

ATG Testing Report Form

The applicable portions of this form must be completed and provided to the facility owner/operator within 30 days of the test date, along with written test procedures, data collection logs, and printouts from test equipment (if applicable). Facility must keep this page along with page 2 as applicable on record for submittal to the WVDEP upon request. Each page must identify the facility and contain the WVDEP certified worker's signature. WVDEP certified worker must be present on site during testing.

When pressure/vacuum testing, any loss in pressure/vacuum during the test shall be considered a failed test, regardless of the manufacturer's criteria for declaring a passed test.

A. Facility Information		WVDEP FACILITY ID#:		
Facility Name:	Site Address:			
Facility Contact:	Phone:	Date of Testing:		

B. Testing Contractor Information

To the best of my knowledge, the facts stated in this document are accurate and in full compliance with legal requirements.				
Company:	Print Name of Tester:	WVDEP Certification #:	Tester's Signature:	Date:
Address:	City:	Phone number:	Email address:	

E. Automatic Tank Gauge Functionality Test (Required annually if present)

AUTOMATIC TANK GAUGE <input type="checkbox"/> Pass <input type="checkbox"/> Fail							
ATG Manufacturer:				ATG Model:			
Detected leak will trigger an alarm? <input type="checkbox"/> Yes <input type="checkbox"/> No				Battery Backup Functional? <input type="checkbox"/> Yes <input type="checkbox"/> No			
ATG software properly programmed? <input type="checkbox"/> Yes <input type="checkbox"/> No				Is the ATG equipped with CITLDS? <input type="checkbox"/> Yes <input type="checkbox"/> No			
TEST PROCEDURE – Briefly describe procedure(s) used to test the probes (i.e. PEI/RP1200, manufacturer's testing procedure, etc.)							
Probe and Testing information							
Tank #	ID:	ID:	ID:	ID:	ID:	ID:	ID:
Product Stored							
Manufacturer							
Model							
Measured Product Level (in.)							
ATG Product Level (in.)							

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Facility Name: _____

Facility ID #: _____

Measured Water Level (in.)									
ATG Water Level (in.)									
Measured product and water levels match ATG values?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the probe in a good state of repair?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the ATG console clear of alarms?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Float(s) move freely	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
V. TEST RESULT	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail

Any "No" answer in a required row indicates the probe fails. Failed probes and ATGs must be reported to WVDEP and repaired or replaced immediately.

COMMENTS:

Tester
Signature: _____

Date: _____

Print
Name: _____

Phone:
Contact: _____