



4701 W. Russell Road 2nd Floor
 Las Vegas, NV 89118-2231
 Phone: (702) 455-5942 Fax: (702) 383-9994
 Marci Henson, Director

For DAQ Use Only

PRESSURE DECAY TEST RESULTS FORM

Initial Triennial Other

Source Name: _____ Source ID: _____

Source Address: _____
(address) (city) (zip)

Test Date: _____ Time of Test: _____

Date and Time of Most Recent Fuel Delivery: _____

Pressure Measuring Device: _____ Device Calibration Date: _____

Note: Phase II EVR Executive Orders (EO) contain requirements (see below) which must be met when conducting a pressure decay test. These requirements must be followed in accordance with the applicable E.O. in order for the pressure decay test result to be valid.

Tank Number:	1	2	3	4	Total
Product Grade:					
Tank Capacity, gallons:					
Distance of highest point of discharge of fill-pipe from tank bottom. (inches)					
Gasoline, gallons:					
Ullage, gallons ¹ :					
Initial Pressure ¹ , wcg:					
Pressure @ 1 minute:					
Pressure @ 2 minutes:					
Pressure @ 3 minutes:					
Pressure @ 4 minutes:					
Final pressure @ 5 minutes:					
Allowable Final Pressure, wcg:					
Pressure Decay Test Results:	<input type="checkbox"/> P/ <input type="checkbox"/> F	<input type="checkbox"/> P/ <input type="checkbox"/> F	<input type="checkbox"/> P/ <input type="checkbox"/> F	<input type="checkbox"/> P/ <input type="checkbox"/> F	<input type="checkbox"/> P/ <input type="checkbox"/> F

¹The minimum total ullage for each individual tank shall be 1,000 gallons or 25% of the tank capacity, whichever is less. The maximum total ullage for all manifolded tanks shall not exceed 25,000 gallons.

Comments: