ATTACHMENT 5

INSPECTION LOG SHEETS
DAILY
ENVIRONMENTAL
INSPECTIONS
ENVIRONMENTAL INSPECTION LOG
FOR THE
INCINERATOR RESIDUE DISCHARGE POINT
LOAD/UNLOAD AREAS (CHB) AND
SECONDARY CONTAINMENT SYSTEMS (OVERPACKS)

Daily

Mark with an S any items found to be satisfactory. Mark area found to be unsatisfactory with a U and describe unsatisfactory conditions in comments.

( ) CHB Load/Unload Areas - Visually inspect for discolored and stained soil/concrete, spilled residues of hazardous waste. (Att. 5, Table 5-16)

( ) CHB (Overpacks) - Visually inspect for proper container labeling Hazardous Waste Labels, etc. (Att. 5, 5.6.2)

( ) CHB (Overpacks) - Review the CHB operating record to determine which overpacks will, or have been in storage for 7 days or more. (Att. 5, Table 5-4)

( ) CHB (Overpacks) - Ensure that the number of full overpacks in storage does not exceed 48. (Att. 5, Table 5-4)

( ) CHB (Overpacks) - Ensure that all overpacks in storage contain the same agent. (Att. 12, 12.8.2)

NOTE: The offloading crew will control the flow of overpacks so that the overpacks will be managed on a first-in/first-out basis and that overpacks will not normally remain in the CHB for more than 24 hours prior to processing. (Att 12, 12.8.5)

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

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Inspector – Print / Sign                 Date                 Time
### DAILY ENVIRONMENTAL INSPECTION
**FOR 24-HOUR INTERMITTENT COLLECTION UNITS AND MDB RCRA PERMITTED SUMPS (CATEGORY A, B AND A/B AREAS)**

<table>
<thead>
<tr>
<th>Sump</th>
<th>Daily Results</th>
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<th>Daily Results</th>
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<td>SDS-PUMP-160</td>
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<td>SDS-PUMP-190</td>
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</tbody>
</table>

1. The sumps are identified by their corresponding pump numbers.

2. **Visual inspection (i.e., by viewing advisor screen located in control room) for the absence of material in sumps.** Sumps identified to contain liquid will be pumped down within 24 hours from the time the liquid first began to accumulate as indicated on the level indicator (Att 5, 5.8.3). **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign: ______________________  Date: __________  Time: __________
DAILY ENVIRONMENTAL INSPECTION LOG
FOR MDB RCRA PERMITTED SUMPS
(CATEGORY C AREAS)

<table>
<thead>
<tr>
<th>SUMP(^1,2)</th>
<th>RESULTS</th>
<th>TIME</th>
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<tbody>
<tr>
<td>SDS-PUMP-101</td>
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<td>SDS-PUMP-102</td>
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<td>SDS-PUMP-199</td>
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<tr>
<td>SDS-PUMP-200</td>
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</tbody>
</table>

1. The sumps are identified by their corresponding pump numbers.
2. Physical, visual inspection is required to determine the presence of material in the sumps (Att 5, Table 5-19). The contents must be pumped within 24 hours of alarm activation. When the low-level indicator is deactivated, the sump is considered absent of material (Att 5, 5.8.8). Mark with an S any item found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

Inspector Print / Sign  Date
DAILY ENVIRONMENTAL INSPECTION LOG
FOR MDB RCRA PERMITTED SUMPS
(CATEGORY C AREAS)

<table>
<thead>
<tr>
<th>SUMP1,2</th>
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<th>TIME</th>
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<td>SDS-PUMP-197</td>
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</tbody>
</table>

1. The sumps are identified by their corresponding pump numbers.
2. Physical, visual inspection is required to determine the presence of material in the sumps (Att 5, Table 5-19). The contents must be pumped within 24 hours of alarm activation. When the low-level indicator is deactivated, the sump is considered absent of material (Att 5, 5.8.8). Mark with an S any item found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.
3. When overpacks are stored in the TMA Airlock, the Airlock may be upgraded from a Category C to a Category B area. If this occurs, the requirements specified elsewhere in the Permit for Category B RCRA permitted sumps (i.e., daily visual inspection augmented by weekly physical inspection) will be adhered to.

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

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Inspector Print / Sign ___________________________ Date ___________________________
ENVIRONMENTAL INSPECTION LOG
FOR THE
LIQUID INCINERATOR NO. 1 PRIMARY AND SECONDARY CHAMBERS

Daily

1. Mark with a ✓ whether the inspection of the Primary Chamber is being performed through the use of a Closed Circuit TV (✓), or In-Person (✗).

2. Secondary Chamber must be performed In-Person.

3. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. (✓) Primary Chamber Agent Feed Line
      LIC 1 Inspect for leaks in the agent feed line at threaded and flanged pipe connections (Att 5, Table 5-11).

   b. (✓) Primary Chamber
      LIC 1 Inspect for fugitive emissions and hot spots on the outer shell of the primary chamber, which would indicate a breakdown of the chamber’s refractory (Att 5, Table 5-11).

   c. (✓) Primary Chamber Combustion Air Blowers
      LIC 1 Evaluate Combustion Air Blower performance through Control Room Advisor Screen Operations (Att 5, Table 5-11).

   d. (✓) Primary Chamber Room Floor
      LIC 1 Inspect for residues of lubricant and/or wastes beneath the components of the LIC agent feed system and the LIC exhaust gas ductwork (Att 5, Table 5-11).

   e. (✓) Secondary Chamber SDS Feed Line
      LIC 1 Inspect for releases of wastes from the spent decon solution feed line at welded and flanged pipe connections (Att 5, Table 5-12).

   f. (✓) Secondary Chamber
      LIC 1 Inspect for fugitive emissions, and hot spots on the outer shell of the secondary chamber, which would indicate a breakdown of the chamber’s refractory. Inspect interior of secondary chamber through view port to ensure the slag level has not reached the top of the view port (Att 5, Table 5-12).

   g. (✓) Secondary Chamber Combustion Air Blowers
      LIC 1 Inspect for loss of lubrication and vibration. Check for broken or missing anchor bolts (Att 5, Table 5-12).

   h. (✓) Secondary Chamber Room Floor
      LIC 1 Inspect for residues of lubricant and/or wastes beneath the components of the spent decon feed system and the LIC secondary chamber ductwork having a potential to cause a release of wastes or fugitive emissions (Att 5, Table 5-12).

4. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

Inspector Print / Sign    Date    Time
ENVIRONMENTAL INSPECTION LOG
FOR THE
LIQUID INCINERATOR NO. 2 PRIMARY AND SECONDARY CHAMBERS

Daily

1. Mark with a ✓ whether the inspection of the Primary Chamber is being performed through the use of a Closed Circuit TV (   ), or In-Person (   ).

2. Secondary Chamber must be performed In-Person.

3. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. (   ) Primary Chamber Agent Feed Line
      LIC 2
      Inspect for leaks in the agent feed line at threaded and flanged pipe connections (Att 5, Table 5-11).

   b. (   ) Primary Chamber
      LIC 2
      Inspect for fugitive emissions and hot spots on the outer shell of the primary chamber, which would indicate a breakdown of the chamber’s refractory (Att 5, Table 5-11).

   c. (   ) Primary Chamber Combustion Air Blowers
      LIC 2
      Evaluate Combustion Air Blower performance through Control Room Advisor Screen Operations (Att 5, Table 5-11).

   d. (   ) Primary Chamber Room Floor
      LIC 2
      Inspect for residues of lubricant and/or wastes beneath the components of the LIC agent feed system and the LIC exhaust gas ductwork (Att 5, Table 5-11).

   e. (   ) Secondary Chamber SDS Feed Line
      LIC 2
      Inspect for releases of wastes from the spent decon solution feed line at welded and flanged pipe connections (Att 5, Table 5-12).

   f. (   ) Secondary Chamber
      LIC 2
      Inspect for fugitive emissions and hot spots on the outer shell of the secondary chamber, which would indicate a breakdown of the chamber’s refractory. Inspect interior of secondary chamber through view port to ensure the slag level has not reached the top of the view port (Att 5, Table 5-12).

   g. (   ) Secondary Chamber Combustion Air Blowers
      LIC 2
      Inspect for loss of lubrication and vibration. Check for broken or missing anchor bolts (Att 5, Table 5-12).

   h. (   ) Secondary Chamber Room Floor
      LIC 2
      Inspect for residues of lubricant and/or wastes beneath the components of the spent decon feed system and the LIC secondary chamber ductwork having a potential to cause a release of wastes or fugitive emissions (Att 5, Table 5-12).

4. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

Inspector Print / Sign / Date / Time

D-6
ENVIRONMENTAL INSPECTION LOG
FOR THE
DEACTIVATION FURNACE

Daily

1. Mark with a ✓ whether the inspection is being performed through the use of a Closed Circuit TV (✓), or In-Person (   ).

2. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. (   ) rotary kiln Combustion Air Blower
      Evaluate combustion air blower performance through Control Room Advisor screen observations (Att 5, Table 5-14).

   b. (   ) rotary kiln
      Inspect the rotary kiln for fugitive emissions (Att 5, Table 5-14).

   c. (   ) rotary kiln Drive
      Inspect the rotary kiln trunnion rollers for smooth motion (Att 5, Table 5-14).

   d. (   ) rotary kiln Drive Lubrication System
      Inspect the rotary kiln trunnion bearing lubrication system for leaks and spills (Att 5, Table 5-14).

   e. (   ) Heated Discharge Conveyor
      Inspect the Heated Discharge Conveyor motion indicator plate for smooth even operation (Att 5, Table 5-14).

3. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

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Inspector Print / Sign  Date  Time
ENVIRONMENTAL INSPECTION LOG
FOR THE
DEACTIVATION FURNACE

Daily

1. This inspection is performed in person.

2. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. ( ) Afterburner Combustion Air Blower
      Inspect blower for excessive noise, vibration, loss of lubricant, and missing or broken anchor bolts (Att 5, Table 5-15).

   b. ( ) Afterburner
      Inspect afterburner shell for hot spot, which would indicate a breakdown of refractory (Att 5, Table 5-15).

   c. ( ) DFS Kiln Exhaust Isolation Valve (XV-862) Locks in Place and Secure
      During normal operations, XV-862 will be locked in the open position and HV-863 will be locked in the closed position. Inspect XV-862 and HV-863 to ensure mechanical locks are in place and secure (Att 5, Table 5-15).

   d. ( ) DFS Afterburner Intake Valve (HV-863) Locks in Place and Secure
      During normal operations, XV-862 will be locked in the open position and HV-863 will be locked in the closed position. Inspect XV-862 and HV-863 to ensure mechanical locks are in place and secure (Att 5, Table 5-15).

3. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

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Inspector Print / Sign Date Time
ENVIRONMENTAL INSPECTION LOG
FOR THE
METAL PARTS FURNACE

Daily

1. This inspection is performed through the use of a Closed Circuit TV and by looking through windows from the Second Floor observation corridor. Convex mirrors are used to inspect areas not easily visible from the windows.

2. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. ( ) Waste Feed System
      Inspect for movement of internal conveyor system from the control panel by ensuring conveyor drive chains are in motion (Att 5, Table 5-13).

   b. ( ) Combustion Air Blowers (evaluate performance through CON Advisor indications)
      Evaluate combustion air blower performance through Control Room advisor screen observations (Att 5, Table 5-13).

   c. ( ) Primary Chamber
      Inspect for hot spots on the primary chamber outer shell, which indicate a breakdown of the incinerator’s refractory (Att 5, Table 5-13).

   d. ( ) Afterburner
      Inspect afterburner shell for hot spots, which would indicate a breakdown of the afterburner’s refractory (Att 5, Table 5-13).

   e. ( ) Ductwork joining Primary Chamber and Afterburner
      Inspect ductwork between primary chamber and afterburner for fugitive emissions (Att 5, Table 5-13).

3. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

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Inspector Print / Sign ___________________________ Date _____________ Time ___________
ENVIRONMENTAL INSPECTION LOG
FOR THE
POLLUTION ABATEMENT SYSTEM

Daily - Physical

Page 1 of 3

Mark with an S any items found to be satisfactory. Mark with a U the system(s) of which incinerator's PAS are found to be unsatisfactory and describe in comments.

a. **Exhaust Gas Ductwork** - Inspect fugitive emissions or residues at flanged duct connections and duct expansion joints. Inspect expansion joints for breaks that would result in leakage to the system (Att 5, Table 5-15).

   (   ) (   ) (   ) (   )
   LIC1  LIC2  MPF  DFS

b. **Quench Tower and Associated Pumps/Piping** - Inspect for brine residues at manway covers and released liquids from piping or pumps (Att 5, Table 5-15).

   (   ) (   ) (   ) (   ) (   )
   LIC1  LIC2  MPF  DFS  Piping inside PAS to BRA

c. **Venturi scrubber and Associated Pumps/Piping** - Check venturi plug valve and ensure that it operates freely. Inspect for releases of scrubber liquid from associated pumps and piping (Att 5, Table 5-15).

