

45/90-DAY HAZARDOUS WASTE ACCUMULATION AREA WEEKLY INSPECTION LOG

Ref: PSNS&IMFINST P5090.5

ACTIVITY (PSNS & IMF, Tenant, Prime Contractor)		ORGANIZATION		MONTH/YEAR		
LOCATION (Building #, DD#, Direction)						
AREA ID # (assigned by Code 106)		AAO:				
# 45/90-		POC:				
INSPECTION ATTRIBUTES				4 <u>Yes</u> <u>No</u> <u>NA</u> or <u>NI</u>		
If any attributes are marked "No" or "NI", place the attribute #, findings & corrective actions on the back of this form. NA = Not Applicable NI = Needs Improvement.				WEEK		
Area Specific		1	2	3	4	5
1.	REQUIRED SIGNS ARE POSTED (Hazardous Waste Accumulation Area, Spill Response, PCB, Certificate of Operation)					
2.	DOORS AND GATES LOCKABLE AND IN GOOD REPAIR					
3.	36-INCH MINIMUM AISLE SPACE IS MAINTAINED					
4.	SECONDARY CONTAINMENT SATISFACTORY (No visible liquid debris, damage, or deterioration)					
5.	FIRE EXTINGUISHER/SUPPRESSION SYSTEM INSPECTIONS ARE CURRENT					
6.	EMERGENCY EYEWASH/SHOWER IN WORKING CONDITION. WEEKLY TESTING IS CURRENT					
7.	FLAMMABLE, COMBUSTIBLE, OR REACTIVE WASTES ARE SEPARATED AND/OR PROTECTED FROM SOURCES OF IGNITION OR REACTION					
8.	TWO-WAY COMMUNICATION OPERABLE (radios, phones, intercom)					
9.	INVENTORY RECORDS ON SITE (NA for B992, 993, 994 and roll off's. Available on request)					
10.	IS SPILL KIT ON SITE, FULLY STOCKED WITH APPROPRIATE CLEAN UP MATERIAL					
11.	CONTAINER (ROLL OFF) IS IN CERTIFIED LOCATION PER CERTIFICATE OF OPERATION					
Container Specific						
1.	CONTAINERS ARE SECURED/CLOSED EXCEPT WHEN ADDING OR REMOVING WASTE					
2.	CONTAINERS ARE IN GOOD CONDITION (No significant rust, not leaking or deteriorating)					
3.	LABELS FILLED OUT CORRECTLY AND VISIBLE. PROPER DOT LABELS ATTACHED					
4.	START DATES NOT OVER 90-DAY LIMIT (non-PCB) OR 30-DAY LIMIT (PCB's)					
5.	HAZARDOUS WASTE WITH PCB: HAZARDOUS WASTE LABEL HAS SAME START DATE AS PCB LABEL					
6.	INCOMPATIBLE WASTES ARE PHYSICALLY SEGREGATED (acids from bases, HW from WAD and EHW) EHW IS COVERED					

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ACTIVITY (PSNS & IMF, Tenant, Prime Contractor)		Organization	MONTH/YEAR	
AREA ID # (assigned by Code 106) # 45/90-		LOCATION (Building #, Dry Dock # and direction)		
INSPECTOR'S NAME / BADGE (PRINT)		SIGNATURE	TIME	DATE (MO/DY/YR)
WEEK 1				
WEEK 2				
WEEK 3				
WEEK 4				
WEEK 5				
FINDINGS (MUST BE FROM ATTRIBUTES ON FRONT)		ACTION TAKEN (OR PENDING)	TIME	DATE (MO/DY/YR)
WEEK 1				
WEEK 2				
WEEK 3				
WEEK 4				
WEEK 5				
PSNS&IMF 5090/127 (Rev. 2-06) (Back)				