

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: _____