

SATELLITE ACCUMULATION POINT (SAP) MONTHLY INSPECTION CHECKLIST UNIVERSAL WASTE (UW)

Fax to Environmental Management Division (EMD) 502-624-3000

LOCATION: _____

TYPE OF WASTE: _____

UNIT: _____

PHONE: _____

INSPECTOR/POC: _____

DATE: _____

TIME: _____

1. SATELLITE ACCUMULATION AREAS.

YES NO N/A

a. Has all UW being generated at the facility been reported to EMD? _____

b. Are UW storage points diked, bermed and/or covered? _____

c. Is incompatible UW properly contained and stored separately? _____

d. Is UW at or near generation point? _____

e. Is UW within operator's control to prevent mixing? _____

f. Are the containers in good condition? _____

g. Are the containers closed except when adding or removing? _____

2. ACCUMULATION IN CONTAINERS.

a. Is there D.O.T. packaging? _____

b. Are there any leaks? _____

c. Are containers marked with National Stock Number (NSN), contents, Mfg. and Quantity? _____

d. Is "Universal Wasted/Used Batteries" marked on container? _____

INSPECTOR'S OVERALL COMMENTS:

REMEDIAL ACTIONS TAKEN

