Inspection Details	M	T	W	Th	F
Date					
Time					
Inspector					
Hazardous Waste Container Storage Areas					
Storage areas are clean	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No
Container exteriors are clean	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No
Drums are stacked no more than 2 high	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No
Top level drums are banded	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No
Aisle spacing is adequate	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No
Storage areas are free from leaks or spills	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No
Containers are free from damage	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No
Signs and labels are facing outwards	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No
Sumps are free of accumulated material	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No
Incompatible materials are separated	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No
Discrepancies					
All items are in compliance/no discrepancies	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No	□ Yes □ No
Discepancies not listed above:					
Discrepancy Location (PSB, LSV, TOB, Other)					

Instructions for inspection:

Log date, time and inspector name. Examine all Hazardous Waste Container Storage Areas (PSB Zones 1-3, TOB Zones 4-12, LSV) for area cleanliness, container cleanliness, appropriate stacking (2 drums high, second level palletized and banded, up to 3 containers high in chemotherapy cage), and evidence of damage to containers. Ensure aisle spacing is adequate for inspection and emergency response. Look for evidence of leaks and spills, and make sure that all labels are facing outward and visible. Ensure that all Hazardous Waste, DOT and Perma-Fix labels are present and legible. Inspect sumps in PSB to ensure that no liquid is accumulated. Answer all inspection questions, indicating yes or no to each statement. An answer of "No" indicates a discrepancy and requires additional steps below.

Instructions for discrepancies:

Note the location of each discrepancy, including location (PSB, LSV, TOB, Dock, Other) and the zone number if applicable. Note any container numbers related to the discrepancy, and the nature of the discrepancy. E-mail these details to the RSO on a daily basis. Emails are then attached to the weekly work order as documentation of inspection results.

Work Order: _____