



**AFVR Audit Form**  
**Underground Storage Tank Management Division**

**RESULTS:**

- Satisfactory
- Issues

Date: \_\_\_\_\_ Project Manager: \_\_\_\_\_ DHEC Field Staff: \_\_\_\_\_

Contractor: \_\_\_\_\_ Contractor Field Staff: \_\_\_\_\_

Site Number: \_\_\_\_\_ Site Name: \_\_\_\_\_

Time Arrived at Site: \_\_\_\_\_ Time Leaving Site: \_\_\_\_\_ Weather Conditions: \_\_\_\_\_

1. Operator on site? .....  YES  NO
2. Proper safety devices employed (e.g. traffic cones, barriers, etc.)? ...  YES  NO
3. Correct extraction well(s) being used? .....  YES  NO
4. Vacuum gauge(s) installed on extraction well(s)? .....  YES  NO
5. Vacuum gauge(s) installed on adjacent monitoring well(s)? .....  YES  NO
6. AFVR unit connected to grounded metal object? .....  YES  NO
7. Stinger(s) set at target depth(s)? .....  YES  NO
8. Other extraction and monitoring well(s) sealed? .....  YES  NO
9. Data recorded at appropriate time intervals? .....  YES  NO    Last two recorded times?  YES  NO
10. Off-gas treatment (if applicable)? .....  YES  NO
11. Complete Data Records:
  - Stinger Depth
  - Airflow Rate/Velocity
  - Vacuum Readings for Extraction Well(s)
  - Vacuum Readings for Adjacent Monitoring Well(s)
  - Water Level Measurement for Adjacent Monitoring Well(s)
  - Pre-treatment Vapor Concentration Measurements
  - Post-treatment Vapor Concentration Measurements

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Notes: \_\_\_\_\_  
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Notes (continued): \_\_\_\_\_

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### UST AFVR AUDIT FORM

- Purpose of the form is to record information gathered during an audit of AFVR events.
- DHEC UST Project Managers and Field Staff.
- Item-by-item instructions for completing the form.
  - Fill in all Site Information boxes.
  - Answer all questions and record any applicable information in the blanks.
  - Sign and date the form.
  - Record any applicable notes.
- Form is scanned and saved electronically – Record Group Number 169, Retention Schedule 13300