CES LANDFILL SITE INSPECTION FORM

Date and Time: _____

Inspecting Personnel: _____

Ground surface (soil) conditions?

Affected by erosion? ☐ yes ☐ no
Affected by wind? ☐ yes ☐ no
Affected by rodents? ☐ yes ☐ no

Landfill cell(s) needing attention _____ remedied by what type of equipment _____

Water visible at landfill cell working face? ☐ yes ☐ no
Debris visible at landfill cell working face? ☐ yes ☐ no

Date re-covered _____ Secondary cover added _____

☐ UST remediated soil ☐ O & G remediated soil ☐ Virgin soil from LF

Topsoil replaced? _____ Amount _____ Seeded _____
Vegetation taking hold? _____ describe _____

Types of plants noticed? _____
Describe condition? _____

Recommended response action _____

Equipment used to remedy: _____
Operator: _____ Respirator protection required? _____

Water spray added while unloading? _____
Berm Status? _____

Closest LF cell to berm location meeding attention? _____

Weather conditions _____

Visitor Sign In _____ _____ _____

Cubic yards unloaded _____ Bags _____
Condition _____

Other Comments: _____

Certification - I hereby certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the submitted information is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature and Date: _____