TR-WM-120 (3/22) Formerly ERS-9658



Wisconsin Department of Agriculture, Trade and Consumer Protection *Bureau of Weights and Measures*P.O. Box 7837, Madison, WI 53707-7837

	FOR OFFICE USE ONLY	
Reg Ob	#:	

CHECKLIST FOR ABOVEGROUND TANK INSTALLATION

Personal information you provide may be used for purposes other than that for which it was originally collected (s. 15.04(1)(m) Wis. Stats.). Complete one form for each tank and related piping.

This checklist covers the installation of:	∃Tank □ Pi	ping							
IDENTIFICATION: (Please Print)									
FACILITY NAME		FACILITY ID #			COUNTY	COUNTY			
INSTALLATION STREET ADDRESS (Not PO Box)			CITY TOWN VILLAGE			STA	TE ZIP		
	1								
OWNER LEGAL NAME	COUNTY		TELEPHONE:	E-MA	IL				
() - OWNER STREET ADDRESS □ CITY □ TOWN □ VILLAGE						STA	TE ZIP		
omen on tell 7 bb 1200									
PLAN APPROVAL							Installer Verified	Inspector Verified	NA
Plans have been approved. State plan no	umber/LPO pla	an number is:							
Tank Capacity: gallons.	•								
3. ☐ POS dispensing (include form TR-WM	M-130)] Vehicle ☐ Marine	e craft	īt					
TANK CONSTRUCTION									
Tank exhibits recognized Listing, API or a	ASME marking	g label [ATCP 93.400].							
2. Tank has been designed or certified for u	use by a Qualif	fied Engineer							
3. Tank has vents installed and configured	for: Cla	ass I, 🔲 Class II, 🗀	Class III product						
4. Emergency relief vent is provided where required Type:									
All normal and emergency vents terminate outside where required									
6. Overfill protection provided? [ATCP 93.410] Make/Model:									
Type: 90 Alarm/95 Alarm	☐ Alarm ☐	Fill Shut Off S	Site Gauge 🔲 Vei	nt Whistle					
7. Tank gauge is provided.									
8. Tank mounted pump Remote	pump / dispens	ser independent of tan	k 🗌						
TANK HANDLING AND PRE-TESTING									
1. Tank is used and has been tested for leaks. Pressure Vacuum Hydrostatic Length of test: min.									
Tank was tested after set in place for leakage per the manufacturer's recommendations.									
TANK SITE									
1. Tank located per approved plans (walls, buildings, power lines, streets, well, etc.).									
2. Tank is spaced a minimum of 3 feet from any other tank. (NFPA 30 Table 22.4.2.1)									
3. Tank in diked containment is spaced a minimum of 2 feet from the toe of the dike wall.									
4. Tank (s) meet ATCP 93.615 setbacks									
5. Tank markings per ATCP 93.400(7)									
PROJECT SITE									
Collision protection provided.									
Storage tank enclosure compliant									
Warning signs posted for dispensing area.									
4. 80 B:C rated fire extinguisher provided if motor vehicle fueling & within 100 ft travel distance.									
5. NFPA 704 emergency response hazard rating signage provided on tank									
PIPING									
· · ·			Other (type):				☐ Inspec	tor Verified	
		nly) 🗌 double wall							
Piping system is: Aboveground only		•			erground				
Piping system Type: Pressurized pip	_	•		_					
		echanical anti-siphon	☐ Solenoid v		AST Gravity/Head pressure				
Piping Catastrophic leak detection meth			A). ☐ Pump aut	o shutoff - E	ELLD B). Flow restrictor	r – MLLD			
Dining look detection with a deal of the		cturer/Model:	to motition were site.		many an look accessor at 11				
Piping leak detection method:	ooveground vis	_		sump se – پ	nsor or leak sensing cable				
		Manufacturer/S	ensui woden						

Aboveground Pipe	Installer Verified	Inspector Verified	NA
Coated to inhibit corrosion.			
Supported and protected against physical damage and stress.			
3. Piping was isolated from the tank and dispenser and air tested at 150% of operating pressures of the system (but not less than 50 p.s.i.) for 1 hour.			
Underground Pipe			
1. Piping is sloped to a sump (min. 1/8 inch per foot).			
Piping was isolated from the tank and dispenser and air tested at 150% of operating pressure of the system (but not less than 50 psig) for 1 hour prior to backfilling.			
After backfilling, piping was isolated from the tank and dispenser and precision tested at 110% of operating pressure but not less than 50 psi for 1 hour.			
4. Test stations have been installed for monitoring cathodic protection on piping.			
5. Approved flexible connectors are installed below dispenser and at aboveground/belowground transition			
SECONDARY CONTAINMENT			
Tank secondary containment: ☐ Double Wall ☐ Diked ☐ Remote impounding			
2. Dike material: Concrete Steel Engineered clay Engineered clay with liner Earthen with Liner Other:			
3. Dike capacity: Weather protected meets 100% ☐ Yes ☐ No Unprotected meets 125% ☐ Yes ☐ No			
4. Double wall or diked tank has interstitial monitor (visual or electronic) ☐ Yes ☐ No			
5. Motor fuel dispenser has liquid tight sump with a sensor ☐ Yes ☐ No			
6. Pipe run is a combination of aboveground and underground pipe ☐ Yes ☐ No Transition sump installed ☐ Yes ☐ No			
LIQUID HANDLING, TRANSFER AND USE			
Check valve installed in piping at connection/disconnection for tank vehicle			
Tank is provided with minimum 5 gal. spill protection			
Dispensing device is listed			
Anti-siphon protection with pressure relief.			
Shear valve installed in pressure system			
6. Pressure Regulator valve with shear section installed in suction system			
7. Aircraft fueling system provides bonding mechanism between aircraft and fueling equipment			
8. Electric equipment and wiring is installed in accordance with SPS 316 (NFPA 70).			
9. Emergency shutoff installed for bulk transfers and motor vehicle fueling is clearly identified and accessible per ATCP 93.370 or NFPA 30A 6.7.			
10. Emergency electrical shutoff installed for bulk transfers (ATCP 93.370), identified and accessible			
11. Where required, listed emergency breakaway, hose and dispensing devices are provided. 12. Dispensing nozzle at marine service stations shall be auto-closing without hold open device.			
13. Hose length: ft.			
A. INSTALLER CERTIFICATION			
INSTALLATION COMPANY NAME (Please print) INSTALLER CERTIFICATION NUMBER TELEPHONE EMAIL			
INSTALLATION COMPANY MAILING ADDRESS <i>STREET</i> CITY STATE	ZIP		
INSTALLATION COMPANY MAILING ADDRESS STREET	z ZIP		
I certify that the tank system and related components have been installed according to the manufacturer's instructions, conditionally approved plans, and	complies v	with ATCP 9	3.
INSTALLER SIGNATURE: DATE SIGNED			
B. INSPECTOR INFORMATION			
INSPECTION DATES: 1. 2. 3. 4. 5.	6.		
INSPECTION COMPANY NAME: FIRE DEPT PROVIDING COVERAGE:	FDID #:		
INSPECTOR SIGNATURE: INSPECTOR CERT #: DAT	E SIGNED):	
COMMENTS			

TANK REGISTRATION FORM TR-WM-118 SIGNED BY THE OWNER MUST BE SUBMITTED WITH EACH INSTALLATION CHECKLIST.

This document can be made available in alternate formats to individuals with disabilities upon request.

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