

Hazardous Waste Program

CASE REVIEW FORM

Check Case Review Type: <input type="checkbox"/> Case Specific Classification Review <input type="checkbox"/> Enforcement Case Review					
Current Date:		Inspection Date:		Inspector:	
EPA ID: _____ Facility Name: _____ Facility Address: _____ Reference Links: _____					
Alleged Violation Type		Manual Guide	Potential for Harm	Extent of Deviation	Yes or No
1.					Repeat Violations Actual or substantial exposure to HW constituents
Comments:					
2.					Repeat Violations Actual or substantial exposure to HW constituents
Comments:					
3.					Repeat Violations Actual or substantial exposure to HW constituents
Comments:					
4.					Repeat Violations Actual or substantial exposure to HW constituents
Comments:					
5.					Repeat Violations Actual or substantial exposure to HW constituents
Comments:					
6.					Repeat Violations Actual or substantial exposure to HW constituents

Hazardous Waste Program CASE REVIEW FORM

Comments:					
7.					Repeat Violations Actual or substantial exposure to HW constituents
Comments:					
8.					Repeat Violations Actual or substantial exposure to HW constituents
Comments:					
9.					Repeat Violations Actual or substantial exposure to HW constituents
Comments:					
10.					Repeat Violations Actual or substantial exposure to HW constituents
Comments:					

Notes:

Note: This staff assessment is preliminary and is designed to assist in the compliance review process, prior to final agency direction. Comments provided herein are not the final position of the Department and may be subject to revision, pursuant to additional information and/or further review.