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 Division of Oil and Public Safety – Compliance Section  
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## Manual Tank Gauging (1001-2000 Gallons)

(Revised 11/2013)

### General Information

Facility ID #:		Facility Name:					
Facility Address:					City/State/ZIP:		
Contact Name:		Phone Number:		Review Starting Date:		Review Ending Date:	

### Manual Tank Gauging Results\*

Tank #	Product	5-Year Test Date	All Passed?	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec

### Manual Tank Gauging Suspected Release Report\*\*

Tank #	Product	Month	Date	Date Suspected Release Reported to OPS	7-Day Investigation Details	7-Day Investigation Results		Date Results Reported to OPS
						Results	Date	

### Manual Tank Gauging Results Review: Class A or B Operator Information

<input type="checkbox"/> Class A	<input type="checkbox"/> Class B	Certification #:			
Printed Name:			Signature:		
			Date:		

\*Owners/Operators must report a suspected release for **any monthly failure** within 24 hours and complete the Suspected Release Report section of this form.

\*\*Owners/Operators must conduct a 7-Day investigation of all suspected releases and report all of the results to OPS.