

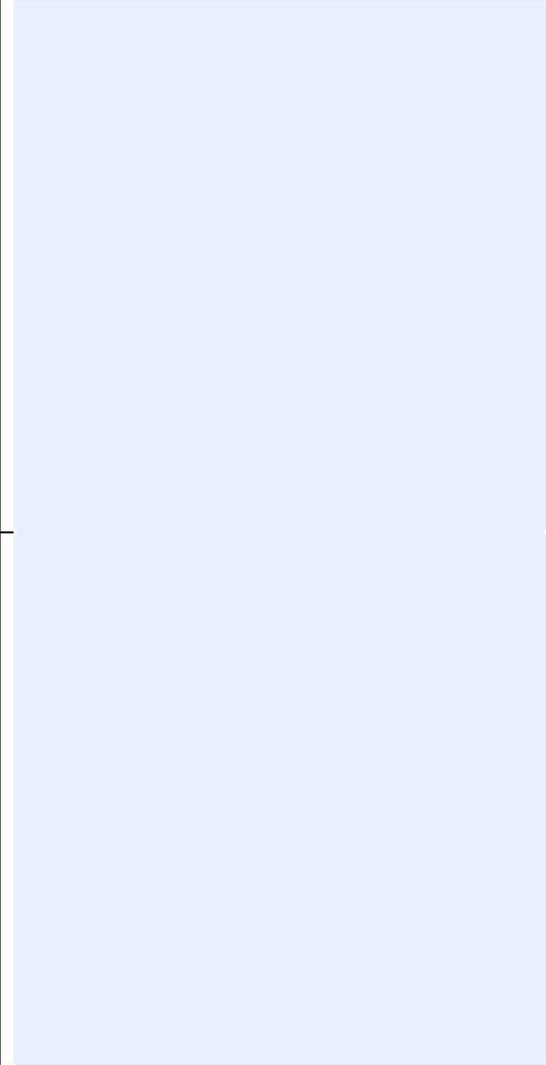
MISSOURI DEPARTMENT OF NATURAL RESOURCES
 SOLID WASTE MANAGEMENT PROGRAM
INACTIVE SANITARY LANDFILL INSPECTION CHECKLIST

I. GENERAL INFORMATION					
DATE OF INSPECTION Date.	DATE CEASED ACCEPTING WASTE date	TIME OF ARRIVAL/DEPARTURE Arrival/Departure	PERMIT NUMBER Permit Number		
FACILITY NAME/ADDRESS Facility Name/ Address			COUNTY County		
MAILING ADDRESS Mailing Address		CITY City	STATE State	ZIP CODE Zip	
LANDFILL REPRESENTATIVE PRESENT Representative		TELEPHONE NUMBER WITH AREA CODE Telephone	TEMPERATURE/WEATHER Temperature/Weather		
II. INSPECTION CHECKLIST—Check all Sections-S=Satisfactory U=Unsatisfactory or N=Not Applicable/Observed/Inspected					
	S	U	N	10 CSR 80-2.030	SOLID WASTE DISPOSAL AREA CLOSURE AND POST-CLOSURE CARE
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(4)(A)3B	Owner/operator begins implementation of closure plan within 30 days after last waste accepted unless otherwise approved by the department
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(4)(A)3D	Closure activities completed in accordance with plan within 180 days of beginning of closure or extended with department approval
10 CSR 80-3.010		DESIGN AND OPERATION			
DESIGN					
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(5)(C)1	For areas observed, construction and operation of the site in accordance with approved plans and specifications
SURVEY CONTROL					
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(7)(C)	Boundary markers, benchmarks and horizontal control stations in place, clearly marked and identified
WATER QUALITY					
5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(8)(B)1F	MO Clean Water Law permits and approvals for runoff obtained
6.	<input type="checkbox"/>	<input type="checkbox"/>		(8)(C)1	Grading promotes rapid runoff without excessive erosion and regrading done to avoid ponding of precipitation and to maintain cover integrity
7.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(8)(C)2	Water contacting waste managed as leachate
LEACHATE COLLECTION SYSTEM					
8.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(9)(C)1	In portions observed, leachate collection system operated and maintained per permit and the approved design and plans
9.	<input type="checkbox"/>	<input type="checkbox"/>		(9)(C)2	Leachate not allowed to discharge off-site or into waters of the state
GROUNDWATER MONITORING					
10.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(11)(C)1D	Monitoring wells and piezometers installed, developed, protected, maintained, identified and decommissioned in accordance with 10 CSR 23-4. Wells inspected: Wells
AIR QUALITY					
11.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(13)(C)	No Burning of regulated waste
12.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(13)(C)	No Burning of wood waste on-site without prior department approval
GAS CONTROL					
13.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(14)(C)1	Decomposition gases not allowed to migrate laterally from landfill
14.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(14)(C)2A	Methane not allowed to concentrate in buildings on-site above 25% LEL (1.25% by volume)
15.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(14)(C)2B	Methane not allowed to concentrate in the soil at the property boundary above 50% LEL (2.5% by volume)
AESTHETICS					
16.	<input type="checkbox"/>	<input type="checkbox"/>		(16)(C)4	Salvaged materials removed from landfill

S	U	N	10 CSR 80-3.010	DESIGN AND OPERATION (continued)
COVER				
17.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(17)(C)2 Cover increased to at least 12 inches of compacted cover on filled areas idle for more than 60 days, prior to application of final cover
18.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(17)(C)3 Intermediate and final slopes do not exceed 33 $\frac{1}{3}$ % [without approval per (17)(B)3]
19.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(17)(C)4A Final cover applied – areas without liners
20.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(17)(C)4B Final cover applied – areas with liners
21.	<input type="checkbox"/>	<input type="checkbox"/>		(17)(C)7 Surface grades and side slopes maintained to promote runoff without excessive erosion
22.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(17)(C)8 Vegetation established within 180 days of completion of installation of final cover
23.	<input type="checkbox"/>	<input type="checkbox"/>		(17)(C)9 Regrading and recovering performed as necessary to maintain cover slope and integrity
24.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(17)(C)10 Borrow areas reclaimed per approved plans
SAFETY				
25.	<input type="checkbox"/>	<input type="checkbox"/>		(19)(A) For areas observed, landfill constructed and operated in a manner to protect the health and safety of personnel and others associated with and affected by the operation
26.	<input type="checkbox"/>	<input type="checkbox"/>		(19)(C)5 Site access controlled by established roadways only and only when landfill personnel are present
RECORDS				
27.	<input type="checkbox"/>	<input type="checkbox"/>		(20)(C)1 Records maintained at the landfill office or made available upon request
28.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(20)(C)1B Gas monitoring records: QTR QTR
29.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(20)(C)1C Groundwater monitoring records: QTR QTR
30.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(20)(C)1I Most recently approved closure/post closure plan
31.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(20)(C)2 Survey and plat submitted for approval and filed with county Recorder of Deeds office. Two copies of recorded documents submitted to the department. Date Filed: <u>Date File</u>
32.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(20)(C)2 Easement submitted for approval and filed with county Recorder of Deeds office. Copy of recorded document submitted to the department. Date Filed: <u>Date Filed</u>
III. REMARKS – All blocks marked U (Unsatisfactory) or N (Not Applicable/Observed/Inspected) require a written explanation				
Click here to enter text.				
SIGNATURE OF INSPECTOR 				DATE Date

Photograph Addendum

		<p>Photograph: #1 Date Taken: Date By: Photographer Description: Description</p>
		<p>Photograph: #2 Date Taken: Date By: Photographer Description: Description</p>
		<p>Photograph: #3 Date Taken: Date By: Photographer Description: Description</p>

	<p>Photograph: #4 Date Taken: Date By: Photographer Description: Description</p>
	<p>Photograph: #5 Date Taken: Date By: Photographer Description: Description</p>
	<p>Photograph: #6 Date Taken: Date By: Photographer Description: Description</p>