

ENVIRONMENTAL SITE ASSESSMENT INSPECTION CHECKLIST

GENERAL INFORMATION

Name: _____

Date: _____

Location: _____

Site History & Usage

- Yes No — Current land use matches zoning regulations
- Yes No — Historical records indicate no prior hazardous use
- Yes No — No evidence of unregistered underground storage tanks
- Yes No — Neighboring properties show no contamination signs

Waste Management

- Yes No — Hazardous materials are stored in designated areas
- Yes No — Waste disposal manifests are current and filed
- Yes No — Spill containment kits are accessible and stocked
- Yes No — No signs of illegal dumping or buried waste

Soil & Water Conditions

- Yes No — No visible staining or discoloration on soil
- Yes No — Stormwater drainage is clear of pollutants

Yes No — Groundwater monitoring wells are accessible

Yes No — Vegetation appears healthy with no stressed areas

Air Quality & Odors

Yes No — No strong chemical or petroleum odors detected

Yes No — Ventilation systems are functioning correctly

Yes No — Air emissions permits are valid and displayed

Yes No — Dust control measures are effectively implemented

FINAL NOTES

Inspector Comments:

Inspector Name: _____

Inspector Email: _____

Inspection Date: _____

I confirm this inspection was completed accurately