HAZARDOUS WASTE SATELLITE ACCUMULATION AREA INSPECTION CHECKLIST

For use of this form, see the Hazardous Waste Management Plan; the proponent is DPW-ENRD

√ -- If satisfactory U – If unsatisfactory					
LOCATION:	MONTH:				
INSPECTOR:	WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5
PHONE NO:	Date:	Date:	Date:	Date:	Date:
INSPECTOR (Alt):	Initials:	Initials:	Initials:	Initials:	Initials:
A. CONTAINER MANAGEMENT					
1) Containers are in good condition (no damage or leaks)					
2) Wastes are in compatible containers					
3) Containers are closed					
4) Incompatible wastes are segregated					
5) All HW containers are properly marked “Hazardous Waste” with contents, indication of hazards of contents, EPA ID, and waste code(s)					
6) HW is collected at or near the point of generation					
7) HW is under the control of the generator					
B. ACCUMULATION TIME					
1) 55-gallons or less of each HW stream is stored in the designated area (or 1-quart of “P” listed waste)					
2) Full containers dated less than three days old					
C. PREPAREDNESS & PREVENTION					
1) Communication equipment is available and working					
2) Fire control equipment is available					
3) Spill control equipment is available					
4) Decontamination equipment (e.g. shower, eye wash) is available					
5) The equipment listed above is maintained					
6) Aisles are clear for emergency evacuation					
7) AVCOE Form 2719 cover page is prominently posted					
D. PERSONNEL TRAINING					
1) Facility personnel are trained in HW handling and emergency response					
2) Employee training records are maintained, readily accessible, and documented on AVCOE Form 2735					
NOTES (unsatisfactory observations, explanations and corrections to be noted with date and corrective actions taken.)					