

Questions? Problems?  
Call 702-455-1660

# Gasoline Dispensing Facilities Daily Inspection Log

## Phase I & II BALANCE



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	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 & Seal – 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 OR <input type="checkbox"/> Other (Please comment below)																
Phase II Balance-MUST BE INSPECTED DAILY																																
Nozzles - Free of drips & leaks?																																
Spouts-Tight, tip round, no crimps or leaks?																																
Nozzle Face Seals & Bellows - No tears, cracks, or damage?																																
Retractor - Operational? (If equipped)																																
Clamps Present & tight?																																
Nozzle Check Valves - Operational? (If equipped)																																
Hoses - No tears, cuts, holes, kinks? Not flattened?																																
Hoses - Proper length? Does not touch the ground?																																

\*\*\*\*This requirement is only for GDFs located in the Las Vegas Valley (HA212). Check your permit to see if it is applicable to your GDF \*\*\*\*

# Gasoline Dispensing Facilities Daily Inspection Log

## Phase I & II BALANCE

Comments/Repairs/Notes/Maintenance Logs (Attach additional sheets if necessary)			
<b>Maintenance Log</b>			
<b>Pump #</b>		<b>Pump #</b>	
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	
<b>Pump #</b>		<b>Pump #</b>	
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	
<b>Pump #</b>		<b>Pump #</b>	
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	

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