

**PERMIT ATTACHMENT 4: INSPECTION FORMS**

## **BIOLOGY CHECKLIST FOR CWL COVER**

## Chemical Waste Landfill Post-Closure Inspection Form Biology Inspection Checklist for the CWL Cover

<p><b><u>Mandatory requirement:</u></b></p> <p>The inspector has read the CWL Post-Closure Care Permit and activity-related procedures in the last 12 months, and completed all required training: (<i>Inspector must initial box before proceeding with the inspection.</i>)</p> <div style="text-align: right; margin-right: 50px;"><input style="width: 50px; height: 30px; border: 1px solid black;" type="checkbox"/></div> <p style="text-align: center;">Date read _____</p>
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Approximate vegetative coverage (actively photosynthesizing): \_\_\_\_\_%

Approximate percent native vegetation of the total vegetative cover: \_\_\_\_\_%

Listed below are the main plant species identified growing on the CWL cover and the approximate percent cover for each species.

<u>Scientific Name</u>	<u>Common Name (optional)</u>	<u>% Total cover photosynthesizing</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
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_____	_____	_____
_____	_____	_____

**Chemical Waste Landfill  
Biology Inspection Checklist for the CWL Cover (Continued)**

Are there any contiguous areas of no vegetation greater than 200 square feet? (Approximately 14 x14 ft.): \_\_\_\_\_

If "Yes," mark such areas on a map and attach to this checklist, and improve such area(s) with native vegetation via soil augmentation, scarification, and/or reseeding.

Are there any very deeply rooted (roots greater than 8 feet deep at maturity) plant species present on the cover? \_\_\_\_\_

If "Yes," mark such areas on a map and attach to this checklist, and remove plant(s) from the cover.

Notes: \_\_\_\_\_

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**Inspection for animal burrow intrusion into CWL cover**

Are any burrows present on the cover? \_\_\_\_\_

Does any burrow(s) appear to be active? \_\_\_\_\_

Does any active burrow(s) appear to be that of a species that is able to burrow 6 feet deep or greater? \_\_\_\_\_

If any of the active burrows appear to be that of a species that is able to burrow 6 feet or greater, mark such burrow(s) on a map and attach at the end of this checklist, and take appropriate actions as necessary to prevent damage to the cover.

Notes: \_\_\_\_\_

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**Biological Aspects Map – [note: sketch map to locate specific features will be attached]**

Survey Biologist Name: \_\_\_\_\_ Date: \_\_\_\_\_

Original to: Chemical Waste Landfill Operating Record

**CHEMICAL WASTE LANDFILL  
INSPECTION CHECKLIST**

## Chemical Waste Landfill Post-Closure Inspection Form Inspection Checklist

1. Date of Inspection \_\_\_\_\_
2. Time of Inspection \_\_\_\_\_
3. Name of Inspector \_\_\_\_\_

<p><b><u>Mandatory requirement:</u></b></p> <p>The inspector has read the CWL Post-Closure Care Permit and activity-related procedures in the last 12 months, and completed all required training: (<i>Inspector must initial box before proceeding with the inspection.</i>)</p> <div style="text-align: right; margin-right: 20px;"> <input style="width: 50px; height: 20px; border: 1px solid black;" type="checkbox"/> </div> <p style="text-align: center;">Date read _____</p>
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Provide explanatory notes for each parameter not inspected or each action required. Include any remedial steps required.

<b>I. COVER SYSTEM [Quarterly]</b>			
<i>Inspection Parameters</i>	<i>Parameter Inspected (Yes or No)</i>	<i>Action Required (Yes or No)</i>	<i>Note Number</i>
A. Visible settlement of the soil cover in excess of 6 inches.			
B. Erosion of the soil cover in excess of 6 inches deep.			
C. Evidence of water ponding.			
D. Animal intrusion burrows in excess of 4 inches in diameter. Note: For first 3 to 5 years this inspection requirement may be covered on the Cover Biology Checklist.			
E. Contiguous areas of no vegetation greater than 200 ft <sup>2</sup> . Note: For first 3 to 5 years this inspection requirement may be covered on the Cover Biology Checklist.			
<b>II. SURFACE-WATER (STORM-WATER) DIVERSION STRUCTURES [Quarterly]</b>			
<i>Inspection Parameters</i>	<i>Parameter Inspected (Yes or No)</i>	<i>Action Required (Yes or No)</i>	<i>Note Number</i>
A. Channel or sidewall erosion in excess of 6 inches deep.			
B. Channel sediment accumulation in excess of 6 inches deep.			
C. Debris that blocks more than 1/3 of the channel width.			

### Chemical Waste Landfill Inspection Checklist (Continued)

<b>III. SECURITY FENCE [Quarterly]</b>			
<i>Inspection Parameters</i>	<i>Parameter Inspected (Yes or No)</i>	<i>Action Required (Yes or No)</i>	<i>Note Number</i>
A. Accumulation of wind-blown plants and debris.			
B. Fence wires and posts in need of repair/maintenance.			
C. Gates in need of oiling/repair/maintenance.			
D. Locks in need of cleaning or replacement.			
E. Warning signs in need of repair or replacement.			
F. Survey monuments in vicinity of CWL visible.			

<b>IV. SOIL-GAS AND GROUNDWATER MONITORING WELLS [Semi-Annually]</b>			
<i>Inspection Parameter</i>	<i>Parameter Inspected (Yes or No)</i>	<i>Action Required (Yes or No)</i>	<i>Note Number</i>
A. Concrete pads, bollards, and protective casings in need of repair/maintenance.			
B. Well cover caps and Swagelok® dust caps in need of repair/maintenance.			
C. Passive venting Baroballs™, soil-gas sampling ports, pumps and tubing in need of repair/maintenance.			
C. Monitoring wells and soil-gas sample port locations properly labeled.			
D. Locks in need of cleaning or replacement.			

<b>V. PREVIOUS DEFICIENCIES [Quarterly]</b>			
<i>Inspection Parameter</i>	<i>Parameter Inspected (Yes or No)</i>	<i>Action Required (Yes or No)</i>	<i>Note Number</i>
A. Uncorrected/undocumented previous deficiencies.			



