

ENVIRONMENTAL COMPLIANCE AUDIT CHECKLIST

Pursuant to: California Code of Regulations (CCR) Title 22, 29 Code of Federal Regulations,
40 CFR 112, NPDES & IUDP Permit, SDAPCD, MCO P5090.2A, MCAS HWMP

Unit / Facility: _____ Date: _____
 Location: _____ Permit No(s): _____
 POC / Phone: _____

HAZARDOUS WASTE COORDINATORS (HWC)

Primary: _____ HWC Course Date: _____ HWC Refresher Date: _____
 Alternate: _____ HWC Course Date: _____ HWC Refresher Date: _____

| LINE ITEMS | | FINDINGS | | |
|------------|---|----------|----|----|
| 1. | ENVIRONMENTAL RECORDS VOLUME I: COMPLIANCE ORDERS BINDER. | Yes | No | NA |
| | a. Is a copy of the current CO's Environmental Policy Statement maintained in this binder? [HWMP, Ch9(3)(g)] | | | |
| | b. Is there a copy of HWMP, SPCC, Air Quality Management Plan, SWPPP, SCP, and ISWMP and are these copies the most current? [HWMP, Ch9(3)(a)] | | | |
| | c. Is the most current copy of the Environmental Compliance Audit maintained in this binder? [HWMP, Ch9(3)(a)] | | | |
| 2. | ENVIRONMENTAL RECORDS VOLUME II: BUSINESS PLAN BINDER. | Yes | No | NA |
| | a. Is the Unified Program Facility Permit (Health Permit) up-to-date and maintained in this binder? [HSC 25404(c)(1)(A); HMD Unified Program Facility Permit HM-906] | | | |
| | b. Is the Hazardous Material Business Plan up-to-date and maintained in this binder? [HSC 25503.5] | | | |
| | c. Are the Appointment Letters and Billet Descriptions for the Primary and Alternate Hazardous Waste Coordinator available? [CCR 66265.16; HWMP Ch9(3)(b)] | | | |
| | d. Are HWC Training Certificates for the (Pri/Alt) current and available? [HWMP, Ch1(4)(a)(2)(c)] | | | |
| | e. Is the Topics 1-4 Training Attendance Roster up-to-date and available? [HSC 25504, HWMP, Ch 8(6)(e)] | | | |
| | f. Are copies of the Business Plan Training Plans, Topics 1- 4 available? [HSC 25504; HWMP, Ch8(6), and Ch (9)(3)(b)] | | | |
| | g. Are all HM listed on the Unit's AUL? [StaO 5100.1 Encl6; HWMP, Ch2(3)(a)(1)] | | | |
| | h. Does the Unit accumulate medical waste i.e. Sharps, Pharmaceutical, Biohazard? If so, include the Medical Waste Compliance Checklist with this audit. [HSC 117960; HWMP, Ch9(3)(b)] | | | |
| | i. Are copies of the most recent County of San Diego HMD Inspection available? [HWMP, Ch9(3)(b)] | | | |
| | j. Is the HW Coordinator (Pri/Alt) familiar with Business Plan Spill Notification Procedures? | | | |
| 3. | ENVIRONMENTAL RECORDS VOLUME III: RECORD KEEPING BINDER. | Yes | No | NA |
| | a. Are weekly site inspections performed, records and Hazardous Waste Inventory maintained? [CCR 66265.174; HWMP, Ch9(3)(c)] | | | |
| | b. Are Daily Above Ground Storage Tank (AST) Inspections performed and records maintained for the Used Oil AST? [CCR 66265.195(a); HWMP, Ch9(3)(c)] | | | |
| | c. Are waste disposal receipts maintained in this binder i.e. Turn-in Sheets, DD1348, vendor receipts, Waste Transfer Log? [CCR 66265.73(b)(1); HWMP, Ch9(3)(c)] | | | |
| | d. Are discharges from the silver recovery unit tested at least once every three months using a silver test paper and documented in the silver recovery-operating logbook? [IUDP Permit 05-1019 App D; HWMP, Ch9(3)(c)] | | | |
| | e. Is the Used Oil AST Certification and Engineering Exemption up-to-date and maintained in this binder? [CCR 66265.192(j)] | | | |
| 4. | OTHER REQUIRED DOCUMENTS: | Yes | No | NA |
| | a. Are spills recorded in the "Spill Log" with the spill date, time, product spilled, quantity, location, cleanup, actions taken and the name of the person reporting the spill? [CCR 66265.56(j); HWMP, Ch7(3)(e)] | | | |
| | b. Is an MSDS for each required Hazardous Material (HM) readily accessible to each employee? [29CFR 1910.1200(g)(8); StaO 5100.1 Encl 6] | | | |
| 5. | SATELLITE ACCUMULATION AREA (SAA): | Yes | No | NA |

