

NOV 15 1994

INSPECTION LOG SHEET FOR:
Daily Inspection of CONTAINER STORAGE AREA
(A separate log must be completed for each storage area.)

DESCRIPTION OF AREA (e.g., metal shelter, northeast corner of warehouse, etc.) PAINT STORAGE SHELTER (Both Sides)

PERMITTED STORAGE VOLUME 1,280 GAL

INSPECTOR'S NAME/TITLE Jim Windham W H M

INSPECTOR'S SIGNATURE:				
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<u>Jim Windham</u>	<u>Jim Windham</u>	<u>Jim Windham</u>	<u>Jim Windham</u>	<u>Jim Windham</u>
<u>10, 10, 94</u>	<u>10, 11, 94</u>	<u>10, 12, 94</u>	<u>10, 13, 94</u>	<u>10, 14, 94</u>
<u>1:00 AM</u>	<u>4:00 PM</u>	<u>8:00 AM</u>	<u>9:00 AM</u>	<u>9:30 AM</u>
DATE: (M/D/Y)				
TIME				

CONTAINERS	MON.	TUES.	WED.	THURS.	FRI.
Total Volume* of <u>PAINT (5)</u> "waste":	<u>7-35</u>	<u>7-35</u>	<u>7-35</u>	<u>7-35</u>	<u>8-40</u>
Total Volume of <u>PAINT (16)</u> "waste":	<u>6-256</u>	<u>6-256</u>	<u>6-256</u>	<u>6-256</u>	<u>6-256</u>
Total Volume of <u>Sk-Pt (5)</u> "waste":	<u>15-75</u>	<u>15-75</u>	<u>15-75</u>	<u>15-75</u>	<u>15-75</u>
Total Volume of <u>Sk-Pt (16)</u> "waste":	<u>10-160</u>	<u>10-160</u>	<u>10-160</u>	<u>10-160</u>	<u>10-160</u>
Total Volume of <u>55-TRANS</u> :	<u>22-1210</u>	<u>23-1265</u>	<u>23-1265</u>	<u>29-1375</u>	<u>23-0</u>
TOTAL VOLUME (IN GALLONS):	<u>1236</u>	<u>1791</u>	<u>1791</u>	<u>1901</u>	<u>0</u>

If 'N', circle appropriate problem: Total volume exceeds the amount for which the facility is permitted, other: _____

Condition of Containers: (A) N (A) N (A) N (A) N (A) N
 If 'N', circle appropriate problem: missing or loose lids, missing, incorrect or incomplete labels, rust, leaks, distortion, other: _____

Stacking/Placement/Aisle Space: (A) N (A) N (A) N (A) N (A) N
 If 'N', circle appropriate problem: different from Part B Floor Plan, containers not on pallets, unstable stacks, broken or damaged pallets, other: _____

CONTAINMENT

Curbing, Floor and Sump(s): (A) N (A) N (A) N (A) N (A) N
 (Any material which spills, leaks or otherwise accumulates in the secondary containment must be completely removed within 24 hours of it being discovered.)
 If 'N', circle appropriate problem: ponding/wet spots, deterioration (cracks, gaps, etc.), displacement, leaks, inadequate sealant, other: _____

Loading/Unloading Area: (A) N (A) N (A) N (A) N (A) N
 If 'N', circle appropriate problem: cracks, deterioration, ponding/wet spots, other: _____

OBSERVATIONS, COMMENTS, DATE AND NATURE OF REPAIRS OF ANY ITEMS INDICATED AS "NOT ACCEPTABLE":

* When calculating total volumes, assume the containers are full.
 ** Enter a short description of the waste (e.g., M.S., I.C., paint, etc.)
 *** A = Acceptable N = Not Acceptable

DOCKET # 911-23

(IF AN ITEM IS NOT APPLICABLE, ENTER 'N/A' AFTER IT AND DRAW A LINE THROUGH THE 'ACCEPTABLE/NOT ACCEPTABLE' ROW)

INSPECTION LOG SHEET FOR:
Daily Inspection of CONTAINER STORAGE AREA
 (A separate log must be completed for each storage area.)

