Appendix 7 Underground Storage Tank Overfill Prevention Equipment Testing Report Form

TESTING TYPE	□ Insta	allation □ Repair □ 36 Month							
1. FACILITY INFORMATION									
CERS ID					Test Date				
Facility Name					-				
Facility Address				City		ZIP Code			
2. SERVICE TECHNIC	CIAN INFO	RMATION							
Company Performing	Testing				Phone)			
Mailing Address									
Service Technician Performing Testing									
Contractor License Nu	mber								
ICC Certification						ICC Expiration Date			
3. TRAINING AND CE	ERTIFICAT	IONS			_				
Manufacturer and Test		Training Expiration Date							
4 7507 000050110	E INICODIA	4 T ION							
4. TEST PROCEDUR			ata Taatad						
Test Procedures Used		Componen	ils resieu						
5. CERTIFICATION BY SERVICE TECHNICIAN CONDUCTING TEST									
I hereby certify that the OPE was tested in accordance with California Code of Regulations,									
title 23, division 3, chapter 16, section 2665; that required supporting documentation,									
including calibration charts, is attached; and all information contained herein is accurate. I understand that test procedures must be made available upon request by the governing									
authority.	procedures	, mast be n	naac avanasi	c apon reques	t by the g	overming			
Service Technician Signature			Date	Т	otal # of Pages				

CERS = California Environmental Reporting System, ICC = International Code Council, ID = Identification, OPE = Overfill Prevention Equipment

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6. OVERFILL PREVENTION EQUIPMENT DETAILS								
Test Method Developed by ☐ Manufacturer ☐ Industry Standard ☐ Professional Engineer								
☐ Check this box if Appendix 7.1 continuation page is attached.								
Tank ID (one OPE per column)								
Tank Manufacturer								
Tank Capacity (Gallons)								
Tank Inside Diameter (Inches)								
Are both vent and tank riser piping	☐ Yes	☐ Yes	☐ Yes	☐ Yes				
secondarily contained?	□ No	□ No	□ No	□ No				
OPE Manufacturer / Model								
What is the OPE response when activated?	☐ Shut off	☐ Shut off	☐ Shut off	☐ Shut off				
(Check all that apply.)	☐ Restrict	☐ Restrict	☐ Restrict	☐ Restrict				
	□Audible	☐ Audible	☐ Audible	☐ Audible				
	☐ Visual	□ Visual	□ Visual	□ Visual				
Are flow restrictors installed on vent piping	☐ Yes*	☐ Yes*	☐ Yes*	☐ Yes*				
that may interfere with the OPE operation?	□ No	□ No	□No	□ No				
For audible/visual overfill alarms, are they	☐ Yes	☐ Yes	☐ Yes	☐ Yes				
clearly audible/visible at the tank fill point?	□ No	□ No	□ No	□ No				
At what level in the tank does the OPE activate? (Inches from bottom of tank)								
What is the percent capacity of the tank at which the OPE activates?								
Is the OPE in proper operating condition to	□Yes	☐ Yes	□ Yes	□ Yes				
respond when the stored substance reaches	□ No	□No	□ No	□ No				
the designated regulatory level? 7. SUMMARY OF TEST RESULTS								
OPE Test Results	□ Pass	□ Pass	□ Pass	ПРесс				
OF L Test Nesults	□ Pass □ Fail	□ Pass □ Fail	□ Pass □ Fail	□ Pass □ Fail				
8 COMMENTS	⊔ ган	□ Fall	Ш Ган	⊔ Ган				
8. COMMENTS								
* □ Check this box if flow restrictors interfere with overfill prevention and repairs are required.								