

**EPA Region 8 Drinking Water Unit
Finished Water Storage Tank Inspection: Cleaning**

Fill out one checklist per storage tank & submit labeled photos of each tank component with this form

| | | | |
|---|-----------------------------------|-------|--|
| PWS Name: | PWS ID: | | |
| Tank Name: | Tank ID: | | |
| Proposed Inspection Date: | Actual Inspection Date: | | |
| Name of Person Filling Out Form: | Title of Person Filling Out Form: | | |
| I certify that this information is complete and accurate: | | Date: | |

Inspector Qualifications (answer to all questions must be "yes" if entering a confined space)

| | |
|--|---|
| Name and contact information of inspector (if water system personnel) or inspection company: | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Has the inspector completed confined space training? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Did the inspector have a confined space entry permit? |

Overall Tank Condition

| | Significant Deficiency | Required Correction | Proposed Completion Date | Actual Completion Date |
|--|--|--|---------------------------------|-------------------------------|
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Does the tank appear to be structurally sound? | If no, what repairs are suggested by the tank inspector? | | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | Are there any unprotected openings in the tank (breaches, leaks, daylight coming through tank in spots, etc) | If yes, indicate type of breach and how it should be repaired. | | |

| Cleaning and Other Items | | | |
|--|--|--------------------------|------------------------|
| Significant Deficiency | Required Correction | Proposed Completion Date | Actual Completion Date |
| Describe any other items noted by the inspector that have the potential to cause contamination of the finished drinking water: | What repairs are suggested to prevent or eliminate the source of contamination? | | |
| <p>Depth of sediment found in the tank before cleaning (inches):</p> <p>How was the storage tank cleaned?</p> <p>How was the storage tank disinfected after cleaning?</p> <p>List any objects found inside the tank during cleaning that may have introduced contamination into the water system (examples: debris, animals, etc):</p> | | | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA | If animal carcasses or other animal debris were found, was EPA notified immediately? | | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA | Was the entry point for the carcass or debris eliminated? Describe: | | |
| Please attach tank as-built drawings (if available) or a sketch of the tank's configuration and dimensions including the location, layout and dimensions of all major components (i.e. access hatch, vent, overflow, drain) | | | |