

Composting Facility Log of Operations Index

Each form represents an individual tab in the binder that houses the Log of Operations

- Instructions for Composting Facility Log of Operations
- Form 1 Yearly Cover Sheet
- Form 2 Materials Acceptance and Distribution
- Form 3 Materials Management
- Form 4a Self-Inspection Checklist Class I
- Form 4b Self-Inspection Checklist Class II
- Form 4c Self-Inspection Checklist Class III
- Form 4d Self-Inspection Checklist Class IV
- Form 5 Unauthorized Materials
- Form 6 Yard Waste Refusal Form



Composting Facility Log of Operations Yearly Cover Sheet

	-		-	r and should be kept on file a 15-560-04. Attach amendme		
Facility Name:		(as it appears on re		ation and/or license)		
Facility Locatio	on:			,		
- 	(stree			(city)	(state)	(zip code)
Contact Name:				Phone #:		
	Class I	Class II	(cł	Class III	Class IV	
Registr	ration #:			License #:		
	Method of Compo	sting	$\left. \right $	Type and Number	r of Available E	quipment
Windrow	composting			Front end loader	Tub gri	nder
In-vessel	composting			Trommel screens	Windro	w turner
Aerated st	tatic pile composting			Shredder/chipper		
Static pile	compositing			Other:		
Other:						

Year:

Composting Facility - Log of Operations							Facility:						
Materi	als Ac	ceptanc	:e & Г)istri	ibutio	on _Y	ear:_				Page:	′	of
Date Load Received	(load must be measured			Type of	`Waste		Waste Origin City/County/State (if not Ohio)			Compost Distributed (load must be measured by weight or volume)			
		J.C.											,,,
		+										+	
		+										+	
		-										+	
												+	
												+	
		+										+	
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		!										+	
		!										+	
	 	!										+	
												+	
												+	
Total Waste Received (this sheet)	tons	Dist	Compost tributed nis sheet)	tons	yd³	Cumulat Total Wa Receive (previous sh	aste ed	tons	yd³	Total C Distr	ulative Compost ibuted us sheets)	tons	yd³
Print N Person Com	Name of	m —				isisisisisisisis.					*ilatatararara		

	Facility - Lo							Facility:		
Materi	als Mai	nage		1t				Year:	Page:	_ of
			((<u>Check A</u>	pplicab	<u>le Boxe</u>				
Date	Pile ID	Temperature	Formed	Turned	Loaded	Sampled	Wood Processing	Description of Activities		
Signa Person Com	iture of							Print Name of Person Completing Form		

Composting Facility - Log of Operations Self-Inspection Checklist Class I Composting Facility			Person Completing Inspection:				
Is the above site being operated in compliance with the following regulations? Please mark the box in the appropriate column to denote compliance status. Marking the box in the NO column indicates that a violation has been noted. If a violation is noted, a description of the violation and steps taken to return to compliance should be provided in the Corrective Actions section below. Please mark the N/A box if not applicable to this location. This checklist is not all inclusive of regulations applicable to Class I composting facilities.							
Y N N/A		Y	N	N/A			
	3745-560-110 Operational requirements (A) Comply with authorizing documents (B) Accept only authorized materials (C)(2) If prohibited material is detected: (a) Remove material from placement area (b) Manage material appropriately (c) Record incidents in log of operations (G) Remove/shred compostable containers (H)(1) Control noise, dust and odors (2) Control vectors (3) Prevent fire (4) Collect and dispose of scattered litter (5) Prevent water pollution (6) Prevent air pollution (I)(1) Limit access (2) Maintain placement areas and access roads (3) Exclude animals				3745-560-110 Operational Requirements (cont.) (J) Adequate equipment for operations (L)(1) Process wood and remove foreign material (2) Process wood at least annually (M)(1) Control runoff and runon, prevent ponding and erosion (2) Manage surface water (ORC 6111) (3) Divert surface water from materials placement area (4) Monitor surface water (if required) (N)(1) Minimize production of leachate (2) Eliminate ponding of leachate (3) Collect and contain leachate (4) Maintain leachate control structures (O) Prevent cross-contamination (P)(1) Incorporate food scraps (2) Maintain stockpile of biofilter material (3) Control free liquid		
Corrective A	ctions (if necessary):	No	otes:				

Composting Facility - Log of Operations Self-Inspection Checklist Class II Composting Facility			Person Completing Inspection:					
Is the above site being operated in compliance with the following regulations? Please mark the box in the appropriate column to denote compliance status. Marking the box in the NO column indicates that a violation has been noted. If a violation is noted, a description of the violation and steps taken to return to compliance should be provided in the Corrective Actions section below. Please mark the N/A box if not applicable to this location. This checklist is not all inclusive of regulations applicable to Class II composting facilities.								
Y N N/A		Y	N	N/A				
	3745-560-210 Operational requirements (A) Comply with authorizing documents (B) Accept only authorized materials (C)(2) If prohibited material is detected: (a) Remove material from placement area (b) Manage material appropriately (c) Record incidents in log of operations (G) Remove/shred compostable containers (H)(1) Control noise, dust and odors (2) Control vectors (3) Prevent fire (4) Collect and dispose of scattered litter (5) Prevent water pollution (6) Prevent air pollution (I)(1) Limit access (2) Maintain placement areas and access roads (3) Exclude animals				3745-560-210 Operational Requirements (cont.) (J) Adequate equipment for operations (L)(1) Process wood and remove foreign material (2) Process wood at least annually (M)(1) Control runoff and runon, prevent ponding and erosion (2) Manage surface water (ORC 6111) (3) Divert surface water from materials placement area (4) Monitor surface water (if required) (N)(1) Minimize production of leachate (2) Eliminate ponding of leachate (3) Collect and contain leachate (4) Maintain leachate control structures (O) Prevent cross-contamination (P)(1) Incorporate food scraps (2) Maintain stockpile of biofilter material (3) Control free liquid			
Corrective A	ctions (if necessary):	No	otes:					

Self-In Class I	osting Facility - Log of Operations spection Checklist II Composting Facility	Date: Time: Weather Conditions: Person Completing Inspection:					
Is the above site being operated in compliance with the following regulations? Please mark the box in the appropriate column to denote compliance status. Marking the box in the NO column indicates that a violation has been noted. If a violation is noted, a description of the violation and steps taken to return to compliance should be provided in the Corrective Actions section below. Please mark the N/A box if not applicable to this location. This checklist is not all inclusive of regulations applicable to Class III composting facilities.							
Y N N/A		Y N N/A					
	3745-560-310 Operational requirements (A) Comply with authorizing documents (B) Accept only authorized materials (C)(2) If prohibited material is detected: (a) Remove material from placement area (b) Manage material appropriately (c) Record incidents in log of operations (G) Remove/shred compostable containers (H)(1) Control noise, dust and odors (2) Control vectors (3) Prevent fire (4) Collect and dispose of scattered litter (5) Prevent water pollution (6) Prevent air pollution (I)(1) Limit access (2) Maintain placement areas and access roads (3) Exclude animals		3745-560-310 Operational Requirements (cont.) (J) Adequate equipment for operations (L)(1) Process wood and remove foreign material (2) Process wood at least annually (M)(1) Control runoff and runon, prevent ponding and erosion (2) Manage surface water (ORC 6111) (3) Divert surface water from materials placement area (4) Monitor surface water (if required) (N)(1) Minimize production of leachate (2) Eliminate ponding of leachate (3) Collect and contain leachate (4) Maintain leachate control structures (O) Prevent cross-contamination				
Corrective A	ctions (if necessary):	Notes:					

Self-In Class I	osting Facility - Log of Operations spection Checklist V Composting Facility	Date: Time: Weather Conditions: Person Completing Inspection:					
Is the above site being operated in compliance with the following regulations? Please mark the box in the appropriate column to denote compliance status. Marking the box in the NO column indicates that a violation has been noted. If a violation is noted, a description of the violation and steps taken to return to compliance should be provided in the Corrective Actions section below. Please mark the N/A box if not applicable to this location. This checklist is not all inclusive of regulations applicable to Class IV composting facilities.							
Y N N/A	2745 5(0 410 Occuptional magninements	Y N N/A	2745 5(0 410 Operational Descriptional Court)				
	3745-560-410 Operational requirements (A) Comply with authorizing documents (B) Accept only authorized materials (C)(2) If prohibited material is detected: (a) Remove material from placement area (b) Manage material appropriately (c) Record incidents in log of operations (G) Remove/shred compostable containers (H)(1) Control noise, dust and odors (2) Control vectors (3) Prevent fire (4) Collect and dispose of scattered litter (5) Prevent water pollution (6) Prevent air pollution (I)(1) Limit access (2) Maintain placement areas and access roads (3) Exclude animals		3745-560-410 Operational Requirements (cont.) (J) Adequate equipment for operations (L)(1) Process wood and remove foreign material (2) Process wood at least annually (M)(1) Control runoff and runon, prevent ponding and erosion (2) Manage surface water (ORC 6111) (3) Divert surface water from materials placement area (4) Monitor surface water (if required) (N)(1) Minimize production of leachate (2) Eliminate ponding of leachate (3) Collect and contain leachate (4) Maintain leachate control structures				
Corrective A	ctions (if necessary):	Notes:					

		g of Operations Materials	Facility:				
Unauti	ioi izcu	Matchais		Year:	Page: of		
Date	Time	Description of Material	Hauler Name	Action Take	n by Owner/Operator		
Signa Person Com	ature of		Print Name of Person Completing Form				

Composting Facility - Log of Operations

Yard Waste Refusal Form

This form shall be completed by the owner/operator of the compost facility when a load of yard waste is refused in accordance with OAC 3745-560-04(A)(7). The transporter of the yard waste shall take this form to a licensed solid waste disposal facility. The solid waste disposal facility shall retain this form with its daily log of operations.

