North Carolina Department of Environment and Natural Resources
Underground Storage Tank Section

UST-6B

"Application to Install or Replace UST Systems (Post-Installation)"

NCDENR

Installation Review Process Overview

UST-6B "Application to Install or Replace Underground Storage Tank Systems (Post-Installation)"

Installation Review Process Overview

UST-6B "Application to Install or Replace Underground Storage Tank Systems (Post-Installation)"

Post Installation

The UST-6B submittal requires:

- UST-6B form, *Application to Install or Replace UST Systems (Post-Installation)*
- UST-6C form, *Schedule of Materials*
- As-built scale drawings
- Completed manufacturer installation checklists for the tanks, piping, and any other applicable equipment
- Copies of manufacturer's installer certifications for each employee who installed equipment

Post Installation (cont)

The UST-6B application requires:

- Documentation of installation testing of each UST system component (e.g., UST-6D – UST-6G forms, line tightness tests, ALLD tests)
- Leak detection console printout showing sensor setup
- Leak detection console printout documenting sensor status / sensor functionality test

Note: Incomplete submittals will delay permitting process.

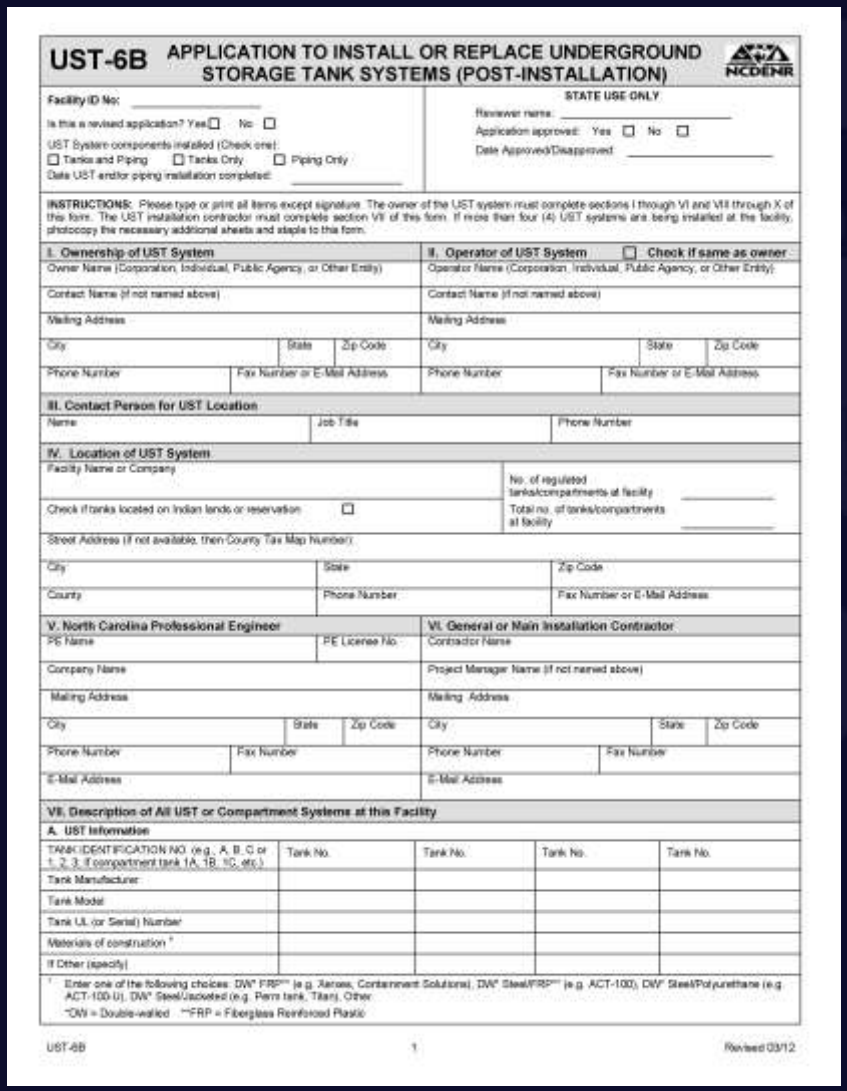
Post Installation (cont)

The UST-6B application requires:

- UST-15A form, Ownership of UST System(s)
- Appropriate annual operating fees
- Proof of Financial Responsibility
- Certification of Financial Responsibility form

Submitting these items earlier in the process, prior to the UST-6B submittal, will help shorten the final review

UST-6B Form



UST-6B APPLICATION TO INSTALL OR REPLACE UNDERGROUND STORAGE TANK SYSTEMS (POST-INSTALLATION)

NCDENR

Facility ID No: _____

Is this a revised application? Yes ☐ No ☐

UST System components installed (Check one):
☐ Tanks and Piping ☐ Tanks Only ☐ Piping Only

Date UST and/or piping installation completed: _____

STATE USE ONLY

Reviewer name: _____

Application approved: Yes ☐ No ☐

Date Approved/Disapproved: _____

INSTRUCTIONS: Please type or print all items except signature. The owner of the UST system must complete sections I through VI and VIII through X of this form. The UST installation contractor must complete section VII of this form. If more than four (4) UST systems are being installed at the facility, photocopy the necessary additional sheets and staple to this form.

I. Ownership of UST System			II. Operator of UST System ☐ Check if same as owner		
Owner Name (Corporation, Individual, Public Agency, or Other Entity)			Operator Name (Corporation, Individual, Public Agency, or Other Entity)		
Contact Name (if not named above)			Contact Name (if not named above)		
Mailing Address			Mailing Address		
City	State	Zip Code	City	State	Zip Code
Phone Number	Fax Number or E-Mail Address		Phone Number	Fax Number or E-Mail Address	

III. Contact Person for UST Location		
Name	Job Title	Phone Number

IV. Location of UST System		
Facility Name or Company		No. of regulated tanks/compartments at facility: _____
Check if tanks located on Indian lands or reservation ☐		Total no. of tanks/compartments at facility: _____
Street Address (If not available, then County Tax Map Number)		
City	State	Zip Code
County	Phone Number	Fax Number or E-Mail Address

V. North Carolina Professional Engineer		VI. General or Main Installation Contractor		
PE Name	PE License No.	Contractor Name		
Company Name		Project Manager Name (if not named above)		
Mailing Address		Mailing Address		
City	State / Zip Code	City	State	Zip Code
Phone Number	Fax Number	Phone Number	Fax Number	
E-Mail Address		E-Mail Address		

VII. Description of All UST or Compartment Systems at this Facility

A. UST Information

TANK IDENTIFICATION NO. (e.g., A, B, C or 1, 2, 3, if compartment tank 1A, 1B, 1C, etc.)	Tank No.	Tank No.	Tank No.	Tank No.
Tank Manufacturer				
Tank Model				
Tank UL (or Serial) Number				
Materials of construction [1]				
If Other (specify)				

[1] Enter one of the following choices: DW* FRP** (e.g. Xerxes, Containment Solutions), DW* Steel/FRP** (e.g. ACT-100), DW* Steel/Polyurethane (e.g. ACT-100-U), DW* Steel/Jacketed (e.g. Permatank, Titan), Other

*DW = Double-walled **FRP = Fiberglass Reinforced Plastic

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- Contact Information
- UST Facility Information
- UST Information

UST-6B APPLICATION TO INSTALL OR REPLACE UNDERGROUND STORAGE TANK SYSTEMS (POST-INSTALLATION)

NCDENR

Facility ID No: _____

Is this a revised application? Yes ☐ No ☐

UST System components installed (Check one):
☐ Tanks and Piping ☐ Tanks Only ☐ Piping Only

Date UST and/or piping installation completed: _____

STATE USE ONLY

Reviewer name: _____

Application approved: Yes ☐ No ☐

Date Approved/Disapproved: _____

INSTRUCTIONS: Please type or print all items except signature. The owner of the UST system must complete sections I through VI and VIII through X of this form. The UST installation contractor must complete section VII of this form. If more than four (4) UST systems are being installed at the facility, photocopy the necessary additional sheets and staple to this form.

I. Ownership of UST System

Owner Name (Corporation, Individual, Public Agency, or Other Entity)		
Contact Name (if not named above)		
Mailing Address		
City	State	Zip Code
Phone Number	Fax Number or E-Mail Address	

II. Operator of UST System ☐ Check if same as owner

Operator Name (Corporation, Individual, Public Agency, or Other Entity)		
Contact Name (if not named above)		
Mailing Address		
City	State	Zip Code
Phone Number	Fax Number or E-Mail Address	

III. Contact Person for UST Location

Name	Job Title	Phone Number

IV. Location of UST System

Facility Name or Company	No. of regulated tanks/compartments at facility _____
Check if tanks located on Indian lands or reservation ☐	Total no. of tanks/compartments at facility _____

Street Address (if not available, then County Tax Map Number):

V. North Carolina Professional Engineer

VI. General or Main Installation Contractor

	tanks/compartments at facility _____
Check if tanks located on Indian lands or reservation ☐	Total no. of tanks/compartments at facility _____

Street Address (if not available, then County Tax Map Number):		
City	State	Zip Code
County	Phone Number	Fax Number or E-Mail Address

V. North Carolina Professional Engineer			VI. General or Main Installation Contractor		
PE Name	PE License No.		Contractor Name		
Company Name			Project Manager Name (if not named above)		
Mailing Address			Mailing Address		
City	State	Zip Code	City	State	Zip Code
Phone Number	Fax Number		Phone Number	Fax Number	
E-Mail Address			E-Mail Address		

VII. Description of All UST or Compartment Systems at this Facility

A. UST Information

TANK IDENTIFICATION NO. (e.g., A, B, C or 1, 2, 3; If compartment tank 1A, 1B, 1C, etc.)	Tank No.	Tank No.	Tank No.	Tank No.
Tank Manufacturer				
Tank Model				
Tank UL (or Serial) Number				
Materials of construction [1]				
If Other (specify)				

[1] Enter one of the following choices: DW* FRP** (e.g. Xerxes, Containment Solutions), DW* Steel/FRP** (e.g. ACT-100), DW* Steel/Polyurethane (e.g. ACT-100-U), DW* Steel/Jacketed (e.g. Perm tank, Titan), Other

*DW = Double-walled **FRP = Fiberglass Reinforced Plastic

	tanks/compartments at facility
Check if tanks located on Indian lands or reservation ☐	Total no. of tanks/compartments
Street Address (if not available, then County Tax Map Number):	
City	State
County	Phone

V. North Carolina Professional Engineer

PE Name	PE Lic
Company Name	
Mailing Address	
City / State / Z	
Phone Number / Fax Number	
E-Mail Address	

VII. Description of All UST or Compartment Systems a

A. UST Information

TANK IDENTIFICATION NO. (e.g., A, B, C or 1, 2, 3; If compartment tank 1A, 1B, 1C, etc.)	Tank No.			
Tank Manufacturer				
Tank Model				
Tank UL (or Serial) Number				
Materials of construction [1]				
If Other (specify)				

[1] Enter one of the following choices: DW* FRP** (e.g. Xerxes, Containment Solutions), DW* Steel/FRP** (e.g. ACT-100), DW* Steel/Polyurethane (e.g. ACT-100-U), DW* Steel/Jacketed (e.g. Perm tank, Titan), Other

*DW = Double-walled **FRP = Fiberglass Reinforced Plastic

	tanks/compartments at facility
Check if tanks located on Indian lands or reservation ☐	Total no. of tanks/compartments at facility

Street Address (if not available, then County Tax Map Number):

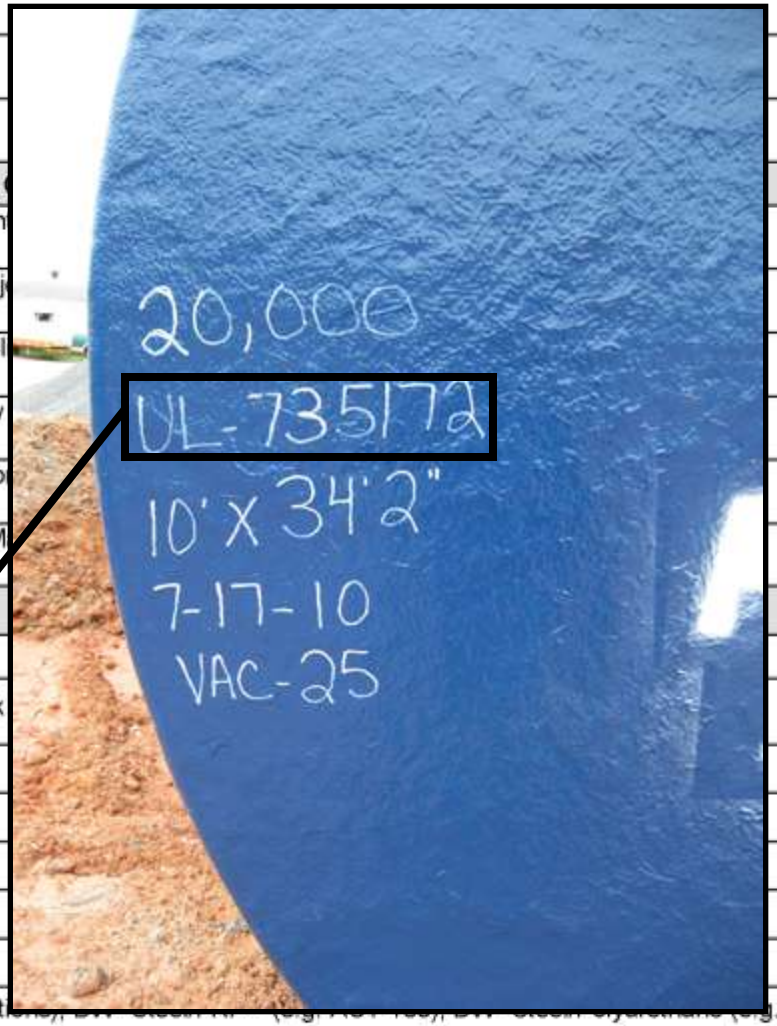
City	State
County	Phone Number

V. North Carolina Professional Engineer			VI.
PE Name	PE License No.		Con
Company Name			Proj
Mailing Address			Mail
City	State	Zip Code	City
Phone Number	Fax Number		Pho
E-Mail Address			E-M

