HAZARDOUS WASTE INSPECTION CHECKLIST

Company Name: _____ Location: _____

Inspection Item	Week 1	Week 2	Week 3	Week 4	Week 5
• Containers marked “Hazardous Waste”	☐	☐	☐	☐	☐
• Accumulation start date recorded	☐	☐	☐	☐	☐
• Containers free from leakage and spillage	☐	☐	☐	☐	☐
• Containers free from rust, bulges, and damage	☐	☐	☐	☐	☐
• Containers are closed when not adding waste	☐	☐	☐	☐	☐
• Containers compatible with waste	☐	☐	☐	☐	☐
• Incompatible wastes separated	☐	☐	☐	☐	☐
• Waste collection log completed for each container	☐	☐	☐	☐	☐
• All labels visible and legible	☐	☐	☐	☐	☐
• The total volume of waste is less than 55 gallons	☐	☐	☐	☐	☐
• Spill kit with appropriate materials on hand	☐	☐	☐	☐	☐
• Rules posted	☐	☐	☐	☐	☐
• Retained copies of signed manifests, land disposal restriction forms, and waste analyses for a minimum of 5 years	☐	☐	☐	☐	☐
• Number of containers in storage at the site	☐	☐	☐	☐	☐
Inspector’s Initials:	_____	_____	_____	_____	_____
Date of Inspection:	_____	_____	_____	_____	_____

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Workers’ Comp Insurance