

| CONTAINMENT SUMP TESTING LOW LIQUID LEVEL TEST METHOD | | | | | | | | | | |
|--|------|------|------|------|------------------------|------|------|---------------|------|------|
| Facility Name: | | | | | Owner: | | | | | |
| Address: | | | | | Address: | | | | | |
| City, State, Zip Code: | | | | | City, State, Zip Code: | | | | | |
| Montana Facility I.D. #: | | | | | Owner Phone #: | | | | | |
| Testing Company: | | | | | Tester Phone #: | | | Testing Date: | | |
| This procedure is to test containment sumps using the low liquid level method. See PEI/RP1200 Section 6.6 for the test method and pass criteria. | | | | | | | | | | |
| Low Level Sump Test Approved by DEQ or Certification Form | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No |
| Containment Sump ID (Be specific with Tag ID) | | | | | | | | | | |
| Containment Sump Material | | | | | | | | | | |
| Visual Inspection (No water ingress, cracks, loose parts or separation of the containment sump.) | Pass | Fail | Pass | Fail | Pass | Fail | Pass | Fail | Pass | Fail |
| Liquid and debris were removed from sump?* | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No |
| When tested, electronic sensor connected to ATG or stand-alone sensor shuts down appropriate STP, dispenser or product as required? | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No |
| Containment Sump Total Depth (inches) | | | | | | | | | | |
| Height at which Sensor Goes Into Alarm (inches) | | | | | | | | | | |
| Starting Water Level (Minimum 4 inches above alarm activation level) | | | | | | | | | | |
| Test Start Time | | | | | | | | | | |
| Ending Water Level (inches) | | | | | | | | | | |
| Test End Time | | | | | | | | | | |
| Test Period (Minimum test period: 1 hour) | | | | | | | | | | |
| Water Level Change (inches) | | | | | | | | | | |
| Pass/fail criteria: Must pass visual inspection. Water level drop of less than 1/8 inch. | | | | | | | | | | |
| Test Results | Pass | Fail | Pass | Fail | Pass | Fail | Pass | Fail | Pass | Fail |
| Comments: | | | | | | | | | | |

*All liquids and debris must be disposed of properly.

Tester's Name (print) _____ Tester's Signature _____