VII. Description of All UST or Compartment Systems at this Facility

A. UST Information

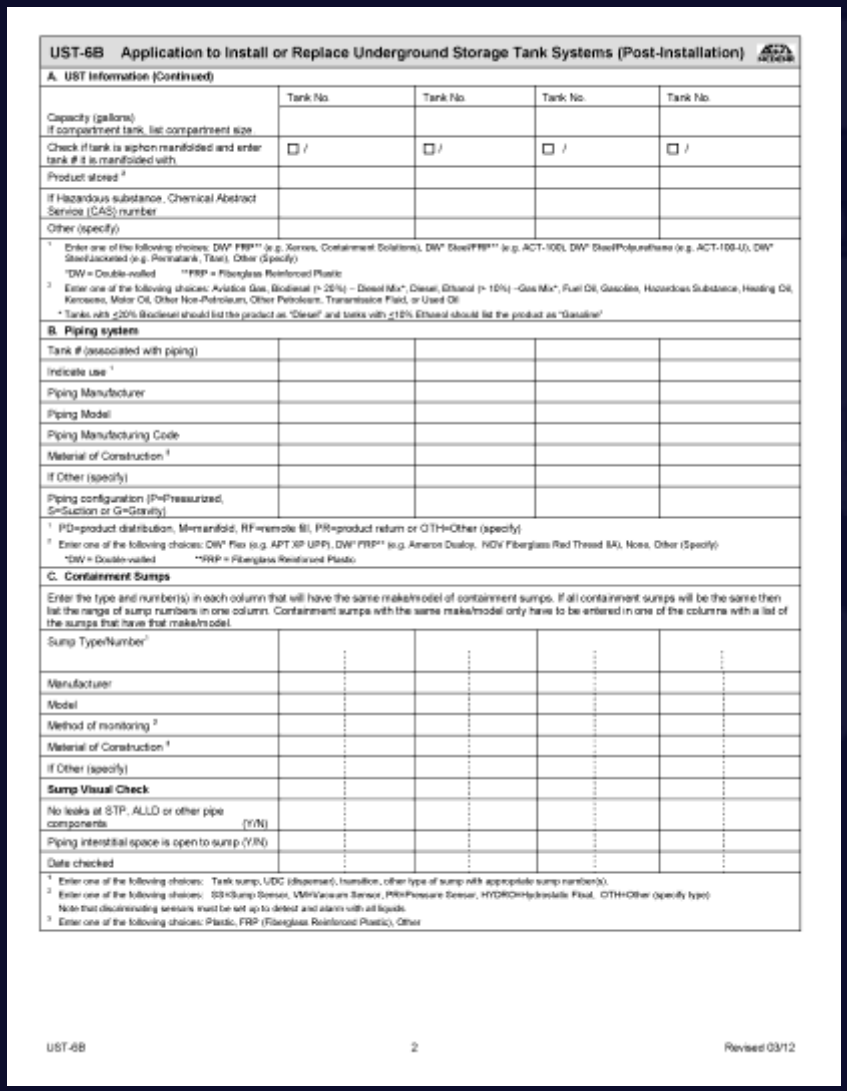
TANK IDENTIFICATION NO. (e.g., A, B, C or 1, 2, 3; If compartment tank 1A, 1B, 1C, etc.)	Tank No.	Tank
Tank Manufacturer		
Tank Model		
Tank UL (or Serial) Number		
Materials of construction [1]		
If Other (specify)		



[1] Enter one of the following choices: DW* FRP** (e.g. Xerxes, Containment Solut… (e.g. ACT-100-U), DW* Steel/Jacketed (e.g. Perm tank, Titan), Other

*DW = Double-walled **FRP = Fiberglass Reinforced Plastic

UST-6B Form



UST-6B Application to Install or Replace Underground Storage Tank Systems (Post-Installation)

A. UST Information (Continued)

	Tank No.	Tank No.	Tank No.	Tank No.
Capacity (gallons) If compartment tank, list compartment size				
Check if tank is siphon manifolded and enter tank # it is manifolded with	☐ /	☐ /	☐ /	☐ /
Product stored [2]				
If Hazardous substance, Chemical Abstract Service (CAS) number				
Other (specify)				

[1] Enter one of the following choices: DW* FRP** (e.g. Xerxes, Containment Solutions), DW* Steel/FRP** (e.g. ACT-100), DW* Steel/Polyurethane (e.g. ACT-100-U), DW* Steel/Jacketed (e.g. Permatank, Titan), Other (Specify)

*DW = Double-walled **FRP = Fiberglass Reinforced Plastic

[2] Enter one of the following choices: Aviation Gas, Biodiesel (> 20%) – Diesel Mix*, Diesel, Ethanol (> 10%) –Gas Mix*, Fuel Oil, Gasoline, Hazardous Substance, Heating Oil, Kerosene, Motor Oil, Other Non-Petroleum, Other Petroleum, Transmission Fluid, or Used Oil

* Tanks with ≤20% Biodiesel should list the product as "Diesel" and tanks with ≤10% Ethanol should list the product as "Gasoline"

B. Piping system

Tank # (associated with piping)				
Indicate use [1]				
Piping Manufacturer				
Piping Model				
Piping Manufacturing Code				
Material of Construction [3]				
If Other (specify)				
Piping configuration (P=Pressurized, S=Suction or G=Gravity)				

[1] PD=product distribution, M=manifold, RF=remote fill, PR=product return or OTH=Other (specify)

[3] Enter one of the following choices: DW* Flex (e.g. APT XP UPP), DW* FRP** (e.g. Ameron Dualoy, NOV Fiberglass Red Thread IIA), None, Other (Specify)

*DW = Double-walled **FRP = Fiberglass Reinforced Plastic

C. Containment Sumps

Enter the type and number(s) in each column that will have the same make/model of containment sumps. If all containment sumps will be the same then list the range of sump numbers in one column. Containment sumps with the same make/model only have to be entered in one of the columns with a list of the sumps that have that make/model.

Sump Type/Number [1]				
Manufacturer				
Model				
Method of monitoring [2]				
Material of Construction [3]				
If Other (specify)				
Sump Visual Check				
No leaks at STP, ALLD or other pipe components (Y/N)				
Piping interstitial space is open to sump (Y/N)				
Date checked				

[1] Enter one of the following choices: Tank sump, UDC (dispenser), Inundator, other type of sump with appropriate sump number(s).

[2] Enter one of the following choices: SS=Sump Sensor, VM=Vacuum Sensor, PR=Pressure Sensor, HYDRO=Hydrostatic Float, OTH=Other (specify type)
Note that discriminating sensors must be set up to detect and alarm with all liquids.

[3] Enter one of the following choices: Plastic, FRP (Fiberglass Reinforced Plastic), Other

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- UST Information (cont.)
- Piping Information
- Containment Sumps

UST-6B Application to Install or Replace Underground Storage Tank Systems (Post-Installation)

A. UST Information (Continued)

	Tank No.	Tank No.	Tank No.	Tank No.
Capacity (gallons) If compartment tank, list compartment size.				
Check if tank is siphon manifolded and enter tank # it is manifolded with.	☐ /	☐ /	☐ /	☐ /
Product stored [2]				
If Hazardous substance, Chemical Abstract Service (CAS) number				
Other (specify)				

[1] Enter one of the following choices: DW* FRP** (e.g. Xerxes, Containment Solutions), DW* Steel/FRP** (e.g. ACT-100), DW* Steel/Polyurethane (e.g. ACT-100-U), DW* Steel/Jacketed (e.g. Permatank, Titan), Other (Specify)

*DW = Double-walled **FRP = Fiberglass Reinforced Plastic

[2] Enter one of the following choices: Aviation Gas, Biodiesel (> 20%) – Diesel Mix*, Diesel, Ethanol (> 10%) –Gas Mix*, Fuel Oil, Gasoline, Hazardous Substance, Heating Oil, Kerosene, Motor Oil, Other Non-Petroleum, Other Petroleum, Transmission Fluid, or Used Oil

* Tanks with ≤20% Biodiesel should list the product as "Diesel" and tanks with ≤10% Ethanol should list the product as "Gasoline"

B. Piping system

Tank # (associated with piping)				
Indicate use [1]				
Piping Manufacturer				
Piping Model				
Piping Manufacturing Code				
Material of Construction [2]				
If Other (specify)				
Piping configuration (P=Pressurized, S=Suction or G=Gravity)				

[1] PD=product distribution, M=manifold, RF=remote fill, PR=product return or OTH=Other (specify)

[2] Enter one of the following choices: DW* Flex (e.g. APT XP UPP), DW* FRP** (e.g. Ameron Dualoy, NOV Fiberglass Red Thread IIA), None, Other (Specify)

...ne same then ...umns with a list of the sumps that have that make/model.

UST-6B Application to Install or Replace Underground Storage Tank Systems (Post-Installation)

NCDENR

A. UST Information (Continued)

	Tank No.	Tank No.	Tank No.	Tank No.
Capacity (gallons) If compartment tank, list compartment size.				
Check if tank is siphon manifolded and enter tank # it is manifolded with.	☐ /	☐ /	☐ /	☐ /
Product stored [2]				
If Hazardous substance, Chemical Abstract Service (CAS) number				
Other (specify)				

[1] Enter one of the following choices: DW* FRP** (e.g. Xerxes, Contain
Steel/Jacketed (e.g. Permatank, Titan), Other (Specify)

*DW = Double-walled **FRP = Fiberglass Reinforced Plastic

[2] Enter one of the following choices: Aviation Gas, Biodiesel (> 20%) –
Kerosene, Motor Oil, Other Non-Petroleum, Other Petroleum, Transr

* Tanks with ≤20% Biodiesel should list the product as "Diesel" and ta

B. Piping system

Tank # (associated with piping)				
Indicate use [1]				
Piping Manufacturer				
Piping Model				
Piping Manufacturing Code				
Material of Construction [2]				
If Other (specify)				
Piping configuration (P=Pressurized, S=Suction or G=Gravity)				

[1] PD=product distribution, M=manifold, RF=remote fill, PR=product return or OTH=Other (specify)

[2] Enter one of the following choices: DW* Flex (e.g. APT XP UPP), DW* FRP** (e.g. Ameron Dualoy, NOV Fiberglass Red Thread IIA), None, Other (Specify)

...ne same then
...umns with a list of the sumps that have that make/model.

UST-6B Application to Install or Replace Underground Storage Tank Systems (Post-Installation)

A. UST Information (Continued)

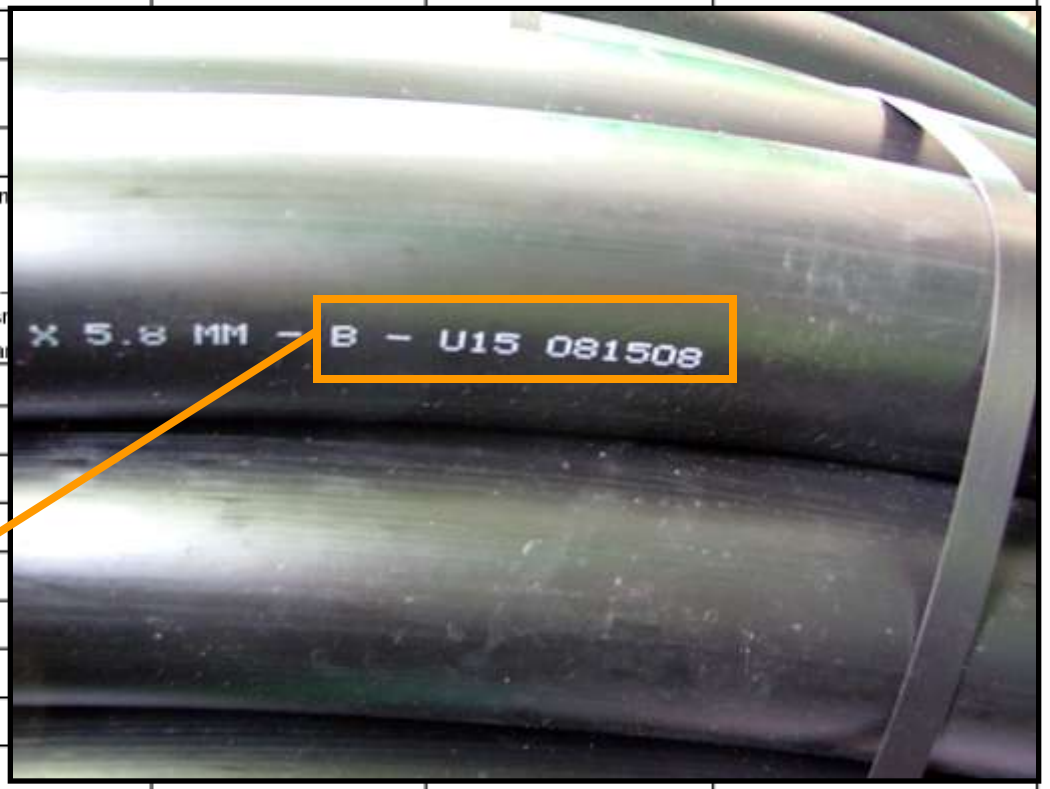
	Tank No.	Tank No.	Tank No.	Tank No.
Capacity (gallons) If compartment tank, list compartment size.				
Check if tank is siphon manifolded and enter tank # it is manifolded with.	☐ /	☐ /	☐ /	☐ /
Product stored [2]				
If Hazardous substance, Chemical Abstract Service (CAS) number				
Other (specify)				

[1] Enter one of the following choices: DW* FRP** (e.g. Xerxes, Contain
Steel/Jacketed (e.g. Permatank, Titan), Other (Specify)

*DW = Double-walled **FRP = Fiberglass Reinforced Plastic

[2] Enter one of the following choices: Aviation Gas, Biodiesel (> 20%) –
Kerosene, Motor Oil, Other Non-Petroleum, Other Petroleum, Transr

* Tanks with ≤20% Biodiesel should list the product as "Diesel" and ta



B. Piping system

Tank # (associated with piping)				
Indicate use [1]				
Piping Manufacturer				
Piping Model				
Piping Manufacturing Code				
Material of Construction [2]				
If Other (specify)				
Piping configuration (P=Pressurized, S=Suction or G=Gravity)				

[1] PD=product distribution, M=manifold, RF=remote fill, PR=product return or OTH=Other (specify)

[2] Enter one of the following choices: DW* Flex (e.g. APT XP UPP), DW* FRP** (e.g. Ameron Dualoy, NOV Fiberglass Red Thread IIA), None, Other (Specify)

the same then
the sumps that have that make/model.

If Other (specify)				
Piping configuration (P=Pressurized, S=Suction or G=Gravity)				

[1] PD=product distribution, M=manifold, RF=remote fill, PR=product return or OTH=Other (specify)

[2] Enter one of the following choices: DW* Flex (e.g. APT XP UPP), DW* FRP** (e.g. Ameron Dualoy, NOV Fiberglass Red Thread IIA), None, Other (Specify)

*DW = Double-walled **FRP = Fiberglass Reinforced Plastic

C. Containment Sumps

Enter the type and number(s) in each column that will have the same make/model of containment sumps. If all containment sumps will be the same then list the range of sump numbers in one column. Containment sumps with the same make/model only have to be entered in one of the columns with a list of the sumps that have that make/model.

