

# MONTHLY INVENTORY RECORD

MONTH/YEAR: \_\_\_\_\_  
 TANK NUMBER: \_\_\_\_\_  
 TANK CONTENTS: \_\_\_\_\_

FACILITY NAME: \_\_\_\_\_  
 FACILITY ID NUMBER: \_\_\_\_\_  
 DATE OF THIS MONTH'S WATER CHECK: \_\_\_\_\_  
 AMOUNT OF WATER (INCHES): \_\_\_\_\_

DATE	START STICK (OR ATG) INVENTORY	GALLONS DELIVERED	GALLONS PUMPED	BOOK INVENTORY	END STICK (OR ATG) INVENTORY		DAILY OVER OR (SHORT)	INITIALS
					INCHES	GALLONS		
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								
26								
27								
28								
29								
30								
31								

**TOTAL GALLONS PUMPED:**

TOTAL GALLONS PUMPED

LEAK CHECK: ( \_\_\_\_\_ ) X .01 + 130 = \_\_\_\_\_

TOTAL OF "DAILY OVER OR SHORT" IS LARGER THAN THE "LEAK CHECK" RESULT:      YES      NO      (Circle one)

IF THE ANSWER IS "YES" TWO MONTHS IN A ROW, NOTIFY THE STORAGE TANK PROGRAM IN WRITING AT: WATER QUALITY DIVISION, 122 WEST 25<sup>TH</sup> STREET, CHEYENNE, WY 82002.

KEEP THIS RESULT ON FILE FOR AT LEAST ONE YEAR