



UNIVERSITY OF MINNESOTA

# Environmental Health & Safety

## Annual OFE Inspection Form

### Land scape Arboretum - Hydraulic Elevator Reservoirs

Year:

**Instructions:** This form is specific to the operational area noted above. Complete this inspection form annually for each regulated oil-filled equipment for proper operation, damage, leaks and suitability for continued service. Any oil-filled equipment at this Facility with a reservoir capacity of more than 55 gallons is subject to regulation. Forward completed checklists monthly to campus EHS staff; EHS staff maintains inspection documentation onsite for 3 years from the date of the inspection.

Date and time of inspection:	Name of inspector:
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#### Part A. Container Visual Check

Review all oil-filled equipment, piping and associated equipment and indicate whether the following criteria are met. Indicate "Yes", "No" or "N/A" for each item. For any answer indicated as "No", indicate specific finding, corrective action(s) required, along with the date, time and person(s) notified of actions required.	HE001 Oswald Visitor Center, RM112 (107)	HE002 Oswald Visitor Center, RM112 (131)	HE003 Synder Building, RM10 (107)								
1. Labels and signage for reservoir is in place, legible and accurate.											
2. Exterior of reservoir, including paint and coatings, is in good condition, with no evidence of leaking around the reservoir, concrete pad or ground.											
3. Above-ground piping, valves, pumps, sensors and associated equipment are in good condition with no evidence of leaking.											
4. Foundations and supports are structurally sound, free from corrosion and other damage, and in good condition.											
5. Grounding straps, wires and sensors are secure, free from corrosion and other damage and in good condition.											



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**Part B. Containment Areas**

<p>Review containment areas associated with oil-filled equipment and indicate whether the following criteria are met. Indicate "Yes", "No" or "N/A" for each item. For any answer indicated as "No", indicate specific finding, corrective action(s) required, along with the date, time and person(s) notified of actions required.</p>	<p>HE001 Oswald Visitor Center, RM112 (107)</p>	<p>HE002 Oswald Visitor Center, RM112 (131)</p>	<p>HE003 Synder Building, RM10 (107)</p>								
<p>1. Containment area (room or elevator pit) is dry or has a minimal level of standing water.</p>											
<p>2. There is no evidence of release or regulated substance in containment area.</p>											
<p>3. Containment structures are in good condition and free from cracks, chipping or other damage, and in good condition.</p>											

**Part C. Safety Precautions & General Conditions**

<p>Review safety precautions in the area of the oil-filled equipment and indicate whether the following criteria are met. Indicate "Yes", "No" or "N/A" for each item. For any answer indicated as "No", indicate specific finding, corrective action(s) required, along with the date, time and person(s) notified of actions required.</p>	<p>HE001 Oswald Visitor Center, RM112 (107)</p>	<p>HE002 Oswald Visitor Center, RM112 (131)</p>	<p>HE003 Synder Building, RM10 (107)</p>								
<p>1. Safety equipment is in place and operative. Fire extinguishers in place.</p>											
<p>2. There are no other conditions that should be addressed for continued safe operation or that may affect the site SPCC plan.</p>											
<p>3. Information on site map &amp; list is complete and accurate.</p>											

Findings/Comments: