

General Purpose Check list for Hazardous Waste Accumulation Point (HWAP)

Name of unit: _____

Building #: _____

	Date	Date	Date	Date	Date	Date	Remarks
Is required documentation (e.g training certificates, assignment letter) filed?							
Is the Red Plan properly posted, maintained and communicated to personnel?							
Are SOPs properly posted, maintained and communicated to personnel?							
Is the overall appearance of the facility clean?							
Are mandatory signs (Gebotszeichen) and hazard signs (Warnzeichen) posted?							
Are prohibition signs (e.g. "No Smoking/Nicht Rauchen") posted?							
Is drinking und eating prohibited and followed by personnel?							
Is facility secured from unauthorized entry (e.g by locking)?							
Do facilities allow safe access into and out of the facility?							
Are aisles kept clear?							
Is PPE available and properly maintained?							
Are fire extinguishers serviceable and tested regularly?							
Are drip pans and/or absorbent used to collect drips?							
Are spills cleaned up immediately?							
Are all drums and container contents clearly marked?							
Is HW properly stored and segregated?							
Are storage properties made of materials that are compatible with their contents?							
Are all drums and containers in good condition and not leaking?							
Are all drums and containers closed at all times, unless adding or removing HW?							
Are liquid (water endangering) HWs placed on secondary containment?							
Is secondary containment clean?							
Are containers regularly emptied?							
Signature of inspector:							

General Purpose Check list for Hazardous Waste Accumulation Point (HWAP)

Other Comments:
Corrective Actions (for each non compliant item, please describe type and completion of corrective actions:

General Purpose Check list for Hazardous Materials Storage Areas

Name of unit: _____

Building #: _____

	Date	Date	Date	Date	Date	Date	Remarks
Is required documentation (e.g training certificates, assignment letter) filed?							
Is the Red Plan properly posted, maintained and communicated to personnel?							
Are SOPs properly posted, maintained and communicated to personnel?							
Is an inventory of all HM maintained?							
Are the MSDSs properly posted, maintained and communicated to personnel?							
Is the overall appearance of the facility clean?							
Are mandatory signs (Gebotszeichen) and hazardous signs (Warnzeichen) posted?							
Are prohibition signs (e.g. "No Smoking/Nicht Rauchen") posted?							
Is drinking und eating prohibited and followed by personnel?							
Is facility secured from unauthorized entry (e.g by locking)?							
Do facilities allow safe access into and out of the facility?							
Are aisles kept clear?							
Is PPE available and properly maintained?							
Are fire extinguishers serviceable and tested regularly?							
Are drip pans and/or absorbent used to collect drips?							
Are spills cleaned up immediately?							
Are all drums and container contents clearly marked?							
Is HM properly stored and segregated?							
Are storage properties made of materials that are compatible with their contents?							
Are all drums and containers in good condition and not leaking?							
Are liquid (water endangering) HMs placed on secondary containment?							
Are secondary containments clean?							
Are compressed gas cylinders adequately secured to prevent falling?							
If flammables: Stored in safety cabinets?							
Are there any expired HM (past shelf life date)?							
Are there any HM near expiration date (e.g., within one month)?							
Signature of inspector:							

General Purpose Check list for Hazardous Waste Accumulation Point (HWAP)

Other Comments:

Corrective Actions (for each non compliant item, please describe type and completion of corrective actions:

General Purpose Check list for Working Area

Name of unit: _____

Building #: _____

	Date	Date	Date	Date	Date	Date	Remarks
Is required documentation (e.g training certificates, assignment letter) filed?							
Is the Red Plan properly posted, maintained and communicated to personnel?							
Are SOPs properly posted, maintained and communicated to personnel?							
Is an inventory of all HM maintained?							
Are the MSDSs properly posted, maintained and communicated to personnel?							
Is the overall appearance of the facility clean?							
Are mandatory signs (Gebotszeichen) and hazardous signs (Warnzeichen) posted?							
Are prohibition signs (e.g. "No Smoking/Nicht Rauchen") posted?							
Is drinking und eating prohibited and followed by personnel?							
Is facility secured from unauthorized entry (e.g by locking)?							
Do facilities allow safe access into and out of the facility?							
Are aisles kept clear?							
Is PPE available and properly maintained?							
Are fire extinguishers serviceable and tested regularly?							
Are drip pans and/or absorbent used to collect drips?							
Are spills cleaned up immediately?							
Are all drums and container contents clearly marked?							
Is HW properly stored and segregated?							
Are storage properties made of materials that are compatible with their contents?							
Are all drums and containers in good condition and not leaking?							
Are all drums and containers closed at all times, unless adding or removing HW?							
Are liquid (water endangering) HWs placed on secondary containment?							
Are secondary containments clean?							
Are containers regularly emptied?							
If flammables: Stored in safety cabinets?							
Are only daily-use quantities of HM stored in work areas							
Are all generated HW collected and removed daily to the designated HWAP?							
Signature of inspector:							

General Purpose Check list for Hazardous Waste Accumulation Point (HWAP)

Other Comments:

Corrective Actions (for each non compliant item, please describe type and completion of corrective actions: