

TankSafeSM

Facility No.	of	

Storage Tank Liability Coverage Facility/Storage Tank Inventory AST Supplemental Worksheet

quote no.	·				AST Su	ıpplemental	Worksheet
Facility Na	ame:			No. of ASTs at this	facility:		
Address:			City: _		State:	USA	
ZIP:	IP: Facility ID #:			(lea	ve blank if not applicable)		
Type of Facil	ity? ☐Gas station ☐	Convenience store	☐Marina ☐Airport ☐	Industrial Fuel Storage/	ransfer		
Do you have	an SPCC for this Fac	ility? □ye	s 🗆 no				
□No pollution □Pollution at	facility in past 10 years	Brd party claims at this s s, resolved with regulat	,	nt Services for this Facility?	P □ves □ne		
Tank No.	Installation Date	AST Capacity (gallons)	AST Secondary Containment	Piping Secondary Containment	Automatic Overfill/Spill Protection and/or Electronic Leak Detection?	Tank Contents	
			□Permeable □Impermeable □None	□Yes □No	□Yes □No	□Unleaded □Diesel □Waste Oil	□Fuel Oil □Jet/Aviation □Other
			☐Permeable ☐Impermeable ☐None	□Yes □No	□Yes □No	□Unleaded □Diesel □Waste Oil	☐Fuel Oil ☐Jet/Aviation ☐Other
			□Permeable □Impermeable □None	□Yes □No	□Yes □No	□Unleaded □Diesel □Waste Oil	☐Fuel Oil ☐Jet/Aviation ☐Other
			☐Permeable ☐Impermeable ☐None	□Yes □No	□Yes □No	□Unleaded □Diesel □Waste Oil	☐Fuel Oil ☐Jet/Aviation ☐Other
			☐Permeable ☐Impermeable ☐None	□Yes □No	□Yes □No	□Unleaded □Diesel □Waste Oil	☐ Fuel Oil ☐ Jet/Aviation ☐ Other
			☐Permeable ☐Impermeable ☐None	☐Yes ☐No	□Yes □No	☐Unleaded ☐Diesel ☐Waste Oil	☐ Fuel Oil ☐ Jet/Aviation ☐ Other
			☐Permeable ☐Impermeable ☐None	□Yes □No	□Yes □No	☐Unleaded ☐Diesel ☐Waste Oil	☐ Fuel Oil ☐ Jet/Aviation ☐ Other
			☐Permeable ☐Impermeable ☐None	☐Yes ☐No	□Yes □No	☐Unleaded ☐Diesel ☐Waste Oil	☐ Fuel Oil ☐ Jet/Aviation ☐ Other
			☐Permeable ☐Impermeable ☐None	☐Yes ☐No	□Yes □No	☐Unleaded ☐Diesel ☐Waste Oil	☐ Fuel Oil ☐ Jet/Aviation ☐ Other
			☐Permeable ☐Impermeable ☐None	□Yes □No	□Yes □No	☐Unleaded ☐Diesel ☐Waste Oil	☐Fuel Oil ☐Jet/Aviation ☐Other

(use additional rows/pages as need)

Copyright, 2016 Page 1 of 1