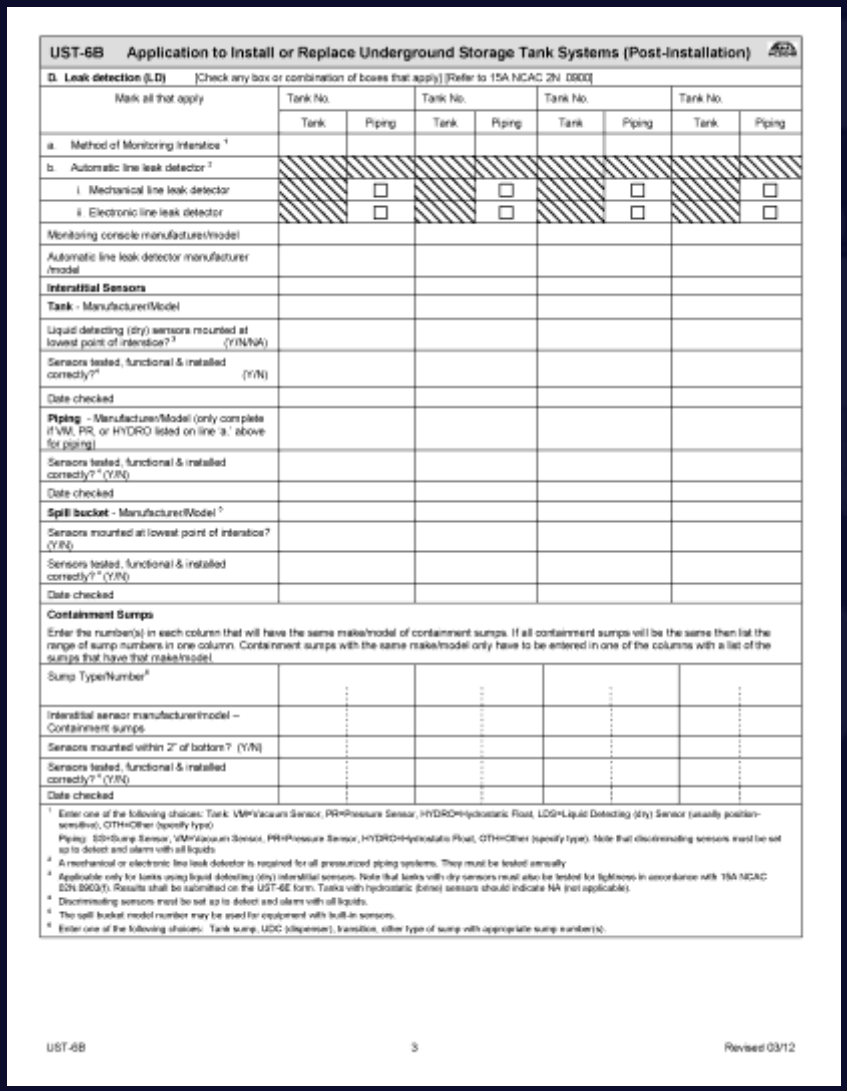
Sump Type/Number[1]				
Manufacturer				
Model				
Method of monitoring [2]				
Material of Construction [3]				
If Other (specify)				
Sump Visual Check				
No leaks at STP, ALLD or other pipe components (Y/N)				
Piping interstitial space is open to sump (Y/N)				
Date checked				

[1] Enter one of the following choices: Tank sump, UDC (dispenser), transition, other type of sump with appropriate sump number(s).

[2] Enter one of the following choices: SS=Sump Sensor, VM=Vacuum Sensor, PR=Pressure Sensor, HYDRO=Hydrostatic Float, OTH=Other (specify type)
Note that discriminating sensors must be set up to detect and alarm with all liquids

[3] Enter one of the following choices: Plastic, FRP (Fiberglass Reinforced Plastic), Other

UST-6B Form



UST-6B Application to Install or Replace Underground Storage Tank Systems (Post-Installation)

D. Leak detection (LD) [Check any box or combination of boxes that apply] [Refer to 15A NCAC 2N .0900]

Mark all that apply	Tank No.		Tank No.		Tank No.		Tank No.	
	Tank	Piping	Tank	Piping	Tank	Piping	Tank	Piping
a. Method of Monitoring Interstice [1]								
b. Automatic line leak detector [2]								
i. Mechanical line leak detector		☐		☐		☐		☐
ii. Electronic line leak detector		☐		☐		☐		☐
Monitoring console manufacturer/model								
Automatic line leak detector manufacturer /model								
Interstitial Sensors								
Tank - Manufacturer/Model								
Liquid detecting (dry) sensors mounted at lowest point of interstice? [3] (Y/N/NA)								
Sensors tested, functional & installed correctly? [4] (Y/N)								
Date checked								
Piping - Manufacturer/Model (only complete if VM, PR, or HYDRO listed on line 'a.' above for piping)								
Sensors tested, functional & installed correctly? [4] (Y/N)								
Date checked								
Spill bucket - Manufacturer/Model [5]								
Sensors mounted at lowest point of interstice? (Y/N)								
Sensors tested, functional & installed correctly? [4] (Y/N)								
Date checked								

Containment Sumps

Enter the number(s) in each column that will have the same make/model of containment sumps. If all containment sumps will be the same then list the range of sump numbers in one column. Containment sumps with the same make/model only have to be entered in one of the columns with a list of the sumps that have that make/model.

Sump Type/Number [6]				
Interstitial sensor manufacturer/model – Containment sumps				
Sensors mounted within 2" of bottom? (Y/N)				
Sensors tested, functional & installed correctly? [4] (Y/N)				
Date checked				

[1] Enter one of the following choices: Tank: VM=Vacuum Sensor, PR=Pressure Sensor, HYDRO=Hydrostatic Float, LDS=Liquid Detecting (dry) Sensor (usually position-sensitive), OTH=Other (specify type)
Piping: SS=Sump Sensor, VM=Vacuum Sensor, PR=Pressure Sensor, HYDRO=Hydrostatic Float, OTH=Other (specify type). Note that discriminating sensors must be set up to detect and alarm with all liquids

[2] A mechanical or electronic line leak detector is required for all pressurized piping systems. They must be tested annually

[3] Applicable only for tanks using liquid detecting (dry) interstitial sensors. Note that tanks with dry sensors must also be tested for tightness in accordance with 15A NCAC 02N .0903(f). Results shall be submitted on the UST-6E form. Tanks with hydrostatic (brine) sensors should indicate NA (not applicable).

[4] Discriminating sensors must be set up to detect and alarm with all liquids.

[5] The spill bucket model number may be used for equipment with built-in sensors.

[6] Enter one of the following choices: Tank sump, UDC (dispenser), transition, other type of sump with appropriate sump number(s).

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- Leak Detection
  - Tanks
  - Piping
  - Spill Buckets
  - Containment Sumps

UST-6B Application to Install or Replace Underground Storage Tank Systems (Post-Installation)

D. Leak detection (LD) [Check any box or combination of boxes that apply] [Refer to 15A NCAC 2N .0900]

Mark all that apply	Tank No.		Tank No.		Tank No.		Tank No.	
	Tank	Piping	Tank	Piping	Tank	Piping	Tank	Piping
a. Method of Monitoring Interstice [1]								
b. Automatic line leak detector [2]								
i. Mechanical line leak detector		☐		☐		☐		☐
ii. Electronic line leak detector		☐		☐		☐		☐
Monitoring console manufacturer/model								
Automatic line leak detector manufacturer /model								
Interstitial Sensors								
Tank - Manufacturer/Model								
Liquid detecting (dry) sensors mounted at lowest point of interstice? [3] (Y/N/NA)								
Sensors tested, functional & installed correctly? [4] (Y/N)								
Date checked								
Piping - Manufacturer/Model (only complete if VM, PR, or HYDRO listed on line 'a.' above for piping)								
Sensors tested, functional & installed correctly? [4] (Y/N)								
Date checked								
Spill bucket - Manufacturer/Model [5]								
Sensors mounted at lowest point of interstice? (Y/N)								

ment Sumps

Enter the number(s) in each column that will have the same make/model of containment sumps. If all containment sumps will be the same then list the

Sensors tested, functional & installed correctly? [4] (Y/N)				
Date checked				
Spill bucket - Manufacturer/Model [5]				
Sensors mounted at lowest point of interstice? (Y/N)				
Sensors tested, functional & installed correctly? [4] (Y/N)				
Date checked				

Containment Sumps

Enter the number(s) in each column that will have the same make/model of containment sumps. If all containment sumps will be the same then list the range of sump numbers in one column. Containment sumps with the same make/model only have to be entered in one of the columns with a list of the sumps that have that make/model.

Sump Type/Number[6]				
Interstitial sensor manufacturer/model – Containment sumps				
Sensors mounted within 2" of bottom? (Y/N)				
Sensors tested, functional & installed correctly? [4] (Y/N)				
Date checked				

[1] Enter one of the following choices: Tank: VM=Vacuum Sensor, PR=Pressure Sensor, HYDRO=Hydrostatic Float, LDS=Liquid Detecting (dry) Sensor (usually position-sensitive), OTH=Other (specify type)

Piping: SS=Sump Sensor, VM=Vacuum Sensor, PR=Pressure Sensor, HYDRO=Hydrostatic Float, OTH=Other (specify type). Note that discriminating sensors must be set up to detect and alarm with all liquids

[2] A mechanical or electronic line leak detector is required for all pressurized piping systems. They must be tested annually

[3] Applicable only for tanks using liquid detecting (dry) interstitial sensors. Note that tanks with dry sensors must also be tested for tightness in accordance with 15A NCAC 02N.0903(f). Results shall be submitted on the UST-6E form. Tanks with hydrostatic (brine) sensors should indicate NA (not applicable).

[4] Discriminating sensors must be set up to detect and alarm with all liquids.

[5] The spill bucket model number may be used for equipment with built-in sensors.

[6] Enter one of the following choices: Tank sump, UDC (dispenser), transition, other type of sump with appropriate sump number(s).

UST-6B Form

UST-6B Application to Install or Replace Underground Storage Tank Systems (Post-Installation)

E. Flexible connectors, Submersible pumps, Riser pipes, Siphon bars, and other Metal fittings

	Tank No.		Tank No.		Tank No.		Tank No.	
	Tank	Dispenser	Tank	Dispenser	Tank	Dispenser	Tank	Dispenser
Flex connector is secondarily contained or located in a monitored containment sump[1]								
Submersible pump (STP) is located in a monitored containment sump [1] (pressurized piping only)								
Metal piping extensions, siphon bars, and/or other metal fittings are located in a monitored containment sump[1]								

[1] Enter one of the following choices: Yes, No, N/A (not applicable)

F. Spill Prevention Equipment

Spill Prevention Equipment Type (Enter Spill Bucket, None, or Not Required [1])				
Spill Prevention Equipment Manufacturer				
Spill Prevention Equipment Model				
Method of Monitoring Interstice [2]				

[1] Not Required is only valid for USTs that are always filled by transfers that are 25 gallons or less.
[2] Enter one of the following choices: SS=Sump Sensor, VM=Vacuum Sensor, PR=Pressure Sensor, HYDRO=Hydrostatic Float, OTH=Other (specify type). Note that discriminating sensors must be set up to detect and alarm with all liquids

G. Overfill Prevention Equipment

Overfill Prevention Equipment Type (Enter Automatic shutoff [1], Alarm at tank, Ball float [1,2], None, or Not Required [3])				
Overfill Prevention Equipment Manufacturer				
Overfill Prevention Equipment Model				
Overfill Prevention Equipment Operability				
Overfill device operational? (Yes/No)				
% of tank volume device is set (indicate .XX% or NA)	%	%	%	%
Minimum required device length in tank? (indicate in inches or NA)	inches	inches	inches	inches
Device length in tank (in inches or NA)	inches	inches	inches	inches
30 minute flow restriction kit installed?[4] (Yes/NA)				
Alarm mounted at fill ports? [5] (Yes/NA)				
Tank top fittings tight? (Yes/No)				
Date checked				

[1] When installing an automatic shut off device, do not install a ball float valve unless the ball float is set to activate at a level higher in the tank than the automatic shut-off device. Only show the primary overfill prevention device in this section.
[2] Ball Floats cannot be used with coaxial vapor recovery or suction piping systems.
[3] Not Required is only valid for USTs that are always filled by transfers that are 25 gallons or less.
[4] Applicable only for certain types of ball floats (indicate NA if not applicable).
[5] Applicable only for high level alarms (indicate NA if not applicable).

H. Stage I vapor recovery (For Gasoline USTs only):

Note: the following gasoline USTs are not required to have Stage I vapor recovery equipment: a) new USTs that are 500 gallons or less in capacity, and b) facilities that have a combined throughput of less than 50,000 gallons per year. If vapor recovery is not required for a UST at this facility, then the last box in this section should be marked. If you have any questions about Stage I vapor recovery, please call the Air Quality Section at (919) 733-1480

Coaxial system	☐	☐	☐	☐
Dual point system	☐	☐	☐	☐
None	☐	☐	☐	☐

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Page 4

- Flexible Connectors / Metal Components
- Spill Prevention Equipment
- Overfill Prevention Equipment
- Stage I Vapor Recovery

UST-6B Application to Install or Replace Underground Storage Tank Systems (Post-Installation)

E. Flexible connectors, Submersible pumps, Riser pipes, Siphon bars, and other Metal fittings

	Tank No.		Tank No.		Tank No.		Tank No.	
	Tank	Dispenser	Tank	Dispenser	Tank	Dispenser	Tank	Dispenser
Flex connector is secondarily contained or located in a monitored containment sump [1]								
Submersible pump (STP) is located in a monitored containment sump [1] (pressurized piping only)								
Metal piping extensions, siphon bars, and/or other metal fittings are located in a monitored containment sump [1]								

[1] Enter one of the following choices: Yes, No, N/A (not applicable)

F. Spill Prevention Equipment

Spill Prevention Equipment Type (Enter Spill Bucket, None, or Not Required [1])				
Spill Prevention Equipment Manufacturer				
Spill Prevention Equipment Model				
Method of Monitoring Interstice [2]				

[1] Not Required is only valid for USTs that are always filled by transfers that are 25 gallons or less.

