

TEMPORARY DISCONTINUATION OF REGULATED OPERATIONS WAIVER REVIEW CHECKLIST

INSPECTION INFORMATION			
NAME		AFFILIATION	PHONE NUMBER
Inspectors:			
Inspection Dates:		Time(s):	
Inspection Announced?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If so, how much advance notice given?	
Facility Rep(s):			

1.	Was the application submitted within 45 days after discontinuation of operations at the facility? [ORC §3752.10(A) and OAC rule 3745-352-40(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
2.	Did the application include two copies of a facility operation and maintenance (O&M) plan? [OAC rule 3745-352-40(A)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
3.	Did the O&M plan include the following: [OAC rule 3745-352-40(A)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	A brief description of the facility name, address and other appropriate location identification, e.g., longitude and latitude?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Land use of adjacent properties?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	The regulated operations including all regulated substances present within the last three years from the filing date of the waiver application?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	A schedule to implement task contained in the O&M plan?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
e.	A statement regarding where facility's SPCC Plan is kept on file, if subject?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
f.	A plan for complying with the security requirements in OAC rule 3745-352-30?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
g.	An evacuation plan if more than ten people remain on site in any 24-hour period?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
h.	Description of all measures to be taken to prevent environmental contamination, including:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
i.	Where and how each regulated substance is to be stored?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
ii.	Precautions taken to prevent ignition or reaction of ignitable or reactive regulated substances?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
iii.	Location of fire extinguishers and spill containment materials?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
iv.	An inspection and maintenance plan for all measures taken to prevent environmental contamination?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
i.	A description why temporary discontinuance will exceed 365 days?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
j.	A certification stating when the regulated operations will resume at the facility signed and dated by a corporate officer or owner of the facility?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

[Facility Name/Inspection Date]

[ID Number]

SECURITY & WARNING SIGNS REQUIREMENTS OF OWNER/OPERATOR [ORC §3752.07 AND OAC RULE 3745-352-30]

4.	Did the owner/operator secure the facility against unauthorized entry using one or more of the following as provided in OAC rule 3745-352-30(A)(1)-(5)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Boarded, locked or used other means to secure all windows, doors and other potential means of entry?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Fencing?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Lighting and a surveillance system?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Guard or security service?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
e.	Demonstrated to the satisfaction of the Director or his/her designee that the proposed security measures secure against unauthorized entry?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
5.	Did the owner/operator post the appropriate warning signs in the following fashion? [ORC §3752.07(A) and OAC rule 3745-352-30]:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Prohibit trespassing and state: "The building, structure, or outdoor location of operations contains or is contaminated with regulated substances that may endanger public health or safety if released into the environment." [OAC rule 3745-352-30(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Are warning signs posted on, or reasonable proximate to, the building, structure or outdoor location in sufficient number to alert people? [OAC rule 3745-352-30(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Posted on, or reasonably proximate to, locations that contain ignitable regulated substances and include the language, "No Smoking?" [OAC rule 3745-352-30(B)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Legible from a distance of at least 25 feet? [OAC rule 3745-352-30(B)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
e.	Constructed to withstand weather and affixed to secure against removal? [OAC rule 3745-352-30(B)(4)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
6.	Are entry barrier and warning signs maintained to secure against unauthorized entry by the following measures listed below: [OAC rule 3745-352-30(C)]	
a.	Inspected weekly or as agreed by the Director or his/her designee, county sheriff's department or local police department? [OAC rule 3745-352-30(C)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	The condition is recorded in an inspection log? [OAC rule 3745-352-30(C)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Prompt repair or replacement after discovery of damage, lost or removed? [OAC rule 3745-352-30(C)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

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