

ALTERNATIVE LANDFILL SITE ASSESSMENT

Site: _____ **EHO:** _____ **Date:** _____

<p>Site Selection Swamps, quarries, pits, old tip, old underground tanks, cliffs, steep inclines, potential weapons</p>	
<p>Landfill Design Potable/non potable/ adequate quantity/pressure</p>	
<p>Landfill Operation Sewerage/Septic Tank/Other</p>	
<p>Collection/Storage/Disposal of Waste Number of waste containers, types and frequency of collection, emptying arrangements</p>	
<p>Vehicle Access /Egress Routes Access of essential service vehicles, orderly traffic flow, consideration to road surface (2wd/4wd)</p>	
<p>Vehicle Parking Designated parking for essential service vehicles, access to kitchen for food transport vehicles</p>	
<p>Pedestrian Access Orderly flow/crowd management, access to toilet and kitchen facilities, provision for persons with disabilities</p>	
<p>Site Security Fencing/gates/locks, security personal where required</p>	
<p>Lighting/Power Back-up generators</p>	

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