A. Facility Information									
Facility Name:	Registration #:								
Facility Address:	(street)	(city)	(state)	(zip)					
		Phone #							
B. Rejection of Incoming I	Load of Yard Waste								
Date Load Rejected:		Time Load Rejected:							
License Plate#:	На	nuler Name:							
Reason for Rejection:									
Additional Notes:									



Composting Facility Log of Operations Instructions

A log of operations must be completed for each license/registration year at a composting facility as required by Ohio Administrative Code Rule 3745-560-04. The forms described below must be completed and retained at the facility or at another location acceptable to the licensing/registration authority. Each form should be indexed for use by the facility operator.

Form 1 – Yearly Cover Sheet

Complete Form 1 at the beginning of each year. If a section does not apply, indicate so with the notation N/A. If any of the information contained on Form 1 changes during the license/registration year, attach an addendum to the form with the corrections and the date on which they occurred. Maintain Form 1 at the beginning of the complete Log of Operations.

Form 2 – Materials Acceptance and Distribution

Form 2 is the record of waste received for composting and compost that leaves the facility for distribution.

Date Load Received

Enter the date when the waste was recorded. For facilities that have a drop off area for the public, enter the date the site operator accounted for the waste.

Quantity of Waste

Enter the amount of weight by weight (tons) or volume (cubic yards) of each incoming load.

Type of Waste

Describe what type of waste received.

County of Generation

Enter the county and state (if not Ohio) where the load of waste was generated.

Compost Distributed

Enter the weight <u>or</u> volume in tons or cubic yards of compost product distributed (sold or given away) or removed from the facility for disposal.

OAC 3745-560 2/2016

Form 3 – Materials Management

This form is the log of all of the composting activities conducted at the facility. For this portion of the log you will focus on documenting management activities, such as the formation of new windrows/piles or loading of in-vessel system, and turning windrows/piles, taking temperatures, etc.

Date

Enter the date the new windrows/piles were formed or the in-vessel system was loaded and any activities that were done on an existing windrows/piles or in-vessel (taking temperatures, turning, sampling, other activities). The facility operator will also record the date when clean whole wood is processed.

Pile ID

The pile ID is used as a tracking system for cross contamination and/or to follow the activities and stages of the composting waste. Assign an alphabetical or numeric label to each windrow, pile or in-vessel. This label should remain consistent from day to day unless two or more piles are combined. When piles are combined, a new label should be assigned.

Temperature

Enter temperature in Fahrenheit, if taken.

Formed

Place an X in the box if the pile or windrow was formed.

Turned

Place an X in the box if the pile, windrow, or in-vessel was turned.

Loaded

Place an X in the box if material was loaded into an in-vessel system.

Sampled

Place an X in the box if the pile, windrow, or in-vessel was sampled.

Wood Processing

Place an X in the box if tree stumps, trunks, limbs, and/or clean untreated wood was shredded or chipped.

Description of Activities

Enter a brief description of any other activities concerning a particular pile (i.e. removal of material, combining of piles, receipt of testing results, etc.). Also use this space to include a brief description of the feed-stocks used in the piles.

Form 4 – Self-Inspection Checklist

The facility operator will complete a self-inspection checklist to monitor compliance at the site. Please mark the box in the appropriate column to denote compliance status. Marking the box in the NO column indicates that a violation has been noted. If a violation is noted, a description of the violation and steps taken to return to compliance should be provided in the Corrective Actions section.

Form 5 – Unauthorized Materials

Date

Enter the date the unauthorized material was discovered.

Time

Enter the time the unauthorized material was discovered.

Description of Material

Enter a brief description of the material discovered.

Hauler Name

Enter the name of the hauler (person or company) of the unauthorized waste load.

Actions Taken by Owner/Operator

Enter the actions taken by the owner/operator to remove unauthorized materials from the facility.

Form 6 - Yard Waste Load Refusal Form

This form shall be completed (both sections A and B) by the owner/operator of the compost facility when a load of yard waste is refused in accordance with OAC 3745-560-04(A)(7). The transporter of the yard waste shall take this form to a licensed solid waste disposal facility. The solid waste disposal facility shall retain this form with its daily log of operations.

OAC 3745-560 2/2016