

ATTACHMENT 3-3 DTTF INSPECTION SCHEDULE

1.0 INTRODUCTION

This attachment presents inspection requirements for the Dugway Thermal Treatment Facility (DTTF) required by Utah Administrative Code (Utah Admin. Code) R315-264-15 and is organized in the following sections:

- General inspection requirements, and
- Specific process inspection requirements.

2.0 GENERAL INSPECTION REQUIREMENTS: 40 CODE OF FEDERAL REGULATIONS (CFR) 264.15, 264.33; UTAH ADMIN. CODE R315-264-15, R315-264-33

Inspections of the DTTF are performed to prevent, detect, and respond to environmental or human health hazards that may occur at the facility. Inspections are conducted on a monthly and/or per-day/event basis using Forms 1 – 4 as necessary. DTTF inspections are under the direction of the DTTF Site Manager. The DTTF Site Manager will be responsible for maintaining the inspection record for three years in accordance with Utah Admin. Code R315-264-15(d). Information recorded during an inspection includes the date and time of inspection, the name of the inspector, observations made, and the nature of repairs or remedial actions performed.

Repairs or replacement of any deteriorated or malfunctioning equipment will be initiated immediately or as soon as is practicable to ensure that the problem does not threaten human health or the environment. Where a hazard is imminent or has already occurred, remedial action will begin immediately. Potential environmental problems at the DTTF include unexploded ordnance (UXO) and scrap metal resulting from open detonation (OD) as well as residual ash on the ground surface from open burning (OB). These problems, if found during the inspections, are corrected immediately. If any vital equipment is inoperative, deteriorated, or not in compliance with specific conditions, maintenance is initiated or the equipment is replaced before further operations commence.

The inspection requirements include determination of the condition and/or availability of the following equipment and security devices necessary for operation of the DTTF:

- Operating/Structural Equipment (see DTTF Facility Description, Attachment 3-5),
- Safety/Emergency Equipment (see DTTF Preparedness and Prevention Plan, Attachment 3-6), and
- Security Devices (see DTTF Security Plan, Attachment 3-2).

3.0 SPECIFIC PROCESS INSPECTION REQUIREMENTS

This section presents inspection requirements for the following equipment or facilities:

- Containers,
- Tank systems,
- Waste piles,
- Surface impoundments, and
- Incinerators.

3.1 CONTAINER INSPECTION: 40 CFR 264.174; UTAH ADMIN. CODE R315-264-174

DPG will not manage any containers at the DTTF Area as a treatment, storage, and disposal facility.

3.2 TANK SYSTEM INSPECTION: 40 CFR 264.195; UTAH ADMIN. CODE R315-264-195

DPG will not operate tank systems at the DTTF Area.

3.3 WASTE PILE INSPECTION: 40 CFR 264.254(b); UTAH ADMIN. CODE R315-264-254(b)

DPG will not operate waste piles at the DTTF Area.

3.4 SURFACE IMPOUNDMENT INSPECTION: 40 CFR 264.226(b) AND (c); UTAH ADMIN. CODE R315-264-226(b) AND (c)

DPG will not operate surface impoundments at the DTTF Area.

3.5 INCINERATOR INSPECTION: 40 CFR 264.347; UTAH ADMIN. CODE R315-264-347

DPG will not operate incinerators at the DTTF Area.

Form 1 Monthly DTTF Inspection.

Group Responsible: _____

Date: _____

| Inspection Item | Inspection Components | Inspection Date and Time | Deficiencies | Inspector Name (printed and signature) |
|--------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------------------------------------------------------------|----------------------------------------|
| Records Inspection | <input type="checkbox"/> Check for presence of all pertinent permits, operating procedures, and manuals. (Updated permit and SOPs) <input type="checkbox"/> Check for presence of complete and up-to-date operating records. (Including shipping documentation, destruction orders, meteorological records, etc.) <input type="checkbox"/> Check that per-day/event inspection records are up to date. (Including Range-Discovered Material Potentially Presenting and Explosive Hazard Tracking System and forms from EOD and others) <input type="checkbox"/> Check that personnel training records are up to date. (All persons signing inspection forms should have annual RCRA Site Specific & Contingency Plan training) | | | |
| Site Inspections | <input type="checkbox"/> Ensure “after event” inspection has been completed per OB & OD event. (Attach inspection forms if necessary) <input type="checkbox"/> Check for water that may have accumulated in the burn pan. (Water is to be containerized for proper subsequent characterization and disposal) | | | |
| Emergency Response Equipment | Ensure that emergency response equipment (Preparedness and Prevention Plan, Attachment 3-6) is available and in good condition. <input type="checkbox"/> First aid kit, fire extinguisher, and two-way radios in operator vehicle <input type="checkbox"/> Emergency telephone on Durand Road <input type="checkbox"/> Empty drums with lids, broom, and shovel in 90-day storage site | | | |
| Deficiencies = Listed items have been inspected and found to be in compliance with permit requirements | | | | |
| DTTF SOPs OB lbs | Dugway Thermal Treatment Facility Standard Operating Procedures Open Burn pounds | EOD RCRA OD | Explosive Ordinance Disposal Resource Conservation and Recovery Act Open Detonation | |

Form 2. Daily Open Burn Activities.

