

## PERIODIC OPERATION AND MAINTENANCE WALKTHROUGH INSPECTIONS

**Instructions: This is a recommended form to be completed in compliance with Hawaii Administrative Rules (HAR), Chapter 11-280.1-36, for Multi - Tank Systems.**

**Part 1: The periodic operation and maintenance walkthrough inspections for Spill Prevention Equipment and Release Detection Equipment are conducted every 31 days. HAR 11-280.1-36(a)(1)**

A. Spill Prevention Equipment – HAR 11-280.1-36(a)(1)(A)	1	2	3	4	5	Remarks
<ul style="list-style-type: none"> <li>○ Visually check for damage</li> <li>○ Remove liquid or debris</li> <li>○ Check for and remove obstructions in the fill pipe</li> <li>○ For double-walled (DW) spill prevention equipment with interstitial monitoring, check for a leak in the interstitial area</li> </ul>						
B. Release Detection Equipment – HAR 11-280.1-36(a)(1)(B)	1	2	3	4	5	Remarks
<ul style="list-style-type: none"> <li>○ Check to make sure the release detection equipment is operating with no alarms or other unusual operating conditions present</li> <li>○ Records of release detection testing are reviewed and current</li> </ul>						

Note any deficiencies observed, as well as any corrective actions taken:

**Part 2: The periodic operation and maintenance walkthrough inspections for Containment Sumps used for interstitial monitoring of piping and handheld release detection equipment are conducted every 365 days. HAR 11-280.1-36(a)(2)**

A. Containment Sumps - HAR 11-280.1-36(a)(2)	1	2	3	4	5	Remarks
<ul style="list-style-type: none"> <li>○ Visually check for damage, leaks to the containment area, or releases to the environment</li> <li>○ Remove liquid (in contained sumps) or debris</li> <li>○ For DW sumps with interstitial monitoring, check for a leak in the interstitial area</li> </ul>						
B. Hand held release detection equipment – HAR 11-280.1-36(a)(2)(B)	1	2	3	4	5	Remarks
<ul style="list-style-type: none"> <li>○ Check devices such as tank gauge sticks or groundwater bailers for operability and serviceability</li> <li>○ Dates of annual (365 days) inspections: _____, _____, and _____</li> </ul>						

Note any deficiencies observed, as well as any corrective actions taken:

Date:	_____
Name of person conducting inspection:	_____
Signature of person conducting inspection:	_____