**SPCC Monthly Tank Assessment Form**

*Copy this sheet as needed.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Tank Description** | **Initials** | **Comments** |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |
|       |       |     |       |

*For instructions, refer to Appendix D.1 in your SPCC Plan.*

**Use one line for each tank inspected.**

**Initial the form after thoroughly checking the following:**

**Tanks:**

Signs of leakage; Tank condition; Foundation condition; Gauges/alarms working properly

**Containment Area:**

Signs of oil in containment area; Cracks in containment; Drainage valves/openings closed

**Transfer Operations:**

Signs of leakage from pipes, valves, flanges; Pipeline condition; Out-of-service pipes capped

**Truck Loading and Unloading Areas:**

Signs of leaks/spills – Warning signs posted or wheel chocks used.

**NDOT Form 197, August 17**