

India Vocational Training Improvement Project
FORM D: CHECKLIST FOR COMPLIANCE OF OPERATION & MAINTENANCE ACTIVITIES AT THE ITI

NOTE: This form is required to be used by the State Environment Officer for checking compliance of the operation & maintenance activities.

ADDRESS OF ITI: _____ DATE OF COMPLIANCE CHECK: _____

NAME OF PRINCIPAL: _____ NAME OF MAINTENANCE INCHARGE: _____

1. ACCESSIBILITY ISSUES

a. How far is the nearest railway station/ bus station from the ITI campus? _____

b. What are the available transportation facilities (by institute and other means) & its condition, frequency _____

2. DRINKING WATER

a. What is the source of drinking water? _____
 Piped water supply, tube well, open well, surface water (river, pond), spring, harvested rainwater?

b. In case of surface water, check if there is any pollution sources near the water body. **YES** **NO**

c. In case of ground water, check the distance of point of withdrawal from soak pits, waste disposal site, polluted river/ stream (should not be less than 200m) _____

d. Please conduct chemical analysis for checking quality of drinking water and attach report with the form. **Attached**

e. Is the area around the drinking water faucet and the storage tank, water cooler, water filters cleaned regularly? Please mention how often **YES** **NO**

3. WASTE RELATED ISSUES

a. Is waste water being recycled and used for landscaping? **YES** **NO**

b. Is the solid waste being collected regularly from classrooms, laboratories, kitchen areas, offices etc. and disposed off properly? (Do not burn or dispose within campus) **YES** **NO**

c. Is the hazardous waste being collected separately and disposed off properly? (Do not dispose in open area/ within campus) **YES** **NO**

d. Whether proper pest control measures are used regularly? Please mention frequency _____ **YES** **NO**

e. Whether organic/ environment friendly measures/ chemicals are used? **YES** **NO**

f. Whether safety equipment like gloves, masks and protective clothing etc are available and enough in number for all students? **YES** **NO**

g. Please check and report condition and usability of the safety equipment. _____

h. Is there designated waste collection staff in the campus? Please provide numbers _____ **YES** **NO**

4. TOILETS

a. Are all toilets being cleaned regularly? Please mention frequency _____ **YES** **NO**

b. Are all toilets open for students to use? Whether any toilets are unusable or locked? Why? **YES** **NO**

c. Is there designated cleaning staff within the campus? Please mention total number _____ **YES** **NO**

5. FIRE SAFETY MEASURES

a. Please check if fire extinguishers, fire buckets, etc are in working condition? **YES** **NO**

b. Whether regular fire drills are conducted? How often? _____ **YES** **NO**

c. Whether any fire accident recently happened in the campus? Please provide details. **YES** **NO**

d. Please check whether the first aid kits in laboratories are in working condition? **YES** **NO**

6. MAINTENANCE RELATED ISSUES

a. Please check if classes/ lab work is being disturbed due to ongoing maintenance work? **YES** **NO**

b. Whether the paints, varnishes, pipes and other material being used for maintenance work is being stored properly? **YES** **NO**

THIS IS TO CERTIFY THAT:

(Please tick)

- The site analysis of the operation and maintenance activities at the ITI, _____ campus has been conducted during ongoing repairs and maintenance on a working day.
- Photographs provided with the above form have been taken during the site visit.
- The estimate for the maintenance and repairs work includes costs of the environmental mitigative measures mentioned in the form.
- Wherever conformance is not possible due to any reason, it is clearly mentioned in the proposal with valid reasons given.

ATTACHMENTS REQUIRED WITH THIS FORM:

(Please tick)

- Chemical analysis report of drinking water
- Description of activities ongoing in the classrooms and laboratories.
- Description of materials being used in labs and their storage facilities
- Description of materials being used in the maintenance and repairs work and their storage facilities
- Photographic evidences/ descriptions of the repair and maintenance work

Verified by me: _____ Signature
_____ Date
_____ Designation

_____ Name of site analyser