

ATTACHMENT 26

**Sanitary Landfill / Pesticide Disposal Area Inspection Form
(SWMU 12/15)**

Sanitary Landfill / Pesticide Disposal Area Inspection Form

Inspector: _____

Inspection Date: _____

Reviewed By: _____

Date: _____

INSPECTION TYPE (Check One)

Quarter 2 _____

Quarter 4 _____

Item No.	Inspection Item	√	Deficiency	Action Taken
1	Security Fence			
2	Erosion Damage			
3	Ponded Water			
4	Vegetative Cover			
5	Other Observations			

Description of Daily Weather Conditions Prior to Inspection: _____