## Closed MSW Landfill Inspection Checklist

### Facility Name

### Address

### Date

### Time

### Inspection Representatives

- Facility
- Health District
- Ohio EPA
- Other

### Inspection Type

<table>
<thead>
<tr>
<th></th>
<th>Comprehensive</th>
<th>Focused</th>
</tr>
</thead>
</table>

### Reason for Inspection

<table>
<thead>
<tr>
<th></th>
<th>Required</th>
<th>Other</th>
<th>Re-Inspection</th>
</tr>
</thead>
</table>

### Is the above site being operated in compliance with the following regulations? Please mark the box in the appropriate column to denote compliance status. Marking the box in the NO column indicates that a violation has been noted. Please mark the N/A box if not applicable to this location. This checklist is not all inclusive of regulations applicable to closed municipal solid waste landfills.

<table>
<thead>
<tr>
<th></th>
<th>Y</th>
<th>N</th>
<th>N/A</th>
</tr>
</thead>
</table>

#### 3745-27-14 Post closure care of MSW Landfills

1. Post-closure care activities
2. Leachate management, surface water management, explosive gas extraction and monitoring, ground water monitoring system
3. Integrity of cap system
4. Repair leachate outbreaks
5. Quarterly inspections-report to Ohio EPA within 15 days
6. Monitoring and reporting requirements of OAC 3745-27-10, 3745-27-12, 3745-76
7. Annual report
8. Record keeping
9. Facility access: Provide access to facility for Ohio EPA and local health department inspections

### Comments:

#### Print Name of Inspector Completing Form

#### Signature

#### Date

**Updated:** 2/2016