

# 2006-2007 SELF-AUDIT FORM FOR ARKANSAS UNDERGROUND STORAGE TANKS

(If you need additional forms, please **Do Not Copy**. Instead, contact the RST Division.)

**Do Not Staple**

63000083

FACILITY ID #

Return original forms to ADEQ, RST Division,  
P. O. Box 8913, Little Rock, AR 72219  
**No later than September 30, 2006**

**Owner Name (print)**  
 N O R T H E R N O I L C O  
**Address**  
 P O B O X 5 6  
**City** B E N T O N      **State** A R      **Zip Code** 7 2 0 1 8 -

**Facility Name (print)**  
 C A S O N S G R O  
**Address**  
 3 4 1 0 7 K A N I S R O A D  
**City** P A R O N      **State** A R      **Zip Code** 7 2 1 2 2 -  
**Date of Evaluation**  
 0 9 / 1 9 / 0 6

Please note that completing this checklist does not guarantee that you are in compliance with UST requirements. Only an official site inspection can confirm your compliance status. Check with ADEQ if you have questions concerning this form. **YOU MUST COMPLETE A NEW FORM ANNUALLY.**

Your USTs have **RELEASE DETECTION?**

Only mark answers in columns for tanks you actually have. 1 tank per column.

	UST #1	UST #2	UST #3	UST #4
UST uses Interstitial Monitoring at least monthly?	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A
UST Uses Automatic Tank Gauging at least monthly?	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A
UST uses Vapor Monitoring at least monthly?	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A
UST uses Groundwater Monitoring at least monthly?	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A
UST uses Manual Tank Gauging alone (only for tanks 1,000 gallons or less)?	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A
UST uses Manual Tank Gauging & Tank Tightness Testing (only for tanks 1,001-2,000 gallons and 10-year maximum use after upgrade)?	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A
UST uses Inventory Control and Tank Tightness Testing (10-year maximum use after upgrade)?	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A

Specify any other release detection method, such as SIR:

If UST has **PRESSURIZED PIPING:**

Only mark answers in columns for tanks you actually have. 1 tank per column.

Piping uses annual line tightness testing?	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> N A
Piping uses monthly or continuous monitoring?	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> N A

If UST has **SUCTION PIPING:**

Only mark answers in columns for tanks you actually have. 1 tank per column.

Piping uses annual line tightness testing?	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A
Piping uses monthly monitoring?	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A
Piping has no release detection requirements due to design?	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A

You keep records at least 1 year showing the results of repairs and of monthly sampling, testing, and monitoring of release detection (except for tank tightness testing records, which you keep until the next test)?	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A
You keep records at least 5 years of calibration and maintenance of release detection equipment? Mark NA if you use manual tank gauging, inventory control, or tank tightness testing.	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A
You keep vendor's performance claims and results of third-party evaluations for 5 years for interstitial monitoring, automatic tank gauging, vapor monitoring, groundwater monitoring, tank tightness testing, or other applicable approved methods?	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> N A	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> N A

Shade Circles Like This--> ●

Not Like This-->

-OVER-

51454



# 2006-2007 SELF-AUDIT FORM FOR ARKANSAS UNDERGROUND STORAGE TANKS

63000083

FACILITY ID #

Your USTs have CORROSION PROTECTION? Only mark answers in columns for tanks you actually have. 1 tank per column.

	UST #1	UST #2	UST #3	UST #4
Tank is fiberglass?	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> NA
Tank is coated & cathodically protected steel (Stip-3)?	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> NA
Tank is steel clad (or jacketed) with non-corrodible material?	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> NA
Tank retrofitted with cathodic protection (impressed current or sacrificial anode system)?	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> NA
Tank retrofitted with interior lining?	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> NA
Specify any other method used to achieve tank's corrosion protection:				

Your piping has CORROSION PROTECTION? Only mark answers in columns for tanks you actually have. 1 tank per column.

Piping is non-corrodible material (fiberglass, flexible piping, etc.)?	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA
Piping is coated & cathodically protected steel?	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA
Piping retrofitted with cathodic protection?	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA
Specify any other method used to achieve piping's corrosion protection:				

You have RECORDS FOR CATHODIC PROTECTION: Only mark answers in columns for tanks you actually have. 1 tank per column.

If you have impressed current systems or sacrificial anodes, you have the documentation of the last 2 tests conducted within 6 months of installation, at least every 3 years thereafter, and within 6 months of a repair?	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> NA
If you have an impressed current system, you have documentation of the last three rectifier readings that need to be taken every 60 days to show that the rectifier is working properly? (Most USTs will share one rectifier.)	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> NA

Your UST has SPILL PROTECTION: Only mark answers in columns for tanks you actually have. 1 tank per column.

UST has spill protection equipment, such as catchment basin?	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> NA
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Your UST has OVERFILL PROTECTION: Only mark answers in columns for tanks you actually have. 1 tank per column.

UST has automatic shutoff device?	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> NA
UST has overflow alarm?	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> NA
UST has ball float valve (cannot be used on systems with suction piping)?	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input checked="" type="radio"/> N <input type="radio"/> O <input type="radio"/> NA	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> NA

OTHER REQUIREMENTS for entire facility: Respond in each row for entire facility

You have filed a notification form with ADEQ?	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA
You keep records of all UST system repairs for the operating life of the UST system?	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA
If you have permanently closed any USTs, you satisfy the requirements for permanent closure and keep site assessment results for 3 years?	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA
If you have temporarily closed any USTs, you satisfy the requirements for temporary closure?	<input type="radio"/> Y <input type="radio"/> N <input checked="" type="radio"/> O <input type="radio"/> NA
You have the correct ADEQ Registration Certificate (with current year's sticker) posted in a conspicuous location at the facility?	<input checked="" type="radio"/> Y <input type="radio"/> N <input type="radio"/> O <input type="radio"/> NA

CERTIFICATION (Read and sign after completing all sections)

I certify under penalty of law that I have personally completed and am familiar with the information submitted in this and all attached documents, and that the submitted information is true, accurate and complete.

Owner Name (print)	Owner Signature	Date Signed
Lyndell BEARD	Lyndell Beard	9-19-06

RECEIVED

SEP 22 2006

ADEQ-RST

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