   (   ) (   ) (   ) (   ) (   )
   LIC1  LIC2  MPF  DFS

d. **Packed Bed Scrubber and Associated Pumps/Piping** - Inspect for scrubber liquid residues at manway cover. Inspect for release of scrubber liquid from pumps and piping (Att 5, Table 5-15).

   (   ) (   ) (   ) (   ) (   )
   LIC1  LIC2  MPF  DFS

e. **Bleed Air Damper Cover Plate** - Ensure cover on bleed air damper is in place and secure (Att 5, Table 5-15).

   (   ) (   ) (   ) (   )
   LIC1  LIC2  MPF  DFS

f. **Demister** – Inspect for fugitive emissions of residues of scrubber liquid at the manway cover (Att 5, Table 5-15).

   (   ) (   ) (   ) (   ) (   ) (   )
   LIC1  LIC2  MPF  DFS  LIC  MPF/DFS
   Spare  Spare

g. **PAS Blower** - Inspect for excessive vibrations and loss of lubricant (Att 5, Table 5-15).

   (   ) (   ) (   ) (   )
   LIC1  LIC2  MPF  DFS
h. **Scrubber Effluent Handling System** — Inspect brine transfer line and associated pumps for leaks at pump seals and flanged pipe fittings. Inspect for swaying pipe system during operation (Att 5, Table 5-15).
   ( ) ( ) ( ) ( )
   LIC1 LIC2 MPF DFS

i. **PFS Condensate Management System**— Inspect PFS condensate transfer lines and associated pumps for leaks at pump seals and flanged pipe fittings (Att. 5, Table 5-15)
   ( ) ( ) ( )
   LIC1 LIC2 MPF

j. **PFS Filter Banks**— Inspect the hopper slide gates under each PFS for leaks. Inspect the carbon canisters located in cabinets on the sides of each PFS for leaks. (Att. 5, Table 5-15).
   ( ) ( ) ( )
   LIC1 LIC2 MPF

k. **PFS Building Sump**— Inspect for presence of liquids and if present determine and document the source. (Att. 5, Table 5-15)
   ( ) ( ) ( )
   LIC1 LIC2 MPF

l. **DFS PAS Makeup Water Lock-out**— When the DFS is operational (i.e., at operating temperature), inspect DFS PAS valve 24-2'-V-9602 to ensure that it is in the closed position and locked out to prevent the transfer of makeup water from PAS-Tank-103 to the DFS PAS. (Att 5, Table 5-15)
   ( ) ( )
   DFS DFS (not operational)

m. **PAS Sump 110 Less than 3 inches**— Inspect for the presence of material and liquids in excess of three inches (3") (Att 5, Table 5-15).
   ( )

n. **PAS Sump 110 no oil sheen**— Inspect for the presence of oil sheen (Att 5, Table 5-15).
   ( )
Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

<table>
<thead>
<tr>
<th>SYSTEM</th>
<th>WORK REQUEST #</th>
<th>EQUIPMENT</th>
<th>INTERIM ACTIONS OR REQUEST DESCRIPTION</th>
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COMMENTS AND OTHER INFORMATION

Inspector Print / Sign ____________________ Date ___ Time ___
ENVIRONMENTAL INSPECTION LOG
FOR THE
INCINERATOR RESIDUE DISCHARGE POINTS &
LOAD/UNLOAD AREAS

Daily

1. Mark with an S any items found to be satisfactory. Mark area found to be unsatisfactory with a U and describe unsatisfactory conditions in comments.

Date: ____________________

<table>
<thead>
<tr>
<th>Area</th>
<th>Inspection Results (S/U)</th>
<th>Time</th>
<th>Inspector Print / Sign</th>
</tr>
</thead>
<tbody>
<tr>
<td>RHA Load/Unload Area 1 (outside building)</td>
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<tr>
<td>MPF Metal Residue Area 2</td>
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<tr>
<td>DFS Cyclone Ash Discharge Area 3</td>
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<tr>
<td>DFS Heated Discharge Conveyor Discharge Area 4</td>
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</tbody>
</table>

1. Visually inspect for discolored and stained soil/concrete and residues of hazardous waste (Att 5, Table 5-16).
2. Inspect for ash residues on concrete base underneath conveyor system (Att 5, Table 5-16).
3. Inspect for ash residue around receiving container. Ensure that the container is labeled as hazardous waste and that there is sufficient space in the container to receive ash that will be generated during operational period (Att 5, Table 5-16).
4. Inspect for ash residue around receiving container. Ensure that the container is labeled as hazardous waste and that there is sufficient space in the container to receive ash that will be generated during operational period (Att 5, Table 5-16).

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**
ACAMS DAILY OPERATIONAL LOG

SEE TE-LOP-524

This page is only used for reference to remind inspectors of the daily requirement.
ACAMS CALIBRATION DATA SHEET

SEE TE-LOP-524

This page is only used for reference to remind inspectors of the daily requirement.
ENVIRONMENTAL INSPECTION LOG
FOR THE PROJECTILE/MORTAR DISASSEMBLY MACHINE
PERFORMED BY CONTROL ROOM OPERATOR

Daily

1. Mark with an S any items found to be satisfactory. Mark items found to be unsatisfactory with a U and describe unsatisfactory conditions in comments.

   a. ( ) Projectile/Mortar Disassembly Machines (to include Burster Size Reduction Machine)
      Observe the operation of the machines. Note the number of times each machine has to be put into manual mode because an interlock on the machine prevented further processing (in order to evaluate any deterioration in the machine’s performance) (Att 5, Table 5-20).

   b. ( ) Waste Feed System => ( ) ECR A ( ) ECR B
      Inspect the Projectile Demilitarization Machine within ECR A and ECR B to ensure that no explosive residues or explosive munition components are collecting on the associated material handling equipment. Inspect for leaking hydraulic hoses/connections and accumulated residues of chemical agent (Att 5, Table 5-14).

   c. ( ) Munition Load/Unload Components
      Visually inspect for munitions and/or munitions components not being transferred by conveyors due to hung up or falling on the floor. Ensure that all containers are able to be moved by the material handling system (Att 5, Table 5-20).

      ( ) Projectile Tilting Conveyor(s)
      ( ) Multiposition Loader(s)

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.


Inspector Print / Sign    Date     Time

D-16
Reserved
1. **Mark with an S any items found to be satisfactory. Mark items found to be unsatisfactory with a U and describe unsatisfactory conditions in comments.**

   a. **Bulk Drain Machine**

   *Observe the operation of the machines. Note the number of times each machine has to be put into manual mode because an interlock on the machine prevented further processing (in order to evaluate any deterioration in the machine's performance) (Att 5, Table 5-20).*

<table>
<thead>
<tr>
<th>Demil Machine ID</th>
<th>No. of Rejects</th>
<th>No. Unplanned Stops</th>
<th>Demil Machine ID</th>
<th>No. of Rejects</th>
<th>No. Unplanned Stops</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reserved</td>
<td></td>
<td></td>
<td>MMS-BDS-101</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Reserved</td>
<td></td>
<td></td>
<td>MMS-BDS-102</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>PHS-PMD-101</td>
<td>N/A</td>
<td>N/A</td>
<td>PHS-MDM-101</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>PHS-PMD-102</td>
<td>N/A</td>
<td>N/A</td>
<td>PHS-MDM-102</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Reserved</td>
<td></td>
<td></td>
<td>PHS-MDM-103</td>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

2. **Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.**

________________________________________________________________________
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________________________________________________________________________
________________________________________________________________________

Inspector Print / Sign ___________ Date ___________ Time ___________
ENVIRONMENTAL INSPECTION LOG
FOR THE MULTIPURPOSE DEMILITARIZATION MACHINE
PERFORMED DAILY BY CONTROL ROOM OPERATOR

Daily

1. Mark with an S any items found to be satisfactory. Mark items found to be unsatisfactory with a U and describe unsatisfactory conditions in comments.

   a. ( ) Multipurpose Demilitarization Machines
      
      Observe the operation of the machines. Note the number of times each machine has to be put into manual mode because an interlock on the machine prevented further processing (in order to evaluate any deterioration in the machine’s performance) (Att 5, Table 5-20).

      | Demil Machine ID | No. of Rejects | No. Unplanned Stops | Demil Machine ID | No. of Rejects | No. Unplanned Stops |
      |------------------|----------------|---------------------|------------------|----------------|---------------------|
      | Reserved         |                |                     | MMS-BDS-101      | N/A            | N/A                 |
      | Reserved         |                |                     | MMS-BDS-102      | N/A            | N/A                 |
      | PHS-PMD-101      | N/A            | N/A                 | PHS-MDM-101      |                |                     |
      | PHS-PMD-102      | N/A            | N/A                 | PHS-MDM-102      |                |                     |
      | Reserved         |                |                     | PHS-MDM-103      |                |                     |

   b. Munitions load/unload components
      
      Visually inspect for munitions and/or munitions components not being transferred by conveyors due to hung up or falling on the floor. Ensure that all containers are able to be moved by material handling system. Record the number of rejects in the Munitions Processing Bay (Att 5, Table 5-20).

      ( ) Pick and Place Machine(s)

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

Inspector Print / Sign ___________________________ Date ___________ Time ___________
ENVIRONMENTAL INSPECTION LOG
FOR THE TRAY SYSTEM
PERFORMED DAILY BY CONTROL ROOM OPERATOR

Daily

1. Mark with an S any items found to be satisfactory. Mark items found to be unsatisfactory with a U and describe unsatisfactory conditions in comments.

   a. Material Handling Conveyor Systems

      Visually inspect for munitions and/or munitions components not being transferred by conveyors due to hung up or falling on the floor. Ensure that all containers are able to be moved by material handling system (Att 5, Table 5-20).

      ( ) Explosive Containment Vestibule
      ( ) Explosive Containment Room 101
      ( ) Explosive Containment Room 102
      ( ) By Pass Conveyor Line A
      ( ) By Pass Conveyor Line B
      ( ) Buffer Storage Area (supporting Munitions Processing Bay)
      ( ) Munitions Corridor
      ( ) Munitions Processing Bay
      ( ) Buffer Storage Area (supporting MPF)

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions with the above inspection criteria.

________________________________________________________________________
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________________________________________________________________________

Inspector Print / Sign ___________________________ Date _____________ Time _____________
ENVIRONMENTAL INSPECTION LOG
FOR THE
SPENT DECON SYSTEM (SDS)

Daily – Inside Toxic Area

1. Mark with a ✓ whether inspection is being performed through the use of: Closed Circuit TV (✓), or In-Person ( ).

2. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. **Level Indicators and Transmitters** - Check level indicator transmitters for proper operation at control panel (Att 5, Table 5-22).
      (✓)  (✓)  (✓)
      SDS-101  SDS-102  SDS-103

   b. **Tank Structure** - Visually inspect for major corroded areas, discolored, or blistered surface coating, buckles or bulges in tank, corrosion around foundation, and evidence of overtopping (Att 5, Table 5-22).
      (✓)  (✓)  (✓)
      SDS-101  SDS-102  SDS-103

   c. **Tank Area** - Visually inspect for evidence of waste residue on floor (Att 5, Table 5-22).
      (✓)  (✓)  (✓)
      SDS-101  SDS-102  SDS-103

   d. **Tank Supports** - Visually inspect for discolored or blistered surface coating and corroded areas (Att 5, Table 5-22).
      (✓)  (✓)  (✓)
      SDS-101  SDS-102  SDS-103

   e. **Pipe System, Valves and Pumps** - Inspect for leaks, vibration or swaying of pipe systems, missing pump anchor bolts (Att 5, Table 5-22).
      (✓)  (✓)  (✓)
      SDS-101  SDS-102  SDS-103

   f. **Secondary Containment (SDS-PUMP-150 presence of liquid – daily)** - Visually inspect for the presence of liquid in secondary containment sump by observing the status of sump’s liquid level indicator (Att 5, Table 5-22).
      (✓)  (✓)  (✓)
      SDS-101  SDS-102  SDS-103

3. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

Inspector Print / Sign __________________________ Date ____________ Time ____________
ENVIRONMENTAL INSPECTION LOG
FOR THE
TOXIC CUBICLE TANK

Daily

1. Mark with a ✓ whether inspection is being performed through the use of: Closed Circuit TV (✓), or In-Person (  ).

2. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.
   
   a. Level Indicators and Transmitters - Check level indicator transmitters for proper operation at control panel (Att 5, Table 5-21).
      (   ) (   )
      ACS-101 ACS-102
   
   b. Tank Structure - Visually inspect for major corroded areas, discolored, or blistered surface coating, buckles or bulges in tank, corrosion around foundation, and evidence of overtopping (Att 5, Table 5-21).
      (   ) (   )
      ACS-101 ACS-102
   
   c. Tank Area - Visually inspect for evidence of waste residue on floor (Att 5, Table 5-21).
      (   ) (   )
      ACS-101 ACS-102
   
   d. Tank Supports - Visually inspect for discolored or blistered surface coating and corroded areas (Att 5, Table 5-21).
      (   ) (   )
      ACS-101 ACS-102
   
   e. Pipe System, Valves and Pumps - Visually inspect for leaks, vibration or swaying of pipe systems, missing pump anchor bolts (Att 5, Table 5-21).
      (   ) (   )
      ACS-101 ACS-102
   
   f. Secondary Containment (SDS-PUMP-151 presence of liquid – daily) - Visually inspect for the presence of liquid in secondary containment sump by observing the status of sump’s liquid level indicator (Att 5, Table 5-21).
      (   ) (   )
      ACS-101 ACS-102

3. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

__________________________________________________________________________________________

Inspector Print / Sign Date Time

D-22
ENVIRONMENTAL INSPECTION LOG
FOR THE
BRINE REDUCTION AREA SURGE TANKS

Daily

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

a. Level Indicators and Transmitters - Check level indicator and transmitter for proper operation at the tank (Att 5, Table 5-23).
   (   ) (   ) (   ) (   )
   BRA-101 BRA-102 BRA-201 BRA-202

b. Tank Structure - Visually inspect for major corroded areas, bulging or buckles in tank, waste, waste residue stains on the sides of tanks and evidence of overtopping (Att 5, Table 5-23).
   (   ) (   ) (   ) (   )
   BRA-101 BRA-102 BRA-201 BRA-202

c. Pipe Systems, Valves and Pumps - Visually inspect for leaks, vibration or swaying of operating pipe systems, missing pump anchor bolts, leaking pump seals. (Att 5, Table 5-23).
   (   ) (   ) (   ) (   ) (   ) (   )
   BRA-101 BRA-102 BRA-201 BRA-202 Brine Loading PAS to Station BRA Tank

d. Secondary Containment (presence of liquid)* - Visually inspect for presence of liquids in secondary containment system and associated sump (Att 5, Table 5-23). Snow, ice and liquid shall be removed within 24 hours of the end of the precipitation event (IV.H.2).
   (   ) (   ) (   ) (   )
   Brine Storage Tank Berm Sump 103 Brine Loading Station Sump 107

e. Secondary Containment (system integrity) - Ensure that there are no cracks or gaps in the coating used to seal the secondary containment berms, floor, and sump (Att 5, Table 5-23). Snow, ice and liquid shall be removed within 24 hours of the end of the precipitation event (IV.H.2).
   (   ) (   ) (   ) (   )
   Brine Storage Tank Berm Sump 103 Brine Loading Station Sump 107

* Liquid may be present in the secondary containment sump from October 15 to April 15. The presence of water is necessary to ensure the proper operation of the heater located in the sump.

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

Inspector Print / Sign ___________ Date ___________ Time ___________
ENIRONMENTAL INSPECTION LOG
FOR THE
MUNITIONS DEMILITARIZATION BUILDING
VENTILATION CARBON FILTER SYSTEM
PERFORMED BY THE CONTROL ROOM OPERATOR
Daily

1. Record the value of all pressure differential and flow rate readings, satisfactory and unsatisfactory for all on-line filter units. For any ACAMS at Midbed in Alarm columns, circle Yes or No as appropriate.

<table>
<thead>
<tr>
<th>Filter Unit</th>
<th>ACAMS in Alarm</th>
<th>Overall Filter Unit Pressure Differential(^2)(^2) (&quot;WC)</th>
<th>Filter Unit Blower(^3) (KCFM)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vestibule</td>
<td>2(^{nd})</td>
<td>3(^{rd})</td>
<td></td>
</tr>
<tr>
<td>Filter 101</td>
<td>Yes/No</td>
<td>Yes/No</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Filter 102</td>
<td>Yes/No</td>
<td>Yes/No</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Filter 103</td>
<td>Yes/No</td>
<td>Yes/No</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Filter 104</td>
<td>Yes/No</td>
<td>Yes/No</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Filter 105</td>
<td>Yes/No</td>
<td>Yes/No</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Filter 106</td>
<td>Yes/No</td>
<td>Yes/No</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Filter 107</td>
<td>Yes/No</td>
<td>Yes/No</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Filter 108</td>
<td>Yes/No</td>
<td>Yes/No</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Filter 109</td>
<td>Yes/No</td>
<td>Yes/No</td>
<td>Yes/No</td>
</tr>
</tbody>
</table>

1 The ACAMS alarm at the levels specified in the Agent Monitoring Plan. Monitoring information is observed to verify that no agent breakthrough for the 2\(^{nd}\) and 3\(^{rd}\) carbon banks has occurred. Breakthrough is defined as any confirmed reading equal to or greater than 3 VSL for any agent.
2 Record value and verify that differential pressure did not exceed 14" w.c. (to determine if plugging of any carbon filter bank has occurred) (Att 5, Table 5-26).
3 Record value and verify an inlet flow greater than or equal to 12,200 CFM (to determine if blower performance has deteriorated) (Att 5, Table 5-26).

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

Inspector Print / Sign ___________________________ Date _____________ Time __________________
ENVIRONMENTAL INSPECTION LOG
FOR THE IGLOO 1631 AUTOCLAVE MISCELLANEOUS TREATMENT UNIT
Daily – Physical
(When in Use)

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

a. ( ) Autoclave Not in Use – Mark the box with an X indicating the system is not in use.

b. Autoclave and Ancillary Equipment

( ) Process Steam Piping; Inspect for leaks and/or drips (Att 5, Table 5-29).

( ) Cooling Tower and Condensate Transfer Pumps; Inspect for leaks, untypical noise and vibrations (Att 5, Table 5-29).

( ) Condensate Transfer Lines; Inspect for rust, leaks and/or drips (Att 5, Table 5-29).

c. Autoclave Carbon Adsorption Filtration System

( ) System Pressure; Observe pressure on Carbon Filter System Pressure Gauge to ensure system is operated under a minimum of 0.25 in-w.c negative pressure relative to the atmosphere (Att 5, Table 5-29).

d. Igloo 1631 Floor

( ) Floor; Inspect area of floor traversed by the condensate transfer piping and Autoclave load/unload area for condensate and/or wet spots and for cracks, gaps or deteriorating floor coating (Att 5, Table 5-29).

e. Igloo 1631 Outside Waste Loading Area

( ) Roll-Off; Ensure roll-off is closed (i.e., covered) except when waste is being added to it (Att 5, Table 5-29).

( ) Waste Loading Area; Inspect for debris or waste that fell from the roll-off during transfer (Att 5, Table 5-29).

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

__________________________________________
Inspector Print / Sign __________________________ Date __________ Time __________
ENVIRONMENTAL INSPECTION LOG
AUTOCLAVE CARBON ADSORPTION FILTRATION SYSTEM
DAILY - Physical

1. Daily Record the value of all pressure differential and flow rate readings, satisfactory and unsatisfactory for on-line filter units. For any ACAMS in Alarm circle Yes or No as appropriate.

<table>
<thead>
<tr>
<th>Filter Unit</th>
<th>Stack ACAMS in Alarm&lt;sup&gt;1&lt;/sup&gt;</th>
<th>Overall Filter Unit Pressure Differential&lt;sup&gt;2&lt;/sup&gt; (&quot;WC&quot;)</th>
<th>Filter Unit Blower&lt;sup&gt;3&lt;/sup&gt; (KCFM)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Filter</td>
<td>Yes/No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Back-up Filter</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<sup>1</sup> The ACAMS alarm at 0.5 VSL. Monitoring information from DAAMS tubes is documented to verify that no agent breakthrough for the 1<sup>st</sup> and 2<sup>nd</sup> carbon banks has occurred. Breakthrough is defined as any confirmed reading equal to or greater than 1 VSL for any agent.

<sup>2</sup> Record value and verify that differential pressure did not exceed the limits. (*to determine if plugging of any carbon filter bank has occurred*) (*Att 5, Table 5-29)*.

<sup>3</sup> Record value and verify an inlet flow greater than or equal to 5,600 CFM (*to determine if blower performance has deteriorated*) (*Att 5, Table 5-29)*.

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

Inspector Print / Sign ___________________________ Date ____________ Time ____________
DAILY ENVIRONMENTAL INSPECTION LOG
FOR DVS/DVSSR SUMPS and Doors
(When in Use)

Mark with an S any item found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

1. **DVS/DVSSR (Not in Use)** – Mark the appropriate box with an X indicating the system is not in use.
   
   (   ) DVS-101 (Not in Use) (   ) DVS-102 (Not in Use) (   ) DVSSR (Not in Use)

2. **Secondary Containment (presence of liquid)** - Visually inspect the enclosure and DVSSR floors & sumps for presence of standing liquids. Sumps must be emptied of liquid within 24 hours of collection (Att 5, Table 5-30).
   
   (   ) DVS-101 (   ) DVS-102 (   ) DVSSR

3. **Secondary Containment (system integrity)** - Visually inspect the DVSSR floor and sump and enclosure sumps for signs of deterioration, cracks, gaps or evidence of leakage (Att 5, Table 5-30).
   
   (   ) DVS-101 (   ) DVS-102 (   ) DVSSR

4. **Enclosure Doors** – Ensure that DVS and DVSSR Doors are closed (Att 5, Table 5-30).
   
   (   ) DVS-101 (   ) DVS-102 (   ) DVSSR

*The DVS enclosure doors and DVSSR doors are required to be closed and the filtration system operating if uncontainerized waste is currently within that unit (e.g., secondary waste drums inside have been punctured and not resealed, the drum lids are not secured, or liquid is present in the sump or on the floor). When no uncontainerized waste is present, then that unit’s doors are not required to be closed.

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

Inspector Print / Sign ___________________________ Date ___________________________
# Daily Environmental Inspection

**For 24-Hour Intermittent Collection Units and ATLIC RCRA Permitted Sumps (LIC Room, Entry Airlock A, B and TOX Area Room)**

<table>
<thead>
<tr>
<th>Sump/Location</th>
<th>Daily Results</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>SDS-PUMP-8526 / Entry Airlock B</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SDS-PUMP-8527 / LIC Room</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SDS-PUMP-8529 / Entry Airlock A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SDS-PUMP-8530 / TOX Area Room</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. The sumps are identified by their corresponding pump numbers.

2. **Visual inspection (i.e., by viewing advisor screen located in control room) for the absence of material in sumps.** Sumps identified to contain liquid will be pumped out within 24 hours from the time the liquid first began to accumulate as indicated on the level indicator (Att 5, 5.8.3). **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Inspector Print / Sign: ___________________ Date: __________ Time: __________
ENVIRONMENTAL INSPECTION LOG
FOR THE
ATLIC LIQUID INCINERATOR PRIMARY AND SECONDARY CHAMBERS

Daily

1. Mark with a ✓ whether the inspection of the Primary Chamber is being performed through the use of a Closed Circuit TV (✓), or In-Person ( ).

2. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. **Primary Chamber / Secondary Combustion Chamber Waste Feed Line**
      Inspect for leaks in the agent feed line at threaded and flanged pipe connections (Att 5, Table 5-32).
      
      (  )        (  )
      ATLIC PCC    ATLIC SCC

   b. **Primary/Secondary Combustion Chamber**
      Inspect for fugitive emissions and hot spots on the outer shell of the chamber, which would indicate a breakdown of the chamber’s refractory (Att 5, Table 5-32).
      
      (  )        (  )
      ATLIC PCC    ATLIC SCC

   c. **ATLIC Combustion Air Blower**
      Evaluate Combustion Air Blower performance through Control Room Advisor Screen Operations (Att 5, Table 5-32).
      
      (  )
      ATLIC

   d. **ATLIC Room Floor**
      Inspect for residues of lubricant and/or wastes beneath the components of the ATLIC waste feed system and the LIC exhaust gas ductwork. Inspect for residues of lubricant and/or wastes beneath the components of the spent decon feed system having a potential to cause a release of wastes or fugitive emissions. (Att 5, Table 5-32).
      
      (  )        (  )
      ATLIC PCC    ATLIC SCC

3. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

Inspector Print / Sign:    Date:     Time
ENVIRONMENTAL INSPECTION LOG
FOR THE
ATLIC POLLUTION ABATEMENT SYSTEM

Daily - Physical

Page 1 of 2

Mark with an S any items found to be satisfactory. Mark with a U the system(s) of which incinerator's PAS are found to be unsatisfactory and describe in comments.

a. Exhaust Gas Ductwork - Inspect fugitive emissions or residues at flanged duct connections and duct expansion joints. Inspect expansion joints for breaks that would result in leakage to the system (Att 5, Table 5-33).
   (   ) ATLIC PAS

b. Quench Tower and Associated Pumps/Piping - Inspect for brine residues at manway covers and released liquids from piping or pumps (Att 5, Table 5-33).
   (   ) ATLIC PAS

c. Packed Bed Scrubber and Associated Pumps/Piping - Inspect for scrubber liquid residues at manway cover. Inspect for release of scrubber liquid from pumps and piping to include piping that services the brine chiller (Att 5, Table 5-33).
   (   ) ATLIC PAS

d. Venturi Scrubber and Associated Pumps/Piping - Inspect venture system for releases of scrubber liquid from associated pumps and piping (Att 5, Table 5-33).
   (   ) ATLIC PAS

e. Moisture Separator - Check for fugitive emission or waste residues at inlet and outlet flange connections. Inspect for releases of scrubber liquid from associated pumps and piping (Att 5, Table 5-33).
   (   ) ATLIC PAS

f. Powered Carbon Injection System – Check for fugitive emission or loose carbon escaping system (Att 5, Table 5-33).
   (   ) ATLIC PAS

g. Baghouse Bypass Valve – Inspect position of valve to ensure that it is in the closed position during operation (Att 5, Table 5.33).
   (   ) ATLIC PAS

h. Baghouse – Inspect inside Baghouse residue enclosure for integrity of the waste residue container’s connection to the Baghouse hopper discharge gate and for waste residues (Att 5, Table 5-33).
   (   ) ATLIC PAS

i. Carbon Filter – Inspect for fugitive emissions of residues of scrubber liquid at the manway cover (Att 5, Table 5-33).
   (   ) ATLIC PAS

j. Carbon Filter System Bypass Valve - – Inspect position of valve to ensure that it is in the closed position during operation (Att 5, Table 5.33).
   (   ) ATLIC PAS
k. **PAS Blower** – Inspect for excessive vibrations and loss of lubricant (Att 5, Table 5-33).

