

**ENVIRONMENTAL SITE CLOSURE SURVEY**

For use of this form, see ATP 3-34.5/MCRP 4-11B; the proponent agency is TRADOC.

**SURVEY TYPE DEFINITIONS**

<b>Initial Survey (I)</b>	Any survey conducted by the closing base camp or unit's environmental officer and/or the theater support group or major subordinate command environmental staff to determine actions needed for transfer or closures. This survey needs to be completed sufficiently in advance of transfer or closure to allow the identified environmental follow-up items to be completed prior to the actual closure or transfer of the base.
<b>Preliminary Survey (P)</b>	A survey conducted by the theater support group or major subordinate command environmental staff to identify all environmental closure actions that must be completed prior to the base camp or unit being granted final clearance. A preliminary survey is normally scheduled 30 days prior to site closure or transfer.
<b>Final Survey (F)</b>	Final clearance survey conducted by theater support group or major subordinate command environmental staff as part of the overall site clearance process.

**REFERENCES**

FM 21- 10, <i>Field Hygiene and Sanitation</i> . Environmental Final Governing Standards (as applicable). Applicable negotiated standards with transfer entity or receiving host nation.	Overseas Environmental Baseline Guidance Document. Annex L: Environmental to the governing operation plan (as applicable).
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**DISPOSITION**

*(Fill in the number of years and the number of days in the spaces provided.)*  
Completed surveys will be maintained at the theater support group or major subordinate command environmental staff for \_\_\_\_\_ years.  
Copies will be forwarded to the theater command environmental section no later than \_\_\_\_\_ days after site transfer or closure.

**1. SITE INFORMATION**

Click this button to add a continuation page if more space is needed for any item.

a. SITE NAME AND DESIGNATION	
b. SITE LOCATION	<i>(Full military grid reference system or latitude and longitude coordinates of site outline or boundary. Not the center of mass.)</i>
c. SITE USE	
d. PREVIOUS UNITS ASSIGNED TO THE BASE	
e. MAP SHEET, SERIES, EDITION, AND SCALE	
f. TYPE OF SURVEY	<i>(Select one.)</i>
g. CLEARING BASE CAMP AND UNIT	
h. BASE CAMP AND UNIT ENVIRONMENTAL OFFICER	<i>(Full name, rank, and duty position.)</i>
i. TELEPHONE NUMBER	
j. DATE-TIME GROUP OF SURVEY	
k. NAME, RANK, AND DUTY POSITION OF SURVEYORS	
l. UNIT AND ORGANIZATION OF SURVEYORS	
m. FINAL ENVIRONMENTAL CLEARANCE GRANTED	<input type="checkbox"/> YES <input type="checkbox"/> NO
n. DATE-TIME GROUP WHEN FINAL CLEARANCE WAS GRANTED	
o. SIGNATURE OF SURVEYOR GRANTING FINAL CLEARANCE	

**2. SURVEY ITEM CHECKLIST**

*(The checklist items for each level of the survey are indicated with an I for initial, P for preliminary, and F for final. Personnel conducting the survey should select the appropriate letter for the level of survey they are completing. Surveyors should be as descriptive as possible to ensure that the information is complete.)*

**a. UNIT OPERATIONS**

(1) List the name of the assigned unit or organization of the environmental officer.	(Select one.)
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(2) Has the unit or organization prepared environmental records and documentation, to include the environmental baseline survey, environmental conditions reports, turn-in documentation, and spill reports for archiving by the theater level command?	
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(3) Has the unit or organization worked with contracting officers to close out any environmental-related contracts or have plans in place to close out contracts?	
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(4) Has the unit or organization provided training materials and manuals for any environmental-related equipment that will be left for the receiving organization or host nation?	
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(5) Does the unit know the environmental points of contact at the theater support group or major subordinate command level?	
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**b. MEDICAL WASTE**

(1) Does the unit or activity operate a medical treatment facility that generates or requires storage of medical waste? (If no, a medical waste survey is not required.)	
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(2) Do medical personnel know the procedures for turn-in of medical waste and major subordinate command or theater support group turn-in points of contact ?	
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(3) Has medical waste been red-bagged and prepared for turn-in?	
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(4) Has all medical waste been removed from the site?	
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(5) What are the grid coordinates for the field aid stations or combat support hospital?	
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(6) Provide and attach post-clearance digital photographs of the site.	
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**c. HAZARDOUS WASTE**

