



**UNDERGROUND STORAGE TANK MANAGEMENT DIVISION  
LIQUID SENSOR FUNCTIONALITY TESTING**

This form can be used to comply with UST Control Regulations R61.92, Section 280.34

UST Facility		Person Conducting Test	
Facility ID#	Facility Name	Tester's Name	Phone Number
Physical Address		Testing Company	
City	State	Tester Certified by	
Owner Phone Number		Tester Certification #:	Expiration Date

**System Information and Testing Requirements**

Purpose of Test	<input type="checkbox"/> Annual	<input type="checkbox"/> Discriminating				
	<input type="checkbox"/> New Installation	<input type="checkbox"/> Non-discriminating				
	<input type="checkbox"/> Troubleshooting					
	<input type="checkbox"/> Leak Investigation					
	<input type="checkbox"/> Other: _____					
Sensor Location						
Type of Sensor	<input type="checkbox"/> Discriminating <input type="checkbox"/> Non-discriminating					

**Liquid Sensor Test Data Table**

Sensor Location							
Is the ATG console clear of any active or recurring warnings or alarms regarding the sensor? If the sensor is in alarm and	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Is the sensor alarm circuit operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Has sensor been inspected and in good operating condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
When placed in the test liquid, does the sensor trigger an alarm?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
When an alarm is triggered, is the sensor properly identified on the ATG console?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Does sensor shut down STP power?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

**Test Results**

*Note: Any response of "no" to the above questions indicates the sensor failed the test.*

Test Results	<input type="checkbox"/> Pass <input type="checkbox"/> Fail						
If test failed was new sensor installed and tested:	<input type="checkbox"/> Yes <input type="checkbox"/> No						

Comments:

I hereby certify that all the information contained in this report is true, accurate, and in full compliance with legal requirements. Per SC Underground Storage Tank Regulations 61.92, 280.45 (b)(i), records of this testing must be kept for a period of three years.

Tester's Signature: \_\_\_\_\_ Date: \_\_\_\_\_