



TIGHTNESS TESTING ASTs

All new and used ASTs and connections that are being installed or reinstalled must be tightness tested **after** installation/reinstallation and **before** being placed in service in accordance with manufacturer requirements or NFPA 30 where none exist. This test must be made at operating pressure with air, inert gas, or water, and air pressure must not be used to test tanks that contain flammable or combustible liquids or vapors. Testing for secondary containment (double-wall) tanks must include the primary and secondary tank.

This guidance document outlines, **but does not replace**, the requirements of NFPA 30 §21.5.2.

Shop-fabricated ASTs:

Note: Most manufacturers include instructions for tightness testing in their installation instructions for the different types of tanks they manufacture that must be followed. (e.g. Convault, Fireguard, Envirovault, F921, Lube Cube, etc.)

Secondary containment tanks that are shipped from the factory with a vacuum drawn on the interstitial space, and the vacuum is held through the completion of installation, meet the tightness testing requirement. Results are to be documented.

Single-wall Horizontal:

- Test at a gauge pressure of 3 to 5 psi for 1 hour.

Double-wall Horizontal:

- Test primary (inner) tank at a gauge pressure of 3 to 5 psi for 1 hour.
- Test secondary tank (interstitial) at a gauge pressure of 3 to 5 psi OR 2.6 psi vacuum for 1 hour.

Single-wall Vertical:

- Test at a gauge pressure of 1.5 to 2.5 psi for 1 hour.

Double-wall Vertical:

- Test primary (inner) tank at a gauge pressure of 1.5 to 2.5 psi for 1 hour.
- Test secondary tank (interstitial) at a gauge pressure of 1.5 to 2.5 psi OR 2.6 psi vacuum for 1 hour.

Rectangular:

- Follow manufacturer instructions.

Field-erected ASTs:

- Test in accordance with the standard to which the tank is constructed.

Tightness tests must be documented and submitted to OPS within 30 days of completion.



CO Dept of Labor & Employment – Division of Oil & Public Safety

633 17th St., Suite 500, Denver CO 80202-3660

Phone: 303-318-8505/8507 Fax: 303-318-8488

E-mail: oil.publicsafety@state.co.us

Web: www.colorado.gov/cdle/ops

ABOVEGROUND STORAGE TANK TIGHTNESS TESTING

Facility Name:		OPS FacID:		Installer Name (Company):		
Address:				Installer Address:		
City:	State: CO	Zip:	City:	State:	Zip:	
Contact Name:		Phone #:		Contact Name:		Phone #:
Contact Email:				Contact Email:		

TEST RESULTS

Tank Information					
OPS Tank #					
New / Used Tank					
Construction (UL142 / SwRI / UL2080 / UL2085)					
Tank Wall Type (Single / Double)					
Total Capacity (gals)					
Compartmentalized Tank (Yes / No)					
Number of Compartments					
Tank Manufacturer					
Tank Model (Envirovault, F921, etc.)					
Test Results					
Note: Choices for Test Method Used are – (P)ressure, (V)acuum, (H)ydrostatic					
Primary					
Test Method Used (P / V / H)					
Test Start Time					
Initial Reading					
Test End Time					
Final Reading					
Change In Readings					
Result (Pass / Fail)					
Secondary					
Test Method Used (P / V / H)					
Test Start Time					
Initial Reading					
Test End Time					
Final Reading					
Change In Readings					
Result (Pass / Fail)					

OPS inspector present during testing? Yes No

Inspector Name: _____ Inspector Signature: _____ Date: ____/____/____

I certify under penalty of law that the information provided here and in supporting documents is true, accurate, and complete.
 Note: When an OPS Inspector is not present during testing, this form must be signed by the Tester AND Owner before submitting to OPS.

Tester Name: _____ Tester Signature: _____ Date: ____/____/____

Owner Name: _____ Owner Signature: _____ Date: ____/____/____

OPS USE: Date Reviewed ____/____/____ Reviewed By _____

Submit to OPS within 30 days of completion.