RCP – 403
Revision 2

Responding to Incidents at a Solid Waste and Metal Recycling Facilities Equipped with Radiation Monitoring Systems

Submitted By: [Signature]
Date: 11/23/16

Reviewed By: [Signature]
Date: November 23, 2016

Approved By: [Signature]
Date: Nov 23, 2016
Revisions 08/01/2016

- Changed Revision 3b to 2
- Added Appendix 4, Waste Incident Response Chart
- Revised Appendix 5, Notification to DMV
- Updated Appendix 6, Waste Bureau Referral List to DEEP Multimedia Check List
- Added Appendix 7, Approved Medical Radioisotopes contained in solid waste allowed for incineration.
- Added 6.1.2, Made “Notify on Call Duty Officer” a separate item since it was not part of obtaining information.
- Added new response protocol in 6.2
- Updated 6.2 “Response Actions Upon Arrival” to “Response Actions for Dispatching to a Facility”
- Updated note in 6.3.9 to allow an isotope identification below a confidence level of 7 to be analyzed using gamma spectroscopy software.
- Added 6.4 “Reporting”
- Remove municipal from “municipal solid waste”
- Updated Appendices to reflect revised forms.
- Renumbered Protocol Accordingly.
- Incorporated Draft revisions into final document

Draft Revisions 01/15/2016

Global change - All references to DEP become DEEP and Department of Environmental Protection become Department of Energy and Environmental Protection.

Title Page - Logo updated.

Global change: IdentIFINDER count times changed to 3 minute minimum from 5 min.
Global Change: “Exemption” changed to “Special Permit” when referring to DOT SP 11406 and SP 10656.
Global Change: “Division of Radiation” changed to “Radiation Division”

Page 5 of 7 - Added Notice regarding possession and responsibility for segregated material.
Page 5 of 7 “Contact a Supervising Radiation Control Physicist for further instructions” before tipping for segregation

Draft Revisions 8/07

Page 4 of 7 - 6.1.5 Add “or Radiation Control Physicist”
Page 4 of 7 - 6.3.3 Perform 5 min background count
Page 4 of 7 - 6.3.4 Perform 5 min isotopic identification
Page 4 of 7 - 6.3.5 Add isotope I-123
Page 5 of 7 - 6.3.6 Perform second 5 min background count
Page 5 of 7 - 6.3.8.2 Add return medical waste to sole-use facility w/o segregation
Page 5 of 7 - 6.3.8.4 Change visual exam to physical contact
Page 6 of 7 - 6.3.9.2 Add requirement for tamper proof seal and notification of the receiving facility
Page 6 of 7 - 6.3.11.4 Perform a 5 min. isotopic analysis (Segregated hot waste).
Page 6 of 7 - 6.3.11.7.2 File a copy of the DOT exemption in the Incident Report Logbook
Page 6 of 7 Added NOTE regarding follow-up of issued DOT Special Permits
Page 7 of 7 - 6.3.13 Attach a copy of the isotopic ID and background files to the report.
Page 7 of 7 - 6.3.14 Electronic and hard copy files for incident reports
Page 7 of 7 - 6.3.15 Add clarification to DEP Waste Bureau Referral Sheet (Appendix 5)
Add Appendix 6
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>SECTION</th>
<th>TITLE</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Table of Contents</td>
<td>2</td>
</tr>
<tr>
<td>1</td>
<td>Purpose</td>
<td>3</td>
</tr>
<tr>
<td>2</td>
<td>Scope</td>
<td>3</td>
</tr>
<tr>
<td>3</td>
<td>References</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Definitions</td>
<td>3</td>
</tr>
<tr>
<td>5</td>
<td>Prerequisites</td>
<td>3</td>
</tr>
<tr>
<td>6</td>
<td>Procedure</td>
<td>4</td>
</tr>
</tbody>
</table>

## APPENDICES

1. DOT SP-11406, Waste or Recycle Materials (as revised)
2. DOT SP-10656, Scrap Metal or Related Material (as revised)
3. DEEP Radiation Division Incident Report (as revised)
4. DEEP Radiation Division Waste Incident Response Decision Chart
5. Notification of DOT Special Permit to Department of Motor Vehicles
6. DEEP Multimedia Checklist
7. Approved Medical Radioisotopes contained in solid waste allowed for incineration. (as revised)
1 Purpose

1.1 The purpose of this procedure is to provide standard guidance to Radiation Division personnel when responding to radiation incidents at solid waste and scrap metal facilities.

