Site Inspection Check List for:

**Waste Processing Services - OAR 333-535-0250**

PR# __________  Date: __________  Inspector: ________________________________

Provider: ________________________________

Project: ________________________________

Address: ________________________________

Present at Site Inspection: ________________________________

Intended Occupancy Date: ________________________________

Required PRIOR to Approved Inspection:  RECEIVED?

Certificate of Occupancy (CO) from governing jurisdiction  YES  NO  NA

MEP Close-Out verification (if required)  YES  NO  NA

**SITE INSPECTION:**

**STORAGE & DISPOSAL = Verify that the facility has installed:**

Space and facilities shall be provided for the sanitary storage and disposal of waste by incineration, mechanical destruction, compaction, containerization, removal, or by a combination of these techniques.  333-535-0250 (1)

**INTERIOR = Verify that the facility has installed:**

**INCINERATOR:**

Waste treatment technologies shall be determined by the facility in conjunction with environmental, economic, and regulatory considerations. The functional program shall describe waste treatment technology components that include the following:  333-535-0250 (c)(A)
Safe locations
Transfer Routes
Distances from waste source
Temporary storage
Spacing Requirements shall be provided that will not cause traffic problems
Limit ordor
Ordor
Noise
Visual impact to patients, visitors, & public

Space shall be determined by the equipment requirements, including associated area for: 333-535-0250 (2)(c)(B)

Opening waste entry doors
Access to control panels
Space for hydraulic lifts
Conveyors
Operational Clearance

Ventilation: 333-535-0250 (2)(c)(C)

Exhaust vents if any from the treatment technology shall be located a minimum of 25 feet from inlets to HVAC systems

If technology involves heat dissipation, sufficient cooling and ventilation shall be provided