

**Date of Issue:** April 2008

**Affected Publication:** API Standard 653, *Tank Inspection, Repair, Alteration, and Reconstruction*,  
Third Edition, December 2001

## ERRATA

**Appendix H,** *Insert the following pages after page H-7:*

**SIMILAR SERVICE ASSESSMENT - DATA SHEET**

CONTROL TANK ID: \_\_\_\_\_ LOCATION: \_\_\_\_\_  
 DIAMETER (FT): \_\_\_\_\_ HEIGHT (FT): \_\_\_\_\_ CAPACITY: \_\_\_\_\_ BBLs

CANDIDATE TANK ID: \_\_\_\_\_ LOCATION: \_\_\_\_\_  
 DIAMETER (FT): \_\_\_\_\_ HEIGHT (FT): \_\_\_\_\_ CAPACITY: \_\_\_\_\_ BBLs

**SECTION 1.0 - TANK BOTTOM (PRODUCT-SIDE) ASSESSMENT**

**H.1.1 TANK CHARACTERISTICS**

|                            | Control Tank <sup>1</sup> | Candidate Tank <sup>2</sup> | MATCH <sup>3</sup>       |                          | IF NO,<br>SEE SEC. <sup>4</sup> |
|----------------------------|---------------------------|-----------------------------|--------------------------|--------------------------|---------------------------------|
|                            |                           |                             | Yes                      | No                       |                                 |
| a. YEAR TANK ERECTED       | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.1                         |
| b. BOTTOM MATERIAL         | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.2                         |
| c. CORROSION ALLOWANCE     | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.4                         |
| d. BOTTOM LINING TYPE      | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.5                         |
| e. BOTTOM LINING THICKNESS | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.5                         |
| f. BOTTOM LINING AGE       | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.5                         |

**H.1.2 CURRENT SERVICE CONDITIONS:**

|                                | Control Tank <sup>1</sup> | Candidate Tank <sup>2</sup> | MATCH <sup>3</sup>       |                          | IF NO,<br>SEE SEC. <sup>4</sup> |
|--------------------------------|---------------------------|-----------------------------|--------------------------|--------------------------|---------------------------------|
|                                |                           |                             | Yes                      | No                       |                                 |
| a. CURRENT PRODUCT NAME        | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| b. PRODUCT CLASS. (TABLE H.1)  | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| c. SPECIFIC GRAVITY OF PRODUCT | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| d. NORMAL OPERATING TEMP.      | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| e. WATER BOTTOM?               | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| f. SULFUR CONTENT              | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| g. TIME IN THIS SERVICE        | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| h. PRODUCT CORROSIVITY         | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |

**H.1.3 PREVIOUS SERVICE CONDITIONS**

|                                | Control Tank <sup>1</sup> | Candidate Tank <sup>2</sup> | MATCH <sup>3</sup>       |                          | IF NO,<br>SEE SEC. <sup>4</sup> |
|--------------------------------|---------------------------|-----------------------------|--------------------------|--------------------------|---------------------------------|
|                                |                           |                             | Yes                      | No                       |                                 |
| a. PREVIOUS PRODUCT NAME       | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| b. PRODUCT CLASS. (TABLE H.1)  | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| c. SPECIFIC GRAVITY OF PRODUCT | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| d. NORMAL OPERATING TEMP.      | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| e. WATER BOTTOM?               | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| f. SULFUR CONTENT              | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| g. TIME IN THIS SERVICE        | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| h. PRODUCT CORROSIVITY         | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |

**H.1.4 CONCLUSIONS**

- a. Does this assessment include additional assessment documentation (see H.2.1), YES  or NO
- b. Based on the criteria reviewed in this Similar Service evaluation,  
Similar Service Is  OR is NOT  recommended for this tank (check appropriate box)
- c. The corrosion rate to be applied to the product side of the tank bottom is: \_\_\_\_\_ mpy.

**COMMENTS:**

\_\_\_\_\_  
 \_\_\_\_\_

NOTE: THE DATA SHEET SHALL BE MAINTAINED IN THE RECORD FILE AS PER SEC. 6.8.

