

CSS 14933

ATTACHMENT J-0200000-05
FORMS

CERTIFICATION OF WORK

(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: WV038

Date of Visit: 1-24-19

Contractor Personnel on Site:

1. Ray Chain
2. _____
3. _____
4. _____
5. _____
6. _____

Work Performed: EVACUATE VACUUM TEST INTRNSCE of 4k USF

Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. _____
2. _____
3. _____
4. _____

Inspection, Testing, and Certification

1. _____
2. _____
3. _____
4. _____

Other Recurring Services

1. _____
2. _____
3. _____
4. _____

Service Calls – Service Call Number and Description

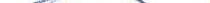
1. CSS14933 WV038 WO#7208
2. EVACUATE water from INTRNSCE
3. VACUUM TEST INTRNSCE of 4000 Gallon Fuel oil USF

Over and Above Repair Work – Order Number and Description of Work Completed

CERTIFICATION OF WORK

To be signed by the Contractor:

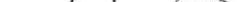
Print Name: RAY CHAN Date: 1-24-19

Signed: 

To be signed by Facility Manager:

By signing the Certification of Work, the said government representative signature does not constitute acceptance of any work performed by the contractor, it only acknowledges that the contractor was on-site during the identified timeline:

Print Name/Rank: Denis, Shawn Date: 20190124

Signed: 

E-Mail: Shawn.m.denis.mil@mail.mil

APPENDIX C-1

TANK SECONDARY CONTAINMENT INTEGRITY TESTING
DRY TEST METHOD

Facility Name: <i>Romney WV USARC</i>	Owner: <i>USARC - 99% RSC DPW</i>				
Address: <i>11 Industrial Park</i>	Address: <i>5231 South Scott Plaza</i>				
City, State, Zip Code: <i>Romney WV 26757</i>	City, State, Zip Code: <i>FT DIX NJ</i>				
Facility I.D. #: <i>WV038</i>	Phone #:				
Testing Company: <i>Ensellor Amico</i>	Phone #: <i>1/24/19</i>				
This data sheet is for testing the integrity of the dry secondary containment of a underground storage tank (UST). See PEI/RP1200 Section 4.2 for the test procedure.					
Tank Number	<i>4000</i>	<i>4000</i>	<i>4000</i>	<i>4000</i>	
Tank Material	<i>STEEL</i>	<i>STEEL</i>	<i>STEEL</i>	<i>STEEL</i>	
Product Stored	<i>#2 FO</i>	<i>#2 FO</i>	<i>#2 FO</i>	<i>#2 FO</i>	
Tank Capacity,* gallons	<i>4000</i>	<i>4000</i>	<i>4000</i>	<i>4000</i>	
Test Start Time	<i>12:46pm</i>	<i>12:48</i>	<i>12:49pm</i>	<i>12:52pm</i>	
Initial Vacuum Reading, inches Hg (See Table 4-1 below.)	<i>5"</i>	<i>5"</i>	<i>5"</i>	<i>5"</i>	
Specified Test Duration (See Table 4-1 below.)	<input type="checkbox"/> 1 hour <input checked="" type="checkbox"/> 2 hours	<input type="checkbox"/> 1 hour <input checked="" type="checkbox"/> 2 hours	<input type="checkbox"/> 1 hour <input checked="" type="checkbox"/> 2 hours	<input type="checkbox"/> 1 hour <input checked="" type="checkbox"/> 2 hours	<input type="checkbox"/> 1 hour <input type="checkbox"/> 2 hours
Test End Time	<i>12:47pm</i>	<i>12:49pm</i>	<i>12:52pm</i>	<i>12:55pm</i>	
Final Vacuum Reading, inches Hg	<i>0"</i>	<i>0"</i>	<i>0"</i>	<i>0"</i>	
Is the Annular Space Dry After the Test?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Test Results	<input type="checkbox"/> Pass <input checked="" type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail			

TABLE 4-1

Vacuum, inches Hg	Capacity, gallons	Duration, hours
10	<20,000	1
	20,000+	2

Comments:

*Total tank capacity, including all compartments in a multi-compartment tank.

Tester's Name (print) Ray ChainTester's Signature 