2 Scope

2.1 This procedure applies to all Radiation Division personnel when responding to an incident at a solid waste or scrap metal facility involving the potential presence of radioactive material.

3 References

3.1 Connecticut General Statutes, Chapters 446 and 446a.
3.2 Regulations of Connecticut State Agencies, Sections 19-24-1 through 19-24-14.
3.3 DOT instructions for use of Special Permit DOT-SP 11406 (Waste)
3.4 DOT instructions for use of Special Permit DOE-SP 10656 (Metals)

4 Definitions

4.1 See Connecticut General Statutes, Section 22a-151.
4.2 See Agency Administrative Regulations, Sections 19-24-1 through 19-24-14.
4.3 See National Council on Radiation Protection Composite Glossary.

5 Prerequisites

5.1 Authorization from CRCPD to sign DOT Special Permits
5.2 Ensure all instruments used are calibrated and are functioning properly.
6 Procedure

6.1 **Immediate Action:** – *Performed by Supervising Physicist.*

6.1.1 Upon receipt of a call for assistance, record/obtain the following administrative information if available.

6.1.1.1 Date and Time call was received.

6.1.1.2 Name and Location of Facility

6.1.1.3 Name, title and telephone number of contact

6.1.1.4 Incident Information: Radiation monitor reading (& background), any handheld instrument measurements/isotopic identification by facility personnel, name & type of carrier, origin of material (town, sole use, out of state, etc.).

6.1.2 Notify On Call Duty Officer or other Radiation Control Physicist.

6.2 **Response Actions:** – *Performed by authorized Radiation Control Physicist.*

6.2.1 Obtain DEEP/RD Incident Number from Incident Log Book.

6.2.2 Refer to Appendix 4 for the appropriate response based on information obtained from the Facility and/or Supervising Physicist.

6.2.3 The Radiation Control Physicist will be dispatched to the facility if one or more of the following conditions are met:

6.2.3.1 The dose on the external surface of the vehicle exceeds 50 mrem/hr or dose to any occupied space (cab areas) exceeds 2 mrem/hr.

6.2.3.2 An isotopic identification has been performed and the material is not indicative of one of the approved medical radioisotopes listed in Appendix 7.

6.2.3.3 The Supervising Physicist has determined that a response is warranted.
6.2.4 If the information obtained from the facility or the Supervising Physicist does not warrant a dispatch of a Radiation Control Physicist, notify the facility that the following options are available.

**Notice**
A Waste Tipping Permit issued by the DEEP Materials Management Bureau must be in effect for the location at which the load will be tipped and segregated.

6.2.4.1 Option 1 – A radiation consultant is hired to disposition the radiation alarm.
- Notification of the results is made to the Radiation Division after disposition of the radiation alarm.

6.2.4.2 Option 2 – A dose reading is obtained off of the external surface of the vehicle and a DOT Special Permit is requested and issued during normal business hours to return the load to the originator for disposition.
- Notification of the results is made to the Radiation Division after disposition of the radiation alarm.
- If the conditions for a DOT Special Permit are met, issue a DOT Special Permit utilizing DOT instructions for DOT Special Permits.
- Obtain a DOT Special Permit Number.

6.2.4.3 Option 3 – Facility operator obtains detailed radiation information utilizing radionuclide identification detector(s) and emails results to the Radiation Division for review and analysis during normal business hours.
- A Radiation Control Physicist will review information obtained to determine the radioisotope.
- The Radiation Control Physicist should analyze the results from the facility utilizing gamma spectroscopy software

6.2.4.3.1 If the radioisotope identified is one of the approved radioisotopes for normal disposal as listed in Appendix 7, notify the facility and the Supervising Physicist of the results and that the material is allowed to be processed without any radiological concern.
6.2.4.3.2 If the radioisotope is not identified as one of the approved
ing the facility and the Supervising Physicist of the results that the material
be released and the following options are available.

6.2.4.3.2.1 Option 1 – A radiation consultant is hired to disposition
the radiation alarm.

- Notification of the results is made to Radiation
  Division after disposition of the radiation alarm.

