UST-6D/23A

Triennial UST Spill Bucket Integrity Testing



Page 1

(Hydrostatic/Vacuum Test)

- If any periodic test fails, a suspected release report must be submitted on a UST-17A form, UST Suspected Release 24 Hour Notice. The suspected release must be investigated, in accordance with 15A NCAC 2N .0603, and defective equipment repaired or replaced in accordance with 15A NCAC 2N .0404/.0900. Results of the investigation must be submitted on a UST-17B form, UST Suspected Release 7 Day Notice.
- The primary containment and interstitial space of the spill bucket shall be tested in accordance with the manufacturer's written guidelines, PEI/RP100
 "Recommended Practices for Installation of Underground Liquid Storage Systems" and/or PEI/RP1200 "Recommended Practices for the Testing and Verification of Spill, Overfill, Leak Detection and Secondary Containment Equipment at UST Facilities."
- The primary and secondary walls are both considered to be tested at the same time if vacuum is used to test the interstice.

UST FACILITY											
Owner / Operator Name			ıme	Facility ID							
Facility Street Address			ty		County						
TESTING CONTRACTOR INFORM	MATION										
Company Name			Phone		ldress						
I certify, under penalty of law, that the testing data provided o manufacturer's guidelines and the applicable national industry stan								accordance	with the		
Print Name of person conducting inspection			e of person o	conducting ins	pection		Test Date				
Identify Spill Bucket (By Tank Number, Stored Product, etc.)	Tank#	Tank #		Tank #		Tank #		Tank #			
Tank Size											
Product											
Indicate units for all measurements											
Bucket Manufacturer/Model											
Bucket Depth											
Construction	☐ SW ☐ DW	□ SW	☐ DW	□ SW [DW	SW	☐ DW	SW	☐ DW		
Bucket Installation Type	Direct Bury Direct Bury w/Liner Containment sump	_	Bury w/Liner	Direct Bu	ry w/Liner	Direct Bu Direct Bu Containn sump	ury w/Liner	Direct Bury Direct Bury w/Liner Containment sump			
Test Type	☐ Hydrostatic☐ Vacuum	☐ Hyd	rostatic uum	☐ Hydros		☐ Hydros		☐ Hydrostatic ☐ Vacuum			
Liquid and debris removed from spill bucket?	☐ Yes ☐ No	☐ Yes	☐ No	☐ Yes	□ No	☐ Yes	☐ No	☐ Yes	☐ No		
Visual inspection (No cracks, loose parts or separation of the bucket from the fill pipe.)	Pass Fail	Pass	☐ Fail		☐ Fail	Pass	☐ Fail	Pass	☐ Fail		
Tank riser cap included in test?	☐ Yes ☐ No ☐ N/A	Yes N/A	□ No	☐ Yes	☐ No	☐ Yes ☐ N/A	□ No	☐ Yes	□ No		
Drain valve included in test?	☐ Yes ☐ No ☐ N/A	☐ Yes	☐ No	☐ Yes ☐ N/A	☐ No	☐ Yes ☐ N/A	☐ No	☐ Yes ☐ N/A	☐ No		
Wait time between applying vacuum/water and start of test											
Primary Section Test Hydrostatic:	Water level must be wi	ithin 1.5 in	ches of top	of bucket	Vac	uum: Apply	vacuum o	f 30 inches	WC		
Begin End Test Time											
Begin End Reading											
	cuum: Apply vacuum o	f 15 inches	s WC								
Begin End Test Time											
Begin End Reading		<u> </u>							<u> </u>		
Pass/fail criteria: Must pass visual inspection. Hydrostatic: Water level drop of less than 1/8 inch in 1 hour; Vacuum single-walled only: Maintain at least 26 inches water column for 1 minute; Vacuum double-walled: Maintain at least 12 inches water column for 1 minute											
Test Results	Pass Fail	☐ Pass	☐ Fail		☐ Fail	☐ Pass	☐ Fail	☐ Pass	☐ Fail		
Comments - (include information on repairs made prior to testing, and recommended follow-up for failed tests)											
Date next Spill Bucket integrity test due (required every 3 years)											

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Triennial UST Spill Bucket Integrity Testing



Page 2

(Dri-sump® Test)

- If any periodic test fails, a suspected release report must be submitted on a UST-17A form, UST Suspected Release 24 Hour Notice. The suspected release must be investigated, in accordance with 15A NCAC 2N .0603, and defective equipment repaired or replaced in accordance with 15A NCAC 2N .0404/.0900. Results of the investigation must be submitted on a UST-17B form, UST Suspected Release 7 Day Notice.
- Single wall spill buckets not located within a containment sump can use the Dri-sump® testing method. If a spill bucket is located within a containment sump then a hydrostatic or vacuum test would need to be performed on the spill bucket. If the spill bucket is required to be double-walled, then the Drisump® testing method can be used to test the containment sump. Complete page 3 of the UST-23B form to document those results.

UST FACILITY												
Owner / Operator Name	Facility Na	me		Facility I	Facility ID							
Facility Street Address	Facility Cit	у		County	County							
TESTING CONTRACTOR INFORM	MATION	1					ı					
Company Name		Phone		Email ad	ldress							
I certify, under penalty of law, that the tmanufacturer's guidelines and the applic approved by NC DEQ.												
Print Name of person conducting inspect	Signatur	e of person o	conducting ins	Test Date								
Tester Certification #:		Equipment	: Certification	n #:								
Tester Certification Expiration:		Equipment	Certification	Expiration:								
Identify Spill Bucket (By Tank Number, Stored Product, etc.)	Tank #	Tank #		Tank #		Tank #		Tank #				
Tank Size												
Product												
Bucket Manufacturer/Model												
Construction	☐ SW ☐ DW	☐ SW	☐ DW	☐ SW [DW	SW	☐ DW	☐ SW	☐ DW			
Bucket Installation Type	☐ Direct Bury ☐ Direct Bury w/Liner	Direct Direct	Bury Bury w/Liner	Direct Bu	•	Direct E	3ury 3ury w/Liner	Direct E	Bury Bury w/Liner			
Liquid and debris removed from spill bucket?	☐ Yes ☐ No	☐ Yes	☐ No	☐ Yes	□ No	☐ Yes	☐ No	☐ Yes	☐ No			
Visual inspection (No cracks, loose parts or separation of the bucket from the fill pipe.)	☐ Pass ☐ Fail	☐ Pass	☐ Fail	☐ Pass	☐ Fail	☐ Pass	☐ Fail	☐ Pass	☐ Fail			
VST Communication (Enter VST number)	VST #:	VST #:		VST #:		VST #:		VST #:				
Closed Hose (C) (in WC)												
Open Hose (O) (in WC)												
VST Connected (V) (in WC)												
VST Communication Passes when: C > O a	and C > V and V ≥ O	<u> </u>		,		,						
Test length in seconds (DW Primary wall or SW)												
Laser Verification (DW Primary wall or SW)	☐ DOT (Pass) ☐ Line (Fail)		(Pass) (Fail)	DOT (F	,	DOT Line ((Pass) Fail)	DOT Line ((Pass) (Fail)			
Test length in seconds (Secondary wall, if DW)												
Laser Verification (Secondary wall, if DW)	☐ DOT (Pass) ☐ Line (Fail)		(Pass) (Fail)	DOT (P	•	DOT Line ((Pass) Fail)	DOT Line ((Pass) (Fail)			
Pass/Fail criteria: Must pass visual inspection. Laser result must be a laser-dot (pass). If the first test fails, then conduct a second test entering results in another column. Test is not valid if liquid or debris was not removed from spill bucket. VST location map must be attached to this report.												
Final Test Result	☐ Pass ☐ Fail	☐ Pass	☐ Fail	☐ Pass	☐ Fail	☐ Pass	☐ Fail	☐ Pass	☐ Fail			
Comments - (include information on repairs	made prior to testing, a	nd recommo	ended follow	-up for failed to	ests)							
Date next Spill Bucket integrity to	est due (required e	very 3 ve	ars)									

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Triennial UST Spill Bucket Integrity Testing



Page 3

(DPleak® Test)

- If any periodic test fails, a suspected release report must be submitted on a UST-17A form, UST Suspected Release 24 Hour Notice. The suspected release must be investigated, in accordance with 15A NCAC 2N .0603, and defective equipment repaired or replaced in accordance with 15A NCAC 2N .0404/.0900. Results of the investigation must be submitted on a UST-17B form, UST Suspected Release 7 Day Notice.
- Single wall spill buckets not located within a containment sump can use the DPleak® testing method. If a spill bucket is located within a containment sump and is required to be double-walled, then the DPleak® testing method can be used to also test the containment sump. Complete page 4 of the UST-23B form to document those results.

UST FACILITY																				
Owner / Operator Name			Facility Name								Fa	Facility ID								
Facility Street Address			Fa	Facility City								Co	County							
TESTING CONTRACTOR INFORM	ΛA	TION																		
Company Name				Phone					E	mail ad	dres	ss								
						orm documents the UST system equipment was tested in accordance with the manufacturer's A NCAC 2N .0406 and/or 15A NCAC 2N .0900, or another method approved by NC DEQ.														
Print Name of person conducting inspection			Signature of person conducting inspection								Test Date									
Tester Certification #:																				
Identify Spill Bucket (By Tank Number, Stored Product, etc.)	Tank #			Tank #			Та	Tank#				Tank#				Tank #				
Tank Size																				
Product																				
Bucket Manufacturer/Model																				
Construction	Г] SW		DW		SW] DW] SW		DW		SW		DW		SW		DW
Bucket Installation Type		Direct Direct	•	w/Liner		Direct Direct	-	w/Liner		Direct B	•	w/Liner		Direct B	•	v/Liner		Direct Direct	•	//Liner
Liquid and debris removed from spill bucket?] Yes		No] Yes] No] Yes		No		Yes		No		Yes		No
Visual inspection (No cracks, loose parts or separation of the bucket from the fill pipe.)] Pass		Fail] Pass		<u> </u>] Pass		Fail		Pass				Pass		Fail
Wall		Pass N/A		Fail		Pass N/A				Pass N/A				Pass N/A		Fail		Pass N/A		Fail
Drain		Pass N/A		Fail		Pass N/A		•		Pass N/A				Pass N/A		Fail		Pass N/A		Fail
Bottom of Riser		Pass N/A		Fail		Pass N/A		Fail		Pass N/A				Pass N/A		Fail		Pass N/A	<u> </u>	Fail
Top of Riser		Pass N/A		Fail		Pass N/A] Fail		Pass N/A				Pass N/A		Fail		Pass N/A		Fail
Swivel		Pass N/A		Fail		Pass N/A] Fail		Pass N/A		Fail		Pass N/A		Fail		Pass N/A		Fail
Сар		Pass N/A		Fail		Pass N/A] Fail		Pass N/A		Fail		Pass N/A		Fail		Pass N/A		Fail
		Pass N/A		Fail		Pass N/A		Fail		Pass N/A		Fail		Pass N/A		Fail		Pass N/A		Fail
Pass/Fail criteria: Must pass visual inspection	on.		ot val	lid if liqu	uid o		was	not re	mov		pill	bucket.	No		spill	bucke	t tha			
LDT test report with addendums attached			□ N								<u> </u>				•					
Final Test Result		Pass		Fail		Pass		Fail		Pass		Fail		Pass		Fail		Pass		Fail
Comments - (include information on repairs									r-up	for failed	tes	ts)								
Date next Spill Bucket integrity t	esi	t due (r	eau	ired e	ver	v 3 ve	ars)													