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| | | | | |
|-----------|---|------------|-----------|-----------|
| | a. Is satellite area authorized by Waste Management Division and identified in Unit's Business Plan? <i>[HWMP, Ch4(4)(b)(1)]</i> | | | |
| | b. Is the satellite area limited to less than 55 gallons total? <i>[MCO P5090.2A Chap9.9104(1)(h)(1), HMWP Ch4(4)(b)(5)]</i> | | | |
| | c. Are the correct waste labels, filled out, legible, and visible for inspection? <i>[CCR 66262.34(f)(1)&(3)]</i> | | | |
| | d. Are weekly satellite area inspections conducted and records maintained? <i>[HWMP Ch4(b)(7)]</i> | | | |
| | e. Is the waste moved to 60-day WAS within nine months of the ASD or when the container is full, whichever occurs first? <i>[HWMP, Ch4(4)(b)(6)]</i> | | | |
| | f. Is the waste moved to the 60-day site within 3 day of the container fill date? <i>[CCR 66262.34(e)(3); [HWMP, Ch4(b)(6)]</i> | | | |
| 6. | HAZARDOUS WASTE ACCUMULATION SITE (HWAS): | Yes | No | NA |
| | a. Are the correct waste labels used, filled out, legible, securely attached and visible for inspection? <i>[CCR 66262.34(f)(1)&(3); HWMP Ch4(5)(d) and (6)]</i> | | | |
| | b. Are the containers compatible with the waste inside the container? Check containers for deterioration and structural integrity. <i>[CCR 66264.172; HMWP Ch4(5)(a)]</i> | | | |
| | c. Are the containers kept closed and secured except when waste is being added or removed? <i>[CCR 66264.173(a), APCD Rule 67.17(d)(1); HMWP Ch4(5)(e)]</i> | | | |
| | d. Are all spills cleaned up immediately and are drums/tanks/containment areas (tops, sides and/or decks) kept clean and free of spill residue? <i>[HWMP Ch2(3)(e)(7), Ch4(5)(c)]</i> | | | |
| | e. Are containers with ignitable waste grounded during waste accumulation and are waste lockers grounded appropriately? <i>[29CFR 1910.107(e)(9), NFPA Code 30, 2008 edition, Chapter 18, Section 18.4.2.2)]</i> | | | |
| | f. Is the initial accumulation start date (ASD) of the waste clearly marked and visible on each container and less than 60 days? <i>[CCR 66262.34(f)(1)]</i> | | | |
| | g. Is the full date clearly marked and visible on each container of waste that was generated at a "Satellite Accumulation Area" (SAA)? <i>[CCR 66262.34(e)(1)(C)]</i> | | | |
| | h. Are incompatible wastes separated (i.e., no oxidizers next to flammables) by means of a dike, berm, wall or other device and with adequate aisle space for access and/or inspection? <i>[CCR 66265.177(c)]</i> | | | |
| | i. Are containers or inner liners larger than five gallons that previously held HM/HW properly marked with words EMPTY and the date it was emptied? <i>[CCR 66261.7(f); HWMP Ch14]</i> | | | |
| | j. Is secondary containment damage free, and free of liquids and debris, and drainage valves leak tight and kept closed? <i>[40CFR 112.8(c)(3); CCR 66265.175]</i> | | | |
| | k. Has the secondary containment drainage log been completed after every drainage event? <i>[SPCC 4.2.3, App B]</i> | | | |
| | l. Are warning signs clearly visible and legible from a distance of 25' in any direction? (No Smoking, HW Area [bilingual if necessary]) <i>[CCR 66265.17(a); 66265.14(c)]</i> | | | |
| | m. During the workplace walk-through, are HWs properly containerized and are drip pans placed underneath all leaking aircraft, machinery and equipment? <i>[CCR 66265.31; HWMP Ch2(3)(e)(1) and ch4(5)]</i> | | | |
| | n. Are eyewash stations & fire extinguishers available and in serviceable condition? <i>[29 CFR 1910.151(c), CCR 66265.32(c), ANSI Z358.1 5.5.2]</i> | | | |
| | o. Is Emergency Spill Response equipment (communication alarm and spill kit) available and adequately stocked? <i>[CCR 66265.32(a)-(d), HWMP Ch7(4)(h)]</i> | | | |
| | p. Are Lead-Acid Batteries marked with the date removed from service? <i>[CCR 66266.81(a)(6)(D)]</i> | | | |
| 7. | RECYCLING: | Yes | No | NA |
| | a. Are tires being stored in a manner which prevents the breeding and harborage of vectors? <i>[Title 14, CCR 17353(a)]</i> | | | |
| | b. Is Unit recycling to the maximum extent practicable? <i>[ISWMP, Ch4(4.1)]</i> | | | |

Supervisor: _____

Date: _____

Unit Coordinator: _____

Date: _____

Inspector: _____

Date: _____

ENVIRONMENTAL COMPLIANCE AUDIT CHECKLIST

Pursuant to: California Code of Regulations (CCR) Title 22, 29 Code of Federal Regulations,
40 CFR 112, NPDES & IUDP Permit, SDAPCD, MCO P5090.2A, MCAS HWMP

NOTES:

MEDICAL WASTE COMPLIANCE CHECKLIST

Pursuant to 29 CFR, California HSC, Certified Unified Program Agency, HWMP StaO 5090.5B,
Naval Medical Center San Diego Instruction 6280.1C, Navy Pharmaceutical Waste Management Guidelines

Unit / Facility: _____ Date: _____
 Location: _____ Permit No(s): _____
 POC / Phone: _____

| LINE ITEMS | | FINDINGS | | |
|------------|---|----------|----|----|
| 1. | MEDICAL WASTE MANAGEMENT: | Yes | No | NA |
| | a. Is medical waste separated from other waste at the point of origin? [HWMP Chap 13, HSC 118275 (a)] | | | |
| | b. Is untreated medical waste (Chemo, Path, and Pharmaceutical) being properly disposed of to an authorized point? [HWMP Chap 13, HSC 118340(a)] | | | |
| | c. Has operator posted an approved and legible Biohazard Waste "warning sign" at the waste storage area(s)? A biohazard symbol or worded signage in English and Spanish. [HWMP Chap 13, HSC 118310] | | | |
| | d. Is medical waste storage area secured as to deny access to unauthorized persons? [HWMP Chap 13, HSC 118310] | | | |
| | e. Very small quantity generator (<20 pounds/month) is properly storing all biohazard waste when ready for disposal for less than 7 days ? [HWMP Chap 13] | | | |
| | f. Are medical waste container/bins labeled with the words "Biohazard Waste" or the international biohazard symbol and the word "Biohazard" on the lid and side so as to be clearly visible? [HWMP Chap 13, HSC 118280 (b)] | | | |
| | g. Is medical waste being treated on site? | | | |
| | h. Is medical SOLID WASTE stored in a trash receptacle or enclosure so as to deny access to unauthorized persons? [HWMP Chap 13, CUPA 68.1211] | | | |
| 2. | RED BIOHAZARD BAG WASTE: | Yes | No | NA |
| | a. Are red bags labeled with the generator's name, address, and phone number on the outside of the red bag? [HWMP Chap 13] | | | |
| | b. Are red bags tied-off "double goose neck" to prevent leakage or expulsion of contents during handling and storage? [HWMP Chap 13, HSC 118280] | | | |
| | d. Are red bags containerized in rigid, leak resistant, and covered containers or bins? [HWMP Chap 13, HSC 118280 (b)] | | | |
| | e. Is the storage time for red bag waste no more than 7 days? [BUMED 6280.1B, HWMP Chap 13, HSC 118280 (d)(1)(A)] | | | |
| 3. | SHARPS WASTE: | Yes | No | NA |
| | a. Is sharps waste stored in an approved and properly marked sharps container? [HWMP Chap 13, HSC 118285] | | | |
| | b. Is sharps container labeled with the generator's name, address, and phone number on the outside of the container? [HWMP Chap 13, CUPA 68.1205] | | | |
| | c. Is full sharps container dated and taped closed or tightly-lid ready for disposal, to preclude loss of contents? [HWMP Chap 13, HSC 118285 (b)] | | | |
| | d. Is the storage time for full sharps waste no greater than 7 days when ready to be disposed? [BUMED 6280.1B, HWMP Chap 13] | | | |
| | e. Are sharp containers in an "In-Use" status, removed from use when they become three-fourths full, or develop an odor? [HWMP Chap 13] | | | |
| 4. | CHEMOTHERAPY WASTE: | Yes | No | NA |
| | a. Is chemotherapy waste segregated from other medical waste? [HSC 118275 (d)(1)] | | | |
| | b. Is chemotherapy waste container labeled with the words "chemotherapy waste" or other approved markings on the lid and sides? [HSC 118275 (d)(1)] | | | |
| | c. Are waste chemotherapy drugs managed as HW IAW Navy Pharmaceutical Waste Management Guidance? | | | |
| 5. | PATHOLOGY WASTE: | Yes | No | NA |
| | a. Is pathology waste segregated from other medical waste? [HSC 118275 (f)] | | | |
| | b. Is pathology waste container labeled with the words "pathology waste" or other approved markings on the lid and sides? [HSC 118275 (f)] | | | |

