



EPS 32-T1

**Appendix EPS32-T1
SPCC Inspection Checklist**

1. Description of Oil Container (tank, drum, piece of equipment, etc.), building, or area covered (note the building and location):

2. Inspection Frequency: **Date** _____ **Monthly** ___ **or** **Annually** ___

3. Equipment description and oil capacity: _____

YES NO

- 4. Is the container leaking? YES NO
- 5. Are any pipes, valves, or pumps leaking? YES NO
- 6. Are any hydraulic hoses leaking? YES NO
- 7. Are there any oil stains on the exterior tank walls? YES NO
- 8. Are there any oil or petroleum products on the ground around the tank or machinery or in the secondary containment area? YES NO
- 9. Are there any indications of corrosion at fitting joints or seals? YES NO
- 10. Are there any raised spots or dents on the tank surface? YES NO
- 11. Does it appear that the foundation has shifted or settled? YES NO
- 12. Are there cracks in the equipment supports? YES NO
- 13. Are any of the oil-related labels or signs illegible or missing? YES NO
- 14. Is oil-containing equipment or container susceptible to physical damage (i.e., motor vehicles, falling objects, etc.) YES NO
- 15. If rainwater is present in the secondary containment area, does sufficient volume remain for spill control? YES NO



General Comments/Observations, Procedure Deficiencies: _____

If a "yes" answer was recorded for any of the Items 4 through 14, or a "no" answer was recorded for Item 15, corrective action is required. Describe action taken and the date below.

Signature

Date

Send a copy of the completed checklist to the SPCC Coordinator, MS 6B