

Narragansett Bay Commission

PRETREATMENT INSPECTION TOOLS & TRICKS

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Pretreatment Manager
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File Review

- Before leaving the office review all files
 - Correspondence
 - SMCR
 - pH
 - Plans



Consistency

NARRAGANSETT BAY COMMISSION
Annual Inspection Checklist
For Significant Industrial Sewer Users

Company Name: _____ Engineer: _____
Contact Person(s): _____ Date: _____
Other Person(s) in Attendance: _____
Company Classification: Electroplater _____ Metalfinisher _____
Other (specify): _____

Part I - Outstanding

- (a) What progress _____
- (b) Has required work been completed? If no, when will it be completed? _____
- (c) What work _____
- (d) Has facility _____

NARRAGANSETT BAY COMMISSION
Brewery/Distillery Inspection Checklist
For Industrial Users

Company Name: _____ Technician/Engineer: _____
Person(s) Met With: _____ Date: _____
Company Classification: _____

Part I - Requirements/Progress Since Last Inspection

- (a) What was required of the firm since last inspection? _____
- (b) Has required work been completed? If no, when will it be completed? _____

Part II - Pretreatment Equipment

- (a) List areas of the facility:
 Process Operations
 Other: _____
- (b) Have changes been made? If yes, detail changes: _____

Part III - Maintenance and Record Keeping

- (a) Is pH recording required? _____
- (b) Are facility pH probes inspected and calibrated? _____

pH readings: _____ NB _____

* If discrepancy is greater than 0.2, calibration, deficiency shall be noted.

- (c) How often are pH probes inspected? _____
- (d) Is the facility required to maintain a logbook? If yes, is the logbook being maintained? If no, please specify: _____

NARRAGANSETT BAY COMMISSION
Inspection Checklist
For Dental Facilities

Company Name: _____
Facility Address: _____
Inspection Date: _____ NBC Inspector(s): _____
Person(s) met with: _____

Part I - Facility Information

- (1) Company Owner: _____
- (2) Contact Person: _____
- (3) Phone Number: _____
- (4) Hours of Operation: _____
- (5) Type of Dental Facility: _____
- (6) Make/Model of Amalgam Separator: _____

Part II - Requirements/Progress Since Last Inspection

- (1) What was required of the firm since the last inspection? _____
- (2) Has required work been completed? Yes No
If no, when will it be completed? _____
- (3) Have all required reports (BMP Certification, SMCRs) been submitted on time? Yes No
If no, discuss the ramifications of late submittals and SNC with the user: _____
- (4) Has the firm been in compliance for the past 12 month period? Yes No
If no, detail the compliance issues and discuss with the user: _____

NARRAGANSETT BAY COMMISSION
Inspection Checklist
For Food Preparation Establishments

Inspection Date: _____
Company Name: _____
Facility Address: _____
Technician/Engineer: _____

NARRAGANSETT BAY COMMISSION
Inspection Checklist
For Industrial Users

Company Name: _____ Tech./Eng.: _____
Person(s) Met With: _____ Date: _____
Company Classification: _____

Part I - Requirements/Progress Since Last Inspection

- (a) What was required of the firm since last inspection? _____

Lincoln Septage Facility
Septage Truck Inspection Checklist

Inspector: _____
Inspection Date: _____
Septage Hauler: _____
Vehicle Inspected: _____
Drivers Name: _____

Vehicle Inspection

- Registration OK? Yes No - Call State Police
- Insurance Card OK? Yes No
- NBC Volume Sticker In Place Yes No - Issued NOV
- NBC Permitted User Sticker In Place Yes No - Issued NOV
- NBC Computer Chip In Place Yes No - Issued NOV

Paperwork Review

- Manifest Properly Completed Yes No - Issued Nov and Refuse Load.

If No, List Problems: _____

Waste Discharge Inspection

- pH of Waste: _____ s.n.
- Was grease observed in Sample? Yes No - If yes, Refuse Load and Collect Sample for Evidence.
- Was grease observed in lakeside? Yes No - If yes, Stop Load Discharge and Collect Sample.

Educational Procedure Review

- Manifest Paperwork Completion procedure was reviewed with driver Yes No
- Grease Policy reviewed with driver Yes No

Other Comments: _____

Communication

- Educate
- Communicate Findings





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