(1) Does the unit or activity conduct any activity that generates or requires storage of hazardous waste? (If no, a hazardous waste survey is not required.)	
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(2) Does the unit or activity have any hazardous waste tanks or drums? Are they in secondary containment?	
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(3) Does the unit or activity have a working spill response plan?	
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(4) Are United Nations approved containers being used for hazardous waste storage?	
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(5) Are enough United Nations approved containers on hand to meet actual and anticipated need? If no, has the unit ordered sufficient containers?	
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(6) Are containers being properly labeled and prepared for turn-in?	
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(7) Are placards on hand for marking vehicles during transportation of waste?	
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(8) Has used (contaminated) spill response equipment been collected and containerized?	
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(9) Does the unit know where bulk turn-in points are for used antifreeze and petroleum, oils, and lubricants?	
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(10) Has a turn-in date and time been established? If yes, note the date and time.	Date: _____ Time: _____
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(11) Have all spills in the hazardous waste storage area been cleaned up?	
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(12) Are the hazardous waste accumulation point locations clean and clear of all materials?	
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(13) Is the hazardous waste storage area location clean and clear of all materials?	
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(14) What are the grid coordinates for the hazardous waste accumulation points ?	
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(15) What are the grid coordinates for the hazardous waste storage area?	(Select one.)
(16) Provide and attach post-clearance digital photographs of each hazardous waste accumulation point and hazardous waste storage area site.	
<b>d. HAZARDOUS MATERIALS</b>	
(1) Does the unit or activity conduct any activity that requires storage or handling of hazardous materials? (If no, a hazardous materials survey is not required.)	
(2) Does the unit or activity have hazardous material tanks or drums? Are they in secondary containment?	
(3) Do personnel know the procedures for storage, handling, and turn-in of hazardous materials?	
(4) Are serviceable and originally packaged hazardous materials being prepared for turn-in to the supply system?	
(5) Are hazardous materials being identified for turn-in as hazardous waste? (For example, expired shelf-life items or materials that are opened and contaminated.)	
(6) What are the grid coordinates for the hazardous materials storage areas?	
(7) Provide and attach post-clearance digital photographs of each hazardous materials storage area.	
<b>e. BURN PITS</b>	
(1) Did the unit or activity operate any burn pits on-site ? (If no, a burn pit survey is not required.)	
(2) Has all metal been removed from the burn pits and segregated for recycling?	
(3) Does the unit have a plan for closing the burn pits?	
(4) Have burn pits been covered with a 6-inch layer of soil?	
(5) Have burn pits been marked with a permanent sign? (Placard must say, "Burn Pit" and list the date closed and unit that closed it.)	
(6) What are the grid coordinates (taken from map center of mass) for all burn pits?	
(7) Provide and attach post-clearance digital photographs of each burn pit.	
<b>f. INCINERATORS</b>	
(1) Did the unit or activity operate any incinerators on-site? (If no, an incinerator survey is not required.)	
(2) Has all metal been removed from the incinerators and segregated for recycling?	
(3) Has all ash been removed, tested, and disposed of according to the standing operating procedures or theater-level regulations?	
(4) Does the unit have a plan for transfer, closing, and disposition of the incinerators?	
(5) Have incinerator sites been marked with a permanent sign? (Placard must say, "Incinerator Site" and list the date closed and unit that closed it.)	
(6) What are the grid coordinates (taken from map center of mass) for all incinerators?	
(7) Provide and attach post - clearance digital photographs of each incinerator.	
<b>g. SOLID WASTE LANDFILLS</b>	
(1) Does the unit or activity operate a solid waste landfill on-site? (If no, a solid waste landfill survey is not required.)	
(2) Has any blowing debris or litter been removed from the site?	
(3) Does the unit have a plan for closing the landfill?	
(4) Have solid waste land fills been covered or capped according to theater-level guidance?	

**Classification:** \_\_\_\_\_

(5) Have landfills been marked with a permanent sign? (Placard must say, "Landfill" and list the date closed and unit that closed it.)	(Select one.)
(6) What are the grid coordinates for the solid waste landfill?	
(7) Provide and attach post-clearance digital photographs of the landfill.	
<b>h. LATRINES</b>	
(1) Does the unit or activity operate latrines on-site? (If no, a latrine survey is not required.)	
(2) Does the unit have a plan for closing and removal of urine tubes and burn out latrines?	
(3) Does the unit have a plan for cleaning human waste that has been spilled on the ground?	
(4) Does the unit have a plan for removing trash from the latrine facility?	
(5) Has all trash and waste been removed from latrine facilities?	
(6) Have the latrines been marked with a permanent sign? (Placard must say, "Latrine" and list the date closed and unit that closed it.)	
(7) What are the grid coordinates for the latrines and urine tubes?	
(8) Provide and attach post-clearance digital photographs of the latrine sites.	
<b>i. MAINTENANCE SITES</b>	
(1) Does the unit or activity have maintenance activities on-site? (If no, a maintenance site survey is not required.)	
(2) Does the unit or activity have maintenance tanks or drums? Do they have secondary containment?	
(3) Has all hazardous waste been turned in?	
(4) Have all accumulation points been cleaned and closed?	
(5) Has all contaminated soil been collected for disposal?	
(6) What are the grid coordinates for the maintenance sites?	
(7) Provide and attach post-clearance digital photographs of the maintenance sites.	
<b>j. GENERATORS</b>	
(1) Does the unit/activity operate generators on-site? (If no, a generator survey is not required.)	
(2) Does the generator site tanks or drums have secondary containment?	
(3) Has contaminated soil (fuel spills, oil spills, and so forth) around the generators been collected for disposal?	
(4) What are the grid coordinates for all generator sites?	
(5) Provide and attach post-clearance digital photographs of the locations of all generators 10 kilowatts and up.	
<b>k. FUEL STORAGE AREAS</b>	
(1) Does the unit or activity conduct bulk refueling or transfer operations (bladder or tanker) on-site? (If no, a fuel storage survey is not required.)	
(2) Do the fuel storage area tanks or drums have secondary containment?	
(3) Has contaminated soil around fuel tankers or bladders been collected and properly disposed of?	
(4) What are the grid coordinates for all bulk fuel storage sites?	
(5) Provide and attach post-clearance digital photographs of the locations of all bulk fuel storage sites.	

