

PERMIT ATTACHMENT D1

INSPECTION SCHEDULES AND CHECKLISTS
Modified from the Permit Application,
Volume I, Section 5.2, Table 5-1, and Volume II, Appendix I

TABLE 5-1 TRIASSIC PARK WASTE DISPOSAL FACILITY INSPECTION SCHEDULE	
INSPECTION ITEM - PROBLEM OR PROBLEM AREA	INSPECTION TIME
General Facility	
Security equipment – signs, perimeter fences, lights	Daily
Stormwater detention basin – liner	Weekly and after storms
Surface water diversion ditches to stormwater detention basin	Weekly and after storms
Landfill	
Liner and cover systems - uniformity, damage and imperfections	During construction and installation
Liners and cover deterioration and malfunction	During and immediately after construction
Spills, leaks, odors, windblown particulate	Weekly and after storms
Run-on/run-off control system - uniformity, damage and imperfections	Weekly and after storms
LCRS/LDRS presence of liquid and volume of liquid pumped	Daily and after storms
Leachate collection tank (while holding waste) for condition and proper function	Daily
Hazardous and organic gases	Quarterly
Ancillary equipment	Manufacturer recommended
Sump pumping and instrumentation	Annually
Evaporation Pond	
Liners and cover systems for uniformity, damage, and imperfections	During construction and installation
Pond freeboard for level for changes	Daily and after storms
Area surrounding pond	Weekly
Run-on/run-off control system - uniformity, damage and imperfections	Weekly and after storms
LCRS/LDRS for presence of liquid and volume of liquid pumped	Daily and after storms
Berms	Weekly
Integrity of liners and associated system	Weekly
Concrete pad for tanker discharge	Weekly
Container Storage Areas - Drum Handling Unit and Roll-off Unit	
Condition of containers, signs, other safety equipment, aisle space	Weekly
Secondary containment condition, presence of liquid, and volume of liquid pumped	Weekly
Run-off/run-on ditches – uniformity, damage and imperfections	Weekly and after storms
Containers with > 500ppmw volatile organic compounds	Monthly
Ancillary equipment	Manufacturer recommended
Tanks	
Condition of tanks, signs, other safety equipment, access routes, overfill control	Daily (when storing)

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INSPECTION ITEM - PROBLEM OR PROBLEM AREA	INSPECTION TIME
Secondary containment condition	Daily
Run-off/run-on ditches – uniformity, damage and imperfections	Weekly and after storms
Leak test on ancillary equipment	Annually
Stabilization Unit	
Condition of unit when in operation – bins, ancillary equipment, monitoring systems	Daily
Condition of unit when empty	Monthly
Secondary containment condition, presence of liquid, and volume of liquid removed	Daily
Concrete vault area – remove liquids if present	Monthly
Run-off/run-on ditches – uniformity, damage and imperfections	Weekly and after storms
Sonic test to ensure thickness of tanks	Annually

INSPECTION CHECKLIST – OPERATIONAL DAYS

Inspections shall be conducted once every operational day (except as noted). An operational day is defined as a day in which waste management activities occur at the site. For purposes of this definition, laboratory operations do not constitute an operational day.

The recording of liquid level readings for Leak Detection Systems, Leachate Collection Systems, collection tanks and freeboard shall be maintained in Facility log books. Only the indication of a problem for each system shall be noted and recorded on the inspection checklist.

Inspectors are required to date, record the time of the inspection and sign their names on the Inspection Checklist that they complete. All items shall be responded to by indicating that an item is either a problem or is not a problem. If a problem is observed, a description of the problem will be recorded. If an item is not inspected, the Inspector shall respond by writing "NI" in the Problem column with an explanation of why it was not inspected. In the event the Inspector cannot complete a checklist, the new Inspector shall continue with the same inspection and shall date and sign his/her name to that checklist.

An Inspection Corrective Action Report, which will include the date and time of repairs and remedial actions taken shall be initiated and distributed by the Inspector. The remediator will retain the original copy until the item has been corrected. A second copy will be given to management and the third copy will remain with the Inspector. The signed original will then be filed with the originating checklist upon completion.

INSPECTION CORRECTIVE ACTION REPORT

		CORRECTED ITEMS	COMMENTS
		1	Reference Corrective Action Report, (Title and Date) for any corrections.
		2	
		3	
		4	
<i>Reviewed by Manager of Environmental Affairs and Regulatory Compliance:</i>			<i>Date:</i>

PRECIPITATION AND WIND READINGS

1. **Precipitation**

Date and time recorded: _____

Amount and type since last daily inspection to the nearest .1 inch: _____

Gauge working: Yes _____ No _____

2. **Wind Readings**

Date and time recorded: _____

Wind Direction: _____

Wind speed in mph: _____

Recorder working: Yes _____ No _____

GENERAL SITE

1. **Drainage Ditches**

Date and time inspected: _____

<u>Ditches Checked</u>	<u>Description and General Condition</u>
1.	
2.	
3.	
4.	
5.	
6.	
7.	

<u>Inspection Item</u>	<u>Problem Yes No</u>	<u>If Yes, Description and Ditch No.</u>
Erosion	_____	_____
Obstructions Overflow or Imminent overflow	_____	_____
Runoff Present	_____	_____
Windblown Debris	_____	_____
Spill Present	_____	_____

2. **Security Fencing and Gates**

Date and time inspected: _____

- a. Any unauthorized entry noted. _____
- b. Repairs required _____

<u>Inspection Item</u>	<u>Problem Yes No</u>	<u>If Yes, Description</u>
3. Sampling Station Time Inspected: _____		
a. Spills, Leaks or unauthorized discharges	_____	_____
b. Obstructions in floor collection trenches	_____	_____
c. Spills or Ponding		
• On roadways	_____	_____
• On access ramps	_____	_____
• On loading and Unloading areas	_____	_____
4. Tanker and Truck Parking Area Date and time Inspected: _____		

<u>Inspection Item</u>	<u>Problem Yes No</u>	<u>If Yes, Description</u>
a. Entry areas:		
• Deterioration	_____	_____
• Cracking	_____	_____
• Corrosion	_____	_____
b. Spills or Ponding		
• On roadways	_____	_____
• On loading and Unloading areas	_____	_____

• HAZARDOUS WASTE MANAGEMENT UNITS

1. **Drum Handling Unit (Weekly)**

Date _____ and _____ time
 inspected: _____

<u>Inspection Item</u>	<u>Problem Yes No</u>	<u>If Yes, Description</u>
Drums:		
• Leaks	_____	_____
• Corrosion	_____	_____
• Deterioration	_____	_____
• Incompatibility with content.	_____	_____
• Rows more than 2 drums wide	_____	_____
• Lack of pallets for	_____	_____
• Aisle space less than 2.5 feet	_____	_____
•		

<u>Inspection Item</u>	<u>Yes No</u>	<u>Problem If Yes, Description</u>
c. Compatibility group designation not visible on drums	_____	_____
d. Spills or Ponding		
• On roadways	_____	_____
• On access ramps	_____	_____
• On loading and Unloading areas	_____	_____
e. Presence of liquids or solids in:		
• Spill containment trenches	_____	_____
• Sump System 1	_____	_____
• Sump System 2	_____	_____
• Sump System 3	_____	_____
• Sump System 4	_____	_____
• Sump System 5	_____	_____
• Sump System 6	_____	_____
• Sump System 7	_____	_____
f. Incompatible waste in same segregation area.	_____	_____

g. Unreadable or no signs posting PPE requirements at entry doors. _____

h. Does waste contain VO concentrations greater than 500 ppmw _____

(If yes, see inspection forms for Volatile organic waste.)

i. No cracks on concrete floor and epoxy coating not damaged. _____

1A. DRUM HANDLING UNIT (VOLATILE ORGANIC WASTES) (WEEKLY)

Date and time inspected: _____

<u>Inspection Item</u>	<u>Yes No</u>	<u>Problem If Yes, Description</u>
a. Cover and closure devices such as lids, bungs, caps etc. are secure		_____
		<ul style="list-style-type: none">• If coverage closure device is not properly secured, then secure, repair or replace.• If volume is less than 0.1 m³, no additional inspection required.• If volume is between 0.1 m³ and 0.46 m³, then confirm requirements for air monitoring for level 1 containers (40 CFR 264.1086)• If volume is greater than 0.46 m³, then confirm requirements for air monitoring for level 1 or level 2 containers, depending on container type (40 CFR 264.1086).

