GEORGIA ENVIRONMENTAL PROTECTION DIVISION
ANNUAL ATG AND PROBE TEST REPORT FOR YEAR _____
Questions on how to complete this form should be directed to the GAEPD UST Program Management, (404) 362-2687

Facility Name:	Owner:
Address:	Address:
City, County, Zip:	City, State, Zip:
Facility I.D. #:	Phone #:

Tester Name:		Tester Phone #:	
Tester Company:		Test Date:	Future Test Date:

Instructions
1. Submit a completed copy of this form with all alarm printouts generated during testing.
2. This form allows you to record up to 6 tanks, assuming that the Facility ID Number remains the same.
3. Complete the portion of the form pertaining to the type of equipment tested for each tank.
4. Testing must be performed in accordance with a nationally recognized code of practice (such as PEI RP-1200 or equivalent) or the manufacturer's instructions.
5. Keep a copy of this testing for 3 years.

Tank #						
Product Stored						
Tank Volume (gallons)						
Tank Diameter (inches)						
Tank Status						
ATG Brand and Model						
Probe Brand and Model						
Total # of Probes		**Total # of Tanks**				

Automatic Tank Gauge and Other Controllers

Alarm test	☐ meets criteria ☐ needs action ☐ n/a	☐ meets criteria ☐ needs action ☐ n/a	☐ meets criteria ☐ needs action ☐ n/a	☐ meets criteria ☐ needs action ☐ n/a	☐ meets criteria ☐ needs action ☐ n/a	☐ meets criteria ☐ needs action ☐ n/a
System configuration verification	☐ meets criteria ☐ needs action ☐ n/a	☐ meets criteria ☐ needs action ☐ n/a	☐meets criteria ☐ needs action ☐ n/a	☐ meets criteria ☐ needs action ☐ n/a	☐ meets criteria ☐ needs action ☐ n/a	☐ meets criteria ☐ needs action ☐ n/a
Battery backup test	☐ meets criteria ☐ needs action ☐ n/a	☐ meets criteria ☐ needs action ☐ n/a	☐ meets criteria ☐ needs action ☐ n/a	☐ meets criteria ☐ needs action ☐ n/a	☐ meets criteria ☐ needs action ☐ n/a	☐ meets criteria ☐ needs action ☐ n/a
Tester's initials						

Probes

Probe Serial Number						
Is probe is free of residual buildup?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
Do floats move freely?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
Is shaft inspected and free of damage?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
Are cables free of kinks?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
Does fuel float level agree with volume programmed in the console?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
Does water float level agree with volume programmed in the ATG console?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
Does fuel float level agree with console inventory when placed at the middle of stem?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
Inch level from the bottom of the stem when 90% alarm is triggered						
90% tank capacity using tank chart						
Does inch level at which the overfill alarm activates agree with the value on the console?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no

Inch level from the bottom when water float first triggers high water alarm						
Does inch level at which the water float alarm activates agrees with value programmed in the console?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
Alarm (Audible and visual) functioning properly?	☐ yes ☐ no	☐ yes ☐ no	☐ yes no	☐ yes ☐ no	yes ☐ no	yes ☐ no
Are alarm printouts attached to test?	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no	☐ yes ☐ no
Result of Probe Test (Probe must meet all applicable criteria to pass.)	☐ **pass** ☐ **fail**	☐ **pass** **fail**	☐ **pass** ☐ **fail**	☐ **pass** ☐ **fail**	☐ **pass** ☐ **fail**	**pass** ☐ **fail**
Tester's initials						

Repairs Needed	Date of Repair	Comments/Description of Repairs

I hereby certify that all the information contained in this report is true, accurate and in full compliance with legal requirements.

Tester's Signature: _____ Date: _____