

Inspection, Testing, and Maintenance Water Storage Tanks
NFPA 25, Chapter 9 as amended by CCR, Title 19

Date of Inspection, Testing, Maintenance: _____

Property Information:

Name: _____

Address: _____

City: _____



Abbreviation Key:

I = Inspection

T = Test

M = Maintenance

A-O = After Operation

MI = Per Manufacturer's Instructions

*= During cold weather season

Item	Activity	Frequency	Description	NFPA 25 Reference	Fail	N/A	Pass
1.1	I	Daily/ Weekly*	Water Temperature	9.2.4			
1.2	I	Daily/ Weekly*	Heating System	9.2.6.6			
1.3	I	Monthly*	Temperature Alarms	9.2.4.2 9.2.4.3			
1.4	I	Monthly/ Quarterly*	Condition of water in tank	9.2.1			
1.5	I	Monthly/ Quarterly	Water - Level	9.2.1			
1.6	I	Monthly/ Quarterly	Air Pressure	9.2.2			
1.7	I	Quarterly	Control Valves	12.3.2.1			
1.8	I	Quarterly	Tank-Exterior	9.2.5.1			
1.9	I	Quarterly	Support Structure	9.2.5.1			
1.10	I	Quarterly	Catwalks / Ladders	9.2.5.1			
1.11	I	Quarterly	Surrounding Area	9.2.5.2			
1.12	I	Annually	Hoops and Grillage	9.2.5.4			
1.13	I	Annually	Painted/Coated Surfaces	9.2.5.5			
1.14	I	Annually	Expansion Joints	9.2.5.3			
1.15	I	5 to 3 Years	Interior	9.2.6			
1.16	I	5 Years	Check Valves	12.4.2.1			
2.1	T	Monthly	Temperature Alarms	9.2.4.2 9.2.4.3			
2.2	T	Monthly*	High Temperature Limit Switch	9.3.4			
2.3	T	Semiannually	Water Level Alarms	9.3.5			
2.4	T	Annually	Control Valve-Position	12.3.3.1			

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Item	Activity	Frequency	Description	NFPA 25 Reference	Fail	N/A	Pass
2.5	T	Annually	Control Valve-Operation	12.3.3.1			
2.6	T	Annually	Supervisory	12.3.3.5			
2.7	T	5-Years	Level Indicators	9.3.1			
2.8	T	5-Years	Pressure Gauges	9.3.6			
2.9	T	5-Years	Automatic Filling Device	9.3.7			
3.1	M	Semiannually	Drain Silt	9.4.5			
3.2	M	Annually	Control Valves	12.3.4			
3.3	M	-----	Water Level	9.4.1			
3.4	M	-----	Embankment-Support coated fabric (ESCF)	9.4.6			
3.5	M	-----	Check Valves	12.4.2.2			

Item	Deficiencies and Comments: Deficiencies and Comments Item number must correspond to the item number of the activity listed above:

See Continuation Page (s) _____ (Indicate the number of continuation pages)

PASS

FAIL

SIGNATURE

DATE