2. Roll-Off Storage Unit – Non-Stabilized (Weekly)

Date and time inspected: _____

<u>Inspection Item</u>	<u>Yes</u>	<u>No</u>	<u>Problem If Yes, Description</u>
a. Containers:			
• Spills	_____	_____	_____
• Corrosion which affects structural integrity or Containment capability	_____	_____	_____
• Deterioration	_____	_____	_____
• Incompatibility with contents	_____	_____	_____
b. Open containers at time of inspection while not involved in sampling	_____	_____	_____
c. Compatibility group designation not visible on containers	_____	_____	_____
d. Incompatible waste in same segregation area.	_____	_____	_____
e. Spills or Ponding			
• On roadways	_____	_____	_____
• On access ramps	_____	_____	_____
• On loading and Unloading areas	_____	_____	_____
f. Presence of liquids in sump.	_____	_____	_____
g. Roll-off units within exclusion zone for storm water storage.	_____	_____	_____
h. Deterioration or leaks in containment berms.	_____	_____	_____
i. Columns less than 4 feet wide, rows less than 2.5 feet wide.	_____	_____	_____

Roll Off Unit Stabilized (Weekly)

Date and time inspected: _____

<u>Inspection Item</u>	<u>Yes No</u>	<u>Problem If Yes, Description</u>
a. Containers:		
• Spills	_____	_____
• Corrosion which affects structural integrity or Containment capability	_____	_____
• Deterioration	_____	_____
• Incompatibility with contents	_____	_____
b. Open containers at time of inspection while not involved in sampling	_____	_____
c. Compatibility group designation on containers.	_____	_____
d. Incompatible waste in same segregation area	_____	_____
e. Spills or Ponding		
• On roadways	_____	_____
• On access ramps	_____	_____
• On loading and Unloading areas	_____	_____
f. Presence of liquids in sump.	_____	_____
g. Roll-off units within exclusion zone for storm water storage.	_____	_____
h. Deterioration or leaks in containment berms.	_____	_____

3. **Liquid Waste Receiving and Storage Unit (Daily)**¹

Date and time inspected: _____

<u>Inspection Item</u>	<u>Problem</u> <u>Yes No</u>		<u>If Yes, Description</u>
a. Leaks or spills in area surrounding tanks.			
• Tank #1	_____	_____	
• Tank #2	_____	_____	
b. Evidence of excessive corrosion			
• Tank #1	_____	_____	
• Tank #2	_____	_____	
c. Leaks in above grade piping, hoses, valves and pumps	_____	_____	
d. Readings compared with operating log			
• Tank #1	_____	_____	
• Tank #2	_____	_____	
e. Proper operation: of tank vents of level indicators			
• Tank #1	_____	_____	
• Tank #2	_____	_____	
f. Liquids in concrete basin. .	_____	_____	
g. Liquid in secondary containment. .	_____	_____	
h. Spills or Ponding			
• On roadways	_____	_____	
• On access ramps	_____	_____	
• On loading and Unloading areas	_____	_____	

¹ Leak Test on Ancillary Equipment is Required Annually.

• 4. **Stabilization Unit (Daily)**

Date and time inspected: _____

<u>Inspection Item</u>	<u>Problem</u> <u>Yes No</u>		<u>If Yes, Description</u>
a. Presence of unknown materials, fume or gas-producing reactions or excessive dust generation.	_____	_____	
b. Posted sign to the Stabilized Unit that denotes the protection level are unreadable or missing	_____	_____	
c. Spills or ponding on process area floor.	_____	_____	
d. Treatment Mixing Basin has a freeboard less than 2 feet	_____	_____	
e. Dust Suppression System:			
• Worn hoses or pipes	_____	_____	
• Loose fitting Hydraulic leaks	_____	_____	
f. Mechanical Mixing System:			
• Worn hoses or pipes	_____	_____	
• Loose fitting Hydraulic leaks	_____	_____	
• Conveyor belts not operating properly	_____	_____	
• Electric cutoff not functioning	_____	_____	
g. Steel Bins:			
• Cracks or dents	_____	_____	
• Punctures	_____	_____	
• Excessive wear	_____	_____	
h. Fluids in leak detection system	_____	_____	
i. Damages to surface within concrete vault. system	_____	_____	

Stabilization Unit (Monthly)

Date and time inspected: _____

<u>Inspection Item</u>	<u>Yes No</u>	<u>Problem If Yes, Description</u>
a. Steel bins (when empty)		
• Cracks	_____	_____
• Punctures	_____	_____
• Excessive wear	_____	_____
b. Concrete frames for bins:		
• Spills or ponding on floor	_____	_____
• Cracks in concrete	_____	_____

5. Evaporation Pond Unit (Daily)

Date and time inspected: _____

Average Daily flow rate _____ gallons/day
 Daily Liquid Level _____ ft.

<u>Inspection Item</u>	<u>Problem Yes No</u>	<u>If Yes, Description</u>
a. Spills, discharges, leaks around perimeter.	_____	_____
b. Staff gauge not visible.	_____	_____
c. Liquid levels above max fill line	_____	_____
d. Liquid levels above pumping levels in LDRS.	_____	_____
e. Liquids levels above pumping levels in Vadose Zone System.	_____	_____
f. Liquids present in secondary containment system.	_____	_____
g. Liquid levels above max storage capacity in the pond.	_____	_____

Evaporation Pond Unit (Weekly and after storms)

Date and time inspected: _____

<u>Inspection Item</u>	<u>Yes No</u>	<u>Problem If Yes, Description</u>
a. Seeps around Pond perimeter.	_____	_____
b. Sloughing or Damage to Berms.	_____	_____
c. Damage to exposed liner system.	_____	_____
d. Damage to protective netting.	_____	_____
e. Sudden drop in impoundment contents.	_____	_____
f. Amount of liquid removed from leak detection system.	_____	_____ gallons

6. Truck Wash Facility

Date and time inspected: _____

<u>Inspection Item</u>	<u>Yes No</u>	<u>Problem If Yes, Description</u>
a. Spills or leaks in or around surrounding area	_____	_____
b. Tank leaking (Note which tank)	_____	_____
c. Ancillary equipment leaking	_____	_____
d. Collection trench overflowing	_____	_____
e. Obstructions in drainage system	_____	_____
f.		Liquids above high level

- point in collection tank _____
- Note liquid levels _____
- g. Deterioration, leaks
or corrosion of the
water recycling system _____
- Note solid levels _____
- h. Recycling System Not
Operating Properly _____

7. Landfill (Daily)

Date and time inspected: _____

<u>Inspection Item</u>	<u>Yes</u>	<u>No</u>	<u>Problem If Yes, Description</u>
a. Ponding or liquids inside cell	_____	_____	_____
b. Erosion of protective soil level	_____	_____	_____
c. Liquid above pumping level in LCRS	_____	_____	_____
d. Liquid above pumping level in LDRS	_____	_____	_____
e. Liquid above pumping level in Vadose Zone Monitoring Sump	_____	_____	_____
f. Spills, discharge, leaks, around leachate storage tank	_____	_____	_____
g. Liquids in secondary containment for leachate storage tank	_____	_____	_____
h. Liquid levels above max storage capacity in leachate storage tanks	_____	_____	_____
i. Spills or Ponding			
• On roadways	_____	_____	_____
• On access ramps	_____	_____	_____
• On loading and Unloading areas	_____	_____	_____

Landfill (Weekly)

Date and time inspected: _____

<u>Inspection Item</u>	<u>Yes No</u>	<u>Problem If Yes, Description</u>
a. Spills, discharge leaks, and/or wind blown debris around perimeter	_____	_____
b. Excess dust generation on haul roads	_____	_____
c. Blockage or damage to runoff/runon control systems	_____	_____
d. Amount of liquid removed from the sump		_____
LCRS System #1		_____ gallons
LDRS System #2		_____ gallons
Vadose System #3		_____ gallons
e. Depth of water in landfill contained water collection basin		_____ ft
f. Depth of water in landfill stormwater collection basin		_____ ft

Landfill (Quarterly)

Date and time inspected: _____

<u>Inspection Item</u>	<u>Yes No</u>	<u>Problem If Yes, Description</u>
a. Organic gas present and need for air quality permit (above background)	_____	_____