[2] Enter one of the following choices: SS=Sump Sensor, VM=Vacuum Sensor, PR=Pressure Sensor, HYDRO=Hydrostatic Float, OTH=Other (specify type). Note that discriminating sensors must be set up to detect and alarm with all liquids

G. Overfill Prevention Equipment

Overfill Prevention Equipment Type (Enter Automatic shutoff [1], Alarm at tank, Ball float [1,2], None, or Not Required [3])				
Overfill Prevention Equipment Manufacturer				
Overfill Prevention Equipment Model				
Overfill Prevention Equipment Operability				
...required device length in tank? (indicate in inches or NA)	inches	inches	inches	% inches

Overfill Prevention Equipment Type (Enter Automatic shutoff [1], Alarm at tank, Ball float [1, 2], None, or Not Required [3])				
Overfill Prevention Equipment Manufacturer				
Overfill Prevention Equipment Model				
Overfill Prevention Equipment Operability Overfill device operational? (Yes/No) % of tank volume device is set (indicate XX% or NA) Minimum required device length in tank? (indicate in inches or NA) Device length in tank (in inches or NA) 30 minute flow restriction kit installed?[4] (Yes/NA) Alarm mounted at fill ports? [5] (Yes/NA) Tank top fittings tight? (Yes/No) Date checked	% inches inches	% inches inches	% inches inches	% inches inches

[1] When installing an automatic shut off device, do not install a ball float valve unless the ball float is set to activate at a level higher in the tank than the automatic shut-off device. Only show the primary overfill prevention device in this section.

[2] Ball Floats cannot be used with coaxial vapor recovery or suction piping systems.

[3] Not Required is only valid for USTs that are always filled by transfers that are 25 gallons or less.

[4] Applicable only for certain types of ball floats (indicate NA if not applicable).

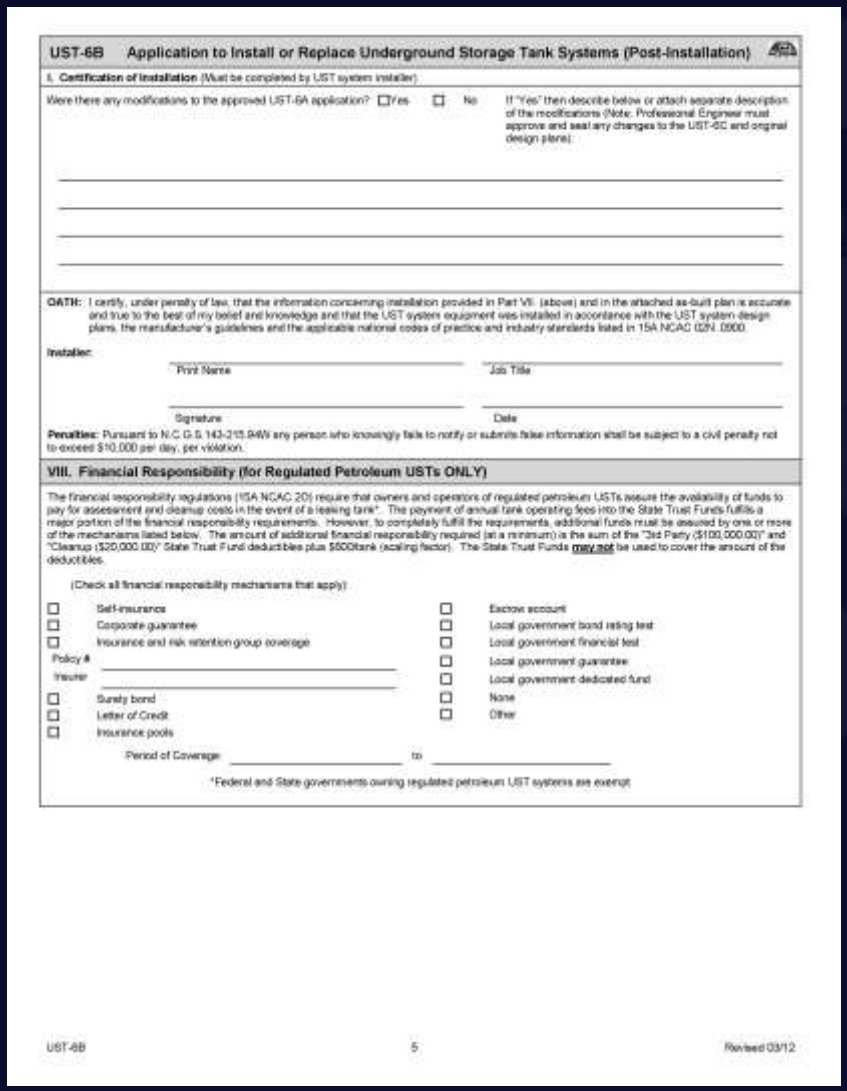
[5] Applicable only for high level alarms (indicate NA if not applicable).

H. Stage I vapor recovery (For Gasoline USTs only):

Note: the following gasoline USTs are not required to have Stage I vapor recovery equipment: a) new USTs that are 500 gallons or less in capacity, and b) facilities that have a combined throughput of less than 50,000 gallons per year. If vapor recovery is not required for a UST at this facility, then the last box in this section should be marked. If you have any questions about Stage I vapor recovery, please call the Air Quality Section at (919) 733-1480.

Coaxial system	☐	☐	☐	☐
Dual point system	☐	☐	☐	☐
None	☐	☐	☐	☐

UST-6B Form



UST-6B Application to Install or Replace Underground Storage Tank Systems (Post-Installation)

I. Certification of Installation (Must be completed by UST system installer)

Were there any modifications to the approved UST-6A application? ☐ Yes ☐ No If "Yes" then describe below or attach separate description of the modifications (Note: Professional Engineer must approve and seal any changes to the UST-2C and original design plans):

OATH: I certify, under penalty of law, that the information concerning installation provided in Part VII. (above) and in the attached as-built plan is accurate and true to the best of my belief and knowledge and that the UST system equipment was installed in accordance with the UST system design plans, the manufacturer's guidelines and the applicable national codes of practice and industry standards listed in 15A NCAC 02N .0900.

Installer:

Print Name Job Title

Signature Date

Penalties: Pursuant to N.C.G.S. 143-215.94N any person who knowingly fails to notify or submits false information shall be subject to a civil penalty not to exceed $10,000 per day, per violation.

VIII. Financial Responsibility (for Regulated Petroleum USTs ONLY)

The financial responsibility regulations (15A NCAC 2O) require that owners and operators of regulated petroleum USTs assure the availability of funds to pay for assessment and cleanup costs in the event of a leaking tank*. The payment of annual tank operating fees into the State Trust Funds fulfills a major portion of the financial responsibility requirements. However, to completely fulfill the requirements, additional funds must be assured by one or more of the mechanisms listed below. The amount of additional financial responsibility required (at a minimum) is the sum of the "3rd Party ($100,000.00)" and "Cleanup ($20,000.00)" State Trust Fund deductibles plus $500/tank (scaling factor). The State Trust Funds **may not** be used to cover the amount of the deductibles.

(Check all financial responsibility mechanisms that apply)

- ☐ Self-insurance
- ☐ Corporate guarantee
- ☐ Insurance and risk retention group coverage
  - Policy #
  - Insurer
- ☐ Surety bond
- ☐ Letter of Credit
- ☐ Insurance pools
- ☐ Escrow account
- ☐ Local government bond rating test
- ☐ Local government financial test
- ☐ Local government guarantee
- ☐ Local government dedicated fund
- ☐ None
- ☐ Other

Period of Coverage _____ to _____

*Federal and State governments owning regulated petroleum UST systems are exempt

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- Installer Certification
- Financial Responsibility

UST-6B Application to Install or Replace Underground Storage Tank Systems (Post-Installation)

I. Certification of Installation (Must be completed by UST system installer)

Were there any modifications to the approved UST-6A application? ☐ Yes ☐ No If "Yes" then describe below or attach separate description of the modifications (Note: Professional Engineer must approve and seal any changes to the UST-6C and original design plans):

_____

_____

_____

_____

OATH: I certify, under penalty of law, that the information concerning installation provided in Part VII. (above) and in the attached as-built plan is accurate and true to the best of my belief and knowledge and that the UST system equipment was installed in accordance with the UST system design plans, the manufacturer's guidelines and the applicable national codes of practice and industry standards listed in 15A NCAC 02N .0900.

Installer:

_____ _____

Print Name Job Title

_____ _____

Signature Date

Penalties: Pursuant to N.C.G.S.143-215.94W any person who knowingly fails to notify or submits false information shall be subject to a civil penalty not to exceed $10,000 per day, per violation.

VIII. Financial Responsibility (for Regulated Petroleum USTs ONLY)

The financial responsibility regulations (15A NCAC 2O) require that owners and operators of regulated petroleum USTs assure the availability of funds to pay for assessment and cleanup costs in the event of a leaking tank*. The payment of annual tank operating fees into the State Trust Funds fulfills a major portion of the financial responsibility requirements. However, to completely fulfill the requirements, additional funds must be assured by one or more of the mechanisms listed below. The amount of additional financial responsibility required (at a minimum) is the sum of the "3rd Party ($100,000.00)" and "Cleanup ($20,000.00)" State Trust Fund deductibles plus $600/tank (scaling factor). The State Trust Funds **may not** be used to cover the amount of the

☐ Corporate guarantee ☐ Local government bond rating test

VIII. Financial Responsibility (for Regulated Petroleum USTs ONLY)

The financial responsibility regulations (15A NCAC 2O) require that owners and operators of regulated petroleum USTs assure the availability of funds to pay for assessment and cleanup costs in the event of a leaking tank*. The payment of annual tank operating fees into the State Trust Funds fulfills a major portion of the financial responsibility requirements. However, to completely fulfill the requirements, additional funds must be assured by one or more of the mechanisms listed below. The amount of additional financial responsibility required (at a minimum) is the sum of the "3rd Party ($100,000.00)" and "Cleanup ($20,000.00)" State Trust Fund deductibles plus $600/tank (scaling factor). The State Trust Funds **may not** be used to cover the amount of the deductibles.

(Check all financial responsibility mechanisms that apply):

- ☐ Self-insurance
- ☐ Corporate guarantee
- ☐ Insurance and risk retention group coverage

Policy # _____

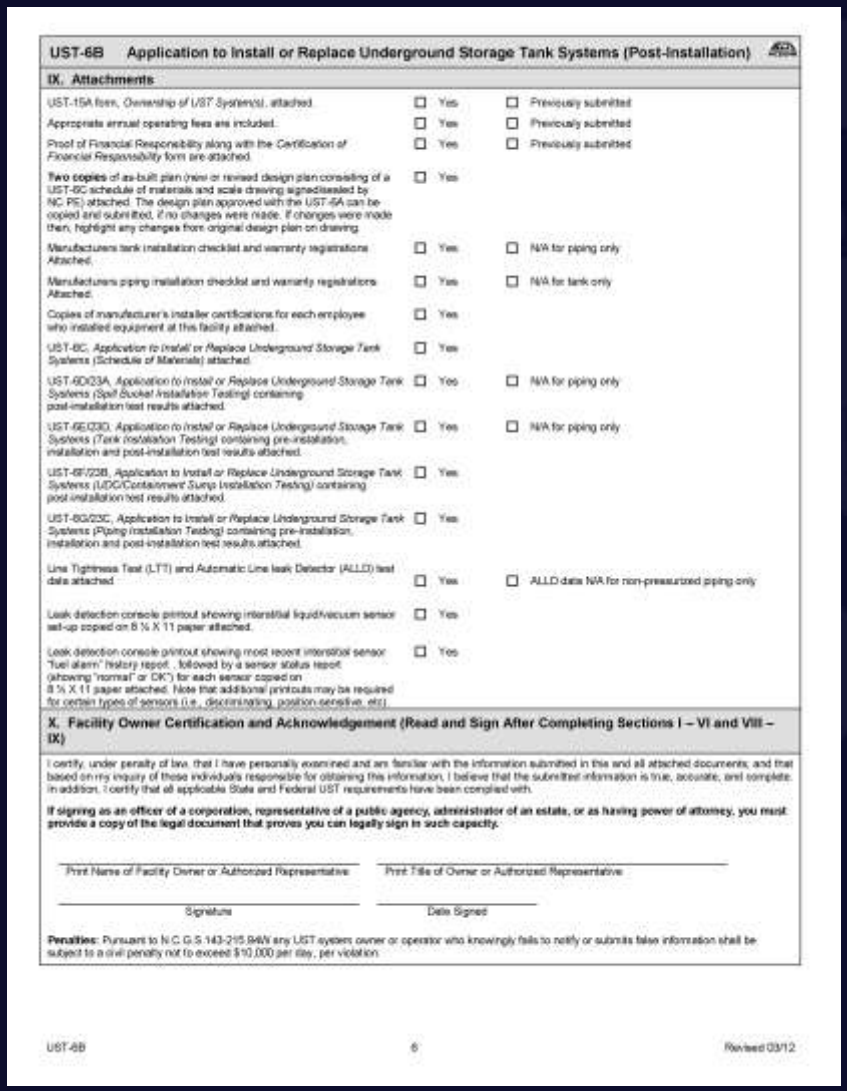
Insurer _____

- ☐ Surety bond
- ☐ Letter of Credit
- ☐ Insurance pools
- ☐ Escrow account
- ☐ Local government bond rating test
- ☐ Local government financial test
- ☐ Local government guarantee
- ☐ Local government dedicated fund
- ☐ None
- ☐ Other

Period of Coverage: _____ to _____

*Federal and State governments owning regulated petroleum UST systems are exempt

UST-6B Form



UST-6B Application to Install or Replace Underground Storage Tank Systems (Post-Installation)

IX. Attachments

UST-15A form, *Ownership of UST System(s)*, attached.	☐ Yes	☐ Previously submitted
Appropriate annual operating fees are included.	☐ Yes	☐ Previously submitted
Proof of Financial Responsibility along with the *Certification of Financial Responsibility* form are attached.	☐ Yes	☐ Previously submitted
Two copies of as-built plan (new or revised design plan consisting of a UST-6C schedule of materials and scale drawing signed/sealed by NC PE) attached. The design plan approved with the UST-6A can be copied and submitted, if no changes were made. If changes were made then, highlight any changes from original design plan on drawing.	☐ Yes	
Manufacturers tank installation checklist and warranty registrations Attached.	☐ Yes	☐ N/A for piping only
Manufacturers piping installation checklist and warranty registrations Attached.	☐ Yes	☐ N/A for tank only
Copies of manufacturer's installer certifications for each employee who installed equipment at this facility attached.	☐ Yes	
UST-6C, *Application to Install or Replace Underground Storage Tank Systems* (Schedule of Materials) attached.	☐ Yes	
UST-6D/23A, *Application to Install or Replace Underground Storage Tank Systems (Spill Bucket Installation Testing)* containing post-installation test results attached.	☐ Yes	☐ N/A for piping only
UST-6E/23C, *Application to Install or Replace Underground Storage Tank Systems (Tank Installation Testing)* containing pre-installation, installation and post-installation test results attached.	☐ Yes	☐ N/A for piping only
UST-6F/23B, *Application to Install or Replace Underground Storage Tank Systems (UDC/Containment Sump Installation Testing)* containing post-installation test results attached.	☐ Yes	
UST-6G/23C, *Application to Install or Replace Underground Storage Tank Systems (Piping Installation Testing)* containing pre-installation, installation and post-installation test results attached.	☐ Yes	
Line Tightness Test (LTT) and Automatic Line leak Detector (ALLD) test data attached.	☐ Yes	☐ ALLD data N/A for non-pressurized piping only
Leak detection console printout showing interstitial liquid/vacuum sensor set-up copied on 8 ½ X 11 paper attached.	☐ Yes	
Leak detection console printout showing most recent interstitial sensor "fuel alarm" history report , followed by a sensor status report (showing "normal" or OK") for each sensor copied on 8 ½ X 11 paper attached. Note that additional printouts may be required for certain types of sensors (i.e., discriminating, position-sensitive, etc.)	☐ Yes	

X. Facility Owner Certification and Acknowledgement (Read and Sign After Completing Sections I – VI and VIII – IX)

I certify, under penalty of law, that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete. In addition, I certify that all applicable State and Federal UST requirements have been complied with.

