

**GAWP Industrial Award Subcommittee  
Instructions**

This form has been developed following the guidelines of the GAWP Awards Committee, which recommends the use of the following rating scale:

**0:** inadequate, **1:** minimum, **2:** good, **3:** very good, and **4:** excellent

Sometimes it may be difficult to assess the conditions of a plant in such a way that a minimum, good or excellent rating cannot be provided. For those cases, there are only two possible answers **yes = 4** or **no = 0**, with the other boxes blocked. When the question is irrelevant to the plant write **N/A** on the side

**GAWP INDUSTRIAL COMMITTEE**  
**Awards Evaluation Form**

**Industry Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Principal Product:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Fax** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

*Last Regulatory Inspection*

**Agency:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Inspector:** \_\_\_\_\_ **Tel.** \_\_\_\_\_

**Results:** \_\_\_\_\_

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*GAWP Evaluation Visit*

**Evaluated by:** \_\_\_\_\_ **Date** \_\_\_\_\_

\_\_\_\_\_ **Date** \_\_\_\_\_

*Award Category*

- Biological - Direct
- Physical-Chemical - Direct
- Biological - Indirect
- Physical-Chemical - Indirect
- Land Application
- Groundwater


**Total Points Scored** \_\_\_\_\_

**Total Points Available** \_\_\_\_\_

**Percentage**

**Permit Monitoring/Compliance**

- Is a current copy of discharge permit available for operating personnel? 0  1  2  3  4  NA
- Is a current copy of the sewer use ordinance available? 0  1  2  3  4  NA
- Does the facility keep compliance records available for review? 0  1  2  3  4  NA
- Has the facility met permit limits and had no NOV's within the last calendar year? 0  1  2  3  4  NA
- Has there been any exceedances to the permit in past calendar year? 0  1  2  3  4  NA
- Do the records identify sampling location, date, time and sampling personnel? 0  1  2  3  4  NA
- Do the laboratory data include analytical methods, results and analyst information? 0  1  2  3  4  NA
- Does the laboratory supply QA/QC results with data package? 0  1  2  3  4  NA
- Is there a copy of QA/QC program available at the facility? 0  1  2  3  4  NA
- Are sampling locations representative of the outfall discharge? 0  1  2  3  4  NA
- Is the effluent monitoring equipment properly installed? 0  1  2  3  4  NA
- Is the effluent monitoring equipment operated properly? 0  1  2  3  4  NA
- At what level does the facility document maintenance and calibration procedures for the effluent monitoring equipment? 0  1  2  3  4  NA

**Sub-total Available**


**Process Control**

- Does the facility have a written environmental plan for process control? 0  1  2  3  4  NA
- How would you rate the plan to identify specific targets and control ranges? 0  1  2  3  4  NA
- Is there a written sampling schedule for process samples? 0  1  2  3  4  NA
- How would you rate the sampling schedule? 0  1  2  3  4  NA
- How do you rate the use of process data to make operational decisions? 0  1  2  3  4  NA

How would you rate the way the data collected is made available to the operating personnel?

0  1  2  3  4  NA

At what level are calculations and operational decisions recorded?

0  1  2  3  4  NA

At what level does the facility display charts and graphs?

0  1  2  3  4  NA

Is there a current written spill response/slug control plan available at the facility?

0  1  2  3  4  NA

**Sub-total Available**


**Safety Issues**

Does the facility have a written health and safety plan?

0  1  2  3  4  NA

How do you rate the signage being display throughout the treatment facility?

0  1  2  3  4  NA

How would you rate the use fire alarms and smoke detectors in the facility?

0  1  2  3  4  NA

Do most areas have two clearly marked exits?

0  1  2  3  4  NA

Are emergency phone numbers clearly displayed?

0  1  2  3  4  NA

Are first aid stations/kits available?

0  1  2  3  4  NA

Are emergency showers and eye washing stations available?

0  1  2  3  4  NA

How do you rate the provisions of personal protective equipment?

0  1  2  3  4  NA

How do you rate the use of personal protective equipment?

0  1  2  3  4  NA

Has the facility being constructed to reduce or eliminate hazards?

0  1  2  3  4  NA

Are the MSDS available for all chemicals at the facility?

0  1  2  3  4  NA

Are all chemicals properly labeled and stored?

