DAILY INSPECTION CHECKLIST

PLANT: **MOORREESBURG WASTE WATER TREATMENT WORKS**

YEAR: _____ **FORM REF NO.:** **MRB-CHK-INS_D-01**

MONTH: _____ **PROCESS CONTROLLER SIGNATURE:** _____

WEEK: From Date: _____ **To Date:** _____ **AREA SUPERINTENDENT SIGNATURE:** _____

INTSRUCTIONS: Yes = ✓ No = ✗ **SHEET NO: 1**

List number of… = Enter the number of epuipment in working order

Sheet to be completed Daily

1. INLET WORKS									
TASK NO.	**CHECKLIST**	**MON**	**TUE**	**WED**	**THUR**	**FRI**	**SAT**	**SUN**	**REMARKS**
2.1	Is the manual screens free of debris or obstructions?								
2.2	Is the hand rake and wheelbarrow/wheelie bin available for screenings?								
2.3	Is the spade and wheelbarrow/wheelie bin available for grit removal?								
2.4	Is screened material stored and disposed off according to procedure?								
2.5	Is grit stored and disposed off according to procedure?								
2.6	Are both grit channels operational?								
2.7	Is the flume free of debris? Is the flow meter operational?								
2. CLARIGESTER									
TASK NO.	**CHECKLIST**	**MON**	**TUE**	**WED**	**THUR**	**FRI**	**SAT**	**SUN**	**REMARKS**
2.1	Is the clarigester operational?								
2.3	Is the flow over the weirs even?								
2.4	Is there any debris restricting the flow over the weirs?								
2.5	Are there any noises or vibrations from the motor?								
2.6	Is the surface scum being removed effectively?								
2.7	Is there any sludge build up on the clarigester?								
2.8	Desludging required? (as per desludging schedule)								
2.9	Are the launders clean and free of debris and algae?								
3. BIOTRICKLING FILTERS									
TASK NO.	**CHECKLIST**	**MON**	**TUE**	**WED**	**THUR**	**FRI**	**SAT**	**SUN**	**REMARKS**
3.1	Is the filter operational?								
3.2	Does the distribution arm rotate smoothly?								
3.3	Are any of the orifices blocked?								
3.4	Are there any leaks on the distributor base?								
3.5	Is the wastewater distributed evenly over the media?								
3.6	Is there any ponding on the filter media?								
3.7	Is there any debris in the underdrains?								
4. ACTIVATED SLUDGE PLANT									
4.1 AEROBIC ZONE									
TASK NO.	**CHECKLIST**	**MON**	**TUE**	**WED**	**THUR**	**FRI**	**SAT**	**SUN**	**REMARKS**
4.1.1	List the number of aerators that are operational (1 - 2)								
4.1.2	Is there any scum on the surface?								
4.1.3	Are the DO meters in working order?								
4.1.4	Are the aerators in good working order?								
4.1.5	Any abnormal noises from the aerators?								
4.1.6	Does the MLSS have a rich brown color and an earthy smell?								
4.2 COMBINED RAS / WAS PUMP STATION									
TASK NO.	**CHECKLIST**	**MON**	**TUE**	**WED**	**THUR**	**FRI**	**SAT**	**SUN**	**REMARKS**
4.2.1	List the number of pumps that are operational (1 - 2)								
4.2.2	Is the flow meter working?								
4.2.3	What is the recycle ratio?								
4.2.4	Are the pumps free of vibrations or unusual noises?								
4.2.5	Have the duty/standby pumps been alternated recently?								
4.2.6	Are the level sensors operational and in good condition?								
4.3 SECONDARY SEDIMENTATION TANKS									
TASK NO.	**CHECKLIST**	**MON**	**TUE**	**WED**	**THUR**	**FRI**	**SAT**	**SUN**	**REMARKS**
4.3.1	List the number of SSTs that are operational (1 - 2)								
4.3.2	Check the splitter box for even flow to the SSTs.								
4.3.3	Is the flow over the weirs even?								
4.3.4	Is there any debris restricting the flow over the weirs?								
4.3.5	Are there any noises or vibrations from the motor?								
4.3.6	Is the surface scum being removed effectively?								
4.3.7	Is there any sludge build up on the SSTs?								
4.3.8	Desludging required? (as per desludging schedule)								
4.3.9	Are the launders clean and free of debris and algae?								
5. DISINFECTION									
TASK NO.	**CHECKLIST**	**MON**	**TUE**	**WED**	**THUR**	**FRI**	**SAT**	**SUN**	**REMARKS**
5.1	Is disinfection taking place?								
5.2	Is there a chlorine smell in the building?								
5.3	Are the motive water pumps working?								
5.4	Is there sufficient chlorine stock?								
5.5	Is the contact tank clean and free of algae?								
6. SLUDGE DEWATERING									
6.1. SLUDGE DRYING BEDS									
	CHECKLIST	**MON**	**TUE**	**WED**	**THUR**	**FRI**	**SAT**	**SUN**	**REMARKS**
6.1.1	Is the sludge on the beds raked and level?								
6.1.2	Is the sludge and draining system piping and valves working?								