

APPENDIX B-5: SAMPLE FORM FOR ANNUAL FUELING SYSTEM CHECKLIST

ANNUAL FUELING SYSTEM CHECKLIST		
Facility ID#	Facility Name	Date
	Qualified Technician Signature	

Equipment to be Checked	PEI/ RP 500	Fueling Position																
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
Dispenser components inside cabinet clean and dry, sump dry	8.4																	
Anchor bolts and dispenser frame solid and in good condition	8.4.1																	
Emergency shutoff valve properly anchored, positioned and tested	8.4.2																	
Vapor shear valve properly anchored and positioned (if present)	8.4.3																	
Filter(s) within owner's expected service life	8.4.4																	
Suction pump strainer cleaned and in good condition	8.4.5																	
Meter(s) calibrated within last 12 months	8.4.6																	
Fire extinguisher has proper pressure and is in good condition	8.4.7																	
Dispenser door panels and lock(s) operate easily	8.5																	
Nozzle flow rate within tolerances	8.6.1																	
Nozzle automatic shutoff working properly	8.6.2																	
Nozzle no pressure/no flow feature working properly	8.6.3																	
Stage II vapor recovery installed and properly tested (if present)	8.7																	
Stage II piping connected, compatible hanging hardware installed	8.7																	
Bellows Interlock feature tested and working properly (if present)	8.7.1																	
Electrical conduit, junction boxes and wiring in good condition	8.8																	
Hanging hardware continuity tested and passed	8.8.1																	
Dispenser properly grounded	8.8.2																	
Emergency stop switch(es) tested and working properly	8.8.3																	

NOTES:

INSTRUCTIONS: Refer to the corresponding section of PEI/RP500 for additional inspection guidance.
 Mark each fueling position where no problem is observed with a checkmark: ✓ If certain equipment is not required and not present, mark checklist: N/A
 Mark each fueling position where a defect is observed with a number. Write the same number in the notes section together with a description of the problem.
 If a defect is found: (1) Place the nozzle, dispenser or product out of service; (2) Notify appropriate person.