Appendix 5
Underground Storage Tank
Release Detection Equipment Testing Report Form

TESTING TYPE ☐ Installation ☐ Repair ☐ 12 Month

1. FACILITY INFORMATION		
CERS ID		Test Date
Facility Name		
Facility Address	City	ZIP Code

2. SERVICE TECHNICIAN INFORMATION	
Company Performing Testing	Phone
Mailing Address	
Service Technician Performing Testing	
Contractor License Number	
ICC Certification	ICC Expiration Date

3. TRAINING AND CERTIFICATIONS	
Manufacturer and Test Equipment Training Certifications	Training Expiration Date

4. CERTIFICATION BY SERVICE TECHNICIAN CONDUCTING TEST		
I hereby certify that all equipment identified in this form has been tested in accordance with California Code of Regulations, title 23, division 3, chapter 16, section 2663; that required supporting documentation is attached; and all information contained herein is accurate.		
Service Technician Signature	Date	Total # of Pages

CERS = California Environmental Reporting System, GPH = Gallons Per Hour, ID = Identification, ICC = International Code Council, LLD = Line Leak Detector, NA = Not Applicable, UDC = Under-Dispenser Containment, UST = Underground Storage Tank, VPH = Vacuum/Pressure/Hydrostatic

5. MONITORING SYSTEM AND PROGRAMMING

A separate Release Detection Equipment Testing Report Form must be prepared for each monitoring system.

Manufacturer of Monitoring System Control Panel	Model of Monitoring System Control Panel	Software Version Installed

Attach the post-testing reports if the monitoring system is capable of generating either: ☐ Monitoring System Set-up Report ☐ Alarm History Report	Yes	No	NA
Is all release detection equipment that was tested operational per manufacturer's specifications?	☐	☐	
Is the secondary containment free of damage, debris, or liquid?	☐	☐	
Are the release detection audible and visual alarms operational?	☐	☐	
Have all sensors been: 1) visually inspected for wiring kinks, breaks and residual buildup on floats; and 2) tested for functionality and confirmed operational?	☐	☐	☐
Are all sensors installed to detect a release at the earliest opportunity?	☐	☐	☐
Was the monitoring system set-up reviewed, and proper settings confirmed?	☐	☐	☐
Was the monitoring system's backup battery visually inspected, functionally tested, and confirmed operational?	☐	☐	☐
Was it confirmed that the flow of hazardous substance stops at the dispenser if a release is detected in the under-dispenser containment?	☐	☐	☐
Does the pressure supply pump automatically shut down if the piping secondary containment monitoring system fails to operate or is disconnected?	☐	☐	☐
Does the pressure supply pump automatically shut down if the piping secondary containment monitoring system detects a release? Which sensors initiate positive shut down? (Check all that apply) ☐ Containment Sump ☐ UDC	☐	☐	☐
If release detection alarms are relayed to a remote monitoring center, is all communication equipment operational?	☐	☐	☐
If there is any buried single-wall suction hazardous substance piping, was it confirmed using the inspection method approved by the Unified Program Agency, that the pipe contents drain back into the UST if the suction is released?	☐	☐	☐

*Describe all answers marked "No" or "Fail" and the proposed remedy in **Section 8**.*
*List all equipment either replaced or repaired (including cleaning or adjustment) in **Section 8**.*

6. SENSOR TEST RESULTS

☐ Check this box if Appendix 5.1 continuation page is attached.

*List only sensors tested. List "**Sensor ID**" as labeled in system programming. For VPH monitoring, continuity must be confirmed between the most distant points in the interstitial space to the extent practical as approved by the Unified Program Agency and the sensor that monitors the zone.*

Sensor ID	Sensor Model	Component(s) Monitored	Function		Continuity		
			Pass	Fail	Pass	Fail	NA
			☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐
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			☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐

*Describe all answers marked "No" or "Fail" and the proposed remedy in **Section 8**.*
*List all equipment either replaced or repaired (including cleaning or adjustment) in **Section 8**.*

7. LINE LEAK DETECTOR TEST RESULTS

☐ Check this box if line leak detectors **ARE NOT** installed. *(Do not complete this section.)*
☐ Check this box if Appendix 5.2 continuation page is attached.

Simulated release rate verified: (Check all that apply.) ☐ 3 GPH ☐ 0.1 GPH *(Required only if LLD performs line tightness testing)*	Yes	No	NA
Has the testing equipment been properly calibrated?	☐	☐	☐
For emergency tank systems, does the LLD create an audible and visual alarm when a release is detected?	☐	☐	☐
For mechanical LLDs, does the LLD restrict the flow through the pipe when a release is detected?	☐	☐	☐
For electronic LLDs, does the pressure supply pump automatically shut off when a release is detected?	☐	☐	☐
For electronic LLDs, does the pressure supply pump automatically shut off if the monitoring system or LLD is disabled or disconnected?	☐	☐	☐
For electronic LLDs, does the pressure supply pump automatically shut off if the monitoring system or LLD malfunctions or fails a tightness test?	☐	☐	☐
For electronic LLDs, have all accessible wiring connections been visually inspected for kinks and breaks?	☐	☐	☐
Were all items on the equipment manufacturer's maintenance checklist completed?	☐	☐	☐
Were all LLDs confirmed operational within regulatory requirements?	☐	☐	☐

List only line leak detectors tested.

LLD ID	LLD Model	Lines Monitored	Pass	Fail
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐

*Describe all answers marked "No" or "Fail" and the proposed remedy in **Section 8**.*
*List all equipment either replaced or repaired (including cleaning or adjustment) in **Section 8**.*

8. COMMENTS

Describe all answers marked "No" or "Fail" and proposed remedy.
List all release detection equipment either replaced or repaired (including cleaning or adjustment).

*Describe all answers marked "No" or "Fail" and the proposed remedy in **Section 8**.*
*List all equipment either replaced or repaired (including cleaning or adjustment) in **Section 8**.*

9. MONITORING SITE PLAN

Attach a copy of the facility's UST Monitoring Site Plan that shows the general layout of tanks and dispensers, locations of the monitoring panel and all other release detection equipment, VPH monitoring zones (if applicable), and the date the site plan was prepared. Include a legend for all symbols depicted.

*Describe all answers marked "No" or "Fail" and the proposed remedy in **Section 8**.*
*List all equipment either replaced or repaired (including cleaning or adjustment) in **Section 8**.*