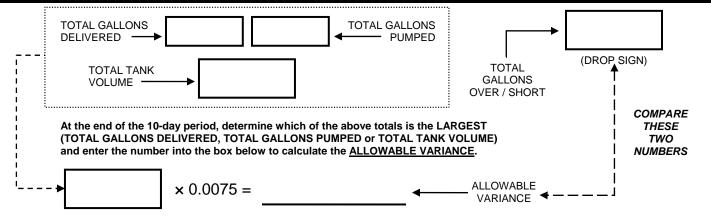
## 10-DAY INVENTORY RECONCILIATION WORKSHEET FOR METERED USTs

Facility Name: _			PBS Number:	
Address: _			Tank ID No:	
_			Product Stored:	
	Inventory record for period from	/	/ to	1 1

D A	DATE &	START STICK INVENTORY	GALLONS DELIVERED	GALLONS PUMPED	BOOK INVENTORY		STICK NTORY	DAILY OVER (+) or SHORT (-)	WATER
Υ	TIME				[A]		[B]	(END - BOOK)	
		(GALLONS)	(GALLONS)	(GALLONS)	(GALLONS)	(INCHES)	(GALLONS)	[B] - [A]	(INCHES)
1		(-	+) (	-) (	=)				
2		(-	+) (	-) (	=)				
3		(-	+) (	-) (	=)				
4		(-	+) (	-) (	=)				
5		(-	+) (	-) (	=)				
6		(-	+) (	-) (	=)				
7		(-	+) (	-) (	=)				
8		(-	+) (	-) (	=)				
9		(-	+) (	-) (	=)				
10		(-	+) (	-) (	=)				



- Is the TOTAL GALLONS OVER/SHORT **LARGER** than the ALLOWABLE VARIANCE? (circle one) YES (see below\*) NO
- Is there an INCREASE/FLUCTUATION/RECCURENCE of water in the bottom of the tank? (circle one) YES (see below\*) NO

## EXPLANATION OF EXCEEDANCE OF ALLOWABLE VARIANCE

Cause determined to be:	
Describe required action taken (i.e., inspection/repairs/tests, etc.) on/ _/(date):	

<sup>\*</sup> If you answered YES above, if the TOTAL GALLONS OVER/SHORT is **LARGER** than the ALLOWABLE VARIANCE, or if there was a RECURRING ACCUMULATION of water in the bottom of the tank – in accordance with 6 NYCRR Part 613-2.4(a)(2), the operator MUST initiate an investigation into possible causes. If **WITHIN 48 HOURS** the cause CANNOT be explained by inaccurate recordkeeping, temperature variations, or other factors not related to leakage, the operator <u>MUST</u> notify the owner and the New York State Department of Environmental Conservation (**SPILL HOTLINE: 1-800-457-7362**). The tank <u>MUST</u> be taken out-of-service in accordance with Part 613-2.6(a) UNTIL such time that inspections and/or tightness tests are performed, the cause is determined and necessary repairs or replacements are made, or the tank is permanently closed in accordance with 613-2.6(b).