

Ship Waste Disposal Assessment Checklist

General Information

Vessel Name

IMO Number

Assessment Date

Assessor Name

Checklist

Item	Yes	No	Comments
Are waste segregated and properly stored?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Are garbage record books up to date?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Are waste containers properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Is there evidence of waste discharge overboard?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Are all waste management procedures followed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

Observations / Notes