



Kansas Department of Health and Environment
 Environmental Use Control Program
 Bureau of Environmental Remediation
 1000 SW Jackson St., Suite 410
 Topeka, KS 66612-1367
 Telephone: (785) 296-1660

ENVIRONMENTAL USE CONTROL OWNER INSPECTION FORM

SECTION I: PROPERTY INFORMATION ON FILE

PROJECT NAME:		PROJECT CODE:
EUC NUMBER: -EUC-	PROPERTY OWNER(S) ON FILE:	OWNER PHONE NUMBER:
PROJECT ADDRESS:		
CITY:	COUNTY:	SEC, TWP, RANGE OR LAT/LONG:
EUC CATEGORY DESIGNATION:	INSPECTION FREQUENCY:	PROPERTY ZONING ON FILE:
PROGRAM : (Circle all that apply) Voluntary Cleanup State Cooperative EUC Brownfields State Water Plan Underground Storage Tanks Other: (Please specify)		

PROTECTIVE STRUCTURE ON-PROPERTY? Yes or No

SECTION II: VERIFICATION OF RESTRICTIONS

ANSWER THE QUESTIONS ACCORDINGLY BY MARKING "YES", "NO", OR "N/A". <small>IF THE PROPERTY IS OUT OF COMPLIANCE, PLEASE EXPLAIN IN THE REMARKS SECTION PROVIDED BELOW. ATTACH ADDITIONAL SHEETS IF NEEDED.</small> <small>"N/A" INDICATES THIS RESTRICTION DOES NOT APPLY TO THE PROPERTY.</small>	1. Has the protective structure(s) retained its functional integrity? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> 2. Is the protective structure(s) free of erosion, cracks or other evidence of degradation? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> 3. Have water wells been drilled, constructed, or used on the property for unauthorized purposes? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	
4. Has unauthorized construction or excavation occurred? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>		
5. Is vegetation present and kept in acceptable condition? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>		
6. Are all permanent survey markers, benchmarks, and monitoring stations in place as designed? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>		
7. Are local ordinances included in the EUCA being enforced? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>		
8. Are site security measures in place and in working condition? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>		
9. Site security measures include: (mark all that apply) Signs <input type="checkbox"/> Fences <input type="checkbox"/> Gates <input type="checkbox"/> Security Guard <input type="checkbox"/>		
10. Is the property used for non-residential purposes only? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>		
11. Is the property being used for unauthorized agricultural activities as defined in the EUCA? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>		
12. Land use type: (mark all that apply) Residential <input type="checkbox"/> Recreational <input type="checkbox"/> Agricultural <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Vacant <input type="checkbox"/>		
13. Surrounding land use type: (mark all that apply) Residential <input type="checkbox"/> Recreational <input type="checkbox"/> Agricultural <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Vacant <input type="checkbox"/>		
14. Has property zoning changed since the last inspection? If yes, the new zoning is: Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>		
15. Does current property zoning exclude residential use? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>		
16. Is the EUCA recorded at the county register of deeds? (For first inspection, provide a copy of the recorded EUCA) Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>		
17. Does the name of the property owner on file at KDHE match the owner listed on the deed? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>		
18. Has property ownership changed? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, the new property owner is:		
19. Is the property being leased? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, the lessee is:		

REMARKS (DESCRIBE ANY ADDITIONAL RESTRICTIONS FOR THE PROPERTY, IF ANY, IN THE REMARKS AREA.)

SECTION III: CURRENT PROPERTY DESCRIPTION

DESCRIBE THE CURRENT CONDITION AND USE(S) OF THE PROPERTY.

DESCRIBE ANY IMPROVEMENTS, INCLUDING NEW STRUCTURES, MADE TO THE PROPERTY SINCE THE PREVIOUS INSPECTION.

DESCRIBE ANY NEED FOR REPAIRS TO THE PROTECTIVE STRUCTURE(S), SECURITY MEASURES, MONITORING STATIONS, PERMANENT BENCHMARKS, OR OTHER FEATURES. INCLUDE OBSERVATION OF EROSION, CRACKING, WEED CONTROL, SETTLEMENT, SUBSIDENCE, EXCESSIVE BURROWING, ETC.

PLEASE TAKE PICTURES OF THE PROPERTY AND INCLUDE IN INSPECTION REPORT.

SECTION IV: INSPECTOR INFORMATION

INSPECTOR NAME:

INSPECTION DATE:

INSPECTOR SIGNATURE: