

**OPERATIONS AND MAINTENANCE QUESTIONS**  
**TO BE COMPLETED BY USER PRIOR TO INSPECTION**

**SIU Name:** \_\_\_\_\_ **Permit #** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Person Completing Questionnaire:** \_\_\_\_\_

**General Questions:**

- |     |    |     |    |  |
|-----|----|-----|----|--|
| Yes | No | N/A | 1. | Is there any formal or informal set of policies for facility operations? |
|     |    |     | 2. | <u>Do policies address any of the following?</u>                         |
| Yes | No | N/A |    | Maintaining process control?   |
| Yes | No | N/A |    | Quality Control?   |
| Yes | No | N/A |    | Preventative Maintenance?  |
| Yes | No | N/A | 3. | Is there a set standard procedure to implement these procedures?         |
| Yes | No | N/A | 4. | Are these policies written? (Circle "No" if they are informal)           |
|     |    |     | 5. | <u>Do these procedures consider the following areas?</u>                 |
| Yes | No | N/A |    | Safety?  |
| Yes | No | N/A |    | Emergency?   |
| Yes | No | N/A |    | Laboratory?  |
| Yes | No | N/A |    | Process Control?   |
| Yes | No | N/A |    | Operating Procedures?  |
| Yes | No | N/A |    | Monitoring?  |
| Yes | No | N/A |    | Energy Conservation?   |
| Yes | No | N/A |    | Collection System?   |
| Yes | No | N/A |    | Treatment Process?   |
| Yes | No | N/A |    | Pollution Prevention?  |
| Yes | No | N/A |    | Equipment Record System?   |
| Yes | No | N/A |    | Work Orders?   |
| Yes | No | N/A |    | Inventory Management?  |
| Yes | No | N/A | 6. | Are the procedures followed?   |

**Organization**

- |     |    |     |    |  |
|-----|----|-----|----|--|
| Yes | No | N/A | 1. | Is there an organizational chart (plan) for operations?          |
|     |    |     | 2. | <u>Does the plan include...</u>                                  |
| Yes | No | N/A |    | Delegation of job responsibilities and authority?                |
| Yes | No | N/A |    | Job Descriptions?  |
| Yes | No | N/A |    | Interactions with other departments?                             |
| Yes | No | N/A | 3. | Is the plan formal? (Circle "No" if it is informal)              |
| Yes | No | N/A | 4. | Is the plan available and understood by staff?                   |
| Yes | No | N/A | 5. | Is the plan followed?  |
| Yes | No | N/A | 6. | Is the plan consistent with policies and procedures?             |
| Yes | No | N/A | 7. | Is the plan flexible (i.e., can it handle emergency situations)? |

## Staffing

Yes	No	N/A	1.	Is there an adequate number of staff to achieve the policies and procedures as established?
			2.	<u>Are staffs adequately qualified for their duties and responsibilities to demonstrate...</u>
Yes	No	N/A		Certification?
Yes	No	N/A		Qualification?
Yes	No	N/A		Ability?
Yes	No	N/A		Job Performance?
Yes	No	N/A	3.	Is the staff effectively used?
Yes	No	N/A	4.	Has the potential for "borrowing" personnel been considered?
			5.	<u>Are training programs followed for:</u>
Yes	No	N/A		Orientation of new staff?
Yes	No	N/A		Training of new operators?
Yes	No	N/A		Training of new supervisors?
Yes	No	N/A		Continuing training of existing staff?
Yes	No	N/A		Cross training?
			6.	<u>Which of the following training procedures are used?</u>
Yes	No	N/A		Formal classroom?
Yes	No	N/A		Home study?
Yes	No	N/A		On-the-job training?
Yes	No	N/A		Participation in professional conferences or organizations?
			7.	<u>Does training provide specific instruction for the following?</u>
Yes	No	N/A		Safety?
Yes	No	N/A		Treatment processes?
Yes	No	N/A		Instrumentation?
Yes	No	N/A		Equipment trouble shooting?
Yes	No	N/A		Handling personnel problems?
Yes	No	N/A		Inventory control?
Yes	No	N/A		Building maintenance?
Yes	No	N/A		Mechanical?
Yes	No	N/A		Electrical?
Yes	No	N/A		Automotive?
Yes	No	N/A	8.	Does management encourage staff motivation?
Yes	No	N/A	9.	Does management support its first line supervisors?
			10.	<u>Is staff encouraged with...</u>
Yes	No	N/A		Encouragement for training?
Yes	No	N/A		Job recognition?
Yes	No	N/A		Promotional opportunities?
Yes	No	N/A		Salary incentives?
Yes	No	N/A		Job security?
Yes	No	N/A		Working environment?

## **Maintenance**

- |     |    |     |    |  |
|-----|----|-----|----|--|
| Yes | No | N/A | 1. | Are maintenance activities planned?  |
| Yes | No | N/A | 2. | Is the planning formal?  |
| Yes | No | N/A | 3. | Are preventative maintenance done in accordance with manufacturers' recommendations? |
| Yes | No | N/A | 4. | Do budgets adequately identify and justify cost components for maintenance?          |

## **Management Controls**

- |     |    |     |    |  |
|-----|----|-----|----|--|
|     |    |     | 1. | <u>Are current versions of the following documents maintained?</u> |
| Yes | No | N/A |    | Operating reports?   |
| Yes | No | N/A |    | Work schedules?  |
| Yes | No | N/A |    | Activity reports?  |
| Yes | No | N/A |    | Performance reports?   |
| Yes | No | N/A |    | Safety reports?  |
| Yes | No | N/A |    | Expenditure reports?   |
| Yes | No | N/A |    | Cost analysis reports?   |
| Yes | No | N/A |    | Monitoring reports?  |