



Weekly Hazardous Waste Container Inspection Checklist

Inspection Information

Container being inspected (number/contents/location):

Date and time:

Date last inspected:

Inspection done by:

| Hazardous Waste Containers | Y / N | Corrective Action | Employee Responsible |
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| Are containers properly and clearly labeled and dated? | | | |
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| Are containers tightly closed? | | | |
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| Are wastes stored in compatible containers? | | | |
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| Is there evidence of container deterioration? | | | |
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| Are spaces between containers clear of debris? | | | |
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| Are incompatible wastes properly segregated? | | | |
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| Are there any signs of leaks or spills? | | | |
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| Is spill response equipment adequate and accessible? | | | |
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| Does each container have adequate secondary containment for its volume? | | | |
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| If required, is an eyewash station accessible and ready for use? | | | |
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| Are "Hazardous Waste" signs in place and clearly visible? | | | |
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| Are "No Smoking" signs and a fire extinguisher in place and clearly visible? | | | |
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| Are all waste containers stored inside the waste storage area? | | | |
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| Is the total volume of wastes stored below the facility's generator status? | | | |
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| Is communication or warning device information posted and properly working? | | | |
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| Are flammable wastes properly stored and grounded/bonded? | | | |
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