DESCRIPTION OF AREA (e.g., metal shelter, northeast corner of warehouse, etc.) Paint Storage Shelter (Both Sides)

PERMITTED STORAGE VOLUME 1,280 GAL

INSPECTOR'S NAME/TITLE T.M. Windham

INSPECTOR'S SIGNATURE:				
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<u>T.M. Windham</u>	<u>T.M. Windham</u>	<u>T.M. Windham</u>	<u>T.M. Windham</u>	<u>T.M. Windham</u>
<u>10, 17, 94</u>	<u>10, 18, 94</u>	<u>10, 19, 94</u>	<u>10, 20, 94</u>	<u>10, 21, 94</u>
DATE: (M/D/Y)				
<u>7:30 AM</u>	<u>3:50 PM</u>	<u>6:00 AM</u>	<u>8:50 AM</u>	<u>2:00 PM</u>
TIME				

CONTAINERS

	MON.	TUES.	WED.	THURS.	FRI.
Total Volume* of <u>PAINT (5)</u> ** waste:	<u>6-30</u>	<u>9-45</u>	<u>11-55</u>	<u>14-70</u>	<u>2-64</u>
Total Volume of <u>PAINT (16)</u> ** waste:	<u>9-144</u>	<u>13-208</u>	<u>17-272</u>	<u>20-320</u>	<u>0-0</u>
Total Volume of <u>Sh-Pt (5)</u> ** waste:	<u>42-210</u>	<u>42-210</u>	<u>39-195</u>	<u>39-195</u>	<u>29-348</u>
Total Volume of <u>Sh-Pt (16)</u> ** waste:	<u>7-112</u>	<u>7-112</u>	<u>7-112</u>	<u>7-112</u>	<u>8-128</u>
Total Volume of <u>5.5-TRANS</u> :	<u>0-0</u>	<u>3-165</u>	<u>5-275</u>	<u>5-275</u>	<u>0-0</u>
TOTAL VOLUME (IN GALLONS):	<u>496</u>	<u>740</u>	<u>728</u>	<u>3,452</u>	<u>540</u>

If 'N', circle appropriate problem: Total volume exceeds the amount for which the facility is permitted, other: _____

Condition of Containers: (A) N (A) N (A) N (A) N (A) N
 If 'N', circle appropriate problem: missing or loose lids, missing, incorrect or incomplete labels, rust, leaks, distortion, other: _____

Stacking/Placement/Aisle Space: (A) N (A) N (A) N (A) N (A) N
 If 'N', circle appropriate problem: different from Part B Floor Plan, containers not on pallets, unstable stacks, broken or damaged pallets, other: _____

CONTAINMENT

Curbing, Floor and Sump(s): (A) N (A) N (A) N (A) N (A) N
 (Any material which spills, leaks or otherwise accumulates in the secondary containment must be completely removed within 24 hours of it being discovered.)
 If 'N', circle appropriate problem: ponding/wet spots, deterioration (cracks, gaps, etc.), displacement, leaks, inadequate sealant, other: _____

Loading/Unloading Area: (A) N (A) N (A) N (A) N (A) N
 If 'N', circle appropriate problem: cracks, deterioration, ponding/wet spots, other: _____

OBSERVATIONS, COMMENTS, DATE AND NATURE OF REPAIRS OF ANY ITEMS INDICATED AS "NOT ACCEPTABLE": _____

* When calculating total volumes, assume the containers are full.
 ** Enter a short description of the waste (e.g., M.S., I.C., paint, etc.)
 *** A = Acceptable N = Not Acceptable
 (IF AN ITEM IS NOT APPLICABLE, ENTER 'N/A' AFTER IT AND DRAW A LINE THROUGH THE 'ACCEPTABLE/NOT ACCEPTABLE' ROW)

INSPECTION LOG SHEET FOR:
Daily Inspection of CONTAINER STORAGE AREA
 (A separate log must be completed for each storage area.)

DESCRIPTION OF AREA (e.g., metal shelter, northeast corner of warehouse, etc.) SOUTHWEST CORNER OF WAREHOUSE

PERMITTED STORAGE VOLUME TRANSFER ONLY (10-DAY)

INSPECTOR'S NAME/TITLE Tim Windham (W.H.M)

INSPECTOR'S SIGNATURE:				
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<i>Tim Windham</i>	<i>Tim Windham</i>	<i>Tim Windham</i>	<i>Tim Windham</i>	<i>Tim Windham</i>
<u>10, 10, 94</u>	<u>10, 11, 94</u>	<u>10, 12, 94</u>	<u>10, 13, 94</u>	<u>10, 14, 94</u>
DATE (M/D/Y)				
<u>10:00 AM</u>	<u>4:00 PM</u>	<u>8:00 AM</u>	<u>10:00 AM</u>	<u>9:30 AM</u>
TIME				

CONTAINERS	MON.	TUES.	WED.	THURS	FRI.
Total Volume* of <u>55-DM</u> ** waste:	<u>1-55</u>	<u>1-55</u>	<u>1-55</u>	<u>1-55</u>	<u>33-18</u>
Total Volume of <u>55-DF</u> ** waste:	<u>1-55</u>	<u>1-55</u>	<u>1-55</u>	<u>1-55</u>	<u>1-55</u>
Total Volume of <u>30-DM</u> ** waste:	<u>2-60</u>	<u>2-60</u>	<u>2-60</u>	<u>2-60</u>	<u>3-90</u>
Total Volume of _____ ** waste:					
Total Volume of _____ ** waste:					
TOTAL VOLUME (IN GALLONS):	<u>170</u>	<u>170</u>	<u>170</u>	<u>170</u>	<u>1960</u>

Condition of Containers: (A) N (A) N (A) N (A) N (A) N
 If 'N', circle appropriate problem: missing or loose lids, missing, incorrect or incomplete labels, rust, leaks, distortion, other: _____

Stacking/Placement/Aisle Space: (A) N (A) N (A) N (A) N (A) N
 If 'N', circle appropriate problem: different from Part B Floor Plan, containers not on pallets, unstable stacks, broken or damaged pallets, other: _____

CONTAINMENT

Curbing, Floor and Sump(s): (A) N (A) N (A) N (A) N (A) N
 (Any material which spills, leaks or otherwise accumulates in the secondary containment must be completely removed within 24 hours of it being discovered.)
 If 'N', circle appropriate problem: ponding/wet spots, deterioration (cracks, gaps, etc.), displacement, leaks, inadequate sealant, other: _____

Loading/Unloading Area: (A) N (A) N (A) N (A) N (A) N
 If 'N', circle appropriate problem: cracks, deterioration, ponding/wet spots, other: _____

OBSERVATIONS, COMMENTS, DATE AND NATURE OF REPAIRS OF ANY ITEMS INDICATED AS "NOT ACCEPTABLE": _____

* When calculating total volumes, assume the containers are full.
 ** Enter a short description of the waste (e.g., M.S., I.C., paint, etc.)
 A = Acceptable N = Not Acceptable
 (If an item is not applicable, enter 'N/A' after it and draw a line through the 'ACCEPTABLE/NOT ACCEPTABLE' row)

INSPECTION LOG SHEET FOR:
 Daily Inspection of **CONTAINER STORAGE AREA**
 (A separate log must be completed for each storage area.)

DESCRIPTION OF AREA (e.g., metal shelter, northeast corner of warehouse, etc.) PAINT STORAGE SHELTER (Both Sides)

PERMITTED STORAGE VOLUME 1,280 GAL

INSPECTOR'S NAME/TITLE Key STEWART-BM / Tim Windham - warehouseman

INSPECTOR'S SIGNATURE:				
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<u>DFP</u>	<u>[Signature]</u>	<u>[Signature]</u>	<u>[Signature]</u>	<u>[Signature]</u>
<u>5,30,94</u>	<u>5,31,94</u>	<u>6,01,94</u>	<u>6,02,94</u>	<u>6,03,94</u>
DATE: (M/D/Y)				
<u>[Signature]</u>	<u>6:00am</u>	<u>10:30am</u>	<u>8:15am</u>	<u>11:00am</u>
TIME				

CONTAINERS	MON.	TUES.	WED.	THURS.	FRI.
Total Volume* of <u>PAINT (5)</u> ** waste:	<u>[Signature]</u>	<u>1-5</u>	<u>1-5</u>	<u>3-15</u>	<u>3-15</u>
Total Volume of <u>PAINT (16)</u> ** waste:	<u>[Signature]</u>	<u>9-144</u>	<u>10-460</u>	<u>7-112</u>	<u>10-160</u>
Total Volume of <u>SL-PT (5)</u> ** waste:	<u>[Signature]</u>	<u>42-210</u>	<u>39-195</u>	<u>39-195</u>	<u>37-125</u>
Total Volume of <u>SL-PT (16)</u> ** waste:	<u>[Signature]</u>	<u>14-224</u>	<u>14-224</u>	<u>14-224</u>	<u>14-224</u>
Total Volume of <u>55-TRANS</u> :	<u>[Signature]</u>	<u>12-660</u>	<u>26-1430</u>	<u>0-0</u>	<u>9-495</u>
TOTAL VOLUME (IN GALLONS):	<u>[Signature]</u>	<u>1,243</u>	<u>1914</u>	<u>546</u>	<u>1079</u>

