## EPA Region 8 Drinking Water Unit Finished Water Storage Tank Inspection: Drain

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:				
Yes No	Has the inspector completed confined space training?			
	Did the inspector have a confined space entry permit?			

Overall Tank Condition						
	Significant Deficiency	Required Correction	Proposed Completion Date	Actual Completion Date		
Yes No	Does the tank appear to be structurally sound?	If no, what repairs are suggested by the tank inspector?				
Yes 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.				

Drain						
	Significant Deficiency	Required Correction	Proposed Completion Date	Actual Completion Date		
Yes No	Does the drain pipe have an air gap of 3 or more pipe diameters above the entrance to any storm or sanitary sewers?	If no, indicate proposed correction:				
Yes No	Yes No Does the discharge have a #24 mesh corrosion resistant screen OR a duckbill valve OR a properly sealed flapper valve with a screen inside? If no, EPA recommends that a #24 mesh screen be installed.		Not Required			
Yes No Does the drain terminate between 12 and 24 inches above the ground surface and discharges over an inlet structure or splash plate? If no, it is recommended that the discharge point be modified to provide for the appropriate air gap.		Not Required				