

Emergency Equipment & Personnel Safety Equipment

Emergency Equipment and Personnel Safety Equipment Cabinet

- 2 Empty 55-gallon, 17-H, lined drums – To store waste
- 2 Salvage drums (lined or poly) – To Store Waste
- 4 8-inch diameter, 10-foot long sorbent booms – To contain Spills
- 2 Spark-resistant safety shovels – To clean-up spills
- 2 Crowbars (nonsparking) – To remove and clean objects
- 2 18-Inch pipe wrenches (nonsparking) – To open objects
- 2 Drum plug wrenches (nonsparking) – To plug drums
- 4 Explosion-proof flashlights – To provide lighting
- 1 Megaphone or Airhorn – For communication
- 2 Nylon ropes (each 50 feet long, ½ inch thick) – To complete confined space entries and/or tie off areas
- 1 Oxygen kit – For oxygen deficient atmospheres
- 5 Safety glasses – for eye protection
- 10 Safety goggles – for eye protection
- 5 Face shield/hard hat combination – head and eye protection
- 2 Emergency eye/face/body wash – for eye/face/body protection
- 20 Tyveks total body coverage - To keep personnel free of contaminants
- 4 Duct tape rolls – to hold things together
- 10 Rubber boots – to prevent footwear from contamination
- 10 Rubber gloves – to protect hands
- 5 Corrosive-resistant aprons – to protect the trunk
- 2 Corrosive-resistant suits – to prevent contamination of the body
- 5 Leather gloves – for hand protection
- 10 Half-mask respirators – for respiratory protection
- 5 Full-face respirators – for respiratory protection
- 1 Box of respirator cartridges (OV) – for respiratory protection
- 1 Hand-Held Explosion meter (contingent upon NFPA upgrades)
- 1 5-lb hand held fire extinguisher – located on figure II.A.5
- 1 10-lb hand held fire extinguisher – located on figure II.A.5
- 1 150-lb wheel-mounted fire extinguisher – located on figure II.A.5
- * Automatic sprinkler system – located in the warehouse
- * Spill Control Equipment located on figure II.A.5
- * Air-Driven pumps of various sizes
- * Alarms
- * Stretcher located in figure II.A.5
- * Cell Phones – for facility personnel

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Figure II B 5
Emergency Equipment and Personnel Safety Cabinet Inspection Form

Inspector Name:

Date:

Time:

Comments:	Quantity	Description	Yes	No
	2	Empty 55-gallon, 17-H, lined drums		
	2	Salvage drums (lined or poly)		
	4	8-inch diameter, 10-foot long sorbent booms		
	2	Spark-resistant safety shovels		
	2	Crowbars (nonsparking)		
	2	18-inch pipe wrenches (nonsparking)		
	2	Drum plug wrenches (nonsparking)		
	4	Explosion proof flashlights		
	1	Megaphone or Air Horn		
	2	Nylon ropes (each 50 feet long, ½ inch thick)		
	1	Oxygen kit		
	5	Safety glasses		
	10	Safety goggles		
	5	Face shield/hard hat combination		
	2	Emergency eye/face/body wash		
	20	Tyveks (or equivalent) total body coverage		
	4	Duct Tape Rolls		
	10	Rubber boots		
	10	Rubber gloves		
	5	Corrosive-resistant aprons		
	2	Corrosive-resistant suits		
	5	Leather gloves		
	10	Half-face respirators		
	5	Full-face respirators		
	1	Box of respirator catridges (OV and AG)		

Describe measure taken or planned to restore, repair, decontaminate, or clean equipment for which a check mark has been placed in the "No" column above:

Figure II B 4
Weekly Inspection Log

Date: _____ Inspector: _____ Time of Inspection: _____

Deficiency Description	S. Warehouse		Loading Dock		N. Warehouse		Describe Problems and Date Corrected
	Yes	No	Yes	No	Yes	No	
Secondary Containment not in good condition							
Waste or debris on floor							
Obstructed aisle space							
Materials and/or equipment littering floor							
Cell capacity exceeded							
Incompatible waste in cell							
Waste not permitted in facility							
Open container							
Container in unstable position							
Leaking/damaged/non-DOT container							
Storage date not on container							
Waste code not on label							
Drum ID # not on drum							
Label not facing aisle side							
Fire Extinguisher missing or inoperable							
Spill control kit missing or not complete							
First aid kit missing or not complete		N/A				N/A	
Safety shower and eye wash inoperable				N/A			
Emergency and safety cabinet not sealed		N/A				N/A	

Waste or debris on ground outside of building: (Circle) **Yes/No** If yes, waste or debris removed? (circle) **Yes/No**
 Standing liquid in parking lot? (Circle) **Yes/No** Standing liquid shows contamination? (Circle) **Yes/No**
 Drain valve closed? (Circle) **Yes/No** Integrity of perimeter fence inspected? (Circle) **Yes/No**
 Storage Capacity Exceeded (Circle) **Yes/No**

Signature _____