A**N (A) N (A) N (A) N (A) N

If 'N', circle appropriate problem: Total volume exceeds the amount for which the facility is permitted, other: _____

Condition of Containers: A N (A) N (A) N (A) N (A) N

If 'N', circle appropriate problem: missing or loose lids, missing, incorrect or incomplete labels, rust, leaks, distortion, other: _____

Stacking/Placement/Aisle Space: A N (A) N (A) N (A) N (A) N

If 'N', circle appropriate problem: different from Part B Floor Plan, containers not on pallets, unstable stacks, broken or damaged pallets, other: _____

CONTAINMENT
 Curbing, Floor and Sump(s): A N (A) N (A) N (A) N (A) N

(Any material which spills, leaks or otherwise accumulates in the secondary containment must be completely removed within 24 hours of it being discovered.)

If 'N', circle appropriate problem: ponding/wet spots, deterioration (cracks, gaps, etc.), displacement, leaks, inadequate sealant, other: _____

Loading/Unloading Area: A N (A) N (A) N (A) N (A) N

If 'N', circle appropriate problem: cracks, deterioration, ponding/wet spots, other: _____

OBSERVATIONS, COMMENTS, DATE AND NATURE OF REPAIRS OF ANY ITEMS INDICATED AS "NOT ACCEPTABLE": _____

* When calculating total volumes, assume the containers are full.
 ** Enter a short description of the waste (e.g., M.S., I.C., paint, etc.)
 *** A = Acceptable N = Not Acceptable

INSPECTION LOG SHEET FOR:
Daily Inspection of CONTAINER STORAGE AREA
 (A separate log must be completed for each storage area.)

DESCRIPTION OF AREA (e.g., metal shelter, northeast corner of warehouse, etc.) Northwest Corner of Warehouse

PERMITTED STORAGE VOLUME 2168 gal

INSPECTOR'S NAME/TITLE Jim Windham (W.H.M.)

INSPECTOR'S SIGNATURE:				
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<u>Windham</u>	<u>Windham</u>	<u>Windham</u>	<u>Windham</u>	<u>Windham</u>
<u>10, 17, 94</u>	<u>10, 18, 94</u>	<u>10, 19, 94</u>	<u>10, 20, 94</u>	<u>10, 21, 94</u>
<u>9:30 AM</u>	<u>3:50 PM</u>	<u>6:00 AM</u>	<u>8:50 AM</u>	<u>8:00 AM</u>

CONTAINERS	MON.	TUES.	WED.	THURS.	FRI.
Total Volume* of <u>HC</u> ** waste:	<u>8-128</u>	<u>12-192</u>	<u>16-256</u>	<u>22-352</u>	<u>2-32</u>
Total Volume of <u>Dry Clean Dry</u> ** waste:	<u>3-48</u>	<u>3-48</u>	<u>4-64</u>	<u>4-64</u>	<u>2-32</u>
Total Volume of <u>Dry Clean PF</u> ** waste:	<u>1-16</u>	<u>1-16</u>	<u>3-48</u>	<u>3-48</u>	<u>2-32</u>
Total Volume of <u>Sludge</u> ** waste:	<u>9-144</u>	<u>11-176</u>	<u>11-176</u>	<u>12-192</u>	<u>16-256</u>
Total Volume of <u>Oil Filters</u> ** waste:	<u>2-60</u>	<u>2-60</u>	<u>13-390</u>	<u>13-390</u>	<u>5-150</u>
TOTAL VOLUME (IN GALLONS):	<u>396</u>	<u>492</u>	<u>934</u>	<u>1046</u>	<u>470</u>

(A) N (A) N (A) N (A) N (A) N

If 'N', circle appropriate problem: Total volume exceeds the amount for which the facility is permitted, other: _____

Condition of Containers: (A) N (A) N (A) N (A) N (A) N

If 'N', circle appropriate problem: missing or loose lids, missing, incorrect or incomplete labels, rust, leaks, distortion, other: _____

Stacking/Placement/Aisle Space: (A) N (A) N (A) N (A) N (A) N

If 'N', circle appropriate problem: different from Part B Floor Plan, containers not on pallets, unstable stacks, broken or damaged pallets, other: _____

CONTAINMENT

Curbing, Floor and Sump(s): (A) N (A) N (A) N (A) N (A) N

(Any material which spills, leaks or otherwise accumulates in the secondary containment must be completely removed within 24 hours of it being discovered.)

If 'N', circle appropriate problem: ponding/wet spots, deterioration (cracks, gaps, etc.), displacement, leaks, inadequate sealant, other: _____

Loading/Unloading Area: (A) N (A) N (A) N (A) N (A) N

If 'N', circle appropriate problem: cracks, deterioration, ponding/wet spots, other: _____

OBSERVATIONS, COMMENTS, DATE AND NATURE OF REPAIRS OF ANY ITEMS INDICATED AS "NOT ACCEPTABLE": _____

* When calculating total volumes, assume the containers are full.
 ** Enter a short description of the waste (e.g., M.S., I.C., paint, etc.)
 *** A = Acceptable N = Not Acceptable
 (IF AN ITEM IS NOT APPLICABLE, ENTER 'N/A' AFTER IT AND DRAW A LINE THROUGH THE 'ACCEPTABLE/NOT ACCEPTABLE' ROW)
 FORM 1160-08-04

INSPECTION LOG SHEET FOR:
Daily Inspection of **CONTAINER STORAGE AREA**
(A separate log must be completed for each storage area.)

DESCRIPTION OF AREA (e.g., metal shelter, northeast corner of warehouse, etc.) Northwest Corner of Warehouse

PERMITTED STORAGE VOLUME 2168 gal.

INSPECTOR'S NAME/TITLE Tim Windham

INSPECTOR'S SIGNATURE:				
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<i>Tim Windham</i>	<i>Tim Windham</i>	<i>Tim Windham</i>	<i>Tim Windham</i>	<i>Tim Windham</i>
DATE: (M/D/Y) <u>11, 9, 94</u>	<u>11, 9, 94</u>	<u>11, 10, 94</u>	<u>11, 11, 94</u>	<u>11, 12, 94</u>
TIME <u>8:00 AM</u>	<u>12:10 PM</u>	<u>10:00 AM</u>	<u>9:20 AM</u>	<u>10:00 AM</u>

CONTAINERS	MON.	TUES.	WED.	THURS.	FRI.
Total Volume* of <u>Flt</u> ** waste:	<u>8-128</u>	<u>12-192</u>	<u>13-208</u>	<u>16-256</u>	<u>6-96</u>
Total Volume of <u>Dry Lnr (OR)</u> ** waste:	<u>9-144</u>	<u>9-144</u>	<u>9-144</u>	<u>18-288</u>	<u>2-32</u>
Total Volume of <u>Dry Lnr (OR)</u> ** waste:	<u>4-64</u>	<u>4-64</u>	<u>4-64</u>	<u>5-80</u>	<u>5-80</u>
Total Volume of <u>Sludge</u> ** waste:	<u>13-208</u>	<u>16-256</u>	<u>18-288</u>	<u>20-320</u>	<u>13-208</u>
Total Volume of <u>oil filters</u> :	<u>20-600</u>	<u>26-780</u>	<u>39-1170</u>	<u>39-1170</u>	<u>20-600</u>
TOTAL VOLUME (IN GALLONS):	<u>1144</u>	<u>1386</u>	<u>1874</u>	<u>2114</u>	<u>1016</u>

N N N N N
If 'N', circle appropriate problem: Total volume exceeds the amount for which the facility is permitted, other: _____

Condition of Containers: N N N N N
If 'N', circle appropriate problem: missing or loose lids, missing, incorrect or incomplete labels, rust, leaks, distortion, other: _____

Stacking/Placement/Aisle Space: N N N N N
If 'N', circle appropriate problem: different from Part B Floor Plan, containers not on pallets, unstable stacks, broken or damaged pallets, other: _____

