



## Onsite Compliance Inspection Form

Site Name, Physical Location: \_\_\_\_\_

Permit Number: MT P/N/F \_\_\_\_\_

Contractor: \_\_\_\_\_ Work Area: \_\_\_\_\_

Type of Abatement Area:    Full enclosure   Mini-enclosure   Glove-bags   Regulated Area

Yes	No	N/A		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Present Credentials and offer business card	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	State nature of visit	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is accreditation of all workers/ supervisors onsite?	ARM 17.74.361(c)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Copy of inspection posted?	ARM 17.74.354(2)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Copy of permit and permit application posted?	ARM 17.74.355(7)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Permit valid?	ARM 17.74.355(1)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is a copy of contract available onsite?	ARM 17.74.355(7)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the associated cost correct?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Project design and sketch posted?	ARM 17.74.355(7)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does containment listed at top match the design?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If a waiver was issued are the conditions being met?	ARM 17.74.355
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the ACM adequately wet?	40 CFR 61.145(c)(3)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the decontamination setup and in operation?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are there any signs of visible emissions?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is negative air in operation?	40 CFR 61.145(c)(3)(b)(1)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is there a likelihood of emission escape from containment?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are removal methods creating friable material?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is waste properly bagged and adequately wet?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has photo documentation been made?	
<input type="checkbox"/>	Accreditation numbers: _____			

Deficiency Notes: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Inspector Name & Signature: \_\_\_\_\_ Date: \_\_\_\_\_