Industrial User Inspection Checklist

1. Industry Name: _____

2. Site Address(s): _____

3. Mailing Address: _____

_____

4. Contact(1): _____

5. Title: _____

6. Telephone Number: _____

7. Contact(2): _____

8. Title: _____

9. Telephone Number: _____

Credentials presented to whom ? _____

Inspector(s)

Name	Agency	Telephone Number

Inspection Date ____/____/____

Note: Complete sections A-E prior to onsite visit.

A. General Information

General Description of Processes and Products.

2a. Categorical Industry ? Yes ___ No ___

b. Category(s): _____

Subcategory(s): _____

Regulatory New Source Date ____/____/____

c. New Source ? Yes ___ No ___

d. List of categorical processes

e. List other operations producing wastewater.

3. Are any alternates to effluent monitoring conducted ? (e.g., TTO/TOMP requirements)?

Yes ___ No ___

Describe: _____

4. Provide production rates for all processes subject to production based standards.

Process	Production Rate Used for calculating Limits	Production Rate for Last 12 Months
_____	_____	_____
_____	_____	_____

5. Any anticipated changes in processes or production rates ?

Yes ___ No ___ Describe _____

_____

B. SHIFT INFORMATION

1. No. of Employees	Hours	Work Days
Shift 1: _____	_____	_____
Shift 2: _____	_____	_____
Shift 3: _____	_____	_____
Total: _____	_____	_____

2. Is production seasonal ? Yes ___ No ___

Explain: _____

_____

C. WASTEWATER DISCHARGES

1. Attach a block flow diagram of manufacturing process, chemical storage area, and wastewater generated. Identify all regulated, unregulated and dilution wastewater discharges. Include sampling location, discharge flowrates and method of disposal.* Note any changes and obtain a new diagram if necessary.

* Disposal Method

CD - Continuous discharge to sanitary
ND - Not discharged or disposed
BD - Batch discharge to sanitary sewer
HH - Hauled as hazardous waste
OD - Other disposal - not to sanitary sewer
HW - Hauled as nonhazardous waste

D. PRETREATMENT FACILITY

1. Pretreatment installed ? Yes ___ No ___

2. Attach a schematic of the pretreatment facility (include all units and sludge storage)

3. Briefly describe operation.

_____

_____

_____

4. Describe sludge storage and disposal method.

_____

_____

_____

5. Describe appearance of effluent at time of inspection.

_____

_____

_____

E. CURRENT COMPLIANCE STATUS

1. Indicate compliance status with:

a. effluent limits _____

b. monitoring _____

c. reporting _____

2. Describe existing enforcement actions (attach schedule)

_____

_____

3. What is current status of compliance with schedule ?

_____

_____

4. OTHER COMMENTS

F. SELF MONITORING

1. Does facility have sampling plan or protocol including use of 40 C.F.R. Part 136 techniques (obtain copy)?

   Yes ___ No ___

2. Is sampling location (C.1) same as in control mechanism?

   Yes ___ No ___

   If no, explain _____

3. Is sampling location appropriate ? Yes ___ No ___

   If no, explain _____

4. Are any parameters monitored by approved methods more frequently than required ?

   Yes ___ No ___

   If yes, are all results submitted to the Control Authority ?

   Yes ___ No ___

5. Does facility resample and report within 30 days of discovering a violation ?

   Yes ___ No ___

6. Are sampling records maitained on site ? Yes ___ No __

   For how long ? _____

7. a. How is flow measured ? _____

   _____

   b. Is measurement location appropriate ? Yes ___ No __

   c. Is flow measurement device calibrated ?

   Yes ___ No ___ N/A ___ How often ? _____

8. Is monitoring equipment (e.g. pH meter) calibrated ?

   Yes ___ No ___ How often ? _____

9. Is sampling and analysis done in-house or by contract ?

   _____

10. Is QA/QC program for sampling and analysis adequate ?
    (obtain copy of plan if available)

    Yes ___ No ___ If no, explain _____

    _____

11. Describe any perceived deficiencies in the self-monitoring program.

    _____

    _____

    _____

    _____

G. Hazardous Material Management

1. Is IU aware of RCRA regulations ? Yes ___ No ___

2. Does facility generate any hazardous waste ?

   Yes ___ No ___

   If yes, indicate type and method of management on site and means of disposal on a separate sheet. Describe any spillage problems or any other releases that are observed.

3. Has facility notified POTW and EPA of any hazardous waste discharges to the sewer ?

   Yes ___ No ___ N/A ___

H. SPILL PREVENTION

1. Does the IU have a spill prevention (SP) plan to address spills to the POTW ?

   Yes ___ No ___ Unknown ___ N/A ___

2. Does the facility have spill notification procedures posted ?

   Yes ___ No ___ Unknown ___ N/A ___

3a.
   Has the facility had any spills or been responsible for slug loads ?

   Yes ___ No ___ Unknown ___ N/A ___

3b.
   If yes, was POTW notified ?

   Yes ___ No ___ Unknown ___ N/A ___

4. Did the IU follow procedures outlined in the spill plan at the time of spills ?

   Yes ___ No ___ Unknown ___ N/A ___

5. Were procedures effective in containing spill ?

Yes ___ No ___ Unknown ___ N/A ___

6. Is the facility keeping records of spill events ?

Yes ___ No ___ Unknown ___ N/A ___

7. Have there been any changes in spill procedures recently ?

Yes ___ No ___ Unknown ___ N/A ___

Describe: _____

_____

_____

8. General Comments: _____

_____

_____

(i.e. perceive deficiencies/violations/discrepancies)

I. FILE REVIEW (indicate Y (in file) or N (not in file))

1. Current IU control mechanism ? __

2. Notices and correspondence with control authority including:

   a. Self monitoring report transmittals ? __

   b. BMR if required ? __

   c. Other ? _____ __

3. Do sampling records include:

   a. Date of sampling event ? __

   b. Time of sampling event ? __

   c. Name of sampling person and affiliation ? __

d. Sample collection method ? __

e. Method of sample preservation ? __

f. Description of sample location ? __

g. Name of person conducting analysis ? __

h. Date of analysis ? __

i. Time of analysis ? __

j. Sample analyses method ? __

4. Is type of sample as specified in control mechanism ? __

5. Are all parameters monitored at the required frequency ? Note any discrepencies in section K. __

6. Analytical results ? __

7a. Are all monitoring results sent to the Control Authority ? __

b. Copies to POTW ? __

8. Appropriate production records for production based standards ? __

9. Documentation of flow rates and volumes ? __

10. Are records maintained at least 3 years ? __

J. SAMPLING

1. Were samples taken ? Yes ___ No ___

If yes, attach sample results.

2. Describe sampling location, method & time.

_____

_____

K. OTHER COMMENTS

Note any entry or other problems.