CONTAINMENT
Curbing, Floor and Sump(s): N N N N N
(Any material which spills, leaks or otherwise accumulates in the secondary containment must be completely removed within 24 hours of it being discovered.)
If 'N', circle appropriate problem: ponding/wet spots, deterioration (cracks, gaps, etc.), displacement, leaks, inadequate sealant, other: _____

Loading/Unloading Area: N N N N N
If 'N', circle appropriate problem: cracks, deterioration, ponding/wet spots, other: _____

OBSERVATIONS, COMMENTS, DATE AND NATURE OF REPAIRS OF ANY ITEMS INDICATED AS "NOT ACCEPTABLE": _____

* When calculating total volumes, assume the containers are full.
** Enter a short description of the waste (e.g., M.S., I.C., paint, etc.)
*** A = Acceptable N = Not Acceptable

(IF AN ITEM IS NOT APPLICABLE, ENTER 'N/A' AFTER IT AND DRAW A LINE THROUGH THE 'ACCEPTABLE/NOT ACCEPTABLE' ROW)

INSPECTION LOG SHEET FOR:
Daily Inspection of CONTAINER STORAGE AREA
 (A separate log must be completed for each storage area.)

DESCRIPTION OF AREA (e.g., metal shelter, northeast corner of warehouse, etc.) North West Corner of Warehouse

PERMITTED STORAGE VOLUME 2,168 gal

INSPECTOR'S NAME/TITLE Tim Windham (WHM)

INSPECTOR'S SIGNATURE:				
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<i>Tim Windham</i>	<i>Tim Windham</i>	<i>Tim Windham</i>	<i>Tim Windham</i>	<i>Tim Windham</i>
<u>10, 10, 94</u>	<u>10, 11, 94</u>	<u>10, 12, 94</u>	<u>10, 13, 94</u>	<u>10, 14, 94</u>
DATE (M/D/Y)				
<u>11:00 AM</u>	<u>4:00 PM</u>	<u>8:00 AM</u>	<u>10:00 AM</u>	<u>9:30 AM</u>
TIME				

CONTAINERS	MON.	TUES.	WED.	THURS.	FRI.
Total Volume* of <u>ILC</u> ** waste:	8-128	9-144	10-160	11-176	11-176
Total Volume of <u>dry clean</u> ** waste:	5-80	5-80	5-80	5-80	10-160
Total Volume of <u>Dry Clean</u> ** waste:	0-0	0-0	0-0	0-0	1-16
Total Volume of <u>Sludge</u> ** waste:	14-224	20-320	20-320	23-368	24-384
Total Volume of <u>0.1 Filters</u> ** waste:	9-270	13-390	23-690	28-840	45-1350
TOTAL VOLUME (IN GALLONS):	702	934	1250	1464	2,086

N N N N N

If 'N', circle appropriate problem: Total volume exceeds the amount for which the facility is permitted, other: _____

Condition of Containers: N N N N N

If 'N', circle appropriate problem: missing or loose lids, missing, incorrect or incomplete labels, rust, leaks, distortion, other: _____

Slacking/Placement/Aisle Space: N N N N N

If 'N', circle appropriate problem: different from Part B Floor Plan, containers not on pallets, unstable stacks, broken or damaged pallets, other: _____

CONTAINMENT

Curbing, Floor and Sump(s): N N N N N

(Any material which spills, leaks or otherwise accumulates in the secondary containment must be completely removed within 24 hours of it being discovered.)

If 'N', circle appropriate problem: ponding/wet spots, deterioration (cracks, gaps, etc.), displacement, leaks, inadequate sealant, other: _____

Loading/Unloading Area: N N N N N

If 'N', circle appropriate problem: cracks, deterioration, ponding/wet spots, other: _____

OBSERVATIONS, COMMENTS, DATE AND NATURE OF REPAIRS OF ANY ITEMS INDICATED AS "NOT ACCEPTABLE": _____

When calculating total volumes, assume the containers are full.
 Enter a short description of the waste (e.g., M.S., I.C., paint, etc.)
 A = Acceptable N = Not Acceptable
 (IF AN ITEM IS NOT APPLICABLE, ENTER 'N/A' AFTER IT AND DRAW A LINE THROUGH THE 'ACCEPTABLE/NOT ACCEPTABLE' ROW)
 FORM 1100-08-04