If signing as an officer of a corporation, representative of a public agency, administrator of an estate, or as having power of attorney, you must provide a copy of the legal document that proves you can legally sign in such capacity.

Print Name of Facility Owner or Authorized Representative

Print Title of Owner or Authorized Representative

Signature

Date Signed

Penalties: Pursuant to N.C.G.S.143-215.94N any UST system owner or operator who knowingly fails to notify or submits false information shall be subject to a civil penalty not to exceed $10,000 per day, per violation.

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- Attachments
- Facility Owner Certification

IX. Attachments

UST-15A form, *Ownership of UST System(s)*, attached.	☐ Yes	☐ Previously submitted
Appropriate annual operating fees are included.	☐ Yes	☐ Previously submitted
Proof of Financial Responsibility along with the *Certification of Financial Responsibility* form are attached.	☐ Yes	☐ Previously submitted
Two copies of as-built plan (new or revised design plan consisting of a UST-6C schedule of materials and scale drawing signed/sealed by NC PE) attached. The design plan approved with the UST-6A can be copied and submitted, if no changes were made. If changes were made then, highlight any changes from original design plan on drawing.	☐ Yes	
Manufacturers tank installation checklist and warranty registrations Attached.	☐ Yes	☐ N/A for piping only
Manufacturers piping installation checklist and warranty registrations Attached.	☐ Yes	☐ N/A for tank only
Copies of manufacturer's installer certifications for each employee who installed equipment at this facility attached.	☐ Yes	
UST-6C, *Application to Install or Replace Underground Storage Tank Systems (Schedule of Materials)* attached.	☐ Yes	
UST-6D/23A, *Application to Install or Replace Underground Storage Tank Systems (Spill Bucket Installation Testing)* containing post-installation test results attached.	☐ Yes	☐ N/A for piping only
UST-6E/23D, *Application to Install or Replace Underground Storage Tank Systems (Tank Installation Testing)* containing pre-installation, installation and post-installation test results attached.	☐ Yes	☐ N/A for piping only
UST-6F/23B, *Application to Install or Replace Underground Storage Tank Systems (UDC/Containment Sump Installation Testing)* containing post-installation test results attached.	☐ Yes	
UST-6G/23C, *Application to Install or Replace Underground Storage Tank Systems (Piping Installation Testing)* containing pre-installation, installation and post-installation test results attached.	☐ Yes	

only

ection console printout showing interstitial liquid/vacuum sensor set-up copied on 8 ½ X 11 paper attached. ☐ Yes

UST-6F/23B, *Application to Install or Replace Underground Storage Tank Systems (UDC/Containment Sump Installation Testing)* containing post-installation test results attached.	☐ Yes	
UST-6G/23C, *Application to Install or Replace Underground Storage Tank Systems (Piping Installation Testing)* containing pre-installation, installation and post-installation test results attached.	☐ Yes	
Line Tightness Test (LTT) and Automatic Line leak Detector (ALLD) test data attached	☐ Yes	☐ ALLD data N/A for non-pressurized piping only
Leak detection console printout showing interstitial liquid/vacuum sensor set-up copied on 8 ½ X 11 paper attached.	☐ Yes	
Leak detection console printout showing most recent interstitial sensor "fuel alarm" history report , followed by a sensor status report (showing "normal" or OK") for each sensor copied on 8 ½ X 11 paper attached. Note that additional printouts may be required for certain types of sensors (i.e., discriminating, position-sensitive, etc).	☐ Yes	

X. Facility Owner Certification and Acknowledgement (Read and Sign After Completing Sections I – VI and VIII – IX)

I certify, under penalty of law, that I have personally examined and am familiar with the information submitted in this and all attached documents; and that based on my inquiry of those individuals responsible for obtaining this information, I believe that the submitted information is true, accurate, and complete. In addition, I certify that all applicable State and Federal UST requirements have been complied with.

If signing as an officer of a corporation, representative of a public agency, administrator of an estate, or as having power of attorney, you must provide a copy of the legal document that proves you can legally sign in such capacity.

Print Name of Facility Owner or Authorized Representative

Print Title of Owner or Authorized Representative

Signature

Date Signed

Penalties: Pursuant to N.C.G.S.143-215.94W any UST system owner or operator who knowingly fails to notify or submits false information shall be subject to a civil penalty not to exceed $10,000 per day, per violation.

As-builts

- 11” x 17”
- Must be sealed by professional engineer if changes to original design were made
- All changes to the originally approved plans should be indicated on as-builts
- If no changes, then original plans with the annotation “as-builts” are fine

Summary of Installation Testing Requirements

UST-6D/23A — **Triennial UST Spill Bucket Integrity Testing**
for components installed on or after 11/1/2007

NCDENR

- A separate form should be used for each facility. If there are more than five (5) spill buckets at this facility, make additional copies of this page.
- The last periodic tightness test record must be maintained at the UST site or the tank owner or operators place of business and must be readily available for inspection.
- If any periodic test fails, a suspected release report must be submitted on a UST-17A form, *UST Suspected Release 24 Hour Notice*. The suspected release must be investigated, in accordance with 15A NCAC 2N .0903, and any defective equipment repaired in accordance with 15A NCAC 2N .0404/.0900. Results of the investigation must be submitted on a UST-17B form, *UST Suspected Release 7 Day Notice*.

UST FACILITY

Owner / Operator Name	Facility Name	Facility ID#
Facility Street Address	Facility City	County

TESTING CONTRACTOR INFORMATION

Company Name	Phone	E-mail Address	
Mailing Address	City	State	Zip

I certify, under penalty of law, that the testing data provided on this form documents the UST system equipment was tested in accordance with the manufacturer's guidelines and the applicable national industry standards listed in 15A NCAC 2N .0900.

Print Name of person conducting test | Signature of person conducting test

SPILL BUCKET TESTING

- Spill buckets, installed on or after 11/1/2007, that are not monitored continuously for releases using vacuum, pressure, or hydrostatic methods must be tightness tested at installation and every three (3) years following installation.
- The primary containment and interstitial space of the spill bucket shall be tested in accordance with the manufacturers written guidelines and PEI/RP100 "Recommended Practice for Installation of Underground Liquid Storage Systems."
- If the spill bucket test results are not within the manufacturer's written guidelines or the manufacturer does not have written test evaluation guidelines then any change in level for a hydrostatic test within 1 hour or change in vacuum within 30 minutes for a vacuum test must be considered a failing integrity test. For hydrostatic tests, please indicate the measured depths of water in the spill bucket as the Begin / End Levels.
- If the spill bucket fails a tightness test, it must be replaced or repaired by the manufacturer, or the manufacturer's authorized representative in accordance with the manufacturer's specifications.
- Following any repair, the spill bucket must be re-tested for tightness.
- The primary and secondary walls are both considered to be tested at the same time if vacuum is used to test the interstice.

Test Method Used: ☐ Hydrostatic ☐ Vacuum ☐ Other (Specify) | Test Equipment Used (If applicable)

Identify Spill Bucket (By Tank Number, Stored Product, etc.)	Tank #	Tank #	Tank #	Tank #	Tank #
Tank Size Product					
Indicate units for all measurements					
Bucket Installation Type	☐ Direct Bury ☐ Containment sump	☐ Direct Bury ☐ Containment sump	☐ Direct Bury ☐ Containment sump	☐ Direct Bury ☐ Containment sump	☐ Direct Bury ☐ Containment sump
Bucket Manufacturer/Model					
Bucket Diameter X Depth					
Wait time between applying vacuum/water and start of test					
Primary Section Test Data					
Begin / End Test Time	/	/	/	/	/
Begin / End Reading	/	/	/	/	/
Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Secondary Interstice Test Data					
Begin / End Test Time	/	/	/	/	/
Begin / End Reading	/	/	/	/	/
Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail

Comments – *(include information on repairs made prior to testing, and recommended follow-up for failed tests)*

Date next spill bucket tightness test are due (required every 3 years)

NORTH CAROLINA DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES, DIVISION OF WASTE MANAGEMENT, UST SECTION
1637 MAIL SERVICE CENTER, RALEIGH, NC 27699-1637 PHONE (919) 707-8171 FAX (919) 715-1117 http://portal.ncdenr.org/web/wm/ 03/12

Spill Bucket Installation Testing

- Test integrity of both primary and secondary wall of spill bucket
- Test data documented on the UST-6D/23A form

UST-6D/23A

Triennial UST Spill Bucket Integrity Testing

for components installed on or after 11/1/2007

- A separate form should be used for each facility. If there are more than five (5) spill buckets at this facility, make additional copies of this page.
- The last periodic tightness test record must be maintained at the UST site or the tank owner or operators place of business and must be readily available for inspection.
- If any periodic test fails, a suspected release report must be submitted on a UST-17A form, *UST Suspected Release 24 Hour Notice*. The suspected release must be investigated, in accordance with 15A NCAC 2N .0603, and any defective equipment repaired in accordance with 15A NCAC 2N .0404/.0900. Results of the investigation must be submitted on a UST-17B form, *UST Suspected Release 7 Day Notice*.

UST FACILITY

Owner / Operator Name	Facility Name	Facility ID#:
Facility Street Address	Facility City	County

TESTING CONTRACTOR INFORMATION

Company Name	Phone	E-mail Address	
Mailing Address	City	State	Zip

I certify, under penalty of law, that the testing data provided on this form documents the UST system equipment was tested in accordance with the manufacturer's guidelines and the applicable national industry standards listed in 15A NCAC 2N .0900.

Print Name of person conducting test	Signature of person conducting test

SPILL BUCKET TESTING

- Spill buckets, installed on or after 11/1/2007, that are not monitored continuously for releases using vacuum, pressure, or hydrostatic methods must be tightness tested at installation and every three (3) years following installation.
- The primary containment and interstitial space of the spill bucket shall be tested in accordance with the manufacturers written guidelines and PEI/RP100 "Recommended Practice for Installation of Underground Liquid Storage Systems."
- If the spill bucket test results are not within the manufacturer's written guidelines or the manufacturer does not have written test evaluation guidelines then any change in level for a hydrostatic test within 1 hour or change in vacuum within 30 minutes for a vacuum test must be considered a failing integrity test. For hydrostatic tests, please indicate the measured depths of water in the spill bucket as the Begin I End Levels.
- If the spill bucket fails a tightness test, it must be replaced or repaired by the manufacturer, or the manufacturer's authorized representative in accordance with the manufacturer's specifications.
- Following any repair, the spill bucket must be re-tested for tightness.
- The primary and secondary walls are both considered to be tested at the same time if vacuum is used to test the interstice.

UST-6D/23A
"Triennial UST Spill Bucket Integrity Testing"

					ank #
Tank Size					

- If the spill bucket test results are not within the manufacturer's written guidelines or the manufacturer does not have written test evaluation guidelines then any change in level for a hydrostatic test within 1 hour or change in vacuum within 30 minutes for a vacuum test must be considered a failing integrity test. For hydrostatic tests, please indicate the measured depths of water in the spill bucket as the Begin I End Levels.
- If the spill bucket fails a tightness test, it must be replaced or repaired by the manufacturer, or the manufacturer's authorized representative in accordance with the manufacturer's specifications.
- Following any repair, the spill bucket must be re-tested for tightness.
- The primary and se

For vacuum tests, please indicate whether measurements are in inches of water or mercury (Hg)

Test Method Used
☐ Hydrostatic ☐ V

Identify Spill Bucket *(By Number, Stored Produc*					Tank #
Tank Size / Product					
Indicate units for all measurements					
Bucket Installation Type	☐ Direct Bury ☐ Containment sump	☐ Direct Bury ☐ Containment sump	☐ Direct Bury ☐ Containment sump	☐ Direct Bury ☐ Containment sump	☐ Direct Bury ☐ Containment sump
Bucket Manufacturer/Model					
Bucket Diameter **X** Depth					
Wait time between applying vacuum/water and start of test					
Primary Section Test Date					
Begin I End Test Time	i	i	i	i	i
Begin I End Reading	i	i	i	i	i
Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Secondary Interstice Test Date					
Begin I End Test Time	i	i	i	i	i
Begin I End Reading	i	i	i	i	i
Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail

Comments – *(include information on repairs made prior to testing, and recommended follow-up for failed tests)*

Date next spill bucket tightness test are due (required every 3 years)

Summary of Installation Testing Requirements

UST-6E/23D Application to Install or Replace Underground Storage Tank Systems
(TANK INSTALLATION/TRIENNIAL TESTING)

- A separate form should be used for each facility. If there are more than five (5) tanks at this facility, make additional copies of this page.
- The primary and interstitial space of the tank shall be tested in accordance with the manufacturers written guidelines and PEI/RP100 "Recommended Practice for Installation of Underground Liquid Storage Systems."
- The last periodic tightness test record must be maintained by the tank owner or operator and must be readily available for inspection.
- Tanks that are not monitored continuously for releases using vacuum, pressure, or hydrostatic methods must be tightness tested at installation, between 6 and 12 months from installation, and every three years following installation.
- The interstitial space of the tank shall be tested using a 3rd party certified interstice tightness test capable of detecting a 0.1 gph leak from the inner or outer wall of the interstice for the tank model that is installed.
- If the tank fails a tightness test, it must be replaced or repaired by the manufacturer or the manufacturer's authorized representative in accordance with the manufacturer's specifications. Following any repair, the tank must be re-tested for tightness. Also a suspected release report must be submitted on a UST-17A form, *UST Suspected Release 24 Hour Notice*. The suspected release must be investigated, in accordance with 15A NCAC 2N .0603, and any defective equipment repaired/replaced in accordance with 15A NCAC 2N .0404/.0900. Results of the investigation must be submitted on a UST-17B form, *UST Suspected Release 7 Day Notice*.