( ) ATLIC PAS

l. **Scrubber Effluent Handling System** – Inspect brine transfer line and associated pumps for leaks at pump seals and flanged pipe fittings. Inspect for swaying pipe system during operation (Att 5, Table 5-33).

( ) ATLIC PAS

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

<table>
<thead>
<tr>
<th>SYSTEM</th>
<th>WORK REQUEST NO.</th>
<th>EQUIPMENT</th>
<th>INTERIM ACTIONS OR REQUEST DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**COMMENTS AND OTHER INFORMATION**

______________________________  _________________  _________________
Inspector Print / Sign:  Date  Time
ENVIRONMENTAL INSPECTION LOG
FOR THE
ATLIC TOXIC AREA TANKS

Daily

1. Mark with a ✓ whether inspection is being performed through the use of: Closed Circuit TV (✓), or In-Person (✓).

2. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

a. **Level Indicators and Transmitters** - Check level indicator transmitters for proper operation at control panel (Att 5, Table 5-37).
   
   (✓) (✓) (✓) (✓) (✓)
   LCS-8511  NSF-8514  LCS-8516  LCS-8534  SDS-8523

b. **Tank Structure** - Visually inspect for major corroded areas, discolored, or blistered surface coating, buckles or bulges in tank, corrosion around foundation, and evidence of overtopping (Att 5, Table 5-37).
   
   (✓) (✓) (✓) (✓) (✓)
   LCS-8511  NSF-8514  LCS-8516  LCS-8534  SDS-8523

c. **Tank Area** - Visually inspect for evidence of waste residue on floor (Att 5, Table 5-37).
   
   (✓) (✓) (✓) (✓) (✓)
   LCS-8511  NSF-8514  LCS-8516  LCS-8534  SDS-8523

d. **Tank Supports** - Visually inspect for discolored or blistered surface coating and corroded areas (Att 5, Table 5-37).
   
   (✓) (✓) (✓) (✓) (✓)
   LCS-8511  NSF-8514  LCS-8516  LCS-8534  SDS-8523

e. **Pipe System, Valves and Pumps** - Visually inspect for leaks, vibration or swaying of pipe systems, missing pump anchor bolts (Att 5, Table 5-37).
   
   (✓) (✓) (✓) (✓) (✓)
   LCS-8511  NSF-8514  LCS-8516  LCS-8534  SDS-8523

3. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

Inspector Print / Sign Date: Time:

---

D-32
ENVIRONMENTAL INSPECTION LOG
FOR THE
ATLIC VENTILATION CARBON FILTER SYSTEM
PERFORMED BY THE CON-OP
Daily

1. Record the value of all pressure differential and flow rate readings, satisfactory and unsatisfactory for all on-line filter units. For any monitoring systems at Midbed in Alarm columns, circle Yes or No as appropriate.

<table>
<thead>
<tr>
<th>Filter Unit</th>
<th>ACAMS/MINCAMs in alarm or DAAMS only Station</th>
<th>Overall Filter Unit Pressure Differential</th>
<th>Filter Unit Blower</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Vestibule¹</td>
<td>1st²</td>
<td>2nd² (inches WC)</td>
</tr>
<tr>
<td>Filter 8441 ( )</td>
<td>Yes/No</td>
<td>Yes/No</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Filter 8363 ( )</td>
<td>Yes/No</td>
<td>Yes/No</td>
<td>Yes/No</td>
</tr>
<tr>
<td>Filter 8364 ( )</td>
<td>Yes/No</td>
<td>Yes/No</td>
<td>Yes/No</td>
</tr>
</tbody>
</table>

¹ For Vestibules, review DAAMS results from previous day. Verify results are less than 0.5 VSL for GA and 0.4 VSL for L. If so circle no.
² The monitoring systems alarm at the levels specified in the Agent Monitoring Plan (Attachment 22a). For filter banks monitoring information is observed to verify that no agent breakthrough for the 1st and 2nd carbon banks has occurred. Monitoring of Vestibules performed with DAAMS. Monitoring of 2nd carbon bed performed with DAAMS only until breakthrough at 1st carbon bed; then NRT monitoring is performed. Second bed inspection not applicable until NRT monitoring begins (i.e., after breakthrough at 1st bed has occurred). Breakthrough is defined as any confirmed reading equal to or greater than or equal to 1 VSL GA or ≥0.4 VSL for Lewisite.
³ Record value and verify that differential pressure did not exceed 12” w.c. (to determine if plugging of any carbon filter bank has occurred) (Att 5, Table 5-35). Note value is the alarm setpoint.
⁴ Record value and verify an inlet flow greater than or equal to 4,730 CFM (to determine if blower performance has deteriorated) (Att 5, Table 5-35). Note value is the alarm setpoint.

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

Inspector Print / Sign: ____________________________ Date: ________________ Time: ________________
DAILY ENVIRONMENTAL INSPECTION LOG
FOR ATLIC TON CONTAINER GLOVE BOX

Daily - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. **Glove-box Gloves** - Visually inspect gloves and their penetration seals/gaskets for cracks, holes or tears. Ensure labeled service life of the glove has not expired (Att 5, Table 5-31).

      (   ) GLBX-8501    (   ) GLBX-8502

   b. **Glove-box Pressure** - Document Glove-box pressure reading to ensure negative pressure is maintained within the glove-box whenever a ton container or waste is present. Ensure glove-boxes holding ton containers are operating at a minimum negative pressure of 0.25 in-w.c. (Att 5, Table 5-31).

      (   ) GLBX-8501    (   ) GLBX-8502

   c. **Glove-box Interior** – Inspect interior of glove-box through the observation windows to determine if connections to ton container, valves and piping are leaking. Observe for presence of liquids (Att 5, Table 5-31).

      (   ) GLBX-8501    (   ) GLBX-8502

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

Inspector Print / Sign: ___________________________ Date: ___________ Time: ___________
ENVIRONMENTAL INSPECTION LOG
FOR THE
ATLIC
LOAD/UNLOAD AREAS

Daily

Mark with an S any items found to be satisfactory. Mark area found to be unsatisfactory with a U and describe unsatisfactory conditions in comments.

( ) Igloo 1639 Load/Unload Areas - Visually inspect for discolored and stained soil/concrete, spilled residues of hazardous waste. (Att. 5, Table 5-38)

( ) ATLIC PAS Blowdown Load Area -- Visually inspect for discolored and stained soil/concrete, spilled residues of hazardous waste. (Att. 5, Table 5-38)

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

________________________________________________________________________

________________________________________________________________________

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________________________________________________________________________

Inspector – Print / Sign: Date: Time:
WEEKLY ENVIRONMENTAL INSPECTIONS
ENVIRONMENTAL INSPECTION LOG FOR THE CONTAINER HANDLING BUILDING (CHB) & SECONDARY CONTAINMENT SYSTEMS (Overpacks)

SECTION 1 (To be filled out daily and turned in weekly - Physical)       Week Ending __________________________ (Sunday)

Overpack(s) in storage more than 7 days will be monitored on day seven and every seventh day thereafter (list by overpack number). Record weekly monitoring results of overpacks listed (agent detected = +, agent not detected = -) (Att 5, Table 5-4).

<table>
<thead>
<tr>
<th>MONDAY</th>
<th>TUESDAY</th>
<th>WEDNESDAY</th>
<th>THURSDAY</th>
<th>FRIDAY</th>
<th>SATURDAY</th>
<th>SUNDAY</th>
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<tbody>
<tr>
<td>Overpack Number</td>
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<td>Overpack Number</td>
<td>Monitoring Results</td>
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</tbody>
</table>

# of ONCs

Initials

Date

Note: Overpacks with positive readings require priority processing.

Number of overpacks in storage (maximum = 48) (Att 5, Table 5-4).

Inspector Print / Sign: ___________________________ Date: ___________ Time: ___________
ENVIRONMENTAL INSPECTION LOG
FOR THE
CONTAINER HANDLING BUILDING
& SECONDARY CONTAINMENT SYSTEMS

Weekly - Physical

SECTION 2

a. Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe unsatisfactory conditions in comments.

i. ( ) Overpack (ONC) Annual Integrity Test — ONCs are subject to an integrity test to determine their ability to contain agent vapors prior to being placed into service and on an annual basis thereafter. Verify annual test has been accomplished by viewing the stenciled date due on the ONC (i.e. 10/04 (in 4” letters)). (Att 5, Table 5-4).

ii. ( ) Overpack label - Inspect all overpacks in storage to ensure they are correctly labeled (Att 5, Table 5-4).

iii. ( ) Material Handling Equipment - Observe material handling equipment during operation to determine any loss of performance (Att 5, Table 5-4).

iv. ( ) Storage Base (Floor, trenches, sumps) - floors, trenches and sumps for cracks, gaps in the concrete or concrete coating (Att 5, Table 5-4).

v. ( ) General Area - Inspect the ONC storage area for apparent spills or leaks from overpacks (Att 5, Table 5-4).

NOTE: CHB personnel will control the flow of overpacks to be managed on a first-in/first-out basis and that they will not normally remain in the CHB for greater than 24 hours prior to processing (Att 12, 12.8.5).

b. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

Inspector Print / Sign ______________________  Date __________  Time __________
ENVIRONMENTAL INSPECTION LOG
FOR
TMA “C” AIRLOCK

Weekly - Visual

(when an overpack is in storage):

a. Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe any unsatisfactory conditions in comments. Inspection to be performed by visual inspection through the observation corridor window (Att 5, Table 5-1).

   i. ( ) Containers in Storage (maximum number of overpacks allowed = 1)

   ii. ( ) Container Labels - Inspect overpack in storage to ensure it is correctly labeled (Att 5, Table 5-6).

   iii. ( ) Material Handling Equipment - Observe material handling equipment during operation to determine any loss of performance (Att 5, Table 5-6).

   iv. ( ) Storage Base (floor, sumps) - Inspect floors, trenches and sumps for cracks, gaps in the concrete or concrete coating (Att 5, Table 5-6).

   v. ( ) General Area - Inspect the ONC storage area for apparent spills or leaks from the overpack (Att 5, Table 5-6).

b. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

Inspector Print / Sign Date Time
ENVIRONMENTAL INSPECTION LOG
FOR
TMA DECON A/B AREA

Weekly - Visual

(when an overpack is in storage):

a. Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe any unsatisfactory conditions in comments. Inspection to be performed by visual inspection (e.g., CCTV) (Att 5, Table 5-1).

i. ( ) Containers in Storage (maximum number of overpacks allowed = 1)

ii. ( ) Container Labels - Inspect overpack in storage to ensure it is correctly labeled (Att 5, Table 5-6).

iii. ( ) Material Handling Equipment - Observe material handling equipment during operation to determine any loss of performance (Att 5, Table 5-6).

iv. ( ) Storage Base (floor, sumps) - Inspect floors, trenches and sumps for cracks, gaps in the concrete or concrete coating (Att 5, Table 5-6).

v. ( ) General Area - Inspect the ONC storage area for apparent spills or leaks from the overpack. (Att 5, Table 5-6).

b. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

________________________________________________________________________

________________________________________________________________________

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________________________________________________________________________

Inspector Print / Sign __________________ Date ________ Time ________
ENVIRONMENTAL INSPECTION LOG
FOR
TMA CONTAINER STORAGE

Weekly - Physical

a. Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe unsatisfactory conditions in comments.

   i. (   ) **Volume of Containers in Storage** - maximum allowed = 2,200 gallons (Att 5, Table 5-5).

   ii. (   ) **Container Labels** - Inspect all containers in storage to ensure they are correctly labeled (Att 5, Table 5-5).

   iii. (   ) **Material Handling Equipment** - Observe material handling equipment during operation to determine any loss of performance (Att 5, Table 5-5).

   iv. (   ) **Integrity of Containers** – Inspect the containers for deterioration (i.e., rupture, corrosion, released material, etc.) (Att 5, Table 5-5).

   v. (   ) **Storage Base (floor, sumps)** - Inspect the floor and sumps for cracks and gaps in the concrete or the concrete coating (Att 5, Table 5-5).

   vi. (   ) **General Area** - Inspect the TMA area for apparent spills or leaks from the containers (Att 5, Table 5-5).

   vii. (   ) **Closed Containers** – Ensure that all containers covers/closure devices are secured in a closed position so that there are not visible holes, gaps or other open spaces into the interior of the container (Att 5, Table 5-5).

b. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

Inspector Print / Sign          Date          Time

W-5
**WEEKLY ENVIRONMENTAL INSPECTION LOG**
FOR 24-HOUR INTERMITTENT COLLECTION UNITS
AND MDB RCRA PERMITTED SUMPS
(CATEGORY A, B, AND A/B AREAS)

Weekly - Physical

Week Ending: ______________________

<table>
<thead>
<tr>
<th>Location</th>
<th>Sump</th>
<th>Result (S or U)</th>
<th>Inspector Print and Sign</th>
<th>Date</th>
<th>Time</th>
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</thead>
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**INSPECTION CONTINUED ON NEXT PAGE**
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<tr>
<th>Location</th>
<th>Sump</th>
<th>Result (S or U)</th>
<th>Inspector Print and Sign</th>
<th>Date</th>
<th>Time</th>
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</tbody>
</table>

1. Inspection will be performed by removing the grating and with a flashlight, inspect for cracks, chips and deterioration of protective coatings, rusting and any signs of leaks (Att 5, Table 5-18 and DSHW letter dated 07 May 2004). **If the inspection cannot be performed due to residues in the sump, the residues must be removed to complete the inspection.**

2. Physical visual inspection to determine if the liquid level in the sump corresponds with the alarm displayed on the advisor screen in the control room (Att 5, Table 5-18). **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions below.**

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions in accordance with the above inspection criteria.**
RESERVED
ACAMS CALIBRATION DATA SHEET

SEE TE-LOP-524

This page is only used for reference to remind inspectors of the weekly requirement.
ENVIRONMENTAL INSPECTION LOG
FOR THE
SPENT DECON SYSTEM (SDS) ROOM

Weekly - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

a. **Level Indicators and Transmitters** — Check level indicator transmitters for proper operation (Att 5, Table 5-22).

   (   )   (   )   (   )
   SDS-101  SDS-102  SDS-103

b. **Tank Structure** — Visually inspect for major corroded areas, discolored, or blistered surface coating, buckles or bulges in tank, corrosion around foundation, and evidence of overtopping (Att 5, Table 5-22).

   (   )   (   )   (   )
   SDS-101  SDS-102  SDS-103

c. **Tank Area** — Visually inspect for evidence of waste residue on floor (Att 5, Table 5-22).

   (   )   (   )   (   )
   SDS-101  SDS-102  SDS-103

d. **Tank Supports** — Inspect for discolored or blistered surface coating and corroded areas (Att 5, Table 5-22).

   (   )   (   )   (   )
   SDS-101  SDS-102  SDS-103

e. **Pipe System, Valves and Pumps** — Inspect for leaks, vibration or swaying of pipe systems, missing pump anchor bolts (Att 5, Table 5-22).

   (   )   (   )   (   )
   SDS-101  SDS-102  SDS-103

f. **Secondary Containment (SDS-PUMP-150 presence of liquid – weekly)** — Visually inspect for the presence of liquid in secondary containment sump (Att 5, Table 5-22).

   (   )   (   )   (   )
   SDS-101  SDS-102  SDS-103

g. **Secondary Containment (system integrity – weekly)** — Inspect for cracks, gaps and deterioration of protective coating of secondary containment system and floor (Att 5, Table 5-22).

   (   )   (   )   (   )
   SDS-101  SDS-102  SDS-103

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

---

Inspector Print / Sign  Date  Time
ENVIRONMENTAL INSPECTION LOG
FOR THE
TOXIC CUBICLE TANK

Weekly - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. **Level Indicators and Transmitters** - Check level indicator transmitters for proper operation (Att 5, Table 5-21).
      (  )  (  )
      ACS-101 ACS-102

   b. **Tank Structure** - Visually inspect for major corroded areas, discolored, or blistered surface coating, buckles or bulges in tank, corrosion around foundation, and evidence of overtopping (Att 5, Table 5-21).
      (  )  (  )
      ACS-101 ACS-102

   c. **Tank Area** - Visually inspect for evidence of waste residue on floor (Att 5, Table 5-21).
      (  )  (  )
      ACS-101 ACS-102

   d. **Tank Supports** - Visually inspect for discolored or blistered surface coating and corroded areas (Att 5, Table 5-21).
      (  )  (  )
      ACS-101 ACS-102

   e. **Pipe System, Valves and Pumps** - Visually inspect for leaks, vibration or swaying of pipe systems, missing pump anchor bolts (Att 5, Table 5-21).
      (  )  (  )
      ACS-101 ACS-102

   f. **Secondary Containment (SDS-PUMP-151 presence of liquid)** - Visually inspect for the presence of liquid in secondary containment sump (Att 5, Table 5-21).
      (  )  (  )
      ACS-101 ACS-102

   g. **Secondary Containment (system integrity)** - Inspect for cracks, gaps and deterioration of protective coating of secondary containment system and floor (Att 5, Table 5-21).
      (  )  (  )
      ACS-101 ACS-102

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

__________________________________________________________________________

Inspector Print / Sign __________________________ Date ____________ Time ____________
ENVIRONMENTAL INSPECTION LOG
FOR THE
S-2 WAREHOUSE CONTAINER STORAGE AREA &
SECONDARY CONTAINMENT SYSTEMS

Weekly - Physical

a. Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe unsatisfactory conditions in comments.

i. ( ) Volume of containers in storage *(maximum allowed = 38,720 gallons) (Att 5, Table 5-10).*

ii. ( ) Volume of containers per secondary containment pallet *(maximum allowed = 600 gallons per secondary containment pallet) (Att 5, Table 5-10).*

iii. ( ) Volume of largest container stored on a secondary containment pallet *(maximum allowed = 60 gallons) (Att 5, Table 5-10).*

Note: Attachment 12 describes certain circumstances where a larger container could be stored.

iv. ( ) Segregation of Incompatible Wastes *(i.e., only one type of site-generated wastes to be placed in a secondary containment pallet at one time) (Att 5, Table 5-10).*

v. ( ) Container Labels - Inspect all containers in storage to ensure they are correctly labeled *(Att 5, Table 5-10).*

vi. ( ) Material Handling Equipment - Observe material handling equipment during operation to determine any loss of performance *(Att 5, Table 5-10).*

vii. ( ) Integrity of Containers *(i.e., absence of deterioration, corrosion, released material, etc.) (Att 5, Table 5-10).*

viii. ( ) Integrity of Secondary Containment Pallets *(i.e., absence of deterioration, corrosion, released material, etc.) (Att 5, Table 5-10).*

ix. ( ) General Area - Inspect area for apparent spills or leaks from the containers or secondary containment pallets *(Att 5, Table 5-10).*

x. ( ) Closed Containers - Ensure that all containers covers/closure devices are secured in a closed position so that there are not visible holes, gaps or other open spaces into the interior of the container *(Att 5, Table 5-10).*

b. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

Inspector Print / Sign ___________________ Date ___________ Time ___________
ENVIRONMENTAL INSPECTION LOG
FOR THE UNPACK AREA (UPA) CONTAINER STORAGE AREA

SECTION 1 (To be filled out daily and turned in weekly - Physical)  Week Ending _________ (Sunday)

Overpack(s) in storage more than 7 days will be monitored on day seven and every seventh day thereafter (list by overpack number). Record weekly monitoring results of overpacks listed (agent detected = +, agent not detected = )

<table>
<thead>
<tr>
<th>MONDAY</th>
<th>TUESDAY</th>
<th>WEDNESDAY</th>
<th>THURSDAY</th>
<th>FRIDAY</th>
<th>SATURDAY</th>
<th>SUNDAY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overpack Number</td>
<td>Monitoring Results</td>
<td>Overpack Number</td>
<td>Monitoring Results</td>
<td>Overpack Number</td>
<td>Monitoring Results</td>
<td>Overpack Number</td>
</tr>
</tbody>
</table>

# of ONCs

Initials

Date

Note:  Onsite Container (ONC) is used interchangeably with Overpack for UPA operations.

Overpacks with positive readings require priority processing.

Number of overpacks in storage (maximum allowed = 9 ONCs)

Inspector Print / Sign: ___________________________  Date: _____________  Time: _____________
SECTION 2

a. Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe unsatisfactory conditions in comments.

i. ( ) Overpack Label - Inspect all overpacks in storage to ensure they are correctly labeled (Att 5, Table 5-7).

ii. ( ) Material Handling Equipment - Observe material handling equipment during operation to determine any loss of performance (Att 5, Table 5-7).

iii. ( ) Storage Base - Inspect floors, trenches and sumps for cracks, gaps in the concrete or the concrete coating (when using the UPA for storage of leaking containers) (Att 5, Table 5-7).

iv. ( ) Closed Containers - Ensure that all containers covers/closure devices are secured in a closed position so that there are not visible holes, gaps or other open spaces into the interior of the container (Att 5, Table 5-7).

v. ( ) General Area - Inspect the storage area for apparent spills or leaks from the overpacks/containers (Att 5, Table 5-7).

b. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above criteria.

---

Inspector Print / Sign Date Time
ENVIRONMENTAL INSPECTION LOG
FOR THE UPA CONTAINER STORAGE AREA
(ONLY APPLICABLE WHEN SECONDARY CONTAINMENT PALLETs ARE USED)

Weekly - Physical

a. Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe unsatisfactory conditions in comments. (NOTE: While stored in the UPA, munitions & bulk containers will be placed on secondary containment pallets or kept in the overpacks which will provide the secondary containment).

i. ( ) Ensure the total number of overpacks and secondary containment pallets used to store containers does not exceed the limits specified below: (Att 12, Table 12-1)

<table>
<thead>
<tr>
<th>Munitions Stored</th>
<th>Maximum Number of Overpacks and Secondary Containment Pallets Allowed</th>
<th>Number of Overpacks and Secondary Containment Pallets in Storage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Munitions or Combination of Munitions</td>
<td>9</td>
<td></td>
</tr>
</tbody>
</table>

ii. ( ) Ensure the number of containers stored per secondary containment pallet does not exceed the quantities specified below (Att 12, 12.10.7 through 12.10.10).

<table>
<thead>
<tr>
<th>Munition</th>
<th>Maximum Number Per Pallet</th>
<th>Number of Munitions on Each Pallet</th>
</tr>
</thead>
<tbody>
<tr>
<td>155 mm projectile</td>
<td>96</td>
<td></td>
</tr>
<tr>
<td>Ton container</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>4.2&quot; mortar</td>
<td>192</td>
<td></td>
</tr>
</tbody>
</table>

iii. ( ) Ensure that the munition(s) or pallet(s) of munitions do not extend over the edge of the secondary containment pallet (Att 5, Table 5-7(a)).

iv. ( ) Integrity of Containers (i.e., absence of deterioration, rupture, corrosion, released material, etc.) (Att 5, Table 5-7(a)).

v. ( ) Integrity of Secondary Containment Pallets (i.e., absence of deterioration, rupture, corrosion, released material, etc.) (Att 5, Table 5-7(a)).

vi. ( ) General Area - Inspect the storage area for apparent spills or leaks from the containers or secondary containment pallets (Att 5, Table 5-7(a)).

vii. ( ) Closed Containers - Ensure that all containers covers/closure devices are secured in a closed position so that there are not visible holes, gaps or other open spaces into the interior of the container (Att 5, Table 5-7(a)).

b. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

________________________________________  __________________________  __________________________
Inspector Print / Sign                     Date                          Time
ENVIROMENTAL INSPECTION LOG FOR THE ECV CONTAINER STORAGE AREA

Weekly - Physical

1. Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe unsatisfactory conditions in comments. Inspection to be performed by visual inspection (e.g., CCTV, advisor screens in control room, etc.).

   a. ( ) **Storage Base (floor)** - Inspect floors for cracks and gaps in the concrete or the concrete coating (Att 5, Table 5-8).

   b. ( ) **General Area** - Inspect the storage area for apparent spills or leaks from the containers (Att 5, Table 5-8).

   c. ( ) **Number of containers in storage in the ECV** - Ensure that the number of containers in storage does not exceed the limits specified below: (Att 12, Table 12-4)

<table>
<thead>
<tr>
<th>Munition/Bulk Container</th>
<th>Number in Storage</th>
<th>Maximum Number Allowed</th>
</tr>
</thead>
<tbody>
<tr>
<td>155-mm Projectiles</td>
<td></td>
<td>156</td>
</tr>
<tr>
<td>Ton Containers</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>4.2” Mortars</td>
<td></td>
<td>180</td>
</tr>
</tbody>
</table>

   d. ( ) **Integrity of Containers** (i.e., absence of deterioration, corrosion, released material, etc.) (Att 5, Table 5-8).

   e. ( ) **Closed Containers** - Ensure that all containers covers/closure devices are secured in a closed position so that there are not visible holes, gaps or other open spaces into the interior of the container (Att 5, Table 5-8).

   Notes:
   1. The required inspections for the material handling equipment and the sumps (ICUs) located in this room are addressed on other inspection logs located in Attachment 5.
   2. Mustard 155mm projectiles and 4.2” mortars that have been rejected from the PMD back into the ECV solely due to a stuck burster or partially stuck fuze may not have fully-seated nose closures. In this case, the burster well continues to function as the container closure device that contains the liquid agent inside. Verification will consist of 1) the lack of visible leakage, and 2) the lack of an ECV ACAMS reading.

