



REGULATOR/RELIEF VALVE INSPECTION CHECKLIST

For Gas Pipeline Facilities
SOUTH DAKOTA PUBLIC UTILITIES COMMISSION

I. GENERAL INFORMATION

Operator Evaluated	_____	
Operator IOCS ID	_____	
Inspection Unit IOCS ID	_____	
Contact Person / Title (person interviewed)	Phone Number	_____
Responsible Party/Title	Phone Number	_____
Mailing Address	_____	
Inspection Date	Last Inspection Date	_____
Location of Inspection	_____	
Inspector Name	Mary Zanter & Boice Hillmer	

SCSR - Single Cut Separate Regulator, DCSR - Double Cut Separate Regulator, MS - Monitor Station, GFSNR - Grandfathered w/ No Regulator, FT - farmtap
 PV - Pop-valve, DO - Direct Operated, PO - Pilot Operated, Int - Internal, WOU - Wide Open Upstream, WOD - Wide Open Downstream

II. REGULATOR STATION

Station ID								
Location (<i>city</i>)								
Location (<i>street</i>)								
Station Type (<i>SCSR, DCSR, MS, GFSNR, FT</i>)								
Atmospheric Corrosion occurring (<i>pitting</i>)								
Surface Rust occurring								
Protective coating used on soil/air interface								
Condition of soil/air interface								
Relief valves locked open								
Relief Type (<i>PV, DO, PO, Int, WOU, WOD</i>)								
Overpressure relief pipe directed to atmosphere								
Vent pipe opening protected from bugs/weather								
Pipeline markers/sign present								
Emergency phone number listed (<i>yes/no</i>)								
Operational (<i>yes/no</i>)								
Location of station (<i>inside/outside</i>)								
Type of building ventilation								
Pipe is isolated from contact with building & ground								
Barricades necessary and installed								
Are supports made of non-combustible material								
Flange bolts through nuts								
Leaks detected audibly or through smell								
System gauge pressure (<i>psi</i>)								
Regulator set point (<i>psi</i>)								
Relief vent pressure (<i>psi</i>)								
Relief vent set point (<i>psi</i>)								
Comment number								

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