6.2.4.3.2.2 Option 2 – DEEP Radiation assists in the identification
and segregation of the radiation alarm source during
ormal business hours.

- After identification and segregation is performed, a
  radiation consultant/ radioactive waste broker
  dispositions the radiation source.

- Notification of the results is made to Radiation
  Division after disposition of the radiation alarm.

Notice
DEEP-RD Personnel should obtain site supervisory approval
for segregation and confirm whether site, hauler or material
source will take possession and responsibility for segregated
material before providing assistance in the tipping and
segregation of the load.

6.3 Response Actions for Dispatching to a Facility: - Performed by Radiation Control
Physicist.

6.3.1 Request backup from supervisor, if necessary.

6.3.2 If necessary, contact facility for additional information, including
directions, truck identification etc.

6.3.3 Proceed to facility at a reasonable speed for road conditions and situation.

6.3.4 Notify facility upon arrival for any additional instructions.

6.3.5 Wear all appropriate PPE as required by the DEEP and any additional
requirements by the facility.
6.3.6 Survey outside of vehicle, and cab area using appropriate instrumentation. Use an Ion Chamber or other Energy Compensated Detector, to document dose rates on side of vehicle and cab area.

6.3.7 Document origin: Transfer station, curbside pick-up, front loaded dumpster service, sole use dumpster from within Connecticut or from out of state.

6.3.8 Perform a 3-minute minimum background count with a portable gamma ray spectroscopy device.

6.3.9 Perform a 3-minute minimum isotopic identification through the truck side with a portable gamma ray spectroscopy device.

NOTE: An isotopic identification confidence level of ≥ 7 must be achieved with a portable gamma ray spectroscopy device to ensure accurate identification. An isotope identification below a confidence level of 7 may be analyzed using gamma spectroscopy software to determine the radioisotope.

6.3.10 Allow an approved facility to tip and process the waste as normal non-radioactive waste, if the radioisotope is identified as one of the approved medical isotopes from Appendix 7, and the contact dose rate on the external surface of the vehicle does not exceed 50 mR/hr. Authorization by a Supervising Radiation Control Physicist is required to tip and process any other radioisotope.

Notice
A Waste Tipping Permit issued by the DEEP Materials Management Bureau must be in effect for the location at which the load will be tipped and segregated.

6.3.11 If Cs-137, Ir-192, Co-60 or Ra-226 is identified consider the possibility of a large shielded source. Obtain the authorization of the Supervising Radiation Control Physicist prior to tipping the load.
Notice
DEEP-RD Personnel should obtain site supervisory approval for segregation and confirm whether site, hauler or material source will take possession and responsibility for segregated material before providing assistance in the tipping and segregation of the load.

6.3.12 Perform a second 3-minute minimum background count with a portable gamma ray spectroscopy device.

6.3.13 If a positive isotopic identification cannot be made, a radioisotope other than listed in Appendix 7 is found, or the contact dose rate on the external surface of the vehicle exceeds 50 mR/hr, or greater than 2 mR/hr in the cab area, contact a Supervising Radiation Control Physicist for further instructions.

- If the load will be returned to its origin and the conditions for a DOT Special Permit are met, issue a DOT Special Permit utilizing DOT instructions for DOT Special Permits.
- Obtain a DOT Special Permit Number.

6.3.14 If the originating facility is registered with the DEEP, Radiation Division, a copy of the Incident Report shall be attached to their file.

6.3.15 At the location where segregation will be performed (See Notice above):
    6.3.15.1 Don appropriate PPE based on Hazard Evaluation.
    6.3.15.2 On the tipping floors: make sure equipment operators are aware of your presence.

6.3.16 During the segregation of radioactive material: Keep aware of vehicles and equipment operating near you.
    6.3.16.1 When an item is identified, place it in a large bag and move it away from the work area to keep the background low.
    6.3.16.2 NOTE: If a large volume of waste is segregated (more than two large bags) arrange with the hauler to have a suitable small dumpster delivered for storing the waste.
6.3.16.3 Continue surveying until no material over twice background can be found.

6.3.16.4 Survey waste container (dumpster, trailer or truck) to insure that no detectable radioactive material remains.

6.3.16.5 Survey segregated material for highest contact, one foot and three foot readings. Perform a 3 min minimum isotopic analysis.