0  1  2  3  4  NA

How would you rate ventilation provided in work areas?

0  1  2  3  4  NA

How would you rate the light provided in all areas of the facility?

0  1  2  3  4  NA

- Are aisles clear and exits accessible? 0  1  2  3  4  NA
- Are electrical components properly labeled, located and secured? 0  1  2  3  4  NA
- Are all operators familiar with lock-out/tag-out procedures? 0  1  2  3  4  NA
- Is there a written confined space entry program? 0  1  2  3  4  NA
- Are records available for all accidents, within the last 2 years? (0-4) 0  1  2  3  4  NA
- Does the facility have an accident review process? (0-4) 0  1  2  3  4  NA

**Sub-total Available**


**Maintenance**

- Is there a written preventive maintenance program in place? 0  1  2  3  4  NA
- Is there a maintenance and repair log for each piece of equipment? 0  1  2  3  4  NA
- Is there a spare part program in place? 0  1  2  3  4  NA
- Are there manuals on all operating equipment available at the facility? 0  1  2  3  4  NA
- Is there an up to date set of plans and specs at the facility? 0  1  2  3  4  NA
- Does the facility have the required tools and personnel to properly maintain the equipment? 0  1  2  3  4  NA
- Is a current O&M Manual available and used? 0  1  2  3  4  NA
- Is the equipment properly maintained? 0  1  2  3  4  NA

**Sub-total Available**


**Facility (Equipment)**

- Is the equipment operated properly? 0  1  2  3  4  NA
- Is equipment in adequate conditions? 0  1  2  3  4  NA
- Is there redundancy on critical components? 0  1  2  3  4  NA
- Are critical control parameters continuously monitored? 0  1  2  3  4  NA
- What are the conditions of in-line analyzer? 0  1  2  3  4  NA
- What are the conditions of the mechanical systems? 0  1  2  3  4  NA
- What are the conditions of the electrical systems? 0  1  2  3  4  NA
- What level of process control system is used at the facility? 0  1  2  3  4  NA
- Is all process equipment properly protected or sheltered? 0  1  2  3  4  NA

**Sub-total Available**


**Solids Management**

- What level of treatment is provided to the solids generated at the facility? 0  1  2  3  4  NA
- Are solids generated being conditioned at the facility? 0  1  2  3  4  NA
- Are solids generated dewatered at the facility? 0  1  2  3  4  NA
- Is the quantity of solids generated being calculated? 0  1  2  3  4  NA
- Are solids tracked by the operating personnel? 0  1  2  3  4  NA
- Are solids being manifested to a licensed disposal facility? 0  1  2  3  4  NA
- Does the facility have a policy for reducing solids generation? 0  1  2  3  4  NA
- Does the facility have a strategy to reduce the water content in solids? 0  1  2  3  4  NA
- Does the facility have a program to reduce treatment costs? 0  1  2  3  4  NA

Has the facility established an odor control strategy? 0  1  2  3  4  NA

How do you rate the solids storage provided to reduce their impact on the environment? 0  1  2  3  4  NA

Does the facility have a program to recycle/reuse solids generated? 0  1  2  3  4  NA

Is the facility in full compliance with applicable State, Federal, etc. regulations or guidelines for handling, testing, tracking, and ultimate disposal of the solids generated? 0  1  2  3  4  NA

**Sub-total Available**


**Staffing and Training**

Is sufficient staffing provided to insure that all tasks associated with the operation, maintenance, monitoring, and reporting requirements can be performed as needed and consistent compliance with permit limits achieved? 0  1  2  3  4  NA

Does the person in responsible charge have a thorough knowledge and understanding of treatment process and controls for their facility? 0  1  2  3  4  NA

Is continuing education available and recommended for operating personnel? 0  1  2  3  4  NA

Is health and safety training available to the operating personnel? 0  1  2  3  4  NA

Does the facility meet the minimum operator certification requirements? 0  1  2  3  4  NA

Does the facility have a certified Laboratory Analyst on staff? 0  1  2  3  4  NA

How do you rate the level of interest demonstrated by the operating personnel? 0  1  2  3  4  NA

How do you rate the level of participation in operation exhibited by the staff? 0  1  2  3  4  NA

**Sub-total Available**


**Overall**

How would the inspector rate the overall performance of the facility? 0  1  2  3  4  5   
6  7  8  9  10  NA