

Questions? Problems?
Call 702-455-1660

Gasoline dispensing Operation Daily Inspection Log

Phase I & II Assist



small business
assistance
PROGRAM

Source ID#: _____

Month: _____

Source Name: _____

Year: _____

Total Monthly Throughput – All Grades of Gasoline (NOT DIESEL) _____ Gallons

	Date																															
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Initials of employee doing inspection																																
Enter a "Y" in each box if no problem is found that day. Enter an "N" if there is a problem. If you enter an "N," explain the problem and corrective actions taken below.																																
Phase I – MUST BE INSPECTED AFTER EACH FUEL DELIVERY (may limit inspections to once daily if multiple deliveries are received)																																
Fuel delivered today? If yes, enter time?	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM															
Spill Buckets - Clean & liquid free?																																
Vapor Cap & Seals – Present, Operational & in good condition?																																
Vapor Adapter - Tight & sealing properly?																																
Fill Cap & Seal – Present, Operational & in good condition?																																
Fill Tube Adapter & Seal- Operational & in good condition?																																
Drain Plug – Operational? (If equipped)																																
Pressure Vacuum (P/V) Valve – Installed and visibly intact?																																
Truck vapor tightness documentation?****																																
****Vapor balance system checks-Monthly (performed by maintenance or operator) ****																Date: <input type="checkbox"/> Sight/ sound/ smell test OR <input type="checkbox"/> Soapy water spray test																
Phase II Assist – MUST BE INSPECTED DAILY																																
Nozzles - Free of drips & leaks?																																
Spouts - Tight, tip round, no crimps or leaks?																																
Clamps (ECD) - Present & tight?																																
Splash Guards (ECD) Operational & in good condition?																																
Retractor - Operational? (If equipped)																																
Hoses - No leaks or kinks? Not flattened?																																

CONTINUED ON BACK

Gasoline Dispensing Operation Daily Inspection Log

Phase I & II ASSIST

	Date																														
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Hoses - Proper length? - No more than 6" contacting the ground?																															
Comments/Repairs/Notes (Attach additional sheets if necessary)																															
Maintenance Log																															
Pump #																Pump #															
Date out of service																Date out of service															
Time out of service	AM/PM															Time out of service	AM/PM														
Part and location																Part and location															
Description of problem																Description of problem															
Date of repair																Date of repair															
Pump #																Pump #															
Date out of service																Date out of service															
Time out of service	AM/PM															Time out of service	AM/PM														
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Part and location																Part and location															
Description of problem																Description of problem															
Date of repair																Date of repair															

****Check permit for requirement****