

Reclamation Manual

Directives and Standards

Checklist 5

WASTE MINIMIZATION

Site/Facility: _____

Date: _____

Address: _____

EPA I.D.: _____

Waste Minimization

INSPECTION ITEM	CITE	YES	NO	COMMENTS
Has a waste minimization plan been developed for this facility?	40 CFR 262.27 ENV 02-03	<input type="checkbox"/>	<input type="checkbox"/>	
Has it been updated in the last 2 years in accordance with the Commissioner's policy?	ENV 02-03	<input type="checkbox"/>	<input type="checkbox"/>	

List any significant waste minimization practices that have been implemented at this facility.

Comments: _____
