



Wisconsin Department of Agriculture, Trade and Consumer Protection  
 Bureau of Weights and Measures, Permits and Licensing  
 2811 Agriculture Drive, PO Box 7837, Madison, WI 53707-7837  
 Phone: (608) 224-4942

**FOR OFFICE USE ONLY**

# TANK TIGHTNESS TEST REPORT

*Personal information you provide may be used for purposes other than that which it was originally collected (s.15.04 (1)(m) Wis. Stats.).*

OWNER INFORMATION			
NAME	TELEPHONE (    )    -	CELL (    )    -	
COMPANY NAME	CONTACT PERSON	EMAIL	
STREET ADDRESS	<input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input type="checkbox"/> TOWN		ZIP
SITE INFORMATION			
FACILITY NAME	FACILITY ID#	DATE OF TESTING/SERVICE	
SITE ADDRESS	<input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input type="checkbox"/> TOWN		ZIP
CONTRACTOR INFORMATION			
CONTRACTOR COMPANY NAME	TELEPHONE (    )    -	CELL PHONE (    )    -	
CONTACT PERSON	EMAIL	WORK ORDER	

Type of Testing Equipment (Brand & Model): \_\_\_\_\_

Material Approval #:

Tank test:	1	2	3	4	5	6	7
Product type							
Tank volume							
Product volume							
Ullage volume							
Tank burial depth (from surface)							
Groundwater depth (from surface)							
Tank isolation method							
Water sensor used?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Interface liquid used with ethanol content greater than 0% and less than 11%?*	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Test pressure							
Time completed							
Time started							
Total test time in minutes							
Initial cylinder level							

Final cylinder level							
Final hourly leak rate							
TEST RESULT							

\* Note: Any tank with ethanol content greater than 0% and less than 11% and groundwater above the bottom of the tank that uses a water conductivity meter/sensor to detect water ingress shall use an interface fluid between the water and fuel to prevent phase separation. Any tank with ethanol content greater than 10% and groundwater above the bottom of the tank that uses a tank tightness method with a water sensor to detect water ingress shall be completely emptied of product prior to testing.

---

TECHNICIAN NAME (TYPE OR PRINT)

TECHNICIAN SIGNATURE

DATE

I attest by signature that the equipment identified in this document was inspected and/or serviced in accordance with the manufacturers' guidelines and the information is true, accurate, and complete.

---

Comments: