

TRICKLING FILTER CHECKLIST

Permit # MO-_____ Facility _____ Date _____

1. What is the design flow? _____MGD; peak design flow _____MGD
2. What is the actual flow? _____MGD; actual peak flow _____MGD
3. What is the recycle rate? _____MGD; ratio: _____
4. What is the filter classification? low rate ____; intermediate rate ____; high rate ____; roughing ____
5. Number of units ____; Dimension of units _____
6. If multiple units are used, is flow distributed equally? Yes ____; No ____
How is it distributed? _____
7. Are the characteristics of the filter media different in the various units?
Yes ____; No ____; If yes, describe: _____
8. Is operation of the system: manual ____; semi-automatic ____; automatic ____; computer controlled ____
9. Type of media: rock ____; plastic ____; redwood ____; other _____
10. Growth color: black ____; dark brown ____; light brown ____; green ____; other _____
11. Odor: septic ____; musty ____; earthy ____; none ____; other _____
12. Is there evidence of uneven flow distribution? Yes ____; No ____
13. Are any nozzles clogged? Yes ____; No ____
14. Is there evidence of filter clogging, ponding? Yes ____; No ____
15. Are there problems with icing? Yes ____; No ____
16. Is there evidence of: filter flies ____; snails ____; other _____
17. Is there grass, moss, or other vegetation growing on filter? Y ____; N ____
18. Are there operable flow measurement devices for recirculation?
Yes ____; No ____; Date last calibrated _____
19. Are influent / recirculating pumps in good working condition?
Yes ____; No ____; N/A ____
20. Safety features provided: guard rails ____; nonskid surfaces ____; lifelines ____; lights ____; other _____
21. Is there an approved lockout / tagout program? Yes ____; No ____
22. Is there an alarm system for the process? Yes ____; No ____
- 22a. (If yes, type: radio telemetry ____; phone dialer ____; local audible/visual ____
23. Alternate power source available? Yes ____ No ____
- 23a. If yes, type: station. generator ____; port. generator ____; separate utility ____
24. How often are units checked? _____
25. Are operation reports maintained? Yes ____; No ____
26. What is the BOD loading rate / filter? _____
27. What is the effluent D.O.? _____
28. What is the frequency of scheduled maintenance? _____
29. Are maintenance records maintained? Yes ____; No ____
30. Do units have adequate spare parts inventory? Yes ____; No ____
31. General housekeeping of units: Good ____; Fair ____; Poor ____
32. What is the general condition of the trickling filter system? G ____ F ____ P ____

33. What are the most common problems the Operator has had with the trickling filter system? _____

Comments:

