

AIR QUALITY & EMISSIONS INSPECTION CHECKLIST

GENERAL INFORMATION

Name: _____

Date: _____

Location: _____

Exhaust & Ventilation

- Yes No — Ductwork and hoods are free from leaks or blockages
- Yes No — Fans and blowers operate at specified speeds
- Yes No — Exhaust stacks are structurally sound and clear
- Yes No — Air intake vents are clean and unobstructed

Monitoring Equipment

- Yes No — Gas analyzers are calibrated and functioning correctly
- Yes No — Sensors for CO, NO_x, or SO_x are reading within limits
- Yes No — Data loggers are recording emissions data accurately
- Yes No — Alarms and warning lights are operational

Particulate & Filter Check

- Yes No — Air filters are clean and seated properly in housings
- Yes No — Baghouse or dust collectors are emptying correctly

Yes No — No visible particulate matter escaping containment

Yes No — Pressure differential gauges read within normal range

Compliance & Records

Yes No — Permits and operating licenses are current and posted

Yes No — Previous inspection logs are available and up to date

Yes No — Emergency shut-off procedures are clearly displayed

Yes No — Staff training records for emissions safety are current

FINAL NOTES

Inspector Comments:

Inspector Name: _____

Inspector Email: _____

Inspection Date: _____

I confirm this inspection was completed accurately