# LANDFILL INFRASTRUCTURE ASSESSMENT FORM

## A. General Information

<table>
<thead>
<tr>
<th>Location: Camp __________________ Sector ____________ Block ___________ Community ______________</th>
</tr>
</thead>
<tbody>
<tr>
<td>GPS Long: _____°_______ʹ_______ʺ    GPS Lat: _____°_______ʹ_______ʺ    Number of toilet cubicles: ______</td>
</tr>
</tbody>
</table>
| Contact person: ___________________ Position: ____________________ Date of visit: ____/________/_____

## B. Identification of risk factors

1. Is there evidence of uncontrolled dumping of wastes outside of the landfill area?  
2. Are there any natural water bodies or drinking water supplies within 50m of the landfill?  
3. Are there any residential houses or shelters within 50m of the landfill?  
4. Is there a lack of fencing around the landfill area?  
5. Is there a lack of a surface water diversion canal around the landfill area?  
6. Is the landfill missing an impermeable rock or clay base layer preventing leaching of wastes into groundwater supplies?  
7. Is the landfill cell visibly cracked / broken / leaking / flooded in any way?  
8. Is there a lack of daily 20cm landfill soil cover to reduce disease vectors?  
9. Is there any evidence of fly infestation at the landfill site? (presence of one or more flies)?  
10. Are hazardous wastes allowed to enter the landfill (e.g. batteries, solvents, paints, varnishes, broken electrical equipment, medical wastes)?  
11. Is there evidence of any open burning of wastes in the displaced setting?  
12. Are wastes handled or transferred manually in any way during collection and disposal?  
13. Do waste collection staff lack basic personal protective equipment (gloves, boots, overalls)?  
14. Is the landfill full? (less than 0.5m remaining space in the pit)?  
15. Is there a lack of a functional hand-washing station and shower at the landfill site? (functional = soap + water + drainage)

<table>
<thead>
<tr>
<th>Risk Score</th>
<th>X</th>
<th>Y</th>
</tr>
</thead>
<tbody>
<tr>
<td>10-15</td>
<td></td>
<td>Y</td>
</tr>
<tr>
<td>6-9</td>
<td></td>
<td>Y</td>
</tr>
<tr>
<td>3-5</td>
<td></td>
<td>Y</td>
</tr>
<tr>
<td>0-2</td>
<td></td>
<td>N</td>
</tr>
</tbody>
</table>

**Total score of risks / 15**

*Signature of Inspector ………………………….….. Community representative ……………………………*

**Note:** Risk score: 10-15 = very high, 6-9 = high, 3-5 = intermediate, 0-2 = low