MEDICAL WASTE COMPLIANCE CHECKLIST

Pursuant to 29 CFR, California HSC, Certified Unified Program Agency, HWMP StaO 5090.5B,
Naval Medical Center San Diego Instruction 6280.1C, Navy Pharmaceutical Waste Management Guidelines

| 6. | PHARMACEUTICAL WASTE: | Yes | No | NA |
|----|--|-----|----|----|
| | a. Is pharmaceutical waste segregated from other medical waste? <i>[6280.1C, HSC 118275 (g)]</i> | | | |
| | b. Is pharmaceutical waste container labeled with the words "incineration only" or other approved markings on the lid and sides? <i>[6280.1C, HSC 118275 (g)]</i> | | | |
| | c. Is the storage time for pharmaceutical waste less than 7 days when ready to be disposed? <i>[HWMP Chap 13]</i> | | | |
| | d. Does the unit maintain a pharmaceutical inventory HW pharmaceuticals? <i>[HWMP Chap 13, Navy PharmaWasteMgtGuidelines]</i> | | | |
| | e. Are RCRA HW pharmaceuticals identified and managed IAW federal and state HW regulations? <i>[HWMP Chap 13, Navy PharmaWasteMgtGuidelines]</i> | | | |
| 7. | RECORDKEEPING and TRAINING: | Yes | No | NA |
| | a. Is Environmental Health Permit for medical waste generators present and current? <i>[HWMP Chap 13, CUPA 68.1203, 68.1202, 68.905]</i> | | | |
| | b. Has Medical Waste Management Plan been submitted to County HMMD if required? <i>[HWMP Chap 13, HSC 117935, 117960]</i> | | | |
| | c. Did the generator retain on file disposal receipts and/or tracking documents for waste shipped offsite for at least 3 years? <i>[HWMP Chap 13, HSC, 117975]</i> | | | |
| | d. Does the generator have a current Limited Quantity Hauling Exemption (LQHE) from County HMMD authorizing the unit to transport less than 20 pounds of medical waste off Station? <i>[HWMP Chap 13, HSC 118025, 118030(a) (1)]</i> | | | |
| | e. Have employees with potential exposure to biohazard waste been adequately trained on MW management procedures at the time of initial assignment and at least annually thereafter? <i>[HWMP Chap 13, 29CFR 1910.1030(g) (2)]</i> | | | |

Supervisor: _____ **Date:** _____

Unit Coordinator: _____ **Date:** _____

Inspector: _____ **Date:** _____

NOTES:

SPCC/STORAGE TANK MANAGEMENT COMPLIANCE AUDIT CHECKLIST

For: SPCC and POL Storage Tank Program

Pursuant to: MCAS Miramar SPCC Plan and UST/AST Management Plan, Calif. H&SC Chapters 6.67 (ASTs) 6.7 (USTs), 40 CFR 112