6.3.16.6 Allow the segregated material to enter the regular waste stream if the condition of 6.2.4.3.1 can be met.

6.3.16.7 Ensure the bag is labeled with isotope, dose/rate, date, and surveyor's initials.

6.3.18.8 Arrange for safe storage of the segregated material for decay, if appropriate, or until a waste broker or consultant can be hired to disposition the material.

6.4 **Reporting — Performed by Radiation Control Physicist.**

6.4.1 Complete a “Radiation Control Incident Report” (Appendix 3) for the incident.

6.4.2 Attach a copy of the isotopic ID and background files to the report.

6.4.3 After review by the supervising Radiation Control Physicist save an electronic copy in D:\Radiate\Share files\Duty in the current year incident folder, with the file name (RPTyyx###.rcp) where ‘yy’ is the current year, ‘###’ is the assigned incident number, and ‘rcp’ is the Radiation Control Physicist’s initials. Place a paper copy in the current year’s incident logbook.

6.4.4 If other potential violations are identified (e.g. car batteries, tires or chemicals entering the waste stream) complete a DEEP Multi Media Checklist (Appendix 6) and forward to the appropriate contact.

6.4.5 Complete and file any DOT Special Permits issued utilizing the DOT Special Permit Instructions. If a DOT Special Permit was
issued and segregation occurs with DEEP oversight, FAX or Email results to personnel listed on DOT Special Permit Form.

6.4.6 It is the responsibility of the issuing Radiation Control Physicist to perform any follow-up activities regarding final disposition of the material.
Annex A

DOT-SP 11406 SHIPPING APPROVAL FORM

Approval No ____________ (Refer to SP 11406 para. 8 a)

This shipment of waste or recycle materials contains unidentified radioactive material causing low level radiation outside the vehicle. Shipment is under Special Permit DOT-SP 11406 without a determination of materials meeting or not meeting the regulatory definition of radioactive material. The shipment is a minor radiological concern based on considerations of the U.S. Department of Transportation and the state official signing this shipment approval document.

DETAILS of DETECTION SITE, MATERIALS, and ORIGIN

Facility: Name __________________________________________ Type: __________________________

Address: ____________________________________________

(1) Contact person: ___________________________ Ph. ___________ Fax. ___________

Highway or Rail: ____________________________ Vehicle Type: ____________________________ Id.No.: ____________________________

Company: ____________________________ Operator Name: ____________________________

(2) Contact person: ____________________________ Ph. ___________ Fax. ___________

Description of waste and release risk factors: ____________________________

Radiation Measurement

mrem/h (max) ____________________________ location on vehicle ____________________________

Inst. Mfrg./type/model ____________________________ Bkg. mrem/h ____________________________

Surveyor name: ____________________________ Ph. ___________

Shipment Origin: Company: ____________________________ Address: ____________________________

Waste Origin: ____________________________

(3) Contact person: ____________________________ Ph. ___________ Fax. ___________

RADIATION CONTROL OFFICIALS (Detection, Origin, Destination States)

Detection State Official (receiving radiation detection info) Name: ____________________________

(4) Organization ____________________________ Ph. ___________ Fax. ___________

Origin State Official (prior to detection) Name: ____________________________

(5) Organization ____________________________ Ph. ___________ Fax. ___________

Destination State Official (after detection) Name: ____________________________

(6) Organization ____________________________ Ph. ___________ Fax. ___________

DESTINATION for RADIOACTIVE MATERIAL IDENTIFICATION and/or DISPOSITION

If carrier and shipper to this location are different than (2) and (3), show info in REMARKS

Company Name: ____________________________ Location: ____________________________

(7) Contact person: ____________________________ Ph. ___________ Fax. ___________
APPROVAL of SHIPMENT and SPECIAL CONDITIONS

Conditions: __________________________________________

(8) Signature: ___________________________ Ph. ___________ Fax. ___________
Title: ___________________________ Organization: ___________ Date: ___________

IDENTIFICATION of RADIOACTIVE MATERIAL and DISPOSITION INFORMATION at DESTINATION

(9) Name: ___________________________ Title: ___________________________ Date: ___________
Organization: ___________________________ Ph. ___________ Fax. ___________

RECORD of TRANSMITTALS (Shipment Approvals and identification/disposition)
(Circumstances may influence distribution)
Shipment Approvals (Sent by (4) or (8)) to (Show date sent)
OED CRCPD ___________________________ (1) ___________________________ (2) ___________________________, (3) ___________________________, (4) ___________________________, (5) ___________________________, (6) ___________________________, (7) ___________________________, OTHER ___________________________

Record of Identification and Disposition (Sent by (7), (9) or other _____) to
OED CRCPD ___________________________ (3) ___________________________, (5) ___________________________, (6) ___________________________, (4) or (8) ___________________________, OTHER ___________________________

REMARKS, OTHER INFORMATION
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

In case of emergency, notify the National Response Center ((800) 424-8802) and the (8) authorizing official and give the Special permit No. SP 11406 and Approval No.
Annex A  DOT-SP 10656 SHIPPING APPROVAL FORM

Approval Number _____-____-_____  (Refer to SP 10656 paras. 8a-8b)

This shipment of scrap metal or related materials for recycle contains unidentified radioactive material causing low levels of radiation outside the transport vehicle. Shipment is under Special permit DOT-SP 10656 without a determination of materials meeting or not meeting the regulatory definition of radioactive material. The shipment is a minor radiological concern based on considerations of the U.S. Department of Transportation and the state official signing this shipment approval document.

DETAILS of DETECTION SITE, MATERIALS, and ORIGIN
Facility:  Name  ___________________________  Type:  ___________________________
Address:  ________________________________________________________________

(1) Contact Person:  ___________________________  Ph.  _______________  Fax.  _______________

[ ] Highway or [ ] Rail  Vehicle Type:  ___________________________  Id.No.:  ___________________________
Owner:  ___________________________  Operator name:  _______________

(2) Contact Person:  ___________________________  Ph.  _______________  Fax.  _______________

Description of Scrap and release risks:  ________________________________________________

Radiation Measurement  Date/Time Performed:  ___________________________

mrem/h (max)  _______________  location on vehicle  ___________________________
Inst. Mfgr./type/model  ___________________________  Bkg. mrem/h  _______________
Surveyor name:  ___________________________  Ph.  _______________

Shipment Origin  Company:  ___________________________  Location:  ___________________________
(3) Contact Person:  ___________________________  Ph.  _______________  Fax.  _______________

RADIATION CONTROL OFFICIALS (Detection, Origin, Destination States)

Detection State Official (receiving radiation detection info) Name:  ___________________________
(4) Organization  ___________________________  Ph.  _______________  Fax  _______________

Origin State Official (prior to detection)
Name:  ___________________________
(5) Organization  ___________________________  Ph.  _______________  Fax  _______________

Destination State Official (after detection)  Name:  ___________________________
(6) Organization  ___________________________  Ph.  _______________  Fax  _______________

DESTINATION for RADIOACTIVE MATERIAL IDENTIFICATION and DISPOSTION
If carrier and shipper to this location are different than (2) and (3), show info in REMARKS
Company Name: ___________________ Location ___________________

(7) Contact Person: ___________________ Ph. ___________ Fax ___________

SP-1056 Approval Number _______ _______

Page 2

APPROVAL of SHIPMENT and SPECIAL CONDITIONS

Conditions: ____________________

(8) Signature: ___________________ Ph. ___________ Fax ___________

Title ________________ Organization ________________ Date ___________

IDENTIFICATION of RADIOACTIVE MATERIAL & DISPOSITION INFORMATION at DESTINATION

(9) Name: ___________________ Title: ________________ Date: ___________

Organization: ________________ Ph. ___________ Fax ___________

RECORD of TRANSMITTALS (Shipment Approvals and identification/disposition)
(Circumstances may influence distribution)

Shipment Approvals (Sent by (4) or (8) to (Show date sent)

OED CRRPD ________________, (1) ____________, (2) ____________, (3) ____________.

(5) ____________, (6) ____________, (7) ____________, Other ________________

Record of Identification and Disposition (Sent by (6), (7), (9) or to

(3) ____________, (4) ____________, (5) ____________, (9) ____________, OED CRRPD ____________

REMARKS, OTHER INFORMATION

_____________________________________________

_____________________________________________

_____________________________________________

In case of an emergency, notify the National Response Center ((800) 424-8802) and the (8) authorizing official and give the Special Permit No. and Approval No.
RADIATION CONTROL INCIDENT REPORT

REPORT #: 
DOT Exemption: 

LICENSEE:
ADDRESS OF LICENSEE:

INCIDENT LOCATION:
AND PHONE#:

PARTIES INVOLVED:

EVENT DATE AND TIME:

LICENSE #:

JOB TITLE:

INSTRUMENTS USED AND CALIBRATION DUE DATES:

MFG Model Serial Cal Due BKG

ISOTOPE(S):

ACTIVITY:

N.R.C. NOTIFICATION:

OVEREXPOSURE:

PERSONAL INJURY:

RELEASE OF RADIOACTIVE MATERIAL > APPENDIX B quantities:

FACILITY DAMAGE:

LICENSE LOSS OF WORK TIME:

LICENSE VIOLATION:

OTHER FEDERAL, STATE OR MUNICIPAL AGENCIES INVOLVED:

TOTAL MAN REM. RECEIVED:
DESCRIPTION OF OCCURRENCE:

IMMEDIATE ACTIONS:

IMMEDIATE RESULTS:

SECONDARY ACTIONS:

SECONDARY RESULTS:

FOLLOW-UP ACTIONS:

FOLLOW-UP RESULTS:

FINAL DISPOSITION:

SUBMITTED BY: ___________________________ Date: ___________________________

REVIEWED BY: ___________________________

This incident is:
ISOTOPIC ANALYSIS:

BACKGROUND SPECTRUM:

CALIBRATION SPECTRUM:

MATERIAL SPECTRUM:

BACKGROUND SPECTRUM:
DEEP Radiation Division Waste Incident Response Decision Chart

**Radiation Alarm**

- An Emergency Response Level is defined as:
  - Greater than 50 mR/hr on any side of the vehicle.
  - Greater than 2 mR/hr in any occupied area (cab area).

**Radiation Below Emergency Response Level**

- Notify DEEP Dispatch during normal business hours:
  - 8:30 a.m. to 4:30 p.m.
  - Telephone: 1-860-424-3333

- Option 1
  - Radiation Consultant hires to disposition alarm.

- Option 2
  - Request DOT Special Permit from DEEP Rad Div during normal business hours.

- Option 3
  - Facility operator obtains detailed radiation information using radionuclide identification detector and emails to Rad Div for review during normal business hours.

**Rad Div Responds 24/7**

- Return load to originating or other location.

**Medical Patient Excreta**


**Option A**
- Radiation Consultant hired to identify and disposition source of radiation alarm.

**Option B**
- DEEP Rad Div identifies and segregates source of alarm during normal business hours.

**NOTE:** US DOT Regulations prohibit vehicle from roadway without one of the following:
- DOT Special Permit
- Full Hazardous Waste Manifest
- Radioactive Source Removed from load

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RCP-403 Rev 2  Appendix 4  Page 1 of 1
FOR LAW ENFORCEMENT CSPD BROADCAST

Via:  □ Fax ____-____-______ □ Email __________________
      □ Phone ____-____-______ □ Other __________________

TO: All Connecticut DMV and CSP Truck Squads

FROM: Connecticut DEEP, Radiation Division

Subject: Notification of Radioactive Shipment Under DOT Special Permit

This is to advise all enforcement personnel that a special permit to ship radioactive materials has been issued under USDOT SP 11406 or SP 10656.

□ DOT-SP 11406 ___-____-____ or □ DOT-SP 10656 ___-____-____

Carrier Name: ____________________________

Vehicle Make: ____________________________

Vehicle Registration(s) __________________

Date and Time Issued _______________________(Use 24 hour time)
Expiration Date and Time _______________________(Use 24 hour time)

Route: ____________________________________________

________________________________________________________________________

If vehicle is encountered on any other highways, during this period, please notify DEEP at 860-424-3029 during business hours or 860-424-3333 on nights and weekends

Name of DEEP Official: __________________________

.broadcast AUTH: __________________________
### Connecticut Department of Energy and Environmental Protection
#### Multi-Media Checklist

**Instructions:** To be considered while conducting all field activities. For sites which have a "YES" answer, forward this form by e-mail to the appropriate contact.

<table>
<thead>
<tr>
<th>Facility/site Name:</th>
<th>Facility/site Contact:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>Telephone #:</td>
<td>Facility/site Type:</td>
</tr>
</tbody>
</table>

**Name of DEEP staff completing checklist:**

**Program/Division:**

**Telephone #:**

**Inspection Date:**

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<table>
<thead>
<tr>
<th>Observation</th>
<th>YES (✓)</th>
<th>Referred to &amp; Date Referred</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depending on the severity of the situation, you can either call the field contact or send an email. DEEP’s e-mail for all staff is: first <a href="mailto:name.lastname@ct.gov">name.lastname@ct.gov</a>. Have you observed any of the potential violations listed below? If so, please check “yes.”</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Recycling (Western: Joseph Schiavone 424-3206 & Eastern: Kevin Barrett 424-3697)**

1. **Business lacking an established recycling program to ensure separation of Designated (mandatory) Recyclable (DR) items and trash within the facility? Are there a lack of recycling bin(s) located throughout the facility where the recyclable materials are being generated? DRs include Corrugated Cardboard, Boxboard, Newspaper, Magazines, White & Colored Office Paper, Glass, Metal & Plastic (#1 and #2).**
   - [ ]

2. **Business lacking more than one container at the “back of the building” to collect DR items separately from trash. Focus on containers EMPTIED by haulers (e.g., dumpsters, 96-gallon wheeled cart).**
   - [ ]

3. **More than an incidental or inadvertent amount of clean DR items visible in the trash container (dumper or wheeled cart).**
   - [ ]

**Air Engineering & Enforcement (Mark Pothash 424-3547)**

1. **Black or white smoke emitted from industrial or large residential (apartment, condos, hotel) stacks. Note: Detached plume indicates water vapor, not smoke.**
   - [ ]

2. **Significant dust plume emanating from crushing/screening or other processes, storage piles, or a construction site, that is crossing property line. Additionally, is there a drag-out onto a paved road?**
   - [ ]

3. **Objectionable odors detected beyond property line.**
   - [ ]

**Pesticides/FIFRA * (Diane Jorsey 424-3328)**

1. **Pesticide spills or discharges to streets, storm sewers, watercourses.**
   - [ ]

2. **Pesticide disposal sites (dumps, burial sites, containers adjacent to or in surface waters, containers in open fields or around commercial buildings).**
   - [ ]

3. **Questionable pesticide storage areas (large volumes, storage of pesticide products near food or feed, broken or leaking containers).**
   - [ ]

**Hazardous Waste/RCRA * (Western: Joseph Schiavone 424-3206 & Eastern: Kevin Barrett 424-3697)**

1. **Containers/roll-offs/tanks with contents stored outdoors that are corroded or leaking or open or unlabeled.**
   - [ ]

2. **Containers/tanks with contents lacking secondary containment or an impervious base.**
   - [ ]

3. **Abandoned sites with waste containers/roll-offs/tanks.**
   - [ ]

**Solid Waste * (Western: Joseph Schiavone 424-3206 & Eastern: Kevin Barrett 424-3697)**

1. **Greater than 10 cubic yards of solid waste including municipal solid waste (MSW), bulky waste (BW), construction/demolition waste, or land clearing waste (stumps), and tires or any other waste dumped on the ground.**
   - [ ]

2. **Containers of solid waste at abandoned sites greater than 10 cubic yards.**
   - [ ]

3. **Excessive dust, litter, or other debris from a solid waste facility.**
   - [ ]

**Terminal Management * (David Keating 424-4186)**

Leaks or spills around above ground storage tank or loading racks at petroleum terminals.
   - [ ]
Approved Medical Radioisotopes contained in solid waste allowed for incineration.

<table>
<thead>
<tr>
<th>Isotope</th>
<th>Half-Life</th>
</tr>
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<tbody>
<tr>
<td>Ga-67</td>
<td>3.62 Days</td>
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<td>I-123</td>
<td>13.27 Hours</td>
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<td>8.02 Days</td>
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<td>In-111</td>
<td>2.8 Days</td>
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<td>Tc-99m</td>
<td>6.01 Hours</td>
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<td>Zr-89</td>
<td>78.41 Hours</td>
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<td>Ra-223</td>
<td>11.44 Days</td>
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