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**
ENVIRONMENTAL INSPECTION LOG
FOR THE
UPMC CONTAINER STORAGE AREA

Weekly - Visual

a. **Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe unsatisfactory conditions in comments.** Inspection to be performed by visual inspection (e.g., CCTV, advisor screens in control room, etc.).

   i. **( ) Storage Base (floor)** - Inspect floors for cracks and gaps in the concrete or the concrete coating (Att 5, Table 5-9).

   ii. **( ) General Area** - Inspect the storage area for apparent spills or leaks from the containers (Att 5, Table 5-8).

   iii. **( ) Number of containers in storage in the UPMC** - Ensure that the number of containers in storage does not exceed the limits specified below: (Att 12, Table 12-4).

<table>
<thead>
<tr>
<th>Munition/Bulk Container</th>
<th>Maximum Number Allowed</th>
<th>Number In Storage</th>
</tr>
</thead>
<tbody>
<tr>
<td>155-mm Projectiles</td>
<td>1,004</td>
<td></td>
</tr>
<tr>
<td>Ton Containers</td>
<td>19</td>
<td></td>
</tr>
<tr>
<td>4.2&quot; Mortars</td>
<td>1,957</td>
<td></td>
</tr>
</tbody>
</table>

   iv. **( ) Integrity of Containers** (i.e., absence of deterioration, corrosion, released material, etc.) (Att 5, Table 5-8).

   v. **( ) Closed Containers** - Ensure that all containers covers/closure devices are secured in a closed position so that there are not visible holes, gaps or other open spaces into the interior of the container (Att 5, Table 5-8).

   Note: The required inspections for the material handling equipment and the sumps (ICUs) located in this room are addressed on other inspection logs located in Attachment 5.

b. **Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above criteria.**

Inspector Print / Sign ___________________________ Date ____________ Time ________
PREPAREDNESS & PREVENTION READINESS INSPECTION LOG
FOR THE
SECURITY FENCING

Weekly - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. ( ) Security Fencing
      Visually inspect the fences and gates surrounding TOCDF for integrity, sight obstructions caused by vegetation, and gaps at the fence base (Att 5, Table 5-28).

   b. ( ) Security Lighting
      Visually inspect the lights for proper operation (Att 5, Table 5-28).

   c. ( ) Warning Signs
      Visually inspect for the presence of all signs. Signs must be legible from a distance of 50 feet (Att 5, Table 5-28).

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Inspector Print / Sign             Date             Time
PREPAREDNESS & PREVENTION READINESS INSPECTION LOG
FOR THE
SITE EVACUATION ALARM

Weekly - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. ( ) Evacuation Siren - Verify operability of evacuation siren (Att 5, Table 5-28).

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

   ____________________________________________

   ____________________________________________

   ____________________________________________

   ____________________________________________

Inspector Print / Sign _______________ Date _______________ Time _______________

W-19
ENVIRONMENTAL INSPECTION LOG
FOR THE
AREA-10 IGLOO 1632, 1633, 1634, 1635, AND 1636 CONTAINER STORAGE AREAS & SECONDARY CONTAINMENT SYSTEMS

Weekly - Physical

a. Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe unsatisfactory conditions in comments.

<table>
<thead>
<tr>
<th>Igloo Inspected</th>
<th>□ 1632</th>
<th>□ 1633</th>
<th>□ 1634</th>
<th>□ 1635</th>
<th>□ 1636</th>
</tr>
</thead>
<tbody>
<tr>
<td>i.</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
</tr>
<tr>
<td>Volume of containers in storage (maximum allowed = 14,520 gallons in each igloo).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ii.</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
</tr>
<tr>
<td>Volume of containers per secondary containment pallet (The maximum combined liquid volume(^1) of all containers on the SC pallet is 10-times the SC pallet’s rated capacity [e.g., 600 total gallons on a 60-gallon SC pallet]).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>iii.</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
</tr>
<tr>
<td>Volume of single largest container stored on a secondary containment pallet (The maximum volume of the single largest liquid container(^1) on the SC pallet is the SC pallet’s rated capacity [e.g., 60 gallons on a 60-gallon SC pallet]).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>iv.</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
</tr>
<tr>
<td>Segregation of Incompatible Wastes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>v.</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
</tr>
<tr>
<td>Container Labels - Inspect all containers in storage to ensure they are correctly labeled.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>vi.</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
</tr>
<tr>
<td>Material Handling Equipment - Observe material handling equipment during operation to determine any loss of performance. Loss of performance may be indicated by hydraulic or oil leaks, frayed cables, jerky movement. Review the Site Work Order database for newly-generated maintenance requests.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>vii.</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
</tr>
<tr>
<td>Integrity of Containers (i.e., absence of deterioration, corrosion, released material, etc.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>viii.</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
</tr>
<tr>
<td>Integrity of Secondary Containment Pallets (i.e., absence of deterioration, corrosion, released material, etc.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ix.</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
</tr>
<tr>
<td>General Area - Inspect area for apparent spills or leaks from the containers or secondary containment pallets and for the accumulation of precipitation.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>x.</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
<td>(    )</td>
</tr>
<tr>
<td>Closed Containers - Ensure that all containers covers/closure devices are secured in a closed position so that there are not visible holes, gaps or other open spaces into the interior of the container.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

b. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

Inspector Print / Sign __________________________ Date ___________ Time ___________

Note 1 - For the purposes of determining required secondary containment capacity, only the volume of an overpacked container needs to be considered, not the volume of the overpack itself as long as the overpack contains only the leaking container (e.g. a 55-gallon drum of liquid waste overpacked in an 85-gallon overpack contributes only 55- gallons to the required SC capacity).
ENVIRONMENTAL INSPECTION LOG
FOR THE IGLOO 1632 DRUM VENTILATION SYSTEM (DVS) MISCELLANEOUS
TREATMENT UNITS AND CARBON ADSORPTION FILTRATION SYSTEM

Weekly

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. **Secondary Containment (presence of liquid)** — Visually inspect the floors & sumps for presence of standing liquids. Sumps must be emptied of liquid within 24 hours of collection (Att 5, Table 5-30).

      (   ) DVS-101 (   ) DVS-102 (   ) DVSSR

   b. **Secondary Containment (system integrity)** — Visually inspect the floors and sumps for signs of deterioration, cracks, gaps or evidence of leakage (Att 5, Table 5-30).

      (   ) DVS-101 (   ) DVS-102 (   ) DVSSR

   c. **Structure and Vent Ducting** - Visually inspect enclosure/walls, vent ducting, observation windows, penetration seals/gaskets and joints for signs of deterioration, cracks, gaps or evidence of leakage (Att 5, Table 5-30).

      (   ) DVS-101 (   ) DVS-102 (   ) DVSSR

   d. **Gloves** - Visually inspect gloves and their penetration seals/gaskets for cracks, holes, evidence of leakage. Ensure the labeled service life of the gloves has not expired (Att 5, Table 5-30).

      (   ) DVS-101 (   ) DVS-102

   e. **Carbon Adsorption Filtration System** – Visually inspect the filter housings and crossaround ducting for cracks, holes, gaps, loose piping or connections that could result in air pollutant emissions [40 CFR 264.1033(l)(2)(i)]. Visually inspect the induction fans for signs of degradation or failure. Ensure the DVS Enclosures and DVSSR are operating at a minimum negative pressure of 0.25 in-w.c. (Att 5, Table 5-30).

      (   ) DVS-101 (   ) DVS-102 (   ) DVSSR (   ) Filter-101 (   ) Filter-102

   f. **Material Handling Equipment** – Visually inspect the forklift and hoists during operation to determine any loss of performance including hydraulic or oil leaks, frayed cables, jerky movement. Review the Site Work Order database for newly-generated maintenance requests. (Att 5, Table 5-30).

      (   ) Forklift (   ) Hoists

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**


Inspector Print / Sign ______________________ Date __________ Time __________
ENVIRONMENTAL INSPECTION LOG
FOR THE IGLOO 1631 AUTOCLAVE MISCELLANEOUS TREATMENT UNIT AND CARBON ADSORPTION FILTRATION SYSTEM

Weekly

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. Autoclave and Ancillary Equipment

      ( ) Autoclave Door; Inspect Locking Ring and Hinges, and Rollers for proper operation.

      ( ) Autoclave Door; Inspect O-Ring for cracks or gaps.

      ( ) Autoclave Door; Inspect door and vessel joint for signs of steam leaks.

      ( ) Autoclave Exterior; Inspect for signs of rust.

   b. Material Handling Equipment

      Loss of performance may be indicated by hydraulic or oil leaks, frayed cables, jerky movement. Review the Site Work Order database for newly-generated maintenance requests.

      ( ) Forklift; Observe equipment during operation to determine any loss of performance.

      ( ) Crane; Observe equipment during operation to determine any loss of performance.

   c. Autoclave Carbon Adsorption Filtration System

      ( ) Ductwork; Inspect for fugitive emissions or residues at flanged duct connections and bends.

      ( ) Ductwork; Inspect joints for breaks that would result in in-leakage to the system.

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

Inspector Print / Sign Date Time
WEEKLY ENVIRONMENTAL INSPECTION LOG FOR 24-HOUR INTERMITTENT COLLECTION UNITS AND ATLIC RCRA PERMITTED SUMPS (CATEGORY A, B, AND A/B AREAS)

Weekly - Physical

Week Ending: ________________________________

<table>
<thead>
<tr>
<th>Location</th>
<th>Sump</th>
<th>Result (S or U)</th>
<th>Inspector Print and Sign</th>
<th>Date</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOX Area</td>
<td>SDS-PUMP-8530</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Entry Airlock B</td>
<td>SDS-PUMP-8526</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Entry Airlock A</td>
<td>SDS-PUMP-8529</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Inspection will be performed by removing the grating and with a flashlight, inspect for cracks, chips and deterioration of protective coatings, rusting and any signs of leaks (Att 5, Table 5-18 and DSHW letter dated 07 May 2004). If the inspection cannot be performed due to residues in the sump, the residues must be removed to complete the inspection.

2. Physical visual inspection to determine if the liquid level in the sump corresponds with the alarm displayed on the advisor screen in the control room (Att 5, Table 5-18). Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions below.

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions in accordance with the above inspection criteria.

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Inspector Print / Sign:_________________________________________________
Date:__________________________ Time:__________________________
ENVIRONMENTAL INSPECTION LOG
FOR THE
ATLIC TOXIC AREA TANKS

Weekly - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

a. **Level Indicators and Transmitters** - Check level indicator transmitters for proper operation (Att 5, Table 5-37).
   (   ) (   ) (   ) (   ) (   )
   LCS-8511  NSF-8514  LCS-8516  LCS-8534  SDS-8523

b. **Tank Structure** - Visually inspect for major corroded areas, discolored, or blistered surface coating, buckles or bulges in tank, corrosion around foundation, and evidence of overtopping (Att 5, Table 5-37).
   (   ) (   ) (   ) (   ) (   )
   LCS-8511  NSF-8514  LCS-8516  LCS-8534  SDS-8523

c. **Tank Area** - Visually inspect for evidence of waste residue on floor (Att 5, Table 5-37).
   (   ) (   ) (   ) (   ) (   )
   LCS-8511  NSF-8514  LCS-8516  LCS-8534  SDS-8523

d. **Tank Supports** - Visually inspect for discolored or blistered surface coating and corroded areas (Att 5, Table 5-37).
   (   ) (   ) (   ) (   ) (   )
   LCS-8511  NSF-8514  LCS-8516  LCS-8534  SDS-8523

e. **Pipe System, Valves and Pumps** - Visually inspect for leaks, vibration or swaying of pipe systems, missing pump anchor bolts (Att 5, Table 5-37).
   (   ) (   ) (   ) (   ) (   )
   LCS-8511  NSF-8514  LCS-8516  LCS-8534  SDS-8523

f. **Secondary Containment (SDS-PUMP-8522 presence of liquid)** - Visually inspect for the presence of liquid in secondary containment sump (Att 5, Table 5-37).
   (   ) (   ) (   ) (   ) (   )
   LCS-8511  NSF-8514  LCS-8516  LCS-8534  SDS-8523

g. **Secondary Containment (system integrity)** - Inspect for cracks, gaps and deterioration of protective coating of secondary containment system and floor (Att 5, Table 5-37).
   (   ) (   ) (   ) (   ) (   )
   LCS-8511  NSF-8514  LCS-8516  LCS-8534  SDS-8523

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

_____________________________________________________________________________________
Inspector Print / Sign:___________________________________________________________________

Date:________________________________ Time:___________________
MONTHLY ENVIRONMENTAL INSPECTIONS
MONTHLY ENVIRONMENTAL INSPECTION LOG
FOR 24-HOUR INTERMITTENT COLLECTION UNITS AND
MDB RCRA PERMITTED SUMPS (CATEGORY A, B, AND A/B AREAS)

MONTH ENDING: ___________________________

<table>
<thead>
<tr>
<th>Location</th>
<th>Sump</th>
<th>Result (S or U)</th>
<th>Inspector Print and Sign</th>
<th>Date</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>LIC1</td>
<td>SDS-PUMP-188</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LIC2</td>
<td>SDS-PUMP-157</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Inspection will be performed by removing the grating and with a flashlight, inspect for cracks, chips and deterioration of protective coatings, rusting and any signs of leaks. **If the inspection cannot be performed due to residues in the sump, the residues must be removed to complete the inspection (Per DSHW Letter, dated May 7, 2004).**

2. Physical visual inspection to determine if the liquid level in the sump corresponds with the alarm displayed on the advisor screen in the control room (*Att 5, Table 5-19*). **Mark with an S any items found to be satisfactory (i.e., those sumps where the liquid level corresponds to the alarm displayed on the advisor screen). Mark unsatisfactory items with a U and describe unsatisfactory conditions below.**

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**
ENVIRONMENTAL INSPECTION LOG
FOR THE
LIQUID INCINERATOR NO. 1 PRIMARY CHAMBER

Monthly - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

a. ( ) Primary Chamber Agent Feed Line - Inspect for leaks in the agent feed line at threaded and flanged pipe connections (Att 5, Table 5-11).

b. ( ) Primary Chamber - Inspect for fugitive emissions and hot spots on the outer shell of the primary chamber, which would indicate a breakdown of the chamber's refractory (Att 5, Table 5-11).

c. ( ) Primary Chamber Combustion Air Blowers – Evaluate Combustion Air Blower performance through Control Room Advisor Screen observations (Att 5, Table 5-11).

d. ( ) Primary Chamber Room Floor - Inspect for residues of lubricant and/or wastes beneath the components of the LIC agent feed system and the LIC exhaust gas ductwork (Att 5, Table 5-11).

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

Inspector Print / Sign __________________________  Date __________  Time __________
ENVIRONMENTAL INSPECTION LOG
FOR THE
LIQUID INCINERATOR NO. 2 PRIMARY CHAMBER

Monthly - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. (   ) Primary Chamber Agent Feed Line - Inspect for leaks in the agent feed line at threaded and flanged pipe connections (Att 5, Table 5-11).

   b. (   ) Primary Chamber - Inspect for fugitive emissions and hot spots on the outer shell of the primary chamber, which would indicate a breakdown of the chamber’s refractory (Att 5, Table 5-11).

   c. (   ) Primary Chamber Combustion Air Blowers - Evaluate Combustion Air Blower performance through Control Room Advisor Screen observations (Att 5, Table 5-11).

   d. (   ) Primary Chamber Room Floor - Inspect for residues of lubricant and/or wastes beneath the components of the LIC agent feed system and the LIC exhaust gas ductwork (Att 5, Table 5-11).

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

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Inspector Print / Sign _______________ Date _______________ Time _______________
ENVIRONMENTAL INSPECTION LOG
FOR THE
DEACTIVATION FURNACE

Monthly - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. ( ) Combustion Air Blower - Evaluate combustion air blower performance through Control Room Advisor screen observations (Att 5, Table 5-14).

   b. ( ) Rotary Kiln - Inspect the rotary kiln for fugitive emissions (Att 5, Table 5-14).

   c. ( ) Rotary Kiln Drive - Inspect the rotary kiln trunnion rollers for smooth motion (Att 5, Table 5-14).

   d. ( ) Rotary Kiln Drive Lubrication System - Inspect the rotary kiln trunnion bearing lubrication system for leaks and spills (Att 5, Table 5-14).

   e. ( ) Heated Discharge Conveyor - Inspect the Heated Discharge Conveyor motion indicator plate for smooth even operation (Att 5, Table 5-14).

   f. ( ) Heated Discharge Conveyor (floor underneath) - Inspect the floor beneath the Heated Discharge Conveyor for residues of accumulated wastes (Att 5, Table 5-14).

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

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Inspector Print / Sign Date Time
ENVIRONMENTAL INSPECTION LOG
FOR THE
METAL PARTS FURNACE

Monthly - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. ( ) Waste Feed System - Inspect for movement of internal conveyor system from the control
      panel by ensuring conveyor drive chains are in motion (Att 5, Table 5-13).

   b. ( ) Combustion Air Blowers - Evaluate combustion air blower performance through Control
      Room Advisor Screen observations (Att 5, Table 5-13).

   c. ( ) Primary Chamber - Inspect for hot spots on the primary chamber outer shell, which indicate
      a breakdown of the incinerator’s refractory (Att 5, Table 5-13).

   d. ( ) Afterburner - Inspect afterburner shell for hot spots, which would indicate a
      breakdown of the afterburner’s refractory (Att 5, Table 5-13).

   e. ( ) Ductwork joining Primary Chamber and Afterburner - Inspect ductwork between
      primary chamber and afterburner for fugitive emissions (Att 5, Table 5-13).

2. Describe corrective actions taken, including any work orders (by number) generated to address
   conditions found to be unsatisfactory. Document any abnormal conditions associated with the
   above inspection criteria.


Inspecter Print / Sign  Date  Time
EMERGENCY RESPONSE EQUIPMENT INVENTORY LOG

Monthly - Physical

(Permit requirement found in Attachment 5, Table 5-27)

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

<table>
<thead>
<tr>
<th>ITEM</th>
<th>LOCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. ( ) HAZMAT Truck</td>
<td>Bldg S1</td>
</tr>
<tr>
<td>Parked in proper location, gas tank is more than half full, engine starts.</td>
<td></td>
</tr>
<tr>
<td>b. ( ) Ton Container Repair Kit (1)</td>
<td>MDB</td>
</tr>
<tr>
<td>Inspect kit seal to ensure that the contents of the kit are complete. If the seal is broken inspect contents of kit.</td>
<td></td>
</tr>
<tr>
<td>c. ( ) 85 Gallon Overpacks (3)</td>
<td>Bldg S1/S4</td>
</tr>
<tr>
<td>Inspect for sufficient quantity.</td>
<td></td>
</tr>
<tr>
<td>d. ( ) OSHA Level A Response Suits (12)</td>
<td>PMB TAP Room</td>
</tr>
<tr>
<td>Inspect for sufficient quantity and functionality.</td>
<td></td>
</tr>
<tr>
<td>e. ( ) OSHA Saranex Suits (6)</td>
<td>PMB TAP Room</td>
</tr>
<tr>
<td>Inspect for sufficient quantity and functionality.</td>
<td></td>
</tr>
<tr>
<td>f. ( ) OSHA Level C Response Suits (6)</td>
<td>HAZMAT Truck</td>
</tr>
<tr>
<td>Inspect for sufficient quantity and functionality.</td>
<td></td>
</tr>
<tr>
<td>g. ( ) OSHA Overboots (6 pair)</td>
<td>HAZMAT Truck</td>
</tr>
<tr>
<td>Inspect for sufficient quantity and functionality.</td>
<td></td>
</tr>
<tr>
<td>h. ( ) SCBA Packs with Bottles (6)</td>
<td>HAZMAT Truck</td>
</tr>
<tr>
<td>Inspect for sufficient quantity and functionality.</td>
<td></td>
</tr>
<tr>
<td>i. ( ) Spare Air Pack Bottles (6)</td>
<td>HAZMAT Truck</td>
</tr>
<tr>
<td>Inspect for sufficient quantity and functionality.</td>
<td></td>
</tr>
<tr>
<td>j. ( ) Particulate/Organic Vapor Cartridge Respirators (6)</td>
<td>HAZMAT Truck</td>
</tr>
<tr>
<td>Inspect for sufficient quantity and functionality.</td>
<td></td>
</tr>
<tr>
<td>k. ( ) Non-Sparking Tool Kit (1)</td>
<td>HAZMAT Truck</td>
</tr>
<tr>
<td>Inspect for completeness of kit.</td>
<td></td>
</tr>
<tr>
<td>l. ( ) Portable Eyewash (1)</td>
<td>PMB TAP Room</td>
</tr>
<tr>
<td>Inspect for functionality.</td>
<td></td>
</tr>
<tr>
<td>m. ( ) Caustic Neutralizer (10 gallons)</td>
<td>Bldg S1/S5</td>
</tr>
<tr>
<td>Inspect for sufficient quantity.</td>
<td></td>
</tr>
<tr>
<td>n. ( ) Acid Neutralizer (10 gallons)</td>
<td>Bldg S1/S5</td>
</tr>
<tr>
<td>Inspect for sufficient quantity.</td>
<td></td>
</tr>
<tr>
<td>o. ( ) Shovels (5 each)</td>
<td>HAZMAT Truck</td>
</tr>
<tr>
<td>Inspect for sufficient quantity.</td>
<td></td>
</tr>
<tr>
<td>p. ( ) Brooms (5 each)</td>
<td>HAZMAT Truck</td>
</tr>
<tr>
<td>Inspect for sufficient quantity</td>
<td></td>
</tr>
<tr>
<td>q. ( ) Absorbent (100 lbs)</td>
<td>Bldg S1/S5</td>
</tr>
<tr>
<td>Inspect for sufficient quantity</td>
<td></td>
</tr>
<tr>
<td>r. ( ) Foot Baths (4)</td>
<td>DECON Trailer</td>
</tr>
<tr>
<td>Inspect for sufficient quantity</td>
<td></td>
</tr>
</tbody>
</table>
s. ( ) TAP Butyl M3 Coveralls or OSHA Level A Response Suits (6)  
Inspect for sufficient quantity and functionality.
HAZMAT Truck

t. ( ) TAP Butyl Hoods (6)  
Inspect for sufficient quantity and functionality.
HAZMAT Truck

u. ( ) TAP Butyl M2A1 Boots (6 pair)  
Inspect for sufficient quantity and functionality.
HAZMAT Truck

v. ( ) TAP Butyl M2 Gloves (6 pair)  
Inspect for sufficient quantity and functionality.
HAZMAT Truck

w. ( ) TAP Butyl M2 Aprons or OSHA Level C Coveralls (6)  
Inspect for sufficient quantity and functionality.
HAZMAT Truck

x. ( ) Agent Antidote Kits (6)  
Inspect for sufficient quantity.
HAZMAT Truck

y. ( ) Water for Decon (25 gallons)  
Inspect for sufficient quantity.
DECON Trailer

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

Inspector Print / Sign __________________________  Date ____________  Time ____________
Reserved
ENVIRONMENTAL INSPECTION LOG
FOR THE PROJECTILE/MORTAR DISASSEMBLY MACHINE
PERFORMED BY CONTROL ROOM OPERATOR

Monthly - Physical

1. Mark with an S any items found to be satisfactory. Mark items found to be unsatisfactory with a U and describe unsatisfactory conditions in comments.

   a. ( ) Waste Feed System ( ) ECR A ( ) ECR B
      Inspect the Projectile/Mortar Disassembly Machine within the ECR to ensure that no explosive residues or explosive munition components are collecting on the associated material handling equipment. Inspect for leaking hydraulic hoses/connections and accumulated residues of chemical agent (Att 5, Table 5-14).

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

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Inspector Print / Sign: ___________________  Date: ________  Time: ________
PREPAREDNESS & PREVENTION READINESS INSPECTION LOG
FOR THE
EMERGENCY GENERATORS
Monthly - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

NOTE: EGENS are tested monthly to ensure they are functioning properly and the equipment and systems designated as essential loads will continue to function if utility power is interrupted.

a. Emergency Generators - Test each Emergency Generator by operating in either a loaded or unloaded configuration (Att 5, Table 5-28).

( ) GEN-GENR-101:
Date____________________________
Time___________________________
Inspector Print / Sign__________________

( ) GEN-GENR-102:
Date____________________________
Time___________________________
Inspector Print / Sign__________________

( ) GEN-GENR-104:
Date____________________________
Time___________________________
Inspector Print / Sign__________________

( ) Area 10-GENR-105:
Date____________________________
Time___________________________
Inspector Print / Sign__________________

( ) GEN-GENR-106:
Date____________________________
Time___________________________
Inspector Print / Sign__________________

b. Uninterruptible Power Supply (See completed PM work orders)
Check for adequate voltage (Att 5, Table 5-28).

( ) UPS-9101:
Date____________________________
Time___________________________
Inspector Print / Sign__________________

( ) UPS-9102:
Date____________________________
Time___________________________
Inspector Print / Sign__________________

( ) UPS-9103:
Date____________________________
Time___________________________
Inspector Print / Sign__________________
2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.
MONTHLY ENVIRONMENTAL INSPECTION LOG
FOR 24-HOUR INTERMITTENT COLLECTION UNITS AND
ATLIC RCRA PERMITTED SUMPS (CATEGORY A, B, AND A/B AREAS)

MONTH ENDING:

<table>
<thead>
<tr>
<th>Location</th>
<th>Sump</th>
<th>Result (S or U)</th>
<th>Inspector Print and Sign</th>
<th>Date</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>ATLIC LIC Primary</td>
<td>SDS-PUMP-8527</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Inspection will be performed by removing the grating and with a flashlight, inspect for cracks, chips and deterioration of protective coatings, rusting and any signs of leaks. **If the inspection cannot be performed due to residues in the sump, the residues must be removed to complete the inspection (Per DSHW Letter, dated May 7, 2004).**

2. Physical visual inspection to determine if the liquid level in the sump corresponds with the alarm displayed on the advisor screen in the control room (Att 5, Table 5-19). **Mark with an S any items found to be satisfactory** (i.e., those sumps where the liquid level corresponds to the alarm displayed on the advisor screen). Mark unsatisfactory items with a U and describe unsatisfactory conditions below.