Unit / Facility: _____ Date: _____

Location: _____ Permit No(s): _____

POC / Phone: _____

| LINE ITEMS | | FINDINGS | | | COMMENTS |
|------------|--|----------|----|----|----------|
| 1. | AUDIT CHECKLIST | Yes | No | NA | |
| | a. Are the SPCC general and site specific (if applicable) documents present and current in the recordkeeping binder? | | | | |
| | b. Storage tank condition: Any visible signs of exterior corrosion, peeling or fading coating, leaks at seams and/or connections? 40 CFR 112.8(c); MCAS Miramar SPCC Plan | | | | |
| | c. Is the secondary containment area free of liquid and debris? 40 CFR 112.8(c) | | | | |
| | d. Is the secondary containment area drainage valve present and operational? 40 CFR 112.8(c) | | | | |
| | e. Is the secondary containment area (if a single-wall tank) drainage valve maintained in a closed position? 40 CFR 112.8(c) | | | | |
| | f. Are secondary containment drainage logs being completed and maintained? 40 CFR 112.8(c) | | | | |
| | g. Are monthly inspection records being maintained for product POL storage tank(s)? 40 CFR 112.7(e), 112.8(c) | | | | |
| | h. Is the used oil AST Certification & Engineering Assessment Exemption Notification form [DEH HM-9271 (02/11)] on file and current? | | | | |
| | i. Are daily inspection records being maintained for the used oil AST? 40 CFR 112.7(e), 112.8(c) | | | | |
| | j. Has the tank operator(s) completed the MCAS Miramar SPCC and Storage Tank Management training module in the past year and are records available? 40 CFR 112.7(f) | | | | |
| | k. Are spills recorded and, if necessary, reported? Spills requiring emergency response personnel assistance and/or 25 gallons or greater require reporting to EMD. Ca H&S 25270.8 | | | | |
| | l. Are Spill Kits available, in good condition and properly stocked? 40 CFR 112.7(c) | | | | |
| | m. Is the storage tank and/or HW/HM storage site locked? 40 CFR 112. 7(g) | | | | |

Present During Inspection: _____

Supervisor (Facility Personnel): _____ Date: _____

Inspector (EPS/Compliance): _____ Date: _____

NOTES:

UNDERGROUND STORAGE (UST) TANK MANAGEMENT COMPLIANCE AUDIT CHECKLIST

For: SPCC and POL Storage Tank Program

Pursuant to: Calif. H&SC Chapter 6.7 (USTs), Title 23 CCR, 40 CFR 280, MCAS Miramar SPCC and UST/AST Management Plans

Unit / Facility: _____ **Date:** _____
Location: _____ **Permit No(s):** _____
POC / Phone: _____

| LINE ITEMS | | FINDINGS | | | COMMENTS |
|------------|--|----------|----|----|----------|
| 1. | AUDIT CHECKLIST | Yes | No | NA | |
| | a. Monthly DUSTO inspections being conducted and reports on file?* | | | | |
| | 23 CCR 2715 | | | | |
| | b. DUSTO Annual Employee training current and forms on file?* | | | | |
| | 23 CCR 2715 | | | | |
| | c. Triennial Secondary Containment Testing being conducted and recorded in the proper timeframe?* | | | | |
| | 23 CCR 2367, Ca H&SC 25284/25291 | | | | |
| | d. Annual DEH Unified Program Facility permit current and on file?* | | | | |
| | Ca H&SC 28284 | | | | |
| | e. UST Operating Permit current and on file? (permit good for 5 years)* | | | | |
| | Ca H&SC 28284 | | | | |
| | f. Is the DUSTO Designation form (DEH HM-9174) present and are the indicated personnel's certifications current?* | | | | |
| | 23 CCR 2715 | | | | |
| | g. Are the UST operating permits current, and the UST operating permit, monitoring plan and emergency response plan posted? (plans modified/changed only when needed)*** | | | | |
| | Ca H&SC 28284, 23 CCR 2632/2641 | | | | |
| | h. Is the leak monitoring system panel displaying anything other than all conditions normal? If YES, then what is the abnormal condition?** | | | | |
| | 23 CCR 2632 | | | | |
| | i. Are alarm conditions on the UST monitoring system panel recorded (in an Alarm Log), reported and investigated?* | | | | |
| | 23 CCR 2632 | | | | |
| | j. Is the audible and visual UST overfill alarm functioning properly?* | | | | |
| | 23 CCR 2636 | | | | |

* To be reviewed at the Designated UST Operator (DUSTO) binder

** To be reviewed at the UST site

*** To be reviewed at both the DUSTO binder and the UST site

Present During Inspection: _____
Supervisor (Facility Personnel): _____ **Date:** _____
Inspector (EPS/Compliance): _____ **Date:** _____

NOTES:

AIR COMPLIANCE INSPECTION CHECKLIST

Pursuant to: San Diego Air Pollution Control District Rules & Regulations; MCO P5090.2A

