



**Environmental  
Protection  
Agency**

## Municipal Solid Waste Transfer Facility Inspection Checklist

| Facility Name: <u>Pumphrey Transfer Station</u>                                                                                                                                |                       | Secondary ID:                                                                                                                                          |                                     |                          |                          |                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| Date: <u>6/9/20</u>                                                                                                                                                            | Time: <u>11:15 AM</u> | Operational Hours:                                                                                                                                     |                                     |                          |                          |                          |
| Weather: <u>Cloudy, humid</u>                                                                                                                                                  |                       |                                                                                                                                                        |                                     |                          |                          |                          |
| <input checked="" type="checkbox"/> Comprehensive Inspection                                                                                                                   |                       | <input type="checkbox"/> Focused Inspection                                                                                                            |                                     | Specify Item #s:         |                          |                          |
| <b>Inspection Representatives</b>                                                                                                                                              |                       |                                                                                                                                                        |                                     |                          |                          |                          |
| Facility: <u>Robert Congrove</u>                                                                                                                                               |                       | Health District: <u>Abigail VanBuskirk</u>                                                                                                             |                                     |                          |                          |                          |
| Ohio EPA:                                                                                                                                                                      |                       | Others Present:                                                                                                                                        |                                     |                          |                          |                          |
| For each item below, mark "Y" if yes, "N" if no, "DNI" if did not inspect, or "NA" if not applicable.<br>Please note: Shaded numbers indicate record related inspection point. |                       |                                                                                                                                                        |                                     |                          |                          |                          |
| #                                                                                                                                                                              | OAC Rule 3745         | Inspection Point                                                                                                                                       | Y                                   | N                        | DNI                      | NA                       |
| <b>General Obligations</b>                                                                                                                                                     |                       |                                                                                                                                                        |                                     |                          |                          |                          |
| 1                                                                                                                                                                              | 555-10(E)             | Are applicable authorizing documents being followed? See page 3.                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Operations</b>                                                                                                                                                              |                       |                                                                                                                                                        |                                     |                          |                          |                          |
| 2                                                                                                                                                                              | 555-610(B)            | Are all authorizing documents and the contingency plan available for inspection at the facility?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3                                                                                                                                                                              | 555-610(C)            | Does the contingency plan contain all the necessary items? See page 3.                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4                                                                                                                                                                              | 555-610(G)            | Is the operator familiar with the proper operational procedures and authorizing documents?                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5                                                                                                                                                                              | 555-610(H)            | Is the waste handling floor supervised by a person knowledgeable with operations?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6                                                                                                                                                                              | 555-610(I)            | Are dust, odors, and vectors controlled so as not to create a nuisance?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7                                                                                                                                                                              | 555-610(J)            | Are measures in place to collect, contain, and dispose of litter?                                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8                                                                                                                                                                              | 555-610(K)            | Is the attraction, breeding, and emergence of birds, insects, and rodents, or other vectors strictly controlled?                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9                                                                                                                                                                              | 555-610(L)            | Is the waste handling floor maintained to prevent the infiltration of leachate into the ground?                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10                                                                                                                                                                             | 555-610(M)            | Is the waste handling floor cleaned to prevent odors and nuisances?                                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11                                                                                                                                                                             | 555-610(N)            | Is leachate managed and disposed of properly?                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12                                                                                                                                                                             | 555-610(O)            | Is fire control equipment, material, and services available at or near facility? See page 3.                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13                                                                                                                                                                             | 555-610(P)            | Are observed engineered components being maintained and repaired as needed?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Daily Log of Operations</b>                                                                                                                                                 |                       |                                                                                                                                                        |                                     |                          |                          |                          |
| 14                                                                                                                                                                             | 555-615(A)            | Are the daily log of operation forms complete and maintained chronologically?                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15                                                                                                                                                                             | 555-615(B)            | Are the daily log of operations maintained on forms prescribed by the director or a submitted alternative form that contains all required information? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16                                                                                                                                                                             | 555-615(C)            | Is the daily log retained for at least five years?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Access</b>                                                                                                                                                                  |                       |                                                                                                                                                        |                                     |                          |                          |                          |
| 17                                                                                                                                                                             | 555-620(A)            | Are access roads maintained to allow use in all weather conditions?                                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18                                                                                                                                                                             | 555-620(A)            | Are access roads maintained to minimize erosion and dust generation?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| #                         | OAC Rule 3745    | Inspection Point                                                                                                                                                                           | Y                                   | N                        | DNI                      | NA                                  |
|---------------------------|------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|-------------------------------------|
| <b>Access (continued)</b> |                  |                                                                                                                                                                                            |                                     |                          |                          |                                     |
| 19                        | 555-620(B)       | Is access limited by unauthorized personnel except during operating hours when operating personnel are present?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 20                        | 555-620(C)       | Are clear instructions for use of the facility posted at the entrance?                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 21                        | 555-620(C)       | Are clear instructions for use of the facility posted at all waste handling areas?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 22                        | 555-620(C)       | Do the instructions include the items listed on page 3?                                                                                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 23                        | 555-620(D)       | Is scavenging and other activities which would interfere with operations being prevented?                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| <b>Waste Handling</b>     |                  |                                                                                                                                                                                            |                                     |                          |                          |                                     |
| 24                        | 555-650(A)       | Is all equipment necessary for operation present at the facility and operational?                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 25                        | 555-650(C)       | Are scales used as the sole means of determining gate receipts?                                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 26                        | 555-650(C)       | Was the scale inspected, tested, and approved by county auditor or city sealer? List approval date on page 3.                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 27                        | 555-650(D)       | Are all solid waste storage and handling operations conducted on the waste handling floor, except for scenarios listed on page 3.                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 28                        | 555-650(E)       | Is solid waste handling confined to the smallest practical area?                                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 29                        | 555-650(F)       | Is all solid waste transferred as soon as practicable?                                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 30                        | 555-650(F)       | Is solid waste that is not transferred in 12 hours being stored in closed containers, enclosed buildings, or in a manner that prevents water infiltration, vectors, and leachate releases? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 31                        | 555-650(F)       | Are doors to enclosed building closed at the end of the day when solid waste remains on the waste handling floor?                                                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 32                        | 555-650(G)       | Are the waste acceptance restrictions being followed? See page 3.                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 33                        | 555-650(G)(3)(b) | If used oil is accepted, is it only from residents and used or transferred in accordance with the exception?                                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 34                        | 555-650(G)(8)    | If scrap tires are accepted, are they transferred to a scrap tire facility?                                                                                                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 35                        | 555-650(G)(9)    | If lead acid batteries are accepted, are they only from residents and transferred to a recycling center?                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 36                        | 555-650(G)(10)   | If source-separated yard waste is accepted, is handled in accordance with the exception?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 37                        | 555-650(H)       | Are restricted materials being refused or handled in accordance with the exceptions?                                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 38                        | 555-650(I)       | If restricted materials are found, is the material being removed as soon as practicable or accepted and managed in accordance with the specified exception?                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 39                        | 555-650(J)       | Are refused loads noted in the daily log of operations?                                                                                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 40                        | 555-650(K)       | Are loads accepted under an exception segregated?                                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 41                        | 555-650(K)       | For loads accepted under an exception, are the types, quantities, and destination of the segregated materials noted in the daily log of operations?                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |

| Item                          | Information                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |         |
|-------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|
| 1                             | License terms/conditions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |         |
|                               | Condition #:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |         |
|                               | Condition #:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |         |
| 1                             | Permit terms/conditions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |         |
|                               | Condition #:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |         |
|                               | Condition #:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |         |
| 1                             | List all alterations issued since previous inspection                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |         |
|                               | Alteration #      Type:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |         |
|                               | Alteration #      Type:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |         |
| 3                             | Contingency plan must address the following: discovery of unauthorized wastes; burning or dusty materials; fire, explosion and spills; equipment failure; plan if operations cannot be conducted in compliance with authorizing documents; leachate management; and alternative disposal locations                                                                                                                                                                                                                                                                                      |         |
| 20                            | Fire equipment, material, or services available: <div> <input checked="" type="checkbox"/> Fire extinguisher    <input type="checkbox"/> Water truck    <input type="checkbox"/> 911 service<br/> <input type="checkbox"/> Other: </div>                                                                                                                                                                                                                                                                                                                                                |         |
| 22                            | Instructions for use must include the following: prohibited wastes; yard waste restrictions; and telephone numbers for local fire department, local health district, Ohio EPA spill hotline, and local law enforcement agency.                                                                                                                                                                                                                                                                                                                                                          |         |
| 26                            | Scale approval date:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |         |
| 27                            | Exceptions include: storage of solid waste in closed containers; handling or storage of whole or shredded scrap tires; and handling or storage of source-separated yard waste providing it prevents the run-on and run-off of surface water.                                                                                                                                                                                                                                                                                                                                            |         |
| 32                            | Waste acceptance restrictions include: hazardous waste; asbestos-containing waste material; liquids and waste containing liquids (except feedstocks containerized at facility, used motor oil from residents, and small containers typical of community operations); polychlorinated biphenyls (PCB) waste; low-level radioactive waste; technologically enhanced naturally occurring radioactive material (TENORM); untreated infectious waste; scrap tires; lead-acid batteries; and, source-separated yard waste. See OAC Rule 3745-555-650(G) for full descriptions and exceptions. |         |
| Item                          | Additional Notes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |         |
|                               | No violations observed. Repairs to exterior of building have been made. Plan to replace area of siding on exterior of building that is beginning to rust next year.                                                                                                                                                                                                                                                                                                                                                                                                                     |         |
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| Abigail VanBuskirk            | <div>  </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 6/09/20 |
| Inspector Name (Please Print) | Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Date    |