

detection and repair inspection? ----- Yes No

2. Does the facility maintain a leak log? ----- Yes No

3. Does the responsible official check the following areas for leaks?

| | | | |
|--|---|------------------------------|---|
| a) Hose connections, fittings, couplings, and valves ----- | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | g) Muck cookers ----- | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| b) Door gaskets and seating ----- | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | h) Stills ----- | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| c) Filter gaskets and seating----- | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | i) Exhaust dampers ----- | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| d) Pumps ----- | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | j) Diverter valves ----- | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| e) Solvent tanks and containers-- | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | k) Cartridge filter housings | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| f) Water separators ----- | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | | |

4. Which method(s) of detection (is/are) used by the responsible official?

| | |
|---|--|
| a) Visual examination (condensed solvent on exterior surfaces) ----- | a) <input type="checkbox"/> |
| b) Physical detection (airflow felt through gaskets) ----- | b) <input type="checkbox"/> |
| c) Odor (noticeable perc odor) ----- | c) <input type="checkbox"/> |
| d) Use of direct-reading instrumentation (FID/PID/calorimetric tubes) ----- | d) <input type="checkbox"/> ** (see below) |
| e) Halogen leak detector ----- | e) <input type="checkbox"/> |

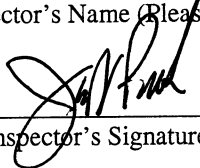
****If using direct-reading instrumentation, is the equipment:** ----- ** N/A

| | |
|--|---|
| 1) Capable of detecting perc vapor concentrations in a range of 0-500 ppm? ----- | 1) <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2) Calibrated against a standard gas prior to and after each use (PID/FID only)? ----- | 2) <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3) Inspected for leaks and obvious signs of wear on a weekly basis? ----- | 3) <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4) Kept in a clean and secure area when not in use? ----- | 4) <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5) Verified for accuracy by use of duplicate samples (calorimetric only)? ----- | 5) <input type="checkbox"/> Yes <input type="checkbox"/> No |

Joseph V. Panetta

11/20/2008

 Inspector's Name (Please Print)



 Inspector's Signature

 Date of Inspection

 Approximate Date of Next Inspection

COMMENTS: Talked with owner Erica Albright. She stated this is a drop off location only. I explained the department has asked to remove electric and perc from the machine. see inspection 02/20/2008.