

OKLAHOMA CORPORATION COMMISSION – PETROLEUM STORAGE TANK DIVISION
P.O. BOX 171, Oklahoma City, OK 73101
(405) 521-4683

CATHODIC PROTECTION SYSTEM SURVEY

<hr/> <i>Date Test Completed</i>	<hr/> <i>Facility Name</i>	<hr/> <i>Facility ID No.</i>
<hr/> <i>Facility Address</i>	<hr/> <i>City/Zip</i>	<hr/> <i>Tester's Name</i>
<hr/> <i>Testing Company Name:</i>	<hr/> <i>Testing Company Address:</i>	<hr/> <i>City/State & Zip:</i>
<hr/> <i>Testing Company Phone</i>	<hr/> <i>Tester's Credentials (i.e. NACE, STI, or other course certification / license number).</i>	

REASON FOR TEST:

Within 6 months of New or Replaced Installation – Installation Date: _____

As required every 3 years after Installation – Date of Prior CP Survey Certificaton: _____

Within 6 months of Repairs – Date repairs completed and describe: _____

Industry standards used to complete adequate design and/or verigy CP system properly working:

STI R892 STI R972 STIR051 ASTM G158 ASTM G57 NACE RP 0169 NACE RP 0285

Other (Describe): _____

TYPE OF CATHODIC PROTECTION SYSTEM: IMPRESSED CURRENT SACRAFICIAL

100 mV Polarization Decay -850 vV Potential Test Polarized Potential ("Instant Off")

Are all CP System components working according to standards and facility system design? Yes No

Is the current CP design available at the facility? Yes No

Are the 60-day readings for the last 12 months at the facility? Yes No

IMPRESSED CURRENT RECTIFIER DATA: Amps _____ Volts _____ Hours _____

(If Not Equipped – enter N/E; If Not Working – enter N/W; Enter reading only if meter is present)

IMPRESSED CURRENT SYSTEMS MUST MAINTAIN ELECTRIC POWER AT ALL TIMES

PLEASE READ BELOW AND COMPLETE FORM AS REQUESTED

When performing the 100 mV Polarization Decay test method, indicate the period of time allowed before recording the base polarized "off" potentials. Record both the immediate "off" potential (after allowing the IR drop component to dissipate), and the decay potential at each test point ON THE SITE MAP submitted with this report. Due to varying site conditions, such as soil moisture, temperature, and other outside influences, a new base "off" potential must be determined during each testing period. Describe the Polarization Decay Period:

When performing the "Instant Off" test method, be certain that the IR drop component has dissipated before recording the **Polarized Potential**. At each test point **ON THE SITE MAP** submitted with this report, record both the "on" and "instant off" voltage readings.

All potentials **must** be recorded for **BOTH tanks and piping** (regardless of material of construction or registration information), and taken in direct contact with soil. **Electrical continuity or isolation must be measured and documented ON THE SITE MAP.**

For all test methods, provide a SITE MAP (include North arrow and site building) showing the location of each test point and the measured values obtained. **The CP Survey must include readings for tanks, piping, and any system components that may be in contact with the soil.**

My signature affirms that I have sufficient education and experience to be a cathodic protection tester; I am competent to perform the tests indicated above; the results on this form are a complete and truthful record of all testing at this location on the date shown above.

CP Tester Signature: _____ **Date:** _____

NOTE TO THE OWNER: If your CP system is not working, properly, you must have a CP Technician, CP Specialist, or Corrosion Expert investigate and fix the problem. A CP Technician/CP Specialist/Corrosion Expert must be either (1) Accredited/Certified by NACE International, or (2) A competent Registered Professional Engineer with certification or licensing in Corrosion Control. You must keep a record of all CP installation designs and repairs for as long as you own the underground storage tank(s).

KEEP THIS REPORT & SITE MAP ON FILE FOR AT LEAST SIX YEARS. THIS FORM MUST BE FULLY COMPLETED.