UST FACILITY

Owner / Operator Name	Facility Name	Facility ID#:
Facility Street Address	Facility City	County

TESTING CONTRACTOR INFORMATION

Company Name	Phone	E-mail address	
Mailing Address	City	State	Zip
Print Name of person conducting test	Signature of person conducting test		

Identify Tank (Tank Number, etc.)	Tank #	Tank #	Tank #	Tank #	Tank #
Tank Size / Product					
UST Type					
UST types: FRP, Steel Jacketed, Steel/CLAD,	**Indicate units for all measurements:**				
I. Pre-installation testing	**Vacuum/Pressure Gauge Range:**				
Test Date					
Interstitial space - Liquid Filled or Vacuum	**Test method:** ☐ Vacuum ☐ Liquid filled/other:_____				
Begin | End Test Time (liquid)					
Begin | End Level (liquid)					
Begin | End Test Time					
Begin | End Pressure/Vacuum					
Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Liquid visible on inside/outside of tank (if applicable)	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
II. Post-installation/triennial testing	**Tightness Test Model (if applicable):** _____				
Test Date: Begin | End					
Interstitial space - Liquid Filled/Other.	**Test method:** ☐ Vacuum ☐ Liquid filled/other:_____				
Begin | End Test Time (liquid)					
Begin | End Level (liquid)					
Begin | End Test Time					
Begin | End Pressure/Vacuum					
Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Liquid visible on inside of tank	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

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Tank Installation Testing

- Tightness of interstice prior to placement in pit
- Post-Installation tightness test
- Test data documented on the UST-6E/23D form

UST-6E/23D Application to Install or Replace Underground Storage Tank Systems

(TANK INSTALLATION/TRIENNIAL TESTING)

NCDENR

- A separate form should be used for each facility. If there are more than five (5) tanks at this facility, make additional copies of this page.
- The primary and interstitial space of the tank shall be tested in accordance with the manufacturers written guidelines and PEI/RP100 "Recommended Practice for Installation of Underground Liquid Storage Systems."
- The last periodic tightness test record must be maintained by the tank owner or operator and must be readily available for inspection.
- Tanks that are not monitored continuously for releases using vacuum, pressure, or hydrostatic methods must be tightness tested at installation, between 6 and 12 months from installation, and every three years following installation.
- The interstitial space of the tank shall be tested using a 3rd party certified interstice tightness test capable of detecting a 0.1 gph leak from the inner or outer wall of the interstice for the tank model that is installed.
- If the tank fails a tightness test, it must be replaced or repaired by the manufacturer or the manufacturer's authorized representative in accordance with the manufacturer's specifications. Following any repair, the tank must be re-tested for tightness. Also a suspected release report must be submitted on a UST-17A form, *UST Suspected Release 24 Hour Notice.* The suspected release must be investigated, in accordance with 15A NCAC 2N .0603, and any defective equipment repaired/replaced in accordance with 15A NCAC 2N .0404/.0900. Results of the investigation must be submitted on a UST-17B form, *UST Suspected Release 7 Day Notice.*

UST FACILITY

Owner / Operator Name	Facility Name	Facility ID#:
Facility Street Address	Facility City	County

TESTING CONTRACTOR INFORMATION

Company Name	Phone	E-mail address	
Mailing Address	City	State	Zip
Print Name of person conducting test	Signature of person conducting test		

Identify Tank (Tank Number, etc.)	Tank #	Tank #	Tank #	Tank #	Tank #
Tank Size					
Product					
UST Type					

UST types: FRP, Steel Jacketed, Steel/CLAD,	**Indicate units for all measurements:**
Pre-Installation testing	**Vacuum/Pressure Gauge Range:**

Begin / End Test Time (liquid)	:	:	:	:	:

NCDENR UST-6E/23D "Tank Installation/Triennial Testing"

UST Type					
UST types: FRP, Steel Jacketed, Steel/CLAD,	**Indicate units for all measurements:**				
I. Pre-installation testing	**Vacuum/Pressure Gauge Range:**				
Test Date					
Interstitial space - Liquid Filled or Vacuum	**Test method:** ☐ Vacuum ☐ Liquid filled/other:_____				
Begin ¡ End Test Time (liquid)					
Begin ¡ End Level (liquid)					
Begin ¡ End Test Time					
Begin ¡ End Pressure/Vacuum					
Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Liquid visible on inside/outside of tank (if applicable)	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
II. Post-installation/triennial testing	**Tightness Test Model (if applicable):** _____				
Test Date: Begin ¡ End					
Interstitial space - Liquid Filled/Other.	**Test method:** ☐ Vacuum ☐ Liquid filled/other:_____				
Begin ¡ End Test Time					
Begin ¡ End Level (liqui					
Begin ¡ End Test Time					
Begin ¡ End Pressure/Vacuum					
Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Liquid visible on inside of tank	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

For vacuum tests, please indicate whether measurements are in inches of water or mercury (Hg)

Summary of Installation Testing Requirements

UST-6F/23B — **Triennial UST Containment Sump / UDC Integrity Testing (for components installed on or after 11/1/2007)** — NCDENR

- A separate form should be used for each facility. If there are more than six (6) UDC / containment sumps at this facility, make additional copies of this page.
- The last periodic tightness test record must be maintained at the UST site or the tank owner or operators place of business and must be readily available for inspection.
- If any periodic test fails, a suspected release report must be submitted on a UST-17A form, *UST Suspected Release 24 Hour Notice*. The suspected release must be investigated, in accordance with 15A NCAC 2N .0503, and any defective equipment repaired in accordance with 15A NCAC 2N .0404/.0900. Results of the investigation must be submitted on a UST-17B form, *UST Suspected Release 7 Day Notice*.

UST FACILITY

Owner / Operator Name	Facility Name	Facility ID#
Facility Street Address	Facility City	County

TESTING CONTRACTOR INFORMATION

Company Name	Phone	E-mail Address	
Mailing Address	City	State	Zip

I certify, under penalty of law, that the testing data provided on this form documents the UST system equipment was tested in accordance with the manufacturer's guidelines and the applicable national industry standards listed in 15A NCAC 2N .0900.

Print Name of person conducting test | Signature of person conducting test

UNDER DISPENSER CONTAINMENT (UDC) / CONTAINMENT SUMP TESTING

- Containment sumps that are not monitored continuously for releases using vacuum, pressure, or hydrostatic interstitial monitoring methods shall be tightness tested at installation and every three (3) years following installation in accordance with the manufacturer's written guidelines and PEI/RP100, "Recommended Practice for Installation of Underground Liquid Storage Systems."
- If the containment sump or UDC test results are not within the manufacturer's written guidelines or the manufacturer does not have written test evaluation guidelines then any change in level for a hydrostatic test within 4 hours or change in vacuum within 1 hour for a vacuum test must be considered a failing integrity test. For hydrostatic tests, please indicate the measured depths of water in the sump as the Begin / End Levels.
- If a UDC / containment sump fails a periodic tightness test, the sump must be replaced or repaired by the manufacturer, or the manufacturer's authorized representative in accordance with the manufacturer's specifications.
- Following replacement or repair, the UDC / containment sump must be re-tested for tightness.

Test Method Used: ☐ Hydrostatic ☐ Vacuum ☐ Other (Specify) | Test Equipment Used (If applicable)

Identify UDC/sump (By *Dispenser No. or Tank Number, Tank Size, Stored Product*)	☐Dispenser # ☐Tank #	☐Dispenser # ☐Tank #	☐Dispenser # ☐Tank #	☐Dispenser # ☐Tank #	☐Dispenser # ☐Tank #	☐Dispenser # ☐Tank #
Transition sumps should be listed above as "TS-XX" (with XX= sump ID#)						
Tank Size Product						
Sump Manufacturer						
Sump Material	☐ FRP ☐ Plastic	☐ FRP ☐ Plastic	☐ FRP ☐ Plastic	☐ FRP ☐ Plastic	☐ FRP ☐ Plastic	☐ FRP ☐ Plastic
Sump Installation Type	☐ Single Wall ☐ Double Wall	☐ Single Wall ☐ Double Wall	☐ Single Wall ☐ Double Wall	☐ Single Wall ☐ Double Wall	☐ Single Wall ☐ Double Wall	☐ Single Wall ☐ Double Wall
Indicate units for all measurements						
Sump Diameter or Length X Width						
Sump Depth						
Wait time between applying vacuum/water and start of test						
Test Date						
Begin / End Test Time	/	/	/	/	/	/
Begin / End Level	/	/	/	/	/	/
Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail

Comments – *(include information on repairs made prior to testing, and recommended follow-up for failed tests)*

Date next Containment Sump/UDC integrity test are due (required every 3 years)

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UDC/Containment Sump Testing

- Test integrity of containment sump
- When using a hydrostatic test, water must cover all penetrations
- Test data documented on the UST-6F/23B form

UST-6F/23B Triennial UST Containment Sump / UDC Integrity Testing (for components installed on or after 11/1/2007)

- A separate form should be used for each facility. If there are more than six (6) UDC / containment sumps at this facility, make additional copies of this page.
- The last periodic tightness test record must be maintained at the UST site or the tank owner or operators place of business and must be readily available for inspection.
- If any periodic test fails, a suspected release report must be submitted on a UST-17A form, *UST Suspected Release 24 Hour Notice*. The suspected release must be investigated, in accordance with 15A NCAC 2N .0603, and any defective equipment repaired in accordance with 15A NCAC 2N .0404/.0900. Results of the investigation must be submitted on a UST-17B form, *UST Suspected Release 7 Day Notice*.

UST FACILITY

Owner / Operator Name	Facility Name	Facility ID#:
Facility Street Address	Facility City	County

TESTING CONTRACTOR INFORMATION

Company Name	Phone	E-mail Address	
Mailing Address	City	State	Zip

I certify, under penalty of law, that the testing data provided on this form documents the UST system equipment was tested in accordance with the manufacturer's guidelines and the applicable national industry standards listed in 15A NCAC 2N .0900.

Print Name of person conducting test	Signature of person conducting test	

UNDER DISPENSER CONTAINMENT (UDC) / CONTAINMENT SUMP TESTING

- Containment sumps that are not monitored continuously for releases using vacuum, pressure, or hydrostatic interstitial monitoring methods shall be tightness tested at installation and every three (3) years following installation in accordance with the manufacturer's written guidelines and PEI/RP100, "Recommended Practice for Installation of Underground Liquid Storage Systems."
- If the containment sump or UDC test results are not within the manufacturer's written guidelines or the manufacturer does not have written test evaluation guidelines then any change in level for a hydrostatic test within 4 hours or change in vacuum within 1 hour for a vacuum test must be considered a failing integrity test. For hydrostatic tests, please indicate the measured depths of water in the sump as the Begin ¡ End Levels.
- If a UDC / containment sump fails a periodic tightness test, the sump must be replaced or repaired by the manufacturer, or the manufacturer's authorized representative in accordance with the manufacturer's specifications.
- Following replacement or repair, the UDC / containment sump must be re-tested for tightness.

Test Method Used	Test Equipment Used (If applicable)

UST-6F/23B
"Triennial UST Containment Sump/UDC Integrity Testing"

...spenser # ...Tank #						
Tank Size, Stored Product)						

evaluation guidelines then any change in level for a hydrostatic test within 4 hours of change in vacuum within 1 hour for a vacuum test must be considered a failing integrity test. For hydrostatic tests, please indicate the measured depths of water in the sump as the Begin ¡ End Levels.

- If a UDC / containment sump fails a periodic tightness test, the sump must be replaced or repaired by the manufacturer, or the manufacturer's authorized representative in accordance with the manufacturer's specifications.
- Following replacement or repair, the UDC / containment sump must be re-tested for tightness.

Test Method Used ☐ Hydrostatic ☐ Vacuum ☐ Other *(Specify)*	Test Equipment Used (If applicable)

Identify UDC/sump *(By Dispenser No. or Tank Number, Tank Size, Stored Product)*	☐**Dispenser #** ☐**Tank #**	☐**Dispenser #** ☐**Tank #**	☐**Dispenser #** ☐**Tank #**	☐**Dispenser #** ☐**Tank #**	☐**Dispenser #** ☐**Tank #**	☐**Dispenser #** ☐**Tank #**
Transition sumps should be listed above as "TS-XX" (with XX= sump ID#)						
Tank Size Product						
Sump Manufacturer						
Sump Material	☐ FRP ☐ Plastic	☐ FRP ☐ Plastic	☐ FRP ☐ Plastic	☐ FRP ☐ Plastic	☐ FRP ☐ Plastic	☐ FRP ☐ Plastic
Sump Installation Type	☐ Single Wall ☐ Double Wall	☐ Single Wall ☐ Double Wall	☐ Single Wall ☐ Double Wall	☐ Single Wall ☐ Double Wall	☐ Single Wall ☐ Double Wall	☐ Single Wall ☐ Double Wall
Indicate units for all measurements						
Sump Diameter or Length X Width						
Sump Depth						
Wait time between applying vacuum/water and start of test						
Test Date						
Begin ¡ End Test Time	¡	¡	¡	¡	¡	¡
Begin ¡ End Level	¡	¡	¡	¡	¡	¡
Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail

Comments – *(include information on repairs made prior to testing, and recommended follow-up for failed tests)*

Date next Containment Sump/UDC integrity test are due (required every 3 years)

Summary of Installation Testing Requirements

UST-6G/23C — **Triennial UST Piping Integrity Testing**
for components installed on or after 11/1/2007

- A separate form should be used for each facility. If there are more than five (5) piping systems at this facility, make additional copies of this page.
- The primary containment and interstitial space of the piping shall be tested in accordance with the manufacturers written guidelines and PE/RP100 "Recommended Practice for Installation of Underground Liquid Storage Systems."
- The last periodic tightness test record must be maintained by the tank owner/operators and must be readily available for inspection.
- If any periodic test fails, a suspected release report must be submitted on a UST-17A form, *UST Suspected Release 24 Hour Notice*, and investigated in accordance with 15A NCAC 2N .0603, and any defective equipment repaired in accordance with 15A NCAC 2N .0404/.0900. Results of the investigation must be submitted on a UST-17B form, *UST Suspected Release 7 Day Notice*.
- Piping that is not monitored continuously for releases using vacuum, pressure, or hydrostatic methods **must be tightness tested at installation and every three years following installation.**
- If the piping fails a tightness test, it must be replaced or repaired by the manufacturer or the manufacturer's authorized representative in accordance with the manufacturer's specifications. Following any repair, the piping must be re-tested for tightness.