Group Responsible: _____

Date: _____

| Inspection Item | Inspection Components | Inspection Date and Time | Deficiencies | Inspector Name (printed and signature) |
|--------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------|----------------------------------------|
| Before Each Day for OB Events | | | | |
| Environmental Data | <input type="checkbox"/> Inspect waste munitions and compare with shipping documentation in accordance with the DTTF Waste Analysis Plan (Attachment 3-1). <input type="checkbox"/> Ensure that loading and unloading treatment areas are inspected prior to use. <input type="checkbox"/> Ensure that (destruction orders/certificates) are completed including records for each waste munition, quantities, etc. <input type="checkbox"/> Ensure that the total net explosive weight is less than 1,500 lbs. <input type="checkbox"/> Ensure the notification and data requirements on the Range-Discovered Material Potentially Presenting and Explosive Hazard Tracking System (Module V) have been completed. <input type="checkbox"/> Ensure that appropriate notifications have been given including Range Control, security, emergency response and environmental personnel, etc. | | | |
| Safety and Emergency Equipment | <input type="checkbox"/> Ensure that emergency response equipment (Preparedness and Prevention Plan, Attachment 3-6) is available and in good condition. | | | |
| Security Equipment | <input type="checkbox"/> Check warning signs at entrance to DTTF Area. | | | |
| Burn Pan Site | <input type="checkbox"/> Check that the area surrounding the burn pan is free of brush and other combustible items within a 200-foot radius. | | | |
| Burn Pan | <input type="checkbox"/> Check under the burn pan for evidence of releases (such as ash or stains). <input type="checkbox"/> Check welds and seams for cracks that could cause releases. <input type="checkbox"/> Check to make sure cover is free of cracks and holes and it opens freely. <input type="checkbox"/> Check inside the pan for and remove all debris including snow, ice, and water. (Water is to be containerized, characterized and properly disposed | | | |

| Inspection Item | Inspection Components | Inspection Date and Time | Deficiencies | Inspector Name (printed and signature) |
|--------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------|-------------------------------------------|
| | of) <input type="checkbox"/> Check that propellant is no more than 3 inches deep in pan. | | | |
| Before Each OB Event | | | | |
| Environmental Data | <input type="checkbox"/> Ensure that the total net explosive weight is less than 1,500 lbs. per event. <input type="checkbox"/> Ensure net explosive weight does not exceed 150,000 lbs per rolling 12 month period. <input type="checkbox"/> Ensure that meteorological conditions and air clearance data are recorded and are acceptable to allow for DTF operations. (Attach additional sheets as needed if multiple burns are performed in a given day.) | | | |
| After Each Day with OB Events | | | | |
| Burn Pan Site | <input type="checkbox"/> Check for fires. <input type="checkbox"/> Check for completeness of burn. <input type="checkbox"/> Check OB area for ejected PEP and if munitions containing white phosphorus were treated, visually confirm that all residues are inert and there is no remaining white phosphorus residue. | | | |
| Burn Pan | <input type="checkbox"/> Collect ash residue, if present. <input type="checkbox"/> Check that cover closes easily. <input type="checkbox"/> Check that cover security latch (or strapping) is in place to prevent the wind from blowing off the cover. <input type="checkbox"/> Check burn pan and cover for excessive warping that may prevent effective use. | | | |
| Environmental Operating Records | <input type="checkbox"/> Ensure that copies of all records and certificates are given to the Site Manager. <input type="checkbox"/> Ensure all data needed for the Range-Discovered Material Potentially Presenting and Explosive Hazard Tracking System (Module V) database have been provided to EP. | | | |
| Comments: | | | | |

| Inspection Item | Inspection Components | Inspection Date and Time | Deficiencies | Inspector Name (printed and signature) |
|--------------------------------------------------------------------------------------------------------|---------------------------------------|--------------------------|--------------|-------------------------------------------|
| Deficiencies = Listed items have been inspected and found to be in compliance with permit requirements | | | | |
| DTTF | Dugway Thermal Treatment Facility | | | |
| PEP | Propellant, Explosive and Pyrotechnic | | | |
| OB | Open Burn | | | |

Form 3. Daily Open Detonation Activities.

