TENNESSEE SMALL BUSINESS ENVIRONMENTAL ASSISTANCE PROGRAM
READY MIXED CONCRETE FACILITY
MULTI-MEDIA INSPECTION CHECKLIST

Name of Facility/Site: ____________________________________________________________

Location: ___________________________________________________________________
                        (Street Address)       (City)       (State)       (Zip Code)

County _______________________________       Facility Telephone #: (____) __________

Type of Activity: ________________________       Number of Employees: _____________

Inspector’s Name: ________________________       Inspector’s Title: ________________

A. GENERAL OBSERVATIONS (Check if items are observed)

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>Dust?</td>
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<tr>
<td>Stressed, Dead Vegetation?</td>
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<tr>
<td>Odors?</td>
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<td>Stressed, Dead, or dying wildlife</td>
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<td>Spillage?</td>
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<td>(animal, fish, etc.)?</td>
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<tr>
<td>Leachate?</td>
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<td>Open Burning?</td>
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<tr>
<td>Smoke?</td>
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<td>Monitoring Wells?</td>
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<td>Poor Housekeeping?</td>
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<td>Poor Maintenance?</td>
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<td>Discolored Soil?</td>
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<tr>
<td>Discolored Water?</td>
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</tbody>
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Provide detailed description for all items checked (attach additional sheets if necessary).

Note: Please be aware that a “No” response to any of the following questions may indicate a compliance issue and corrective action needed.

If you don’t know the answer to a question and need assistance, please call the SBEAP at 1-800-734-3619 or e-mail BGSBEAP@tn.gov

* (If unknown, call SBEAP at 1-800-734-3619 for assistance)
B. Clean Air

1. Does the facility have an air permit? Yes ☐ No ☐ N/A

2. Are the facility’s air permits up to date? Yes ☐ No ☐ N/A

3. If the facility has a permit, does the facility monitor compliance and meet the permit conditions? Yes ☐ No ☐ N/A

4. If the facility is planning or conducting any construction activity, has the company discussed the proposed activities and possible permitting requirements with the State or your local (i.e. either Knox, Davidson, Shelby, Hamilton County) regulatory Division of Air Pollution Control? Yes ☐ No ☐ N/A

5. If the facility has any sources of fugitive emissions (examples: unpaved roads, storage piles, material handling areas) has the company taken measures to either control or obtain an air permit for these emissions? Yes ☐ No ☐ N/A

6. Does the facility ensure that wastes are not burned outside including using burn barrels, piles, etc)? Yes ☐ No ☐ N/A

7. Has the facility changed ownership and applied for a new permit from the appropriate air regulatory agency? Yes ☐ No ☐ N/A

8. If the facility made changes to its operation, that differs from the permit, was the appropriate air regulatory agency notified? Yes ☐ No ☐ N/A

C. Emergency Planning and Community Right-To-Know Act (EPCRA)

1. Did the facility submit a Tier II report to the local Fire Department, Local Emergency Planning Committee, and Tennessee Emergency Management Agency, if the following exists:
   • there are chemicals stored at the facility that require a Material Safety Data Sheet (MSDS) under OSHA’s Hazard Communication Standard

2. Did the facility submit information to the Environmental Protection Agency (EPA) on the facility’s chemicals that require Toxic Release Inventory (TRI) reporting? Yes ☐ No ☐ N/A
D. Water Pollution Control

1. Does the facility have a National Pollutant Discharge Elimination System (NPDES) permit, if the facility discharges wastewater to a body of surface water (stream, lake, etc.)?  
   ☐ Yes ☐ No ☐ N/A

2. Does the facility have a NPDES permit for process wash water and storm water runoff?  
   ☐ Yes ☐ No ☐ N/A

3. Does the facility take water sample(s) at outfall of wash water basin?  
   ☐ Yes ☐ No ☐ N/A

4. Does the facility submit the Monthly Discharge Monitoring Report (DMR) to the State?  
   ☐ Yes ☐ No ☐ N/A

5. Is the DMR signed with the original signature of the responsible official who certifies its accuracy?  
   ☐ Yes ☐ No ☐ N/A

6. If the facility has changed ownership, has the original owner submitted notice of termination (NOT) and the new owner submitted a notice of intent (NOI) for coverage?  
   ☐ Yes ☐ No ☐ N/A

7. Does the facility have a Storm Water Pollution Prevention Plan (SWPPP)?  
   ☐ Yes ☐ No ☐ N/A

8. Does the facility have a written Spill Prevention Control and Countermeasure Plan (SPCC) if the facility stores oil more than of 1,320 gallons in an above ground containers or tanks?  
   ☐ Yes ☐ No ☐ N/A

9. Have you eliminated any unauthorized bypassing throughout the treatment facility?  
   ☐ Yes ☐ No ☐ N/A

10. Were the employees trained as required by the permit, the SWPPP and the SPCC?  
    ☐ Yes ☐ No ☐ N/A

11. Were the reports required by the permit submitted on schedule?  
    ☐ Yes ☐ No ☐ N/A

12. Were the inspections and maintenance tasks performed as required by the permit, the SWPPP and the SPCC?  
    ☐ Yes ☐ No ☐ N/A
E. **Hazardous Waste**

1. Has the facility evaluated all wastes it generates to find out if they would be classified as hazardous waste?  
   - Yes □  No □  N/A □

2. Has the facility determined its hazardous waste generator status based on how much hazardous waste is generated in a calendar month (Conditionally exempt Small Quantity generator, Small Quantity Generator, Large Quantity Generator)?  
   - Yes □  No □  N/A □

3. Are solvent-contaminated shop towels collected and kept in a closed container?  
   - Yes □  No □  N/A □

4. Are containers labeled with words HAZARDOUS WASTE or other words that identify the content of container?  
   - Yes □  No □  N/A □

5. Does the facility prevent hazardous wastes from being dumped in dumpster, into drains, sinks or toilets?  
   - Yes □  No □  N/A □

6. Are containers of hazardous waste kept closed unless waste is being added or removed?  
   - Yes □  No □  N/A □

7. Does the facility send all hazardous waste off-site to a hazardous waste treatment, storage, disposal or recycling facility?  
   - Yes □  No □  N/A □

8. Were the inspections and maintenance tasks performed as required by the regulations?  
   - Yes □  No □  N/A □

F. **Solid Waste**

1. Has the facility evaluated its solid wastes to ensure that they do not meet the definition of hazardous or infectious waste?  
   - Yes □  No □  N/A □

2. Is the facility recycling materials such as cardboard, scrap metal, leftover (useable) paints, etc., where possible?  
   - Yes □  No □  N/A □

3. For solid wastes that cannot be recycled, is the facility sending these materials off-site for disposal at a licensed solid waste landfill?  
   - Yes □  No □  N/A □

G. **Underground Storage Tanks (UST) Program**

1. Are there any underground storage tanks at this facility?  
   - Yes □  No □  N/A □

2. Are the tanks registered with the State of Tennessee?  
   - Yes □  No □  N/A □