tank secured / locked? Y/N	
Are tanks labelled correctly?	
Is spill equipment present/accessible?	
Check that tank vents are clear of obstruction & operational	
If spill or leak has occurred when was VA notified and to whom was notice given?	
SOP accessible for drainage of containment?	
SOP accessible for proper filling & withdrawal procedures if applicable?	
Comments:	
Inspected By:	
SPCC ANNUAL REQUIREMENTS	
Test fuel gauge (once per year)	
Conduct employee training (at least once per year)	Date(s)