

**TANK SECONDARY CONTAINMENT INTEGRITY
TESTING DRY TEST METHOD**

Facility Name:	Owner Name:	
Address:	Address:	
City, State, Zip Code:	City, State, Zip Code:	
Montana Facility I.D. #:	Owner Phone #:	
Testing Company:	Test Co Phone #:	Date:

This data sheet is for testing the integrity of the dry secondary containment of a underground storage tank (UST). See PEI/RP1200 Section 4.2 for the test procedure.

Tank Tag ID Number						
Tank Material						
Product Stored						
Tank Capacity,* gallons						
Test Start Time						
Initial Vacuum Reading, inches Hg (See Table 4-1 below.)						
Specified Test Duration (See Table 4-1 below.)	1 hour 2 hours	1 hour 2 hours	1 hour 2 hours	1 hour 2 hours	1 hour 2 hours	1 hour 2 hours
Test End Time						
Final Vacuum Reading, inches Hg						
Is the Annular Space Dry After the Test?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Test Results	Pass Fail	Pass Fail	Pass Fail	Pass Fail	Pass Fail	Pass Fail

TABLE 4-1

Vacuum, inches Hg	Capacity, gallons	Duration, hours
10	<20,000	1
	20,000+	2

Comments:

*Total tank capacity, including all compartments in a multi-compartment tank.

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