ASSESSED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_  
 (tank owner/operator)

**NOTES:**

- 1. The Control Tank is the tank for which service conditions and corrosion rates are well known.
- 2. The Candidate Tank is the tank to be compared to the Control Tank to determine if similar service concepts apply.
- 3. "Y" or "Yes" indicates that the Candidate Tank criterion essentially matches the Control Tank .
- 4. If the Candidate Tank criterion does not match the Control Tank criterion, see H.2.1.

## SIMILAR SERVICE ASSESSMENT - DATA SHEET

CONTROL TANK ID: \_\_\_\_\_ LOCATION: \_\_\_\_\_  
 DIAMETER (FT): \_\_\_\_\_ HEIGHT (FT): \_\_\_\_\_ CAPACITY: \_\_\_\_\_ BBLs

CANDIDATE TANK ID: \_\_\_\_\_ LOCATION: \_\_\_\_\_  
 DIAMETER (FT): \_\_\_\_\_ HEIGHT (FT): \_\_\_\_\_ CAPACITY: \_\_\_\_\_ BBLs

**SECTION 2.0 - TANK BOTTOM (SOIL-SIDE) ASSESSMENT****H.2.1 TANK CHARACTERISTICS**

|                        | Control Tank <sup>1</sup> | Candidate Tank <sup>2</sup> | MATCH <sup>3</sup>       |                          | IF NO,<br>SEE SEC. <sup>4</sup> |
|------------------------|---------------------------|-----------------------------|--------------------------|--------------------------|---------------------------------|
|                        |                           |                             | Yes                      | No                       |                                 |
| a. YEAR TANK ERECTED   | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.1                         |
| b. BOTTOM MATERIAL     | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.2                         |
| c. CORROSION ALLOWANCE | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.4                         |
| d. DOUBLE BOTTOM       | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.7                         |

**H.2.2 SOIL/MATERIAL IN CONTACT WITH OR AROUND BOTTOM PLATE<sup>5</sup>**

|                                      | Control Tank <sup>1</sup> | Candidate Tank <sup>2</sup> | MATCH <sup>3</sup>       |                          | IF NO,<br>SEE SEC. <sup>4</sup> |
|--------------------------------------|---------------------------|-----------------------------|--------------------------|--------------------------|---------------------------------|
|                                      |                           |                             | Yes                      | No                       |                                 |
| a. SOIL TYPE                         | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.8                         |
| b. SOIL pH                           | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.8                         |
| c. SOIL ALKALINITY                   | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.8                         |
| d. SOIL MOISTURE                     | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.8                         |
| e. SOIL SALINITY                     | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.8                         |
| f. SOIL CONDUCTIVITY                 | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.8                         |
| g. OIL TYPE (if Oil Sand Foundation) | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.8                         |
| h. SOIL CLEANLINESS                  | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.8                         |

**H.2.3 CURRENT OPERATING CONDITIONS**

|                                     | Control Tank <sup>1</sup> | Candidate Tank <sup>2</sup> | MATCH <sup>3</sup>       |                          | IF NO,<br>SEE SEC. <sup>4</sup> |
|-------------------------------------|---------------------------|-----------------------------|--------------------------|--------------------------|---------------------------------|
|                                     |                           |                             | Yes                      | No                       |                                 |
| a. NORMAL OPERATING TEMP.           | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| b. CATHODIC PROTECTION <sup>5</sup> | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.6                         |
| c. PONDING/WATER                    | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.8                         |

**H.2.4 PREVIOUS OPERATING CONDITIONS**

|                                     | Control Tank <sup>1</sup> | Candidate Tank <sup>2</sup> | MATCH <sup>3</sup>       |                          | IF NO,<br>SEE SEC. <sup>4</sup> |
|-------------------------------------|---------------------------|-----------------------------|--------------------------|--------------------------|---------------------------------|
|                                     |                           |                             | Yes                      | No                       |                                 |
| a. NORMAL OPERATING TEMP.           | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| b. CATHODIC PROTECTION <sup>5</sup> | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.6                         |
| c. PONDING/WATER                    | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.8                         |

**H.2.5 CONCLUSIONS**

- a. Does this assessment include additional assessment documentation (see H.2.1), YES  or NO
- b. Based on the criteria reviewed in this Similar Service evaluation,  
 Similar Service Is  OR is NOT  recommended for this tank (check appropriate box)
- c. The corrosion rate to be applied to the soil side of the tank bottom is: \_\_\_\_\_ mpy.