<b>I. RECYCLING AND REUSE AREAS</b> <i>(Examples: metal, plastic, glass, paper, cardboard, tires, wood, used oil, and so forth.)</i>	
(1) Does the unit or activity operate a recycling or reuse area on-site? (If no, a recycling or reuse survey is not required.)	(Select one.)
(2) List all the materials that are recycled or reused at the site.	
(3) Have all recycled or reused materials been policed up from the site?	
(4) Does the unit or activity have a plan for closing the recycling or reuse area?	
(5) What are the grid coordinates for the recycling or reuse area?	
(6) Provide and attach post-clearance digital photographs of the recycling or reuse area .	
<b>m. WATER, WASTEWATER, AND LAUNDRIES</b>	
(1) Does the unit or activity operate a water generation area on-site? If yes, describe.	
(2) Does the unit or activity operate a wastewater system on-site? If yes, describe.	
(3) Does the unit or activity operate any wash racks and/or oil water separators? If yes, describe .	
(4) Does the unit or activity operate a laundry system on-site? If yes, describe.	
(5) Does the unit or activity have a plan for closing the water generation area ?	
(6) Does the unit or activity have a plan for closing the wastewater system?	
(7) Does the unit or activity have a plan for closing the wash racks and/or oil water separators?	
(8) Does the unit or activity have a plan for closing the laundry system?	
(9) What are the grid coordinates for the water generation area?	
(10) What are the grid coordinates for the wastewater system?	
(11) What are the grid coordinates for wash racks and/or water separators?	
(12) What are the grid coordinates for the laundry system?	
(13) Provide and attach post-clearance digital photographs of the water, wastewater, laundry areas, and wash racks and/or oil water separators.	
<b>n. PESTICIDE MIXING AND STORAGE</b>	
(1) Does the unit or activity operate any pesticide mixing or storage areas on-site? (If no, a pesticide survey is not required.)	
(2) Do personnel know the procedures for storage, handling, and turn-in of pesticides?	
(3) Are serviceable and originally packaged pesticide containers being prepared for turn-in to the supply system?	
(4) Are pesticides being identified as being waste prepared for turn-in? (For example, expired shelf-life items or materials that are opened and contaminated.)	
(5) Does the unit or activity have a plan for closing the pesticide mixing or storage area?	
(6) What are the grid coordinates for the pesticide mixing or storage areas?	
(7) Provide and attach post-clearance digital photographs of the pesticide mixing or storage areas.	
<b>o. DINING FACILITY FOOD WASTE MANAGEMENT</b>	
(1) Does the unit or activity operate any food waste management areas on-site? (If no, a food waste management area survey is not required.)	
(2) Does the unit or activity operate any grease traps on-site?	

Classification: \_\_\_\_\_

(3) Does the unit or activity operate any soakage pits on-site?	(Select one.)
(4) Do personnel know the procedures for separation, storage, handling, and disposal of food wastes (to include grease)?	
(5) Does the unit or activity have a plan for closing the food waste management areas?	
(6) Does the unit or activity have a plan for closing the grease traps?	
(7) Does the unit or activity have a plan for closing the soakage pits?	
(8) What are the grid coordinates for the food waste management areas?	
(9) What are the grid coordinates for the grease traps?	
(10) What are the grid coordinates for the soakage pits?	
(11) Provide and attach post-clearance digital photographs of the food waste management mixing or storage areas.	
(12) Provide and attach post-clearance digital photographs of the grease traps.	
(13) Provide and attach post-clearance digital photographs of the soakage pits.	

**p. GENERAL**

(1) Has the unit or activity scheduled its preliminary and final inspections?	
(2) Does the unit or activity need help to remediate any environmental spills? If so, describe.	
(3) Does the unit or activity need help coordinating hazardous waste turn-in?	
(4) Does the unit or activity need help in solving any environmental problems? If so, describe.	
(5) Are there any hazardous materials or waste on-site that are not covered by the survey categories above? If yes, describe type, location, and disposition.	

**3. COMMENTS AND RECOMMENDATIONS**

Blank area for comments and recommendations.

**4. LIST OF ATTACHMENTS** (Such as maps, pictures, reports, or diagrams.)

Blank area for list of attachments.

**5. FINAL SURVEY RESULTS** (Check one)

Base Camp or Unit is:  CLEARED  NOT CLEARED