Group Responsible: _____

Date: _____

| Inspection Item | Inspection Components | Inspection Date and Time | Deficiencies | Inspector Name (printed and signature) |
|--------------------------------------|-----------------------|--------------------------|--------------|-------------------------------------------|
| Before Each Day for OD Events | | | | |

| Inspection Item | Inspection Components | Inspection Date and Time | Deficiencies | Inspector Name (printed and signature) |
|--------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------|----------------------------------------|
| Environmental Data | <ul style="list-style-type: none"> <input type="checkbox"/> Inspect waste munitions and compare with shipping documentation in accordance with the DTTF Waste Analysis Plan (Attachment 3-1). <input type="checkbox"/> Ensure that loading and unloading treatment areas are inspected prior to use. <input type="checkbox"/> Ensure that (destruction orders/certificates) are completed including records for each waste munition, quantities, etc. <input type="checkbox"/> Ensure that the total net explosive weight is less than 1500 lbs. per event. <input type="checkbox"/> Ensure the net explosive weight does not exceed 150,000 lbs per rolling 12 month period. <input type="checkbox"/> Ensure that appropriate notifications have been given including Range Control, security, emergency response and environmental personnel, etc. <input type="checkbox"/> Ensure the notification and data requirements on the Range-Discovered Material Potentially Presenting and Explosive Hazard Tracking System (Module V) have been completed. <input type="checkbox"/> Visually confirm that no animals are present prior to initiating treatment. | | | |
| Safety and Emergency Equipment | <ul style="list-style-type: none"> <input type="checkbox"/> Ensure that emergency response equipment (Preparedness and Prevention Plan, Attachment 3-6) is available and in good condition. | | | |
| Security Equipment | <ul style="list-style-type: none"> <input type="checkbox"/> Check warning signs at entrance to DTTF Area. | | | |
| Detonation Area | <ul style="list-style-type: none"> <input type="checkbox"/> Check that area is free of brush for ease of locating UXO and fragments. <input type="checkbox"/> Ensure that operating record includes general location of the detonation area. | | | |

| Before Each OD Event | | | | |
|---------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| Environmental Data | <input type="checkbox"/> Ensure that the total net explosive weight is less than 1500 lbs per event. <input type="checkbox"/> Ensure net explosive weight is less than 1,500 lbs. per day. <input type="checkbox"/> Ensure that meteorological conditions and air clearance data are recorded and are acceptable to allow for DTTF operations. (Attach additional sheets as needed if multiple detonations are performed in a given day.) | | | |
| After Each Day for OD Events | | | | |
| Detonation Area | <input type="checkbox"/> Check for fires. <input type="checkbox"/> Check OD area for UXO or fragments and if any munitions containing white phosphorus were treated, visually confirm that all residues are inert and there is no remaining white phosphorus residue. <input type="checkbox"/> Assess the need to backfill and level craters caused by detonation and if white phosphorus was treated, grading the site to ensure complete reaction of white phosphorus | | | |
| Environmental Operating Records | <input type="checkbox"/> Ensure that copies of all records and certificates are given to the Site Manager. <input type="checkbox"/> Ensure all data needed for the Range-Discovered Material Potentially Presenting and Explosive Hazard Tracking System (Module V) database have been provided to EP. | | | |
| Comments: | | | | |
| Date/Time/Signature = Listed items have been inspected and found to be in compliance with permit requirements | | | | |
| DTTF | Dugway Thermal Treatment Facility | | | |
| UXO | Unexploded Ordinance | | | |
| OD | Open Detonation | | | |

Form 4. DTFF Compliance Review (optional).

Group Responsible: _____

Date: _____

| Inspection Item | Inspection Components | Inspection Date and Time | Deficiencies | Inspector Name (printed and signature) |
|--------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------------------------------------------------------------|----------------------------------------|
| DTTF Site Manager | <input type="checkbox"/> Check for presence of all pertinent permits, operating procedures, and manuals. (Updated permit and SOPs) <input type="checkbox"/> Check for presence of complete and up-to-date operating records. (Including shipping documentation, destruction orders, meteorological records, etc.) <input type="checkbox"/> Check that per-event inspection records are up to date. (Including forms from EOD and others) <input type="checkbox"/> Check that personnel training records are up to date. (All persons signing inspection forms should have annual RCRA Site Specific & Contingency Plan training) <input type="checkbox"/> Ensure the Range-Discovered Material Potentially Presenting and Explosive Hazard Tracking System (Module V) database is complete for all treatments. | | | |
| Inspection Forms | <input type="checkbox"/> For each month, ensure that the monthly inspections have been conducted and documented, and "after event" inspections have been completed for all events at both OB & OD areas. | | | |
| Environmental Monitoring | <input type="checkbox"/> Ensure that annual soil sampling has been conducted at the DTFF (see 3-09, Section 3.9) and that records are up to date | | | |
| Comments: | | | | |
| Deficiencies = Listed items have been inspected and found to be in compliance with permit requirements | | | | |
| DTTF SOPs OB | Dugway Thermal Treatment Facility Standard Operating Procedures Open Burn | EOD RCRA OD | Explosive Ordinance Disposal Resource Conservation and Recovery Act Open Detonation | |