

**SATELLITE ACCUMULATION POINT (SAP) MONTHLY INSPECTION CHECKLIST HAZARDOUS WASTE (HW)**

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 HW being generated at the facility been reported to EMD?	_____	_____	_____
b. Are HW storage points diked, bermed and/or covered?	_____	_____	_____
c. Is incompatible HW properly contained and stored separately?	_____	_____	_____
d. Is there a maximum of 55 gallons of HW?	_____	_____	_____
e. Is there a maximum of 1 Quart of acutely HW?	_____	_____	_____
f. Is HW at or near the generation point?	_____	_____	_____
g. Is HW within the operator's control to prevent mixing?	_____	_____	_____
h. Are containers in good condition?	_____	_____	_____
i. Are containcers closed except when adding or removing HW?	_____	_____	_____
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 "Hazardous Waste" marked on container?	_____	_____	_____

**INSPECTOR'S OVERALL COMMENTS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REMEDIAL ACTIONS TAKEN**

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