

Hazardous Materials Container Unloading Checklist

Container & Delivery Information

Container No.
Seal No.
Arrival Date/Time
Location
Carrier/Driver

Pre-Unloading Checks

Item	Yes	No	Comments
PPE (Personal Protective Equipment) worn?	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency equipment functional & accessible?	<input type="checkbox"/>	<input type="checkbox"/>	
MSDS/SDS available for contents?	<input type="checkbox"/>	<input type="checkbox"/>	
Container placarding correct and visible?	<input type="checkbