

NON-AERATED (FACULTATIVE) 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 ___; Anaerobic___
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. Are there signs of solids accumulation? Yes___ No___
11. Color: green___; dark green___; light brown___; dark brown___; other___
12. Odor: septic___; musty___; earthy___; none___; other_____
13. Is the algae in the lagoon primarily: bluegreen ___; green___; brown___
14. Does the lagoon have a foam or scum control system? Yes___ No___
- 14a. If yes, is it operable? Yes___ No___
15. Are there weeds or woody vegetation growing in lagoon? Yes___ No___
16. Are there trees or other obstacles in the vicinity that would prevent wind action to the lagoon? Yes___ No___
17. Is there evidence of rodent burrowing in the dikes? Yes___ No___
18. Is there evidence of bank erosion? Yes___ No___
19. Are there excessive insect populations in the vicinity? Yes___ No___
20. How often are lagoon facilities checked?_____
21. What is the frequency of scheduled maintenance?_____
22. Are maintenance records maintained? Yes___ No___
23. What is the frequency of testing in each cell?_____
24. What is the D.O.? _____mg/l What is the pH? _____
25. Are test results acceptable according to the permit? Yes___ No___
26. What is the general condition of lagoon facility? Good___ Fair___ Poor___
27. What are the most common problems the Operator has had with the lagoon system? _____

Comments:
