

## AERATED LAGOONS CHECKLIST

Permit # MO-\_\_\_\_\_ Facility\_\_\_\_\_ Date\_\_\_\_\_

1. What is design flow \_\_\_\_\_ MGD; \_\_\_\_\_ peak MGD
2. What is actual flow \_\_\_\_\_ MGD; \_\_\_\_\_ peak MGD
3. Type of lagoon system: Aerobic \_\_\_; Facultative \_\_\_
4. Number of cells in lagoon system: \_\_\_ (operated in series)
5. Number of lagoons in system: \_\_\_ (operated in parallel)
6. What are lagoon dimensions? \_\_\_\_\_
7. What is the water depth in the lagoon? \_\_\_\_\_ ft.
8. Is the area around the lagoon landscaped to prevent surface water from entering the lagoon? Yes\_\_\_ No\_\_\_
9. Is the area around the lagoon fenced, gated, and padlocked? Yes\_\_\_ No\_\_\_
10. Type of aeration system (mechanical, coarse or fine bubble diffused, etc.) \_\_\_\_\_; # of units \_\_\_\_\_; capacity of each unit \_\_\_\_\_
11. Are all mechanical aerators / air blowers operating properly? Yes\_\_\_ No\_\_\_
12. Does equipment have adequate spare parts inventory? Yes\_\_\_ No\_\_\_
13. Does mixing appear to be: excessive \_\_\_; adequate \_\_\_; insufficient\_\_\_
14. Are there signs of solids accumulation? Yes\_\_\_ No\_\_\_
15. Do there appear to be dead spots in lagoon during aeration? Yes\_\_\_ No\_\_\_ If yes, where? \_\_\_\_\_
16. Color: green\_\_\_; dark green\_\_\_; light brown\_\_\_; dark brown\_\_\_ other\_\_\_
17. Odor: septic \_\_\_; musty \_\_\_; earthy \_\_\_; none \_\_\_; other \_\_\_\_\_
18. Foam: light, crisp \_\_\_; thick, dark \_\_\_; heavy white \_\_\_; other \_\_\_\_\_
19. Is the algae in the lagoon primarily: bluegreen \_\_\_; green \_\_\_; brown\_\_\_
20. Does the lagoon have a foam or scum control system? Yes\_\_\_ No\_\_\_ If yes, is it operable? Yes\_\_\_ No\_\_\_
21. Are there weeds or woody vegetation growing in lagoon? Yes\_\_\_ No\_\_\_
22. Are there trees or other obstacles in the vicinity that would prevent wind action to the lagoon? Yes\_\_\_ No\_\_\_
23. Is there evidence of rodent burrowing in the dikes? Yes\_\_\_ No\_\_\_
24. Is there evidence of bank erosion? Yes\_\_\_ No\_\_\_
25. Are there excessive insect populations in the vicinity? Yes\_\_\_ No\_\_\_
26. How often are lagoon facilities checked? \_\_\_\_\_
27. What is the frequency of scheduled maintenance? \_\_\_\_\_
28. Are maintenance records maintained? Yes\_\_\_ No\_\_\_
29. What is the frequency of testing in each cell? \_\_\_\_\_
30. Are D.O. profiles conducted on a periodic basis? Yes\_\_\_ No\_\_\_
31. What is the D.O.? \_\_\_\_\_ mg/l What is the pH? \_\_\_\_\_
32. Are test results acceptable according to the permit? Yes\_\_\_ No\_\_\_
33. What is the general condition of lagoon facility? Good\_\_\_ Fair\_\_\_ Poor\_\_\_
34. Comments: \_\_\_\_\_  
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