UST FACILITY

Owner/Operator Name	Facility Name	Facility ID#
Facility Street Address	Facility City	County

TESTING CONTRACTOR INFORMATION

Company Name	Phone	E-mail Address	
Mailing Address	City	State	Zip

Print Name of person conducting test — Signature of person conducting test

Identify piping system (By Tank Number, Stored Product, etc.)	Tank #	Tank #	Tank #	Tank #	Tank #
Tank Size Product					
Piping Type(DW FRP, DW Flex, Other)					
Piping Configuration	☐Pressurized ☐Suction	☐Pressurized ☐Suction	☐Pressurized ☐Suction	☐Pressurized ☐Suction	☐Pressurized ☐Suction
Piping Manufacturer					
Pipe Model (Part No.)					
I. Installation	**Indicate units for all measurements**				
Test Date					
A. Primary pipe & fittings soap test					
Begin / End test time					
Begin / End air pressure					
Primary Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail
B. Secondary interstice & fittings soap test.					
Begin / End test time					
Begin / End air pressure					
Secondary Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail
II. Post-Installation / Triennial Testing: (Attach test data sheets to form)					
A. Primary Pipe Test (Note: Must be a third-party certified tightness test)					
Line tightness test model name					
Line tightness test date					
Line Tightness Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail
ALLD Test Results	☐ Pass ☐ Fail ☐ N/A (Suction pipe)	☐ Pass ☐ Fail ☐ N/A (Suction pipe)	☐ Pass ☐ Fail ☐ N/A (Suction pipe)	☐ Pass ☐ Fail ☐ N/A (Suction pipe)	☐ Pass ☐ Fail ☐ N/A (Suction pipe)
B. Secondary Interstice Test					
Test Method Used	☐pressure☐vacuum	☐pressure☐vacuum	☐pressure☐vacuum	☐pressure☐vacuum	☐pressure☐vacuum
Test Date					
Begin / End test time					
Vacuum/pressure reading at begin / end of test					
Secondary Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail

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Piping Installation Testing

- Before backfilling, test piping primary and secondary
- Post-Installation line tightness testing of the primary and interstitial spaces
- Test data documented on the UST-6G/23C form

UST-6G/23C

Triennial UST Piping Integrity Testing
for components installed on or after 11/1/2007

- A separate form should be used for each facility. If there are more than five (5) piping systems at this facility, make additional copies of this page.
- The primary containment and interstitial space of the piping shall be tested in accordance with the manufacturers written guidelines and PEI/RP100 "Recommended Practice for Installation of Underground Liquid Storage Systems."
- The last periodic tightness test record must be maintained by the tank owner/operators and must be readily available for inspection.
- If any periodic test fails, a suspected release report must be submitted on a UST-17A form, *UST Suspected Release 24 Hour Notice*, and investigated in accordance with 15A NCAC 2N .0603, and any defective equipment repaired in accordance with 15A NCAC 2N .0404/.0900. Results of the investigation must be submitted on a UST-17B form, *UST Suspected Release 7 Day Notice.*
- Piping that is not monitored continuously for releases using vacuum, pressure, or hydrostatic methods **must be tightness tested at installation and every three years following installation.**
- If the piping fails a tightness test, it must be replaced or repaired by the manufacturer or the manufacturer's authorized representative in accordance with the manufacturer's specifications. Following any repair, the piping must be re-tested for tightness.

UST FACILITY

Owner/Operator Name	Facility Name	Facility ID#:
Facility Street Address	Facility City	County

TESTING CONTRACTOR INFORMATION

Company Name	Phone	E-mail Address	
Mailing Address	City	State	Zip

Print Name of person conducting test	Signature of person conducting test

Identify piping system (By Tank Number, Stored Product, etc.)	**Tank #**	**Tank #**	**Tank #**	**Tank #**	**Tank #**
Tank Size Product					
Piping Type(DW FRP, DW Flex, Other)					
Piping Configuration	☐Pressurized ☐Suction	☐Pressurized ☐Suction	☐Pressurized ☐Suction	☐Pressurized ☐Suction	☐Pressurized ☐Suction
Piping Manufacturer					

UST-6G/23C
"Triennial UST Piping Integrity Testing"

A. Primary pipe & fittings soap test

Piping Type(DW FRP, DW Flex, Other)					
Piping Configuration	☐Pressurized ☐Suction	☐Pressurized ☐Suction	☐Pressurized ☐Suction	☐Pressurized ☐Suction	☐Pressurized ☐Suction
Piping Manufacturer					
Pipe Model (Part No.)					
I. Installation	**Indicate units for all measurements**				
Test Date					
A. Primary pipe & fittings soap test					
Begin ¡ End test time					
Begin ¡ End air pressure					
Primary Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail
B. Secondary interstice & fittings soap test.					
Begin ¡ End test time					
Begin ¡ End air pressure					
Secondary Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail
II. Post-Installation / Triennial Testing: (Attach test data sheets to form)					
A. Primary Pipe Test (Note: Must be a third-party certified tightness test)					
Line tightness test model name					
Line tightness test date					
Line Tightness Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail
ALLD Test Results	☐ Pass ☐ Fail ☐ N/A (Suction pipe)	☐ Pass ☐ Fail ☐ N/A (Suction pipe)	☐ Pass ☐ Fail ☐ N/A (Suction pipe)	☐ Pass ☐ Fail ☐ N/A (Suction pipe)	☐ Pass ☐ Fail ☐ N/A (Suction pipe)
B. Secondary Interstice Test					
Test Method Used	☐pressure☐vacuum	☐pressure☐vacuum	☐pressure☐vacuum	☐pressure☐vacuum	☐pressure☐vacuum
Test Date					
Begin ¡ End test time					
Vacuum/pressure reading at begin ¡ end of test					
Secondary Test Result	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail

Line Tightness Tests

- Must be conducted at 1.5 times operating pressure (minimum 50 psi)
- Test data must be included with report that is attached to UST-6G

Remember that line tightness tests are required on all regulated piping, including remote fills, tank manifolds, European suction, return lines, etc. that are monitored using sump sensors

Leak Detection Console Printouts

Sensor Setup

- A copy of the sensor setup from the leak detection monitoring console must be included

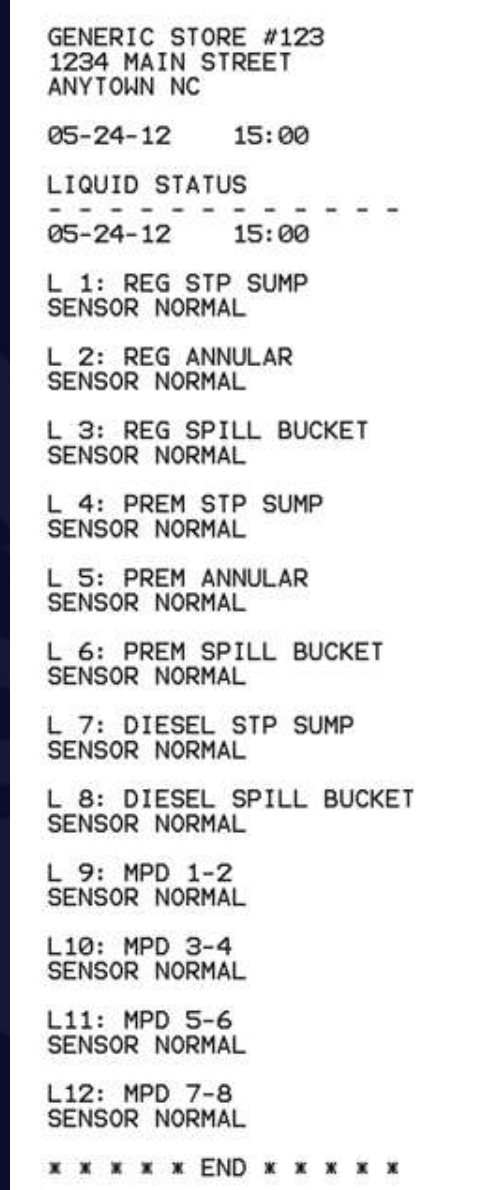
Each sensor should be named uniquely and with clarity as to what it is monitoring

```
GENERIC STORE #123
1234 MAIN STREET
ANYTOWN NC

05-24-12    15:00

LIQUID SENSOR SETUP
- - - - - - - - - - - -
05-24-12    15:00

L 1: REG STP SUMP
TRI-STATE (SINGLE FLOAT)
CATEGORY : STP SUMP

L 2: REG ANNULAR
TRI-STATE (SINGLE FLOAT)
CATEGORY : ANNULAR SPACE

L 3: REG SPILL BUCKET
NORMALLY CLOSED
CATEGORY : OTHER SENSOR

L 4: PREM STP SUMP
TRI-STATE (SINGLE FLOAT)
CATEGORY : STP SUMP

L 5: PREM ANNULAR
TRI-STATE (SINGLE FLOAT)
CATEGORY : ANNULAR SPACE

L 6: PREM SPILL BUCKET
NORMALLY CLOSED
CATEGORY : OTHER SENSOR

L 7: DIESEL STP SUMP
TRI-STATE (SINGLE FLOAT)
CATEGORY : STP SUMP

L 8: DIESEL SPILL BUCKET
NORMALLY CLOSED
CATEGORY : OTHER SENSOR

L 9: MPD 1-2
TRI-STATE (SINGLE FLOAT)
CATEGORY : DISPENSER PAN

L10: MPD 3-4
TRI-STATE (SINGLE FLOAT)
CATEGORY : DISPENSER PAN

L11: MPD 5-6
TRI-STATE (SINGLE FLOAT)
CATEGORY : DISPENSER PAN

L12: MPD 7-8
TRI-STATE (SINGLE FLOAT)
CATEGORY : DISPENSER PAN

* * * * * END * * * * *
```

Leak Detection Console Printouts

Sensor Status

- A copy of the sensor status from the leak detection monitoring console must be included



```
GENERIC STORE #123
1234 MAIN STREET
ANYTOWN NC

05-24-12    15:00

LIQUID STATUS
- - - - - - - - - - - - -
05-24-12    15:00

L 1: REG STP SUMP
SENSOR NORMAL

L 2: REG ANNULAR
SENSOR NORMAL

L 3: REG SPILL BUCKET
SENSOR NORMAL

L 4: PREM STP SUMP
SENSOR NORMAL

L 5: PREM ANNULAR
SENSOR NORMAL

L 6: PREM SPILL BUCKET
SENSOR NORMAL

L 7: DIESEL STP SUMP
SENSOR NORMAL

L 8: DIESEL SPILL BUCKET
SENSOR NORMAL

L 9: MPD 1-2
SENSOR NORMAL

L10: MPD 3-4
SENSOR NORMAL

L11: MPD 5-6
SENSOR NORMAL

L12: MPD 7-8
SENSOR NORMAL

* * * * * END * * * * *
```

