



## Monthly Dispenser Inspection Log

Can be used to meet the requirements of 280.43(g) and 280.41(b)

Facility Name: \_\_\_\_\_

Facility ID #: \_\_\_\_\_

Year: \_\_\_\_\_

- This form may be used to record results of visual inspections underneath each dispenser at the facility once each month and/or conduct visual interstitial monitoring for double wall piping systems with under dispenser containment (UDC).
- A separate form should be used for each registered facility. Indicate the year utilized in the space provided.
- The front of this form has space for seven dispensers. If more space is needed, use an additional form.
- If no liquid is found, mark "OK" in the appropriate box for each dispenser. If liquid is found, indicate the corrective action taken.
- To satisfy release detection requirements, you must maintain the most recent 12 months of these records.

I hereby certify that all the information contained in this report is true, accurate, and in full compliance with legal requirements. Records of this testing must be kept for at least one year.

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

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

Date Inspected	Disp. #	Disp. #	Disp. #	Disp. #	Disp. #	Disp. #	Disp. #	Corrective Actions Taken if Dispenser not OK	Initials
JAN									
FEB									
MAR									
APR									
MAY									
JUNE									
JULY									
AUG									
SEPT									
OCT									
NOV									
DEC									



## Monthly Dispenser Log for Underground Storage Tanks (USTs)

### General Information:

The primary purpose of this form is to provide consistency in the monthly dispenser visual inspection requirements as outlined by the South Carolina Underground Storage Tank Regulations 61-92.

Please type or print in ink. Also, please be sure that you have signatures in ink.

*Who must complete this form?*

Any person or their authorized representative (such as a tester or contractor) that conducts the monthly dispenser checks.

*What USTs are included?*

An UST system is defined as any one or combination of tanks that is used to contain an accumulation of regulated substances, and whose volume (including connected underground piping) is 10 percent or more beneath the ground. Regulated USTs store petroleum or hazardous substances. This includes UST systems with field-constructed tanks and airport hydrant fuel distribution systems.

*What Tanks are Excluded from these Requirements?*

- Tanks removed from the ground prior to January 1, 1986;
- Farm or residential tanks of 1,100 gallons or less used to store motor fuel for noncommercial purposes;
- Tanks storing heating oil for use on the premise being stored;
- Septic tanks;
- Certain pipeline facilities regulated under Chapters 601 and 603 of Title 49;
- Surface impoundments, pits, ponds, or lagoons;
- Storm water or wastewater collection systems;
- Flow-through process tanks;
- Liquid traps or associated gathering lines directly related to oil or gas production and gathering operations;
- Tanks on or above the floor of underground areas, such as basements or tunnels;
- Tanks with a capacity of 110 gallons or less;
- Wastewater treatment tank systems;
- UST systems containing radioactive materials that are regulated under the Atomic Energy Act of 1954;
- UST systems that are part of an emergency generator system at nuclear power generation facilities regulated by the Nuclear Regulatory Commission under 10 CFR part 50.

### *What Substances are Covered?*

These requirements apply to USTs containing petroleum or certain hazardous substances. Petroleum includes gasoline, used oil, diesel fuel, crude oil, or any fraction thereof which is liquid at standard conditions of temperature and pressure (60 degrees F and 14.7 pounds per square inch absolute). Hazardous substances are those found in Section 101 (14) of the Comprehensive Environmental Response Compensation and Liability Act (CERCLA) of 1980 with the exception of those substances regulated as hazardous waste under Subtitle C of the Resource Conservation and Recovery Act (RCRA).

### **Instructions for Completing the Monthly Dispenser Log Form:**

UST Facility Information: Enter the name of the facility, the facility identification number (permit number) for the facility, and the current year.

Tester's Signature: The person conducting the test must sign and date the test.

### Data Table:

1. Label each dispenser being checked.
2. Indicate ok in the appropriate row for each dispenser in the current month if no liquid is found.
3. Indicate not ok in the appropriate row for each dispenser in the current month if liquid is found.
4. If liquid is found, indicated corrective action taken in the appropriate box.
5. Initial at the end of the row.

### **Office Mechanics and Filing:**

After completing the form, retain a copy in your files for review by inspector during annual compliance inspections. If this is completed in response to an inspection, please forward it to the Department for our review. It will become part of your permanent file.

**Retention Schedule:** Forms will be retained within SCDES's electronic records for a period of 13 years after tanks are permanently closed.

**Contact Information:** Please contact the UST Management Division at (803) 898-0589 for further information.