



# SITE INSPECTION COMPLIANCE REPORT – WLAP Regulatory Issues

| Inspection Section                | Compliant*   | Inspection Section                  | Compliant*   |
|-----------------------------------|--|-------------------------------------|--|
| A. Registration                   | Yes <input type="checkbox"/> No <input type="checkbox"/> | f) Minimum 110% containment of fuel | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| B. Best Management Practices      | Yes <input type="checkbox"/> No <input type="checkbox"/> | C. a) Treatment of Sewage           | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| a) Disposal of Blood Water        | Yes <input type="checkbox"/> No <input type="checkbox"/> | b) Disposal of Sewage               | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| b) Disposal of Net Cleaning Waste | Yes <input type="checkbox"/> No <input type="checkbox"/> | D. Environmental Management         | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| c) Disposal of Disinfectant Waste | Yes <input type="checkbox"/> No <input type="checkbox"/> | E. Water Licence                    | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| d) Disposal of Morts              | Yes <input type="checkbox"/> No <input type="checkbox"/> | F. Trapping Licence                 | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| e) Disposal of Refuse             | Yes <input type="checkbox"/> No <input type="checkbox"/> | G. Hunting Licence                  | Yes <input type="checkbox"/> No <input type="checkbox"/> |

Company Name \_\_\_\_\_

Site Name \_\_\_\_\_

Person Interviewed \_\_\_\_\_

Signature \_\_\_\_\_

MAFF Inspector \_\_\_\_\_

Date of Inspection \_\_\_\_\_

**\*IF NOT IN COMPLIANCE, SEE BELOW FOR DETAILS**

| Inspection Section<br>(above) | Legislation Contravened | Required Corrective Measures | Date Action to be Completed | Date of Required Response<br>to Ministry |
|-------------------------------|-------------------------|------------------------------|-----------------------------|--|
|                               |                         |                              |                             |  |
|                               |                         |                              |                             |  |
|                               |                         |                              |                             |  |
|                               |                         |                              |                             |  |
|                               |                         |                              |                             |  |

**Service of this notice does not preclude the ministry from pursuing prosecution and/or administration action for the above-listed non-compliance issues.**

Other Non-Compliance observed: \_\_\_\_\_

Signature of Inspector: \_\_\_\_\_

Date of Chief Inspector Review: \_\_\_\_\_

Date Forwarded to Head Office: \_\_\_\_\_

Date Forwarded to MWLAP: \_\_\_\_\_