



**PHOTOGRAPHS TAKEN DURING INSPECTIONS ARE AVAILABLE ON REQUEST**

<b>Documentation:</b>	<b>Requirement met?</b>	<b>Comments</b>
Does the facility have SMRF non-submittals or exceedances?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	M&R Review being done under a separate action.
If yes, do the exceedances meet the requirements for significant non-compliance? <i>(list in Comments)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Were required notifications provided for violation of any permit condition, discharge limit, or exceedance of an alert level? <i>(list notifications in Comments)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	M&R Review being done under a separate action.
Were SMRFs and monitoring requirements discussed with the facility?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Does the facility have any outstanding or overdue compliance schedule items? (Section 3.0 in the permit)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Does the facility have a copy of the current signed permit?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Is there a copy of the operations and maintenance manual on-site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Is there a copy of the approved contingency/emergency response plan on-site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Was there any unauthorized discharge of suspected hazardous, toxic, or non-hazardous materials? If so list corrective actions taken. (Section 2.6.5)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>Facility Description and Operational Monitoring Requirements</b>	<b>Requirement met?</b>	<b>Comments</b>
Is the log book of the inspections and measurements required by this permit updated and current?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Do the facility treatment processes match what is in the current permit?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Is the facility being maintained according to the Operations and Maintenance Manual?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Freeboard in Recharge Basin: Minimum 1 ft?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Do the treatment plant components appear to be in working order?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

Recharge Basins: Are they in good condition and adequately scarified?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>Compliance Monitoring</b>	<b>Requirement met?</b>	<b>Comments</b>
<b>POC – 30-feet south of the Percolation Ponds</b> Loc: 32° 28' 56.7" N 114° 41' 9.24" W <ul style="list-style-type: none"> <li>• Location verified?</li> <li>• Does the well appear to be in working order?</li> </ul>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Field Methods – Is the facility using applicable on-site calibrations and quality assurance for BOD, T, pH, and turbidity?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Does the facility have a written QA manual for all analysis done on-site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Are ADHS approved methods used for all analyses?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Did the facility have a method detection limit study for lab methods?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Are on-site lab instruments properly calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Are on-site calibration and baseline reagents current and not expired?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Are on-site flow meters properly calibrated?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Does the facility have a bench log sheet?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

**RECOMMENDATIONS AND POTENTIAL DEFICIENCIES:**