GENERIC STORE #123
1234 MAIN STREET
ANYTOWN NC

05-24-12 15:00

LIQUID STATUS
- - - - - - - - - - - - -
05-24-12 15:00

L 1: REG STP SUMP
SENSOR NORMAL

L 2: REG ANNULAR
SENSOR NORMAL

L 3: REG SPILL BUCKET
SENSOR NORMAL

L 4: PREM STP SUMP
SENSOR NORMAL

L 5: PREM ANNULAR
SENSOR NORMAL

L 6: PREM SPILL BUCKET
SENSOR NORMAL

L 7: DIESEL STP SUMP
SENSOR NORMAL

L 8: DIESEL SPILL BUCKET
SENSOR NORMAL

L 9: MPD 1-2
SENSOR NORMAL

L10: MPD 3-4
SENSOR NORMAL

L11: MPD 5-6
SENSOR NORMAL

L12: MPD 7-8
SENSOR NORMAL

* * * * * END * * * * *

GENERIC STORE #123
1234 MAIN STREET
ANYTOWN NC

05-24-12 15:21

LIQUID STATUS
- - - - - - - - - - - - -
05-24-12 15:21

L 1: REG STP SUMP
FUEL ALARM

L 2: REG ANNULAR
FUEL ALARM

L 3: REG SPILL BUCKET
FUEL ALARM

L 4: PREM STP SUMP
FUEL ALARM

L 5: PREM ANNULAR
FUEL ALARM

L 6: PREM SPILL BUCKET
FUEL ALARM

L 7: DIESEL STP SUMP
FUEL ALARM

L 8: DIESEL SPILL BUCKET
FUEL ALARM

L 9: MPD 1-2
FUEL ALARM

L10: MPD 3-4
FUEL ALARM

L11: MPD 5-6
FUEL ALARM

L12: MPD 7-8
FUEL ALARM

* * * * * END * * * * *

GENERIC STORE #123
1234 MAIN STREET
ANYTOWN NC

05-24-12 15:46

LIQUID STATUS
- - - - - - - - - - - - -
05-24-12 15:46

L 1: REG STP SUMP
SENSOR NORMAL

L 2: REG ANNULAR
SENSOR OUT ALARM

L 3: REG SPILL BUCKET
SENSOR NORMAL

L 4: PREM STP SUMP
SENSOR NORMAL

L 5: PREM ANNULAR
SENSOR OUT ALARM

L 6: PREM SPILL BUCKET
SENSOR NORMAL

L 7: DIESEL STP SUMP
SENSOR NORMAL

L 8: DIESEL SPILL BUCKET
SENSOR NORMAL

L 9: MPD 1-2
SENSOR NORMAL

L10: MPD 3-4
SENSOR NORMAL

L11: MPD 5-6
SENSOR NORMAL

L12: MPD 7-8
SENSOR NORMAL

* * * * * END * * * * *

GENERIC STORE #123
1234 MAIN STREET
ANYTOWN NC

05-24-12 16:07

LIQUID STATUS
- - - - - - - - - - - - -
05-24-12 16:07

L 1: REG STP SUMP
SENSOR NORMAL

L 2: REG ANNULAR
SENSOR NORMAL

L 3: REG SPILL BUCKET
SENSOR NORMAL

L 4: PREM STP SUMP
SENSOR NORMAL

L 5: PREM ANNULAR
SENSOR NORMAL

L 6: PREM SPILL BUCKET
SENSOR NORMAL

L 7: DIESEL STP SUMP
SENSOR NORMAL

L 8: DIESEL SPILL BUCKET
SENSOR NORMAL

L 9: MPD 1-2
SENSOR NORMAL

L10: MPD 3-4
SENSOR NORMAL

L11: MPD 5-6
SENSOR NORMAL

L12: MPD 7-8
SENSOR NORMAL

* * * * * END * * * * *

NCDENR

Example of a Sensor Functionality Test

GENERIC STORE #123
1234 MAIN STREET
ANYTOWN NC

05-24-12 15:00

LIQUID STATUS
- - - - - - - - - - - -
05-24-12 15:00

L 1: REG STP SUMP
SENSOR NORMAL

L 2: REG ANNULAR
SENSOR NORMAL

L 3: REG SPILL BUCKET
SENSOR NORMAL

L 4: PREM STP SUMP
SENSOR NORMAL

L 5: PREM ANNULAR
SENSOR NORMAL

L 6: PREM SPILL BUCKET
SENSOR NORMAL

L 7: DIESEL STP SUMP
SENSOR NORMAL

L 8: DIESEL SPILL BUCKET
SENSOR NORMAL

L 9: MPD 1-2
SENSOR NORMAL

L10: MPD 3-4
SENSOR NORMAL

L11: MPD 5-6
SENSOR NORMAL

L12: MPD 7-8
SENSOR NORMAL

* * * * * END * * * * *

GENERIC STORE #123
1234 MAIN STREET
ANYTOWN NC

05-24-12 15:21

LIQUID STATUS
- - - - - - - - - - - -
05-24-12 15:21

L 1: REG STP SUMP
FUEL ALARM

L 2: REG ANNULAR
FUEL ALARM

L 3: REG SPILL BUCKET
FUEL ALARM

L 4: PREM STP SUMP
FUEL ALARM

L 5: PREM ANNULAR
FUEL ALARM

L 6: PREM SPILL BUCKET
FUEL ALARM

L 7: DIESEL STP SUMP
FUEL ALARM

L 8: DIESEL SPILL BUCKET
FUEL ALARM

L 9: MPD 1-2
FUEL ALARM

L10: MPD 3-4
FUEL ALARM

L11: MPD 5-6
FUEL ALARM

L12: MPD 7-8
FUEL ALARM

* * * * * END * * * * *

GENERIC STORE #123
1234 MAIN STREET
ANYTOWN NC

05-24-12 15:46

LIQUID STATUS
- - - - - - - - - - - -
05-24-12 15:46

L 1: REG STP SUMP
SENSOR NORMAL

L 2: REG ANNULAR
SENSOR OUT ALARM

L 3: REG SPILL BUCKET
SENSOR NORMAL

L 4: PREM STP SUMP
SENSOR NORMAL

L 5: PREM ANNULAR
SENSOR OUT ALARM

L 6: PREM SPILL BUCKET
SENSOR NORMAL

L 7: DIESEL STP SUMP
SENSOR NORMAL

L 8: DIESEL SPILL BUCKET
SENSOR NORMAL

L 9: MPD 1-2
SENSOR NORMAL

L10: MPD 3-4
SENSOR NORMAL

L11: MPD 5-6
SENSOR NORMAL

L12: MPD 7-8
SENSOR NORMAL

* * * * * END * * * * *

GENERIC STORE #123
1234 MAIN STREET
ANYTOWN NC

05-24-12 16:07

LIQUID STATUS
- - - - - - - - - - - -
05-24-12 16:07

L 1: REG STP SUMP
SENSOR NORMAL

L 2: REG ANNULAR
SENSOR NORMAL

L 3: REG SPILL BUCKET
SENSOR NORMAL

L 4: PREM STP SUMP
SENSOR NORMAL

L 5: PREM ANNULAR
SENSOR NORMAL

L 6: PREM SPILL BUCKET
SENSOR NORMAL

L 7: DIESEL STP SUMP
SENSOR NORMAL

L 8: DIESEL SPILL BUCKET
SENSOR NORMAL

L 9: MPD 1-2
SENSOR NORMAL

L10: MPD 3-4
SENSOR NORMAL

L11: MPD 5-6
SENSOR NORMAL

L12: MPD 7-8
SENSOR NORMAL

* * * * * END * * * * *

ALL FUNCTIONS NORMAL

NCDENR

Example of a Sensor Functionality Test

GENERIC STORE #123
1234 MAIN STREET
ANYTOWN NC

05-24-12 15:00

LIQUID STATUS
- - - - - - - - - - - - -
05-24-12 15:00

L 1: REG STP SUMP
SENSOR NORMAL

L 2: REG ANNULAR
SENSOR NORMAL

L 3: REG SPILL BUCKET
SENSOR NORMAL

L 4: PREM STP SUMP
SENSOR NORMAL

L 5: PREM ANNULAR
SENSOR NORMAL

L 6: PREM SPILL BUCKET
SENSOR NORMAL

L 7: DIESEL STP SUMP
SENSOR NORMAL

L 8: DIESEL SPILL BUCKET
SENSOR NORMAL

L 9: MPD 1-2
SENSOR NORMAL

L10: MPD 3-4
SENSOR NORMAL

L11: MPD 5-6
SENSOR NORMAL

L12: MPD 7-8
SENSOR NORMAL

* * * * * END * * * * *

GENERIC STORE #123
1234 MAIN STREET
ANYTOWN NC

05-24-12 15:21

LIQUID STATUS
- - - - - - - - - - - - -
05-24-12 15:21

L 1: REG STP SUMP
FUEL ALARM

L 2: REG ANNULAR
FUEL ALARM

L 3: REG SPILL BUCKET
FUEL ALARM

L 4: PREM STP SUMP
FUEL ALARM

L 5: PREM ANNULAR
FUEL ALARM

L 6: PREM SPILL BUCKET
FUEL ALARM

L 7: DIESEL STP SUMP
FUEL ALARM

L 8: DIESEL SPILL BUCKET
FUEL ALARM

L 9: MPD 1-2
FUEL ALARM

L10: MPD 3-4
FUEL ALARM

L11: MPD 5-6
FUEL ALARM

L12: MPD 7-8
FUEL ALARM

* * * * * END * * * * *

GENERIC STORE #123
1234 MAIN STREET
ANYTOWN NC

05-24-12 15:46

LIQUID STATUS
- - - - - - - - - - - - -
05-24-12 15:46

L 1: REG STP SUMP
SENSOR NORMAL

L 2: REG ANNULAR
SENSOR OUT ALARM

L 3: REG SPILL BUCKET
SENSOR NORMAL

L 4: PREM STP SUMP
SENSOR NORMAL

L 5: PREM ANNULAR
SENSOR OUT ALARM

L 6: PREM SPILL BUCKET
SENSOR NORMAL

L 7: DIESEL STP SUMP
SENSOR NORMAL

L 8: DIESEL SPILL BUCKET
SENSOR NORMAL

L 9: MPD 1-2
SENSOR NORMAL

L10: MPD 3-4
SENSOR NORMAL

L11: MPD 5-6
SENSOR NORMAL

L12: MPD 7-8
SENSOR NORMAL

* * * * * END * * * * *

GENERIC STORE #123
1234 MAIN STREET
ANYTOWN NC

05-24-12 16:07

LIQUID STATUS
- - - - - - - - - - - - -
05-24-12 16:07

L 1: REG STP SUMP
SENSOR NORMAL

L 2: REG ANNULAR
SENSOR NORMAL

L 3: REG SPILL BUCKET
SENSOR NORMAL

L 4: PREM STP SUMP
SENSOR NORMAL

L 5: PREM ANNULAR
SENSOR NORMAL

L 6: PREM SPILL BUCKET
SENSOR NORMAL

L 7: DIESEL STP SUMP
SENSOR NORMAL

L 8: DIESEL SPILL BUCKET
SENSOR NORMAL

L 9: MPD 1-2
SENSOR NORMAL

L10: MPD 3-4
SENSOR NORMAL

L11: MPD 5-6
SENSOR NORMAL

L12: MPD 7-8
SENSOR NORMAL

* * * * * END * * * * *

SENSOR FUNCTIONALITY TEST

Example of a Sensor Functionality Test

GENERIC STORE #123
1234 MAIN STREET
ANYTOWN NC

05-24-12 15:00

LIQUID STATUS
- - - - - - - - - - - -
05-24-12 15:00

L 1: REG STP SUMP
SENSOR NORMAL

L 2: REG ANNULAR
SENSOR NORMAL

L 3: REG SPILL BUCKET
SENSOR NORMAL

L 4: PREM STP SUMP
SENSOR NORMAL

L 5: PREM ANNULAR
SENSOR NORMAL

L 6: PREM SPILL BUCKET
SENSOR NORMAL

L 7: DIESEL STP SUMP
SENSOR NORMAL

L 8: DIESEL SPILL BUCKET
SENSOR NORMAL

L 9: MPD 1-2
SENSOR NORMAL

L10: MPD 3-4
SENSOR NORMAL

L11: MPD 5-6
SENSOR NORMAL

L12: MPD 7-8
SENSOR NORMAL

* * * * * END * * * * *

GENERIC STORE #123
1234 MAIN STREET
ANYTOWN NC

05-24-12 15:21

LIQUID STATUS
- - - - - - - - - - - -
05-24-12 15:21

L 1: REG STP SUMP
FUEL ALARM

L 2: REG ANNULAR
FUEL ALARM

L 3: REG SPILL BUCKET
FUEL ALARM

L 4: PREM STP SUMP
FUEL ALARM

L 5: PREM ANNULAR
FUEL ALARM

L 6: PREM SPILL BUCKET
FUEL ALARM

L 7: DIESEL STP SUMP
FUEL ALARM

L 8: DIESEL SPILL BUCKET
FUEL ALARM

L 9: MPD 1-2
FUEL ALARM

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FUEL ALARM

L11: MPD 5-6
FUEL ALARM

L12: MPD 7-8
FUEL ALARM

* * * * * END * * * * *

GENERIC STORE #123
1234 MAIN STREET
ANYTOWN NC

05-24-12 15:46

LIQUID STATUS
- - - - - - - - - - - -
05-24-12 15:46

L 1: REG STP SUMP
SENSOR NORMAL

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SENSOR NORMAL

L 5: PREM ANNULAR
SENSOR OUT ALARM

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SENSOR NORMAL

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SENSOR NORMAL

L 8: DIESEL SPILL BUCKET
SENSOR NORMAL

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SENSOR NORMAL

L10: MPD 3-4
SENSOR NORMAL

L11: MPD 5-6
SENSOR NORMAL

L12: MPD 7-8
SENSOR NORMAL

* * * * * END * * * * *

GENERIC STORE #123
1234 MAIN STREET
ANYTOWN NC

05-24-12 16:07

LIQUID STATUS
- - - - - - - - - - - -
05-24-12 16:07

L 1: REG STP SUMP
SENSOR NORMAL

L 2: REG ANNULAR
SENSOR NORMAL

L 3: REG SPILL BUCKET
SENSOR NORMAL

L 4: PREM STP SUMP
SENSOR NORMAL

L 5: PREM ANNULAR
SENSOR NORMAL

L 6: PREM SPILL BUCKET
SENSOR NORMAL

L 7: DIESEL STP SUMP
SENSOR NORMAL

L 8: DIESEL SPILL BUCKET
SENSOR NORMAL

L 9: MPD 1-2
SENSOR NORMAL

L10: MPD 3-4
SENSOR NORMAL

L11: MPD 5-6
SENSOR NORMAL

L12: MPD 7-8
SENSOR NORMAL

* * * * * END * * * * *

ALL FUNCTIONS NORMAL

NCDENR

Example of a Sensor Functionality Test

UST-6B Review

Two simultaneous but separate reviews occur:

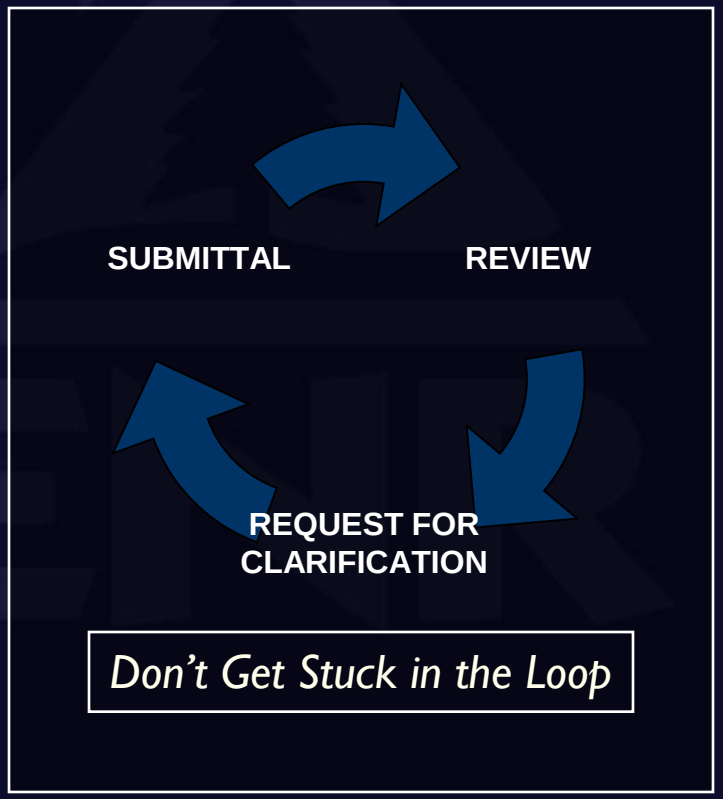
1) Technical review
2) Registration, permitting and financial responsibility review

UST-6B submittals typically reviewed within 1-2 weeks after receipt

UST-6B Review

If UST-6B submittal is not satisfactory:

- State will request additional information to correct minor deficiencies
- State may return application if severely deficient
- Deficient applications will result in delayed approval



UST-6B Review

<u>If UST-6B submittal is satisfactory:</u>

- State issues an approval confirming the satisfactory completion of the UST-6B
- Refers the UST-6B submittal to the registration and permitting group with the recommendation for issuance of an annual UST permit

In addition to the technical review, the ownership, financial responsibility and payment of fees must be satisfactory

North Carolina Department of Environment and Natural Resources
Underground Storage Tank Section

Questions?

NCDENR

North Carolina Department of Environment and Natural Resources
Underground Storage Tank Section

Thank you for attending!

Division of Waste Management - UST Section
1637 Mail Service Center, Raleigh, NC 27699
phone: (919) 707-8171 fax: (919) 715-1117
http://www.wastenotnc.org

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