**COMMENTS:**

\_\_\_\_\_  
 \_\_\_\_\_

NOTE: THE DATA SHEET SHALL BE MAINTAINED IN THE RECORD FILE AS PER SEC. 6.8.

ASSESSED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

(tank owner/operator)

**NOTES:**

1. The Control Tank is the tank for which service conditions and corrosion rates are well known.
2. The Candidate Tank is the tank to be compared to the Control Tank to determine if similar service concepts apply.
3. "Y" or "Yes" indicates that the Candidate Tank criterion essentially matches the Control Tank.
4. If the Candidate Tank criterion does not match the Control Tank criterion, see H.2.1.
5. See API 651, Section 5.3.

**SIMILAR SERVICE ASSESSMENT - DATA SHEET**

CONTROL TANK ID: \_\_\_\_\_ LOCATION: \_\_\_\_\_  
 DIAMETER (FT): \_\_\_\_\_ HEIGHT (FT): \_\_\_\_\_ CAPACITY: \_\_\_\_\_ BBLs  
 CANDIDATE TANK ID: \_\_\_\_\_ LOCATION: \_\_\_\_\_  
 DIAMETER (FT): \_\_\_\_\_ HEIGHT (FT): \_\_\_\_\_ CAPACITY: \_\_\_\_\_ BBLs

**SECTION 3.0 - TANK SHELL (PRODUCT-SIDE) ASSESSMENT**

**H.3.1 TANK CHARACTERISTICS**

|                           | Control Tank <sup>1</sup> | Candidate Tank <sup>2</sup> | MATCH <sup>3</sup>       |                          | IF NO,<br>SEE SEC. <sup>4</sup> |
|---------------------------|---------------------------|-----------------------------|--------------------------|--------------------------|---------------------------------|
|                           |                           |                             | Yes                      | No                       |                                 |
| a. YEAR TANK ERECTED      | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.1                         |
| b. SHELL MATERIAL         | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.3                         |
| c. CORROSION ALLOWANCE    | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.4                         |
| d. SHELL LINING TYPE      | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.5                         |
| e. SHELL LINING THICKNESS | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.5                         |
| f. SHELL LINING AGE       | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.5                         |

**H.3.2 AMBIENT CONDITIONS:**

|                           | Control Tank <sup>1</sup> | Candidate Tank <sup>2</sup> | MATCH <sup>3</sup>       |                          | IF NO,<br>SEE SEC. <sup>4</sup> |
|---------------------------|---------------------------|-----------------------------|--------------------------|--------------------------|---------------------------------|
|                           |                           |                             | Yes                      | No                       |                                 |
| a. LOW ONE DAY MEAN TEMP. | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.9                         |
| b. EXPOSURE TO SALT AIR   | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.9                         |

**H.3.3 CURRENT SERVICE CONDITIONS:**

|                                | Control Tank <sup>1</sup> | Candidate Tank <sup>2</sup> | MATCH <sup>3</sup>       |                          | IF NO,<br>SEE SEC. <sup>4</sup> |
|--------------------------------|---------------------------|-----------------------------|--------------------------|--------------------------|---------------------------------|
|                                |                           |                             | Yes                      | No                       |                                 |
| a. CURRENT PRODUCT NAME        | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| b. PRODUCT CLASS. (TABLE H.1)  | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| c. SPECIFIC GRAVITY OF PRODUCT | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| d. REID VAPOR PRESSURE @ 60°F  | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| e. NORMAL OPERATING TEMP.      | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| f. INERT GAS BLANKET?          | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| g. WATER BOTTOM?               | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| h. SULFUR CONTENT              | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| i. TIME IN THIS SERVICE        | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| j. PRODUCT CORROSIVITY         | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |

**H.3.4 PREVIOUS SERVICE CONDITIONS**

|                                | Control Tank <sup>1</sup> | Candidate Tank <sup>2</sup> | MATCH <sup>3</sup>       |                          | IF NO,<br>SEE SEC. <sup>4</sup> |
|--------------------------------|---------------------------|-----------------------------|--------------------------|--------------------------|---------------------------------|
|                                |                           |                             | Yes                      | No                       |                                 |
| a. PREVIOUS PRODUCT NAME       | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| b. PRODUCT CLASS. (TABLE H.1)  | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| c. SPECIFIC GRAVITY OF PRODUCT | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| d. REID VAPOR PRESSURE @ 60°F  | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| e. NORMAL OPERATING TEMP.      | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| f. INERT GAS BLANKET?          | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| g. WATER BOTTOM?               | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| h. SULFUR CONTENT              | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| i. TIME IN THIS SERVICE        | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| j. PRODUCT CORROSIVITY         | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |

**H.3.5 CONCLUSIONS**

- a. Does this assessment include additional assessment documentation (see H.2.1), YES  or NO
- b. Based on the criteria reviewed in this Similar Service evaluation,  
 Similar Service Is  OR is NOT  recommended for this tank (check appropriate box)
- c. The corrosion rate to be applied to the product side of the tank shell is: \_\_\_\_\_ mpy.

**COMMENTS:**

\_\_\_\_\_  
 \_\_\_\_\_

**SIMILAR SERVICE ASSESSMENT - DATA SHEET**

NOTE: THE DATA SHEET SHALL BE MAINTAINED IN THE RECORD FILE AS PER SEC. 6.8.

SUBMITTED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

NOTES:

1. The Control Tank is the tank for which service conditions and corrosion rates are well known.
2. The Candidate Tank is the tank to be compared to the Control Tank to determine if similar service concepts apply.
3. "Y" or "Yes" indicates that the Candidate Tank criterion essentially matches the Control Tank .
4. If the Candidate Tank criterion does not match the Control Tank criterion, see H.2.1.

**SIMILAR SERVICE ASSESSMENT - DATA SHEET**

CONTROL TANK ID: \_\_\_\_\_ LOCATION: \_\_\_\_\_  
 DIAMETER (FT): \_\_\_\_\_ HEIGHT (FT): \_\_\_\_\_ CAPACITY: \_\_\_\_\_ BBLS  
 CANDIDATE TANK ID: \_\_\_\_\_ LOCATION: \_\_\_\_\_  
 DIAMETER (FT): \_\_\_\_\_ HEIGHT (FT): \_\_\_\_\_ CAPACITY: \_\_\_\_\_ BBLS

**SECTION 4.0 - TANK SHELL (EXTERNAL SIDE) ASSESSMENT**

**H.4.1 TANK CHARACTERISTICS**

|                         | Control Tank <sup>1</sup> | Candidate Tank <sup>2</sup> | MATCH <sup>3</sup>       |                          | IF NO,<br>SEE SEC. <sup>4</sup> |
|-------------------------|---------------------------|-----------------------------|--------------------------|--------------------------|---------------------------------|
|                         |                           |                             | Yes                      | No                       |                                 |
| a. YEAR TANK ERECTED    | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.1                         |
| b. SHELL MATERIAL       | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.3                         |
| c. CORROSION ALLOWANCE  | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.4                         |
| d. INSULATION TYPE      | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.4                         |
| e. INSULATION THICKNESS | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.4                         |
| f. INSULATION AGE       | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.4                         |
| g. COATING TYPE         | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.4                         |
| h. COATING THICKNESS    | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.4                         |
| i. COATING AGE          | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.4                         |

**H.4.2 AMBIENT CONDITIONS:**

|                           | Control Tank <sup>1</sup> | Candidate Tank <sup>2</sup> | MATCH <sup>3</sup>       |                          | IF NO,<br>SEE SEC. <sup>4</sup> |
|---------------------------|---------------------------|-----------------------------|--------------------------|--------------------------|---------------------------------|
|                           |                           |                             | Yes                      | No                       |                                 |
| a. LOW ONE DAY MEAN TEMP. | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.9                         |
| b. EXPOSURE TO SALT AIR   | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.9                         |

**H.4.3 CURRENT OPERATING CONDITIONS:**

|                           | Control Tank <sup>1</sup> | Candidate Tank <sup>2</sup> | MATCH <sup>3</sup>       |                          | IF NO,<br>SEE SEC. <sup>4</sup> |
|---------------------------|---------------------------|-----------------------------|--------------------------|--------------------------|---------------------------------|
|                           |                           |                             | Yes                      | No                       |                                 |
| a. PONDING/WATER          | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| b. NORMAL OPERATING TEMP. | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |

**H.4.4 PREVIOUS OPERATING CONDITIONS**

|                           | Control Tank <sup>1</sup> | Candidate Tank <sup>2</sup> | MATCH <sup>3</sup>       |                          | IF NO,<br>SEE SEC. <sup>4</sup> |
|---------------------------|---------------------------|-----------------------------|--------------------------|--------------------------|---------------------------------|
|                           |                           |                             | Yes                      | No                       |                                 |
| a. PONDING/WATER          | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |
| b. NORMAL OPERATING TEMP. | _____                     | _____                       | <input type="checkbox"/> | <input type="checkbox"/> | H.2.1.10                        |

**H.4.5 CONCLUSIONS**

- a. Does this assessment include additional assessment documentation (see H.2.1), YES  or NO
- b. Based on the criteria reviewed in this Similar Service evaluation,  
Similar Service Is  OR is NOT  recommended for this tank (check appropriate box)
- c. The corrosion rate to be applied to the ambient side of the tank shell is: \_\_\_\_\_ mpy.

**COMMENTS:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

NOTE: THE DATA SHEET SHALL BE MAINTAINED IN THE RECORD FILE AS PER SEC. 6.8.

ASSESSED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_  
 (tank owner/operator)

**NOTES:**

1. The Control Tank is the tank for which service conditions and corrosion rates are well known.
2. The Candidate Tank is the tank to be compared to the Control Tank to determine if similar service concepts apply.
3. "Y" or "Yes" indicates that the Candidate Tank criterion essentially matches the Control Tank .
4. If the Candidate Tank criterion does not match the Control Tank criterion, see H.2.1.

### SIMILAR SERVICE ASSESSMENT - DATA SHEET

CONTROL TANK ID: \_\_\_\_\_ LOCATION: \_\_\_\_\_  
 DIAMETER (FT): \_\_\_\_\_ HEIGHT (FT): \_\_\_\_\_ CAPACITY: \_\_\_\_\_ BBLS

CANDIDATE TANK ID: \_\_\_\_\_ LOCATION: \_\_\_\_\_  
 DIAMETER (FT): \_\_\_\_\_ HEIGHT (FT): \_\_\_\_\_ CAPACITY: \_\_\_\_\_ BBLS

#### **SECTION 5.0 - CONCLUSION SUMMARY**

- a. From Section 1.0, the corrosion rate to be applied to the product-side of the tank bottom is: \_\_\_\_\_ mpy.
- b. From Section 2.0, the corrosion rate to be applied to the soil-side of the tank bottom is: \_\_\_\_\_ mpy.
- c. From Section 3.0, the corrosion rate to be applied to the product-side of the tank shell is: \_\_\_\_\_ mpy.
- d. From Section 4.0, the corrosion rate to be applied to the external side of the tank shell is: \_\_\_\_\_ mpy.
- e. Based on the corrosion rates applied, the next internal inspection for this tank will be completed in Year \_\_\_\_\_.

#### **COMMENTS:**

---



---



---



---

NOTE: THE DATA SHEET SHALL BE MAINTAINED IN THE RECORD FILE AS PER SEC. 6.8.

ASSESSED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_  
*(tank owner/operator)*