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign:____________________________________________________

Date:___________ Time:____________________
ENVIRONMENTAL INSPECTION LOG
FOR THE
ATLIC LIQUID INCINERATOR PRIMARY CHAMBER

Monthly - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. **Primary Chamber / Secondary Combustion Chamber Waste Feed Line**
      Inspect for leaks in the agent feed line at threaded and flanged pipe connections (Att 5, Table 5-32).

      ( ) ATLIC PCC ( ) ATLIC SCC

   b. **Primary/Secondary Combustion Chamber**
      Inspect for fugitive emissions and hot spots on the outer shell of the chamber, which would indicate a breakdown of the chamber’s refractory (Att 5, Table 5-32).

      ( ) ATLIC PCC ( ) ATLIC SCC

   c. **ATLIC Combustion Air Blower**
      Evaluate Combustion Air Blower performance through Control Room Advisor Screen Operations (Att 5, Table 5-32).

      ( ) ATLIC

   d. **ATLIC Room Floor**
      Inspect for residues of lubricant and wastes beneath the components of the ATLIC waste feed system and the LIC exhaust gas ductwork. Inspect for residues of lubricant and wastes beneath the components of the spent decon feed system having a potential to cause a release of wastes or fugitive emissions. (Att 5, Table 5-32).

      ( ) ATLIC PCC ( ) ATLIC SCC

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

Inspector Print / Sign: ____________________________________________

Date: _____________ Time: ______________

M-13
PREPAREDNESS & PREVENTION READINESS INSPECTION LOG
FOR THE
ATLIC EMERGENCY GENERATORS
Monthly - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. **Emergency Generators** - Test each Emergency Generator by operating in either a loaded or unloaded configuration (Att 5, Table 5-36).

      ( ) GEN-GENR-8001:
      
      Date:________________________
      Time:________________________
      Inspector Print / Sign:______________________________________________

      ( ) GEN-GENR-8002:
      
      Date:________________________
      Time:________________________
      Inspector Print / Sign:______________________________________________

   b. **Uninterruptible Power Supply** (See completed PM work orders)
      
      Check for adequate voltage (Att 5, Table 5-36).

      ( ) SPS-UPS-8001/8004:
      
      Date:________________________
      Time:________________________
      Inspector Print / Sign:______________________________________________

      ( ) SPS-UPS-8002/8003:
      
      Date:________________________
      Time:________________________
      Inspector Print / Sign:______________________________________________

3. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

   ______________________________________________________

   Inspector Print / Sign:______________________________________

   Date:________________________ Time:________________________
ENVIRONMENTAL INSPECTION LOG
FOR THE
BRINE REDUCTION AREA SURGE TANKS

Every Other Month - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. Cathodic Protection
      
      Inspect/Test sources of impressed current (Att 5, Table 5-23).

      (   ) (   ) (   ) (   )
      BRA-101  BRA-102  BRA-201  BRA-202

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

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Inspector Print / Sign ___________ Date ___________ Time ___________
QUARTERLY, SEMI ANNUAL, & ANNUAL INSPECTIONS
ENVIRONMENTAL INSPECTION LOG
FOR THE
SPENT DECON SYSTEM (SDS) ROOM

Annual - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. Ultrasonic Thickness Testing
      Inspect for corrosion (i.e. loss of shell thickness). If the measured wall thickness is less than or equal to 0.25 inches then the effected tank will be taken out of service until TOCDF and DSHW agree upon an appropriate course of action (Att 5, Table 5-22).

      ( ) ( ) ( )
      SDS-101 SDS-102 SDS-103

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

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Inspector Print / Sign ____________________ Date __________ Time __________
PREPAREDNESS & PREVENTION READINESS INSPECTION LOG
FOR THE
FIRE PROTECTION SYSTEMS

Semi Annual and Annual Physical

1.  Mark with an S any items found to be satisfactory.  Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a.  Fire Protection Systems (See subcontractor’s inspection reports)

      ( )  **Halon System (Control Room)** – Semi Annual Inspection  
            Verify sufficient pressure in halon storage tanks (Att 5, Table 5-28).

      ( )  **FM-200/FE-227 (UPS/Battery Enclosures)** – Semi Annual Inspection  
            Verify sufficient pressure in FM-200/FE-227 storage tanks (Att 5, Table 5-28).

      ( )  **Dry Chemical Systems (Toxic Cubicle, Common PAS)**  
            (circle system found unsatisfactory) - Semi Annual Inspection  
            Verify sufficient pressure in nitrogen propellant tanks (Att 5, Table 5-28).

      ( )  **Automatic Sprinkler System (CHB, UPA)**  
            (circle system found unsatisfactory) - Annual Inspection  
            Verify sufficient flow rate of water at inspector’s test connection (Att 5, Table 5-28).

      ( )  **Fire Hydrants (See DCD fire department records)** – Annual Inspection  
            Verify sufficient flow (Att 5, Table 5-28).

2.  Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory.  **Document any abnormal conditions associated with the above inspection criteria.**

    
    
    
    
    
    Inspector Print / Sign  Date  Time
### PREPAREDNESS & PREVENTION READINESS INSPECTION LOG
#### FOR THE
#### EMERGENCY GENERATORS
#### Annual - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

Test Emergency Generators and Uninterruptible Power Supply by performing a power outage exercise. Ensure sufficient power is provided to equipment and systems designated as critical and essential loads. These tests may be scheduled events or may be unscheduled or naturally occurring events (e.g. power loss due to inclement weather, etc) (Att 5, 5.10.2.3).

#### a. Emergency Generators

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<tr>
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<td>Time:</td>
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<td>Inspector Print / Sign:</td>
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<td>Inspector Print / Sign:</td>
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<td>Inspector Print / Sign:</td>
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</tbody>
</table>

#### b. Uninterruptible Power Supply

<table>
<thead>
<tr>
<th></th>
<th>UPS-9101:</th>
<th></th>
<th>UPS-9102:</th>
<th></th>
<th>UPS-9103:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Date:</td>
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<td>Date:</td>
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<td>Date:</td>
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<td>Inspector Print / Sign:</td>
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<td>Inspector Print / Sign:</td>
<td></td>
<td>Inspector Print / Sign:</td>
</tr>
</tbody>
</table>
2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**
ENVIRONMENTAL INSPECTION LOG
FOR THE
BRINE REDUCTION AREA SURGE TANKS

Annual - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

a. Cathodic Protection
   Confirm proper operation of the Cathodic Protection Systems (Att 5, Table 5-23).
   (   ) (   ) (   ) (   )
   BRA-101  BRA-102  BRA-201  BRA-202

b. Pipe Trench (   )
   Visually inspect for presence of liquids in secondary containment system. Ensure that there are no cracks or gaps in the coating used to seal the secondary containment trench (Att 5, Table 5-23).

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

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Inspector Print / Sign ___________________________ Date ___________ Time ________
ENVIRONMENTAL INSPECTION LOG
FOR THE
TOXIC CUBICLE TANK

Annual - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

Fixed Roof and Closure Devices
Visually inspect to check for defects that could result in air pollutant emissions. Defects include, but are not limited to, visible cracks, holes or gaps in the roof sections or between the roof and the tank wall; broken, cracked, or otherwise damaged seals or gaskets on closure devices; and broken or missing hatches, access covers, caps, or other closure devices (Att 5, Table 5-21).

( ) ( )
ACS-101 ACS-102

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

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Inspector Print / Sign ___________________________ Date _________________ Time _________________
PREPAREDNESS & PREVENTION READINESS INSPECTION LOG
FOR THE
ATLIC FIRE PROTECTION SYSTEMS

Semi Annual and Annual Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. Fire Protection Systems (See subcontractor’s inspection reports)

      ( ) Fire Suppression System (ATLIC Control Room) Semi Annual Inspection Verify sufficient pressure in nitrogen propellant tanks (Att 5, Table 5-36).

      ( ) Automatic Sprinkler System (See DCD fire department records) –Annual Inspection Verify sufficient flow (Att 5, Table 5-36).

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

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Inspector Print / Sign: ___________________________ ___________________________ ___________________________

Date: ___________________ Time: ___________________
PREPAREDNESS & PREVENTION READINESS INSPECTION LOG
FOR THE
ATLIC EMERGENCY GENERATORS
Annual - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

*Test Emergency Generators and Uninterruptible Power Supply by performing a power outage exercise. Ensure sufficient power is provided to equipment and systems designated as critical and essential loads. These tests may be scheduled events or may be unscheduled or naturally occurring events (e.g. power loss due to inclement weather, etc) (Att 5, 5.10.2.3).*

a. **Emergency Generators**

   ( ) GENGENR-8001:
   
   Date: ________________________________
   Time: ________________________________
   Inspector Print / Sign: ________________________________

   ( ) GEN-GENR-8002:
   
   Date: ________________________________
   Time: ________________________________
   Inspector Print / Sign: ________________________________

b. **Uninterruptible Power Supply**

   ( ) SPS-UPS-8001/8004:
   
   Date: ________________________________
   Time: ________________________________
   Inspector Print / Sign: ________________________________

   ( ) SPS-UPS-8002/8003:
   
   Date: ________________________________
   Time: ________________________________
   Inspector Print / Sign: ________________________________

3. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**
ENVIRONMENTAL INSPECTION LOG
FOR THE
ATLIC TOXIC AREA TANKS

Annual - Physical

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

Fixed Roof and Closure Devices
Visually inspect to check for defects that could result in air pollutant emissions. Defects include, but are not limited to, visible cracks, holes or gaps in the roof sections or between the roof and the tank wall; broken, cracked, or otherwise damaged seals or gaskets on closure devices; and broken or missing hatches, access covers, caps, or other closure devices (Att 5, Table 5-37).

(   ) (   ) (   ) (   ) (   )
LCS-8511 NSF-8514 LCS-8516 LCS-8534 SDS-8523

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions associated with the above inspection criteria.

___________________________________________________________________________________
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___________________________________________________________________________________

Inspector Print / Sign:_________________________________________________________________

Date:___________ Time:____________
ENVIRONMENTAL INSPECTIONS FOR INACTIVE SYSTEMS
Reserved
ENVIRONMENTAL INSPECTION LOG
FOR THE
DUNNAGE INCINERATOR
POLLUTION ABATEMENT SYSTEM

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. ( ) Exhaust Gas Ductwork
   b. ( ) Afterburner
   c. ( ) Afterburner Combustion Air Blower
   d. ( ) Quench Tower and Associated Pumps/Piping
   e. ( ) Baghouse - differential pressure reading =
      Action Level: 0.0 inches WC
   f. ( ) Baghouse ash discharge area
   g. ( ) Induced Draft Fan
   h. ( ) DUN PAS Pad SUMP
   h. ( ) Exhaust Stack

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions.**

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Inspector's Signature Date Time
Reserved
ENVIRONMENTAL INSPECTION LOG
FOR THE
BRINE REDUCTION AREA
POLLUTION ABATEMENT SYSTEM

1. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. ( ) Knockout Box Manway Cover, Knife Gate, Flashing
   b. ( ) Knockout Box Discharge Container & Transfer Hose
   c. ( ) PAS Ductwork Flange Connections
   d. ( ) Baghouse(s) Flashing, Access Door, Knife Gate
   e. ( ) Baghouse(s) Discharge Container & Transfer Hose
   f. ( ) Baghouse Pad Sump
   g. ( ) Exhaust Stack Plume Opacity
   h. ( ) Emergency Equipment
   i. ( ) Spill Kit
   j. ( ) Compliance Inst. Calibration
   k. ( ) Baghouse(s) Differential Pressure Reading(s)

<table>
<thead>
<tr>
<th>INSTRUMENT TAG ID</th>
<th>DIFFERENTIAL PRESSURE</th>
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<tbody>
<tr>
<td>PDI-143</td>
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<td>PDI-144</td>
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<td>PDI-145</td>
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<td>PDI-186</td>
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</tbody>
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Action Level for baghouse differential pressure low is: 1.0 inches WC
Action Level for baghouse differential pressure high is: 5.0 inches WC

2. Describe items marked unsatisfactory and corrective action taken (to include any work order number(s) generated to address items marked as unsatisfactory. **Document any abnormal conditions.**

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________________________________________________________________________

Inspector's Signature ___________________ Date ___________ Time ___________
Reserved
ENVIRONMENTAL INSPECTION LOG
FOR THE
SPENT DECON SYSTEM (SDS) *

Daily – Inside Toxic Area

1. This inspection must be performed in person.

2. Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.

   a. Pipe System, Valves, Pumps

      SDS-101  SDS-102  SDS-103

* Note: This inspection covers the piping system and valves used to transfer spent decontamination solution to the 90-day tank located in the PUB.

3. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. Document any abnormal conditions.

Inspector Print / Sign         Date         Time