City of Lompoc Recycled Water Program

Site Inspection Report To Be Completed By Wastewater Reclamation plant (LRWRP) Staff

Recycled Water User: _____

Site Inspected (Address, Intersection) _____

Name of Inspector: _____

Date and Time of Inspection: _____

Inspection of User Operations

Note: Use the space provided under each question to explain any "yes" answers and attach photo documentation if applicable.

Any evidence of runoff from the use site or discharge to gutter, storm drain, or surface water?	☐ yes	☐ no
Any odors detected from recycled water use?	☐ yes	☐ no
Any ponding of recycled water?	☐ yes	☐ no
Any evidence of mosquito breeding?	☐ yes	☐ no
Warning signs, equipment tags or markers properly posted and legible?	☐ yes	☐ no
Any evidence of overspray into public use areas?	☐ yes	☐ no
Any leaks or breaks in storage containers or equipment?	☐ yes	☐ no
Maintaining a minimum 100 foot setback from domestic wells?	☐ yes	☐ no

Describe any problem(s) below and attach a site map, if necessary, to locate the problem area(s).