

**TENNESSEE DIVISION OF SOLID WASTE MANAGEMENT
SWP FACILITY INSPECTION CHECKLIST***

**SWP
FACILITY**

SITE NAME BioWaste LLC.	PERMIT NUMBER SWP160001538	DATE 9/24/2018	TIME 11:00	WEATHER Rain
LOCATION 210-1/2 Mitchell Blvd, Tullahoma		INSPECTOR GBM	EFO CMBA	

*SEE DISCLAIMER ON LAST PAGE

VIOLATION	CITATION REFERENCE		OBSERVATION			
			NVO	AOC	V1	V2

01	Inadequate vector control	0400-11-01-.02(2)(a)1(ii)(I)	?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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COMMENTS							
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02	Potential for explosions or uncontrolled fires	0400-11-01-.02(2)(a)1(ii)(II)	?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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COMMENTS							
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03	Potential for releases of solid waste	0400-11-01-.02(2)(a)1(ii)(III)	?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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COMMENTS							
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04	Unauthorized or uncontrolled access	0400-11-01-.02(2)(a)1(ii)(IV)	?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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COMMENTS							
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05	Inadequate artificial or natural barriers	0400-11-01-.02(2)(a)1(iii)	?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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COMMENTS							
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06	Inadequate information signs	0400-11-01-.02(2)(a)1(iv)	?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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COMMENTS							
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07	Personnel not present during operating hours	0400-11-01-.02(2)(a)1(v)	?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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COMMENTS							
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08	Inadequate employee facilities	0400-11-01-.02(2)(a)1(vi)	?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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COMMENTS							
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VIOLATION		CITATION REFERENCE	OBSERVATION			
			NVO	AOC	V1	V2
09	Unsatisfactory access road/parking areas	0400-11-01-.02(2)(a)1(vii) ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMMENTS						
10	Waste handling not conducted on paved surfaces	0400-11-01-.02(2)(a)1(viii) ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMMENTS						
11	Improper storage of solid waste	0400-11-01-.02(2)(a)1(ix) ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMMENTS						
12	Evidence of burning	0400-11-01-.02(2)(a)1(x) ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMMENTS						
13	Unapproved scavenging of waste	0400-11-01-.02(2)(a)1(xi) ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMMENTS						
14	Unsatisfactory litter control	0400-11-01-.02(2)(a)1(xii) ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMMENTS						
15	Unapproved discharge of liquid residue	0400-11-01-.02(2)(a)1(xiii) ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMMENTS						
16	Unapproved handling of special waste	0400-11-01-.02(2)(a)1(xiv) ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMMENTS	Policy PN016 states that TREATED medical waste does not require special waste approval. This material is autoclaved, which satisfies that requirement.					

VIOLATION		CITATION REFERENCE	OBSERVATION
			NVO AOC V1 V2
17	No provision for alternative waste handling	0400-11-01-.02(2)(a)1(xv) ?	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
COMMENTS			
18	Inadequate fire protection	0400-11-01-.02(2)(a)1(xvi) ?	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
COMMENTS			
19	UNAPPROVED DISPOSAL OF WASTE RESIDUE	0400-11-01-.02(2)(A)1(XVII) ?	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
COMMENTS			
20	Improper closure	0400-11-01-.02(2)(a)1(xviii) ?	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
COMMENTS			
21	Unauthorized waste accepted	0400-11-01-.02(2)(c) ?	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
COMMENTS			
22	Unsatisfactory records of reports	0400-11-01-.02(2)(a) ?	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
COMMENTS	Manifests In/Out reviewed.		
23	Authorization letter not available	0400-11-01-.02(2)(a) ?	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
COMMENTS			
24	Operation does not comply with notification	0400-11-01-.02(2)(c) ?	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
COMMENTS			

LOCK Form

SAVE FORM

Compliance date