

This form is now available for electronic submittal using the Alabama Environmental Permitting and Compliance System or AEPACS.

[Note: The program encourages the use of an electronic form submittal rather than a paper form submittal.]

Please click the link below to submit this form electronically using AEPACS.

https://aepacs.adem.alabama.gov/nviro/ncore/external/home

						Fac	:#	ANWAL	KD	ate	
ADEM ANNUAL WALKTHROUGH INSPECTION CHECKLIST LOG FOR YEAR											
Site Name:					Owner:						
Address:					Address:						
City, County,State Zip, Country:					City, State, Zip, Country:						
Facility I.D. #:					#:						
Tester Name:					Phone #:						
Tester Company:					Inspection Date:						
Tester Certification & Expiration Date: Instructions											
1. This form allows you to record up to 5 ADEM Unique Tank Numbers, assuming that the Facility ID Number remains the same.											
<ol> <li>Complete portion of form pertaining to type of equipment inspected for each tank.</li> <li>Inspection must be performed in accordance with a nationally recognized code of practice (such as PEI RP-900, or equivalent), manufacturer's instructions, or ADEM requirements.</li> </ol>											
<ul> <li>4. Sites with safe suction piping are not required to complete the containment sump inspection portion of this form. For sites with safe suction piping and no hand held release detection equipment, completion of this form is not required.</li> <li>5. Keep a copy of this inspection for 1 year. Questions on how to complete this form should be directed to the Groundwater Branch,</li> </ul>											
UST Compliance Section at (33  ADEM Unique Tank # or											
Dispenser #											
Is the Site Using Interstitial Leak Detection for Piping?	□ yes	□ no	□ yes	□ no	□ yes	□ no	□ yes	□ no	□ yes	□ no	
		Visual C	ontainme	nt Sump	Inspectio	n					
Type of containment sump inspected	☐ sub pump☐ intermediate☐ dispenser		☐ sub pump ☐ intermediate ☐ dispenser		☐ sub pump ☐ intermediate ☐ dispenser		☐ sub pump ☐ intermediate ☐ dispenser		☐ sub pump ☐ intermediate ☐ dispenser		
Is the sump an earthen sump?	□ yes □ no		□ yes □ no		□ yes □ no		□ yes □ no		□ yes □ no		
Is the visible piping in good condition?	□ yes □ no		□ yes □ no		□ yes □ no		□ yes □ no		□ yes □ no		
Is there evidence of a release? (If release found, report it to ADEM)	□ yes □ no		□ yes □ no		□ yes □ no		□ yes □ no		□ yes □ no		
Is the Sump free of damage?	□ yes □ no	□ n/a	□ yes □ no	□ n/a	□ yes □ no	□ n/a	□ yes □ no	□ n/a	□ yes □ no	□ n/a	
Is the Sump free of water, fuel, and/or debris?	□ yes □ no	□ n/a	□ yes □ no	□ n/a	□ yes □ no	□ n/a	□ yes □ no	□ n/a	□ yes □ no	□ n/a	
Water, fuel and/or debris removed and disposed of properly?	□ yes □ no	□ n/a	□ yes □ no	□ n/a	□ yes □ no	□ n/a	□ yes □ no	□ n/a	□ yes □ no	□ n/a	
Are penetrations (boots, conduits,	□ yes		□ yes		□ yes		□ yes		□ yes		
etc.) into sump in good condition?	□no	□ n/a	□ no	□ n/a	□no	□ n/a	□ no	□ n/a	□ no	□ n/a	
Is primary piping interstitial space open, or test boots positioned, to allow product to enter sump?	□ yes □ no	□ n/a	□ yes □ no	□ n/a	□ yes □ no	□ n/a	□ yes □ no	□ n/a	□ yes □ no	□ n/a	
Are the sensors properly positioned	□ yes		□ yes		□ yes		□ yes		□ yes		
near bottom of sump?	□no	□ n/a	□no	□ n/a	□no	□ n/a	□ no	□ n/a	□ no	□ n/a	
If double walled sump, is	□ yes		□ yes		□ yes		□ yes		□ yes		
interstitial space free of liquid?	□no	□ n/a	□ no	□ n/a	□ no	□ n/a	□ no	□ n/a	□ no	□ n/a	
Results of sump inspection	□ pass	lald Dala	□ pass □ fail	tion Fam	☐ pass ☐ fail		□ pass □ fail		□ pass □ fail		
Hand Held Release Detection Equipment Inspection											
Type of hand held release detection equipment	☐ gauge stick ☐ groundwater bailer		<ul><li>☐ gauge stick</li><li>☐ groundwater</li><li>bailer</li></ul>		☐ gauge stick ☐ groundwater bailer		☐ gauge stick ☐ groundwater bailer		☐ gauge stick ☐ groundwater bailer		
Results of equipment inspection	□ other (specify): □ other □ pass □ fail □ fail		(specify):	□ other ( □ pass □ fail	(specify):	□ other (specify): □ pass □ fail		□ other (specify): □ pass □ fail			
Repairs Needed	Date of Repair Description of any Repairs										

Site Latitude \_\_\_\_\_ Longitude\_\_\_\_\_ ADEM Form 19 6/22 m3

Inspector's Signature: