Secondary Containment Testing Report Form

For Use by Unidocs Member Agencies or where approved by your Local Jurisdiction
Authority Cited: Health and Safety Code §25293; Title 23 CCR §2637(a)(4)

This form, or the standard form develped by the State Water Resources Control Board (SWRCB), must be used by contractors performing periodic testing of underground storage tank (UST) secondary containment systems in Unidocs member agency jurisdictions. The completed form, written test procedures, data collection logs, and printouts from test equipment (if applicable), must be provided to the facility owner/operator for submittal to the local regulatory agency within 30 days of the test date.

SWRCB requires that the entire volume of each sump and under-dispenser containment (UDC) system be tested if the sump/UDC is not equipped with a continuous monitoring system that shuts down the pump when a leak is detecetd or the leak detection sensor fails or is disconnected. [See SWRCB Local Guidance Letter LG-160]

Systems where leak detection equipment continuously monitors both primary and secondary containment (e.g. systems that are hydrostatically monitored or under constant vacuum) are exempt from periodic testing requirements. [23 CCR §2637(a)(6)]

In the case of pressure/vacuum testing, any loss in pressure/vacuum during the course of the test shall be considered a failed test, regardless of the manufacturer's criteria for declaring a passed test. [23 CCR §2637(a)(2)]

A. Facility Information

Facility Name:	Date of Testing:
Site Address:	
Facility Contact:	Phone:
Date Local Agency was Notified of Testing :	
Name of Local Agency Inspector *(if present during testing)*:	

B. Testing Contractor Information

Company Name:	
Credentials: ☐ CSLB-Licensed Contractor; ☐ SWRCB-Licensed Tank Tester	
License Type: ☐ A; ☐ C-10; ☐ C-34; ☐ C-36; ☐ C-61 (D40)	License Number:
Name of Technician Conducting Tests:	

Training by Equipment Manufacturer

Manufacturer	Component(s)	Date Training Expires

C. Certification by Technician Responsible for Conducting Testing

To the best of my knowledge, the facts stated in this document are accurate and in full compliance with legal requirements.

Technician's Signature: _____ **Date:** _____

D. Testing of Tank Annular Spaces/Vaults

☐ N/A (No tanks have secondary containment)

Test Method Developed By: ☐ Tank Manufacturer; ☐ Industry Standard; ☐ PE; ☐ Other *(Specify)*:				
Test Method Used: ☐ Pressure; ☐ Vacuum; ☐ Hydrostatic; ☐ Other *(Specify)*:				
Test Equipment Used:			Equipment Resolution:	
	Tank #:	**Tank #:**	**Tank #:**	**Tank #:**
Is Tank Exempt From Testing?	☐ Yes; ☐ No	☐ Yes; ☐ No	☐ Yes; ☐ No	☐ Yes; ☐ No
Tank Capacity (gallons):				
Product/Grade Stored in Tank:				
Tank Manufacturer:				
Tank Model:				
Wait time between applying pressure/vacuum/water and starting test (minutes):				
Test Start Time:				
Initial Reading (R_I):				
Test End Time:				
Final Reading (R_F):				
Change in Reading ($R_F - R_I$):				
Pass/Fail Threshold or Criteria:				
Test Result:	☐ **Pass;** ☐ **Fail**	☐ **Pass;** ☐ **Fail**	☐ **Pass;** ☐ **Fail**	☐ **Pass;** ☐ **Fail**
Was leak detection sensor properly replaced and verified as functional after testing?	☐ Yes; ☐ No; ☐ N/A (Not Removed)	☐ Yes; ☐ No; ☐ N/A (Not Removed)	☐ Yes; ☐ No; ☐ N/A (Not Removed)	☐ Yes; ☐ No; ☐ N/A (Not Removed)

E. Testing of Secondary Piping or Containment Trenches

☐ N/A (No piping 2° containment)

Test Method Developed By: ☐ Pipe/Trench Manufacturer; ☐ Industry Standard; ☐ PE; ☐ Other *(Specify)*:				
Test Method Used: ☐ Pressure; ☐ Vacuum; ☐ Hydrostatic; ☐ Other *(Specify)*:				
Test Equipment Used:			Equipment Resolution:	
	Pipe Run #:	**Pipe Run #:**	**Pipe Run #:**	**Pipe Run #:**
Pipe/Trench Manufacturer:				
Pipe/Trench Model:				
Product/Grade in Line:				
Wait time between applying pressure/vacuum/water and starting test (minutes):				
Test Start Date/Time:				
Initial Reading (R_I):				
Test End Date/Time:				
Final Reading (R_F):				
Change in Reading ($R_F - R_I$):				
Pass/Fail Threshold or Criteria:				
Test Result:	☐ **Pass;** ☐ **Fail**	☐ **Pass;** ☐ **Fail**	☐ **Pass;** ☐ **Fail**	☐ **Pass;** ☐ **Fail**

F. Testing of Piping Sumps/Turbine Sumps

☐ N/A (No piping/turbine sumps)

Test Method Developed By: ☐ Sump Manufacturer; ☐ Industry Standard; ☐ PE; ☐ Other *(Specify)*:				
Test Method Used: ☐ Pressure; ☐ Vacuum; ☐ Hydrostatic; ☐ Other *(Specify)*:				
Test Equipment Used:			Equipment Resolution:	
	Sump #:	**Sump #:**	**Sump #:**	**Sump #:**
Sump Diameter (inches):				
Sump Depth (inches):				
Sump Material:				
Height from Tank Top to Top of Highest Pipe Penetration (inches):				
Height from Tank Top to Lowest Electrical Penetration (inches):				
Portion of Sump Tested:				
If turbine shuts down when sump sensor detects liquid, specify turbine shutdown response time.	☐ N/A minutes.	☐ N/A minutes.	☐ N/A minutes.	☐ N/A minutes.
Wait time between applying pressure/vacuum/water and starting test:	minutes.	minutes.	minutes.	minutes.
Test Start Date/Time:				
Initial Reading (R_I):				
Test End Date/Time:				
Final Reading (R_F):				
Change in Reading ($R_F - R_I$):				
Pass/Fail Threshold or Criteria:				
Test Result:	☐ **Pass;** ☐ **Fail**	☐ **Pass;** ☐ **Fail**	☐ **Pass;** ☐ **Fail**	☐ **Pass;** ☐ **Fail**
Was leak detection sensor properly replaced and verified as functional after testing?	☐ Yes; ☐ No; ☐ N/A (Not Removed)	☐ Yes; ☐ No; ☐ N/A (Not Removed)	☐ Yes; ☐ No; ☐ N/A (Not Removed)	☐ Yes; ☐ No; ☐ N/A (Not Removed)

G. Testing of Under-Dispenser Containment (UDC)

☐ N/A (No dispensers or no UDC)

Test Method Developed By: ☐ UDC Manufacturer; ☐ Industry Standard; ☐ PE; ☐ Other *(Specify)*:	
Test Method Used: ☐ Pressure; ☐ Vacuum; ☐ Hydrostatic; ☐ Other *(Specify)*:	
Test Equipment Used:	Equipment Resolution:

	Dispenser #	**Dispenser #**	**Dispenser #**	**Dispenser #**
Is UDC Exempt from Testing?	☐ Yes; ☐ No	☐ Yes; ☐ No	☐ Yes; ☐ No	☐ Yes; ☐ No
UDC Manufacturer:				
UDC Model:				
UDC Depth:				
Height from UDC Bottom to Top of Highest Piping Penetration:				
Height from UDC Bottom to Lowest Electrical Penetration:				
Portion of UDC Tested[1.]				
If turbine shuts down when UDC sensor detects liquid, specify turbine shutdown response time.	☐ N/A minutes.	☐ N/A minutes.	☐ N/A minutes.	☐ N/A minutes.
Wait time between applying pressure/vacuum/water and starting test	minutes.	minutes.	minutes.	minutes.
Test Start Date/Time:				
Initial Reading (R_I):				
Test End Date/Time:				
Final Reading (R_F):				
Change in Reading ($R_F - R_I$):				
Pass/Fail Threshold or Criteria:				
Test Result:	☐ **Pass;** ☐ **Fail**	☐ **Pass;** ☐ **Fail**	☐ **Pass;** ☐ **Fail**	☐ **Pass;** ☐ **Fail**
Was leak detection sensor properly replaced and verified as functional after testing?	☐ Yes; ☐ No; ☐ N/A (Not Removed)	☐ Yes; ☐ No; ☐ N/A (Not Removed)	☐ Yes; ☐ No; ☐ N/A (Not Removed)	☐ Yes; ☐ No; ☐ N/A (Not Removed)

H. Testing of Fill Riser Containment Sumps

☐ N/A (No fill riser sumps)

☐ Fill Riser Containment Sumps are Present, but were Not Tested			
Test Method Developed By: ☐ Sump Manufacturer; ☐ Industry Standard; ☐ PE; ☐ Other *(Specify)*:			
Test Method Used: ☐ Pressure; ☐ Vacuum; ☐ Hydrostatic; ☐ Other *(Specify)*:			
Test Equipment Used:		Equipment Resolution:	
	Sump #:	**Sump #:**	**Sump #:**	**Sump #:**
Sump Diameter (inches):				
Sump Depth (inches):				
Portion of Sump Tested				
Sump Material:				
Wait time between applying pressure/vacuum/water and starting test (minutes):				
Test Start Date/Time:				
Initial Reading (R_I):				
Test End Date/Time:				
Final Reading (R_F):				
Change in Reading ($R_F - R_I$):				

[2.] If the entire depth of the UDC is not tested, specify how much was tested. If the answer to <u>any</u> of the questions indicated with an asterisk (*) is "NO" or "N/A", the entire UDC must be tested. [See SWRCB Local Guidance Letter LG-160]

Pass/Fail Threshold or Criteria:				
Test Result:	☐ **Pass;** ☐ **Fail**	☐ **Pass;** ☐ **Fail**	☐ **Pass;** ☐ **Fail**	☐ **Pass;** ☐ **Fail**
Was leak detection sensor properly replaced and verified as functional after testing?	☐ Yes; ☐ No; ☐ N/A (Not Removed)	☐ Yes; ☐ No; ☐ N/A (Not Removed)	☐ Yes; ☐ No; ☐ N/A (Not Removed)	☐ Yes; ☐ No; ☐ N/A (Not Removed)

I. Testing of Spill Buckets

☐ N/A (No spill buckets installed)

☐ Spill bucket(s) not tested Test Method Developed By: ☐ Bucket Manufacturer; ☐ Industry Standard; ☐ PE; ☐ Other *(Specify)*:				
Test Method Used: ☐ Pressure; ☐ Vacuum; ☐ Hydrostatic; ☐ Other *(Specify)*:				
Test Equipment Used:			Equipment Resolution:	
	Bucket #:	**Bucket #:**	**Bucket #:**	**Bucket #:**
Bucket Diameter:				
Bucket Depth:				
Wait time between applying pressure/vacuum/water and starting test:				
Test Start Time:				
Initial Reading (R_I):				
Test End Time:				
Final Reading (R_F):				
Change in Reading ($R_F - R_I$):				
Pass/Fail Threshold or Criteria:				
Test Result:	☐ **Pass;** ☐ **Fail**	☐ **Pass;** ☐ **Fail**	☐ **Pass;** ☐ **Fail**	☐ **Pass;** ☐ **Fail**

J. Additional Information

Were any repairs made to secondary containment systems prior to testing? ☐ Yes (describe in "Comments"); ☐ No

Were any secondary containment systems unable to be tested? ☐ Yes (describe in "Comments"); ☐ No

Is any follow-up action recommended? ☐ Yes (describe in "Comments"); ☐ No

Was any cleaning of secondary containment systems done? ☐ Yes (describe management of wastewater in "Comments"); ☐ No

If hydrostatic testing was performed, describe in "Comments" what was done with the water after completion of testing.

Comments: _____