

# Annual Leak Monitoring and Overfill Protection Test Form For Underground or Aboveground Storage Tank Systems

*N. H. Code of Administrative Rules Env-Or 406.18 and Env-Or 406.20 (for UST Facilities) and  
N. H. Code of Administrative Rules Env-Or 306.12, (for AST Facilities)*

The New Hampshire Department of Environmental Services (NHDES) has developed this form to document the required annual testing of leak monitoring and/or overfill protection equipment at this UST or AST storage facility.

Facility Name: Lake Foodmart UST ☒ AST ☐ DES Site No. / Facility No. 200507041 / 0115700

Facility Address: 425 LAKE AVE City: Manchester Zip: 03103

## A. Annual Leak Monitoring and/or Overfill Protection Test Results

Complete the following checklist using: Y = Yes, N = No, N/A = Not Applicable

1. Leak monitor and/or overfill protection equipment. List all tested with manufacturer's name and model#:  
Veeco RST 725 350

	Tank #:	1	2A	Q3	
2.	Leak monitor console assignments are correctly programmed and labeled for all sensors.	Y	Y	Y	
3.	<u>Tank</u> secondary containment sensor is positioned per manufacturer's requirements.	Y	Y	Y	
4.	<u>Piping</u> secondary containment (piping, intermediate, and or dispenser sump) sensors are positioned per manufacturer requirements to monitor all containment.	Y	Y	Y	
5.	Brine level of the tank interstitial space is within the manufacturers operating range.	N/A	N/A	N/A	
6.	All secondary containment is liquid tight and free of debris, water and regulated substance.	Y	Y	Y	
7.	All sensors were visually inspected, manually tested, confirmed operational and reset.	Y	Y	Y	
8.	The leak monitor console <u>audible</u> alarm is confirmed operational and reset.	Y	Y	Y	
9.	The leak monitor console <u>visuals</u> alarms are operational and reset.	Y	Y	Y	
10.	The communication equipment (e.g. modem) is operational for leak monitoring systems and will relay alarms to a remote station.	N/A	N/A	N/A	
11.	Overfill alarm sensors and shutoff devices, as applicable, were manually activated and verified to be at the proper operational setting. (Required Triennially for USTs, Annually for ASTs)	N/A	N/A	N/A	
12.	In summary, the leak monitor and/or overfill protection systems are confirmed to be in proper operation per manufacturer's requirements. All sensors are reset and alarms have been cleared.	<div style="display: flex; justify-content: space-between; width: 100%;"> <span><u>Yes</u></span> <span>No</span> </div>			

If your answer is No, then describe on the reverse side of this form how and when these items will be corrected.

## B. Certification

I hereby certify that the equipment identified in this document was tested for proper operation in accordance with manufacturer's requirements.

Name (print): Mike Gold Company Name: Petroleum Equipment Service

Company Address / State / Zip: 440 Harvey Road, Manchester, NH 03103

Tester's Signature: [Signature] Phone No.: (603) 935-9330 Test Date: 12-15-20

## C. Record Keeping and Reporting Instructions

- Keep a completed copy of this form for owner/operator records.
- The owner/operator must submit a copy of the annual test report to NHDES within 30 days of testing to:

NH DEPARTMENT OF ENVIRONMENTAL SERVICES  
OIL REMEDIATION AND COMPLIANCE BUREAU  
PO BOX 95, CONCORD NH 03302-0095  
Phone # (603) 271-3899 Fax # (603) 271-2181