CAFO FACILITY INSPECTION REPORT

OFFICE NO: [NUMPAGES][PAGE][NUMPAGES][PAGE][NUMPAGES][PAGE][FORMTEXT]
PCA SYSTEM TASK NO: [FORMTEXT]

INSPECTOR(S): [FORMTEXT]

FACILITY INFORMATION

[FORMTEXT] WDID NUMBER	**[FORMTEXT]** OWNER NAME	**[FORMTEXT]** FACILITY NAME
[FORMTEXT] NPDES NUMBER	**[FORMTEXT]** OWNER ADDRESS	**[FORMTEXT]** FACILITY ADDRESS
[FORMTEXT] RWQCB ORDER NO.	**[FORMTEXT]** OWNER CITY AND STATE	**[FORMTEXT]** FACILITY CITY AND STATE
[FORMTEXT] SCHEDULED INSPECTION DATE	**[FORMTEXT]** OWNER CONTACT	**[FORMTEXT]** FACILITY CONTACT
[FORMTEXT] ACTUAL INSPECTION DATE	**[FORMTEXT]** OWNER PHONE NO.	**[FORMTEXT]** FACILITY PHONE NO.
[FORMTEXT] RECEIVING WATER	**[FORMTEXT]** FACILITY LATITUDE	**[FORMTEXT]** FACILITY LONGITUDE

INSPECTION TYPE

[FORMCHECKBOX] (A1) "A" type compliance -- (EPA Type S)
[FORMCHECKBOX] (B1) "B" type compliance -- (EPA Type C)
[FORMCHECKBOX] (02) Noncompliance follow-up - Correction of a previously identified violation
[FORMCHECKBOX] (03) Enforcement follow-up - Enforcement action is being met
[FORMCHECKBOX] (04) Complaint - Complaint
[FORMCHECKBOX] (05) Pre-requirement
[FORMCHECKBOX] (06) Miscellaneous

[FORMTEXT] (Type)

NOTE: If this is an EPA inspection not mentioned above, please note type (e.g., biomonitoring, performance audit, diagnostic, etc.)

[FORMDROPDOWN]	Was the inspection pre-announced?
[FORMDROPDOWN]	Were potential violations noted during this inspection?
[FORMDROPDOWN]	Was this a quality assurance-based inspection?
[FORMDROPDOWN]	Were bioassay samples collected?
[FORMDROPDOWN]	Were water quality samples collected?

INSPECTION SUMMARY

The overall Facility rating, on a 1 (Unreliable) to 5 (Very Reliable) scale, was determined to be: [FORMDROPDOWN].

[FORMTEXT]

- **[FORMTEXT]**

ED_005010_00004117-00001

INSPECTOR DATA

INITIALS _____ SIGNATURE _____ DATE_____

CIWQS DATA ENTRY DATE: _____ REGIONAL BOARD FILE NUMBER: _____

FOR INTERNAL USE: REVIEWED BY: (1)_____ (2) _____ (3) _____

REPORT PREPARED BY: [FORMDROPDOWN] ON [FORMTEXT] /[FORMTEXT] /[FORMTEXT]

EPA SUGGESTED INSPECTION CHECKLIST

[FORMCHECKBOX] Permit **[HYPERLINK \l "_PERMIT:___ "**] Records/Reports	**[HYPERLINK \l "_FACILITY_SITE_REVIEW:_ "**] Flow Measurement **[HYPERLINK \l**	**[FORMCHECKBOX]** Pretreatment **[FORMCHECKBOX]** Compliance Schedules **[FORMCHECKBOX]** Self-	**[FORMCHECKBOX]** Operations & Maintenance **[HYPERLINK \l "_OPERATIONS_AND_MAINTENANCE: "**] Sludge

POTENTIAL VIOLATIONS

1. [FORMTEXT]

Description of Potential Violation: **[FORMTEXT]**

2. [FORMTEXT]

Description of Potential Violation: **[FORMTEXT]**

3. [FORMTEXT]

Description of Potential Violation: **[FORMTEXT]**

4. [FORMTEXT]

Description of Potential Violation: **[FORMTEXT]**

5. [FORMTEXT]

Description of Potential Violation: **[FORMTEXT]**

6. [FORMTEXT]

Description of Potential Violation: **[FORMTEXT]**

7. [FORMTEXT]

Description of Potential Violation: **[FORMTEXT]**

8. [FORMTEXT]

Description of Potential Violation: **[FORMTEXT]**

9. [FORMTEXT]

Description of Potential Violation: **[FORMTEXT]**

10. [FORMTEXT]

Description of Potential Violation: **[FORMTEXT]**

11. [FORMTEXT]

Description of Potential Violation: **[FORMTEXT]**

12. [FORMTEXT]

Description of Potential Violation: **[FORMTEXT]**

Date of Potential Violation: **[FORMTEXT]**

Date of Potential Violation Determination: **[FORMTEXT]**

INSPECTION OBSERVATIONS

[FORMTEXT]

FACILITY

CAFO Size: **[FORMDROPDOWN]** (at time of inspection)

Total Acres: **[FORMTEXT]**

Production Area Acres: **[FORMTEXT]**

CONTAINMENT STRUCTURES

Wastewater Lagoons: **[FORMTEXT]**

Evaporation Ponds: **[FORMTEXT]**

Catch Basins: **[FORMTEXT]**

Depth Markers: **[FORMTEXT]**

Other: **[FORMTEXT]**

ANIMALS ONSITE DURING INSPECTION

Milk Cows: **[FORMTEXT]**

Dry Cows: **[FORMTEXT]**

Heifers: **[FORMTEXT]**

Calves: **[FORMTEXT]**

Other: **[FORMTEXT]**

INSPECTION OBSERVATIONS

1. [FORMTEXT]
2. [FORMTEXT]
3. [FORMTEXT]
4. [FORMTEXT]
5. [FORMTEXT]
6. [FORMTEXT]
7. [FORMTEXT]
8. [FORMTEXT]
9. [FORMTEXT]
10. [FORMTEXT]

ANNUAL REPORT REVIEW

ANNUAL REPORT

Monitoring Year: **[FORMTEXT]**

Reviewed: **[FORMDROPDOWN]**

Signed & Certified: **[FORMDROPDOWN]**

Submittal Date: **[FORMTEXT]**

REPORTED ANIMAL POPULATION

Milk Cows: **[FORMTEXT]**

Dry Cows: **[FORMTEXT]**

Heifers: **[FORMTEXT]**

Calves: **[FORMTEXT]**

Other: **[FORMTEXT]**

MANURE INFORMATION

Amount of manure spread on cropland at the Facility: **[FORMTEXT]**

Amount of manure hauled away from the Facility: **[FORMTEXT]**

Name and location of the composting operation, or, if the manure was hauled to cropland, the owner or tenant, and the destination address: **[FORMTEXT]**

1. [FORMTEXT]
2. [FORMTEXT]
3. [FORMTEXT]
4. [FORMTEXT]
5. [FORMTEXT]
6. [FORMTEXT]
7. [FORMTEXT]
8. [FORMTEXT]
9. [FORMTEXT]
10. [FORMTEXT]

ENGINEERED WASTE MANAGEMENT PLAN (EWMP) REVIEW

Did the inspector review the EWMP in the RWQCB file?	**[FORMDROPDOWN]**
Did the Facility have a copy of the EWMP on-site and available for review?	**[FORMDROPDOWN]**
EWMP preparation date:	**[FORMTEXT]**
EWMP prepared by:	**[FORMTEXT]**
Santa Ana RWQCB EWMP acceptance date:	**[FORMTEXT]**
EWMP was certified by the Facility's engineer/consultant on:	**[FORMTEXT]**

1. [FORMTEXT]
2. [FORMTEXT]
3. [FORMTEXT]
4. [FORMTEXT]
5. [FORMTEXT]
6. [FORMTEXT]
7. [FORMTEXT]
8. [FORMTEXT]

9. [FORMTEXT]

10. [FORMTEXT]

NUTRIENT MANAGEMENT PLAN (NMP) REVIEW (IF APPLICABLE)

Did the Facility have a copy of the NMP on-site and available for review?	**[FORMDROPDOWN]**
Date NMP was prepared:	**[FORMTEXT]**
NMP prepared by:	**[FORMTEXT]**
Santa Ana RWQCB NMP acceptance date:	**[FORMTEXT]**

1. [FORMTEXT]

2. [FORMTEXT]

3. [FORMTEXT]

4. [FORMTEXT]

5. [FORMTEXT]

6. [FORMTEXT]

7. [FORMTEXT]

8. [FORMTEXT]

9. [FORMTEXT]

10. [FORMTEXT]

FACILITY HOUSEKEEPING, WASTEWATER, AND MANURE INFORMATION

Typical Depth of Manure in Corrals (in inches):	**[FORMTEXT]**
Estimated Freeboard in Fullest Lagoon (in feet):	**[FORMTEXT]**
Date of Last Lagoon Solids Removal, per Facility Representative:	**[FORMTEXT]**
Disposal Location for Lagoon Solids:	**[FORMTEXT]**

REVIEW OF FACILITY HOUSEKEEPING

1. [FORMTEXT]

2. [FORMTEXT]

3. [FORMTEXT]

4. [FORMTEXT]

5. [FORMTEXT]
6. [FORMTEXT]
7. [FORMTEXT]
8. [FORMTEXT]
9. [FORMTEXT]
10. [FORMTEXT]

CONDITION OF BERMS AND CONTAINMENT STRUCTURES

11. [FORMTEXT]
12. [FORMTEXT]
13. [FORMTEXT]
14. [FORMTEXT]
15. [FORMTEXT]
16. [FORMTEXT]
17. [FORMTEXT]
18. [FORMTEXT]
19. [FORMTEXT]
20. [FORMTEXT]

ITEMS FOR FOLLOW UP ON FUTURE INSPECTIONS

1. [FORMTEXT]
2. [FORMTEXT]
3. [FORMTEXT]
4. [FORMTEXT]
5. [FORMTEXT]
6. [FORMTEXT]
7. [FORMTEXT]
8. [FORMTEXT]

9. [FORMTEXT]

10. [FORMTEXT]