Unit / Facility: _____ Date: _____
 Location: _____ Permit No(s): _____
 POC / Phone: _____
 Equipment(s): _____

| LINE ITEMS | | FINDINGS | | | COMMENTS |
|------------|---|----------|----|----|----------|
| 1. | General Requirements: [Rules 10, 20, 21, 40, 50, 51, 67.17] | Yes | No | NA | |
| | a. Is the equipment the same as described in the Permit to Operate? | | | | |
| | b. Is the current permit posted/available & within 25' of equipment? | | | | |
| | c. Are MSDS's being maintained and up to date? | | | | |
| | d. Is the equipment in good working condition and are operating procedures posted? | | | | |
| | e. Are there open container violation(s) of VOC materials (paint can, solvent tank, discarded rag, etc.)? [Rule 67.17] | | | | |
| | f. Are all conditions of the permit being met? [Rule 21] | | | | |
| | g. Equipment moved/modified without permit notification? | | | | |
| | h. Are records (usage or otherwise) being maintained for 3 years? | | | | |
| 2. | Emergency Standby Engine (Generator or Fire Pump) and/or Boilers: [Rules 10, 12, 20, 40, 50, 51, 69/69.2, 69.2.1, 69.4 or 69.4.1] | Yes | No | NA | |
| | a. Is fuel being used CARB Diesel Fuel? | | | | |
| | b. Is the non-resettable engine hour meter installed and operational? | | | | |
| | c. Is operating log available and maintained containing the following: Dates and times of engine operation, emergency or non-emergency operation and nature of emergency, total cumulative hours of operation per calendar year, and records of periodic maintenance including dates maintenance was performed? | | | | |
| 3. | Coatings Operations (Aerospace, Adhesive, Automotive & Wood): [Rules 10, 20, 40, 50, 51, 66.1, 67.0, 67.11, 67.20, 67.21, 67.3, 67.9] | Yes | No | NA | |
| | a. Are coatings applied in paint booth? (Not applicable to Hangars) | | | | |
| | b. Are booth filters in place and in good condition? | | | | |
| | c. Is exhaust fan operational? | | | | |
| | d. Is paint application compliant with the conditions of permit? | | | | |
| | e. If HVLP paint gun, is air cap pressure gauge for HVLP spray gun available and indicating a 0.1-10.0 psig reading? Or is HVLP gun manufacturer literature available correlating inlet pressure to 10 psig nozzle outlet pressure? (Check Mfg. of paint gun: i.e. AirVerter or DeVil Biss) | | | | |
| | f. Are coatings materials and/or solvents/materials APCD compliant? | | | | |
| | g. Are paint gun cleaning solvents and method s APCD compliant? | | | | |
| 4. | Gasoline Dispensing Operations: [Rules 10, 20, 40, 50, 51, 60.1, 61.3.1, 61.4.1, 61.5, 61.8] | Yes | No | NA | |
| | a. Are daily inspections conducted and documented in Attachment I? Spot check a few Vapor Recovery components. | | | | |
| | b. Inspection, ISD Alarm Response, Maintenance and Repair Log (Attachment I) available and properly maintained? Spot check a few ISD alarm events. | | | | |
| | c. Is Attachment J, Annual Inspection and Maintenance Checklist, available and properly conducted? | | | | |
| | d. Is Monthly Dispensing Flow Rate test properly conducted and documented? Check Attachment E. | | | | |

AIR COMPLIANCE INSPECTION CHECKLIST

Pursuant to: San Diego Air Pollution Control District Rules & Regulations; MCO P5090.2A

| | | | | | |
|-----------|---|------------|-----------|-----------|--|
| | e. Are Annual required tests conducted and documented properly? Check Attachment AA for required tests. | | | | |
| | f. Are Monthly throughput records available and maintained for 3 years? Check Attachment C or equivalent form/method. | | | | |
| | g. Vapor recovery hoses coaxial hoses drained weekly, volume of gas recorded on Attachment F. Fueling point removed from service if hose has > 150ml of gas drained from vapor side. | | | | |
| | h. Are the Healy 900 Nozzle Insertion Interlock Quarterly Inspections Requirement being conducted and recorded on VR-20102020XX Healy Quarterly Inspection form? | | | | |
| | i. Are required inspections, maintenance, and repairs being conducted and recorded properly on "Attachment M Inspection, Maintenance, and Repair Log" which contains the Weekly Inspection Log, Monthly Inspection Log, Annual Inspection Log and Repair Log. | | | | |
| 5. | Solvent Cleaning Operations: [Rules 10, 20, 40, 50, 51, 67.6, 67.6.1, 67.6.2] | Yes | No | NA | |
| | a. Are there solvent leaks from any part of the equipment? | | | | |
| | b. Is the cover closed while unit is not in use? | | | | |
| | c. Are operating instructions posted? | | | | |
| | d. Is Liquid solvent level below the marked maximum solvent level line? | | | | |
| | e. Are Solvents APCD compliant? Verify with Permit Attachment, if applicable. | | | | |
| 6. | Jet Engine Test Cells & Test Stands: [Rules 10, 20, 40, 50, 51, 69.3, 69.4] | Yes | No | NA | |
| | a. Are only the engines indicated on permit tested? | | | | |
| | b. Is daily engine number tested permit limit exceeded? | | | | |
| | c. Is Annual engine numbers tested permit limit exceeded? | | | | |
| | d. Are records of engine operation and total fuel usage per engine test maintained and available for review? | | | | |
| | e. Are usage records being maintained for 3 years? | | | | |
| 7. | Abrasive/Blasting/Grinding/Sanding Operations: [Rules 10, 20, 40, 50, 51, 52, 52.1, 54, 55] | Yes | No | NA | |
| | a. Are grinding operations being limited to the booth? | | | | |
| | b. Are maintenance records available and maintained for 3 years? | | | | |
| | c. Is a differential pressure gauge being maintained to indicate filter condition and is reading between 0.5" and 5"? | | | | |
| | d. Are filters, screens and other waste containing dust stored in sealed containers pending disposal? | | | | |
| | e. Are dust spills being vacuumed up after the end of each work shift and is the filter system kept on while dust is vacuumed? | | | | |
| 8. | Arresting Gear Engines: [Rule 69.4.1] | Yes | No | NA | |
| | a. Is the engine being operated less than 200 hours per year? | | | | |
| | b. Is the engine using California reformulated gasoline fuel? | | | | |
| | c. Is the engine equipped with a non-resettable fuel meter and/or time to measure fuel and/or time of operation? | | | | |
| | d. Is there a Daily Log containing dates and times of operation, total cumulative hours, and records of engine maintenance? | | | | |
| | e. Is the engine periodically maintained as recommended by approved maintenance requirement document at least once a year? | | | | |

Acknowledged by: _____

Date: _____

AIR COMPLIANCE INSPECTION CHECKLIST

Pursuant to: San Diego Air Pollution Control District Rules & Regulations; MCO P5090.2A

Inspector (EMD): _____ Date: _____

NOTES:

FEWD COMPLIANCE AUDIT CHECKLIST

For: Food Establishment Wastewater Discharge (FEWD) Permit Program
Pursuant to: San Diego Municipal Code, Article 4, Division 7, 64.0701

Unit / Facility: _____ **Date:** _____
Location: _____ **Food Estbmt No:** _____
POC / Phone: _____

| LINE ITEMS | | FINDINGS | | | COMMENTS |
|------------|--|----------|----|----|----------|
| 1. | AUDIT CHECKLIST | Yes | No | NA | |
| | a. Is the unit FEWD Permit posted? | | | | |
| | b. Is the unit FEWD Permit current? | | | | |
| | c. Does the Grease Removal Equipment Log or grease removal receipt have the date the equipment was cleaned and the company and/or service provider's name of who cleaned the equipment? | | | | |
| | d. Is the grease being pumped out at the frequency being recommended by the City of San Diego? | | | | |
| | e. Has there been any change in the food preparation that generates fats, oil or grease? <i>(For Wipe Condition Facilities)</i> | | | | |
| | f. Has there been any addition of food preparation equipment added to the work area? | | | | |
| | g. Are collection drums and/or grease collection bins being used for maximum segregation of fats, oil or grease? Are surrounding collection drums and/or grease collection bins tidy/clean and are employees practicing good housekeeping practices? | | | | |
| | h. Are outdoor collection drums and/or grease collection bins being secondary contained per SPCC Regulations, Title 22, CCR, 40 CFR? | | | | |
| | i. Is the facility name the same as is on the permit? | | | | |

Supervisor (Facility Personnel): _____ **Date:** _____

Inspector (EPS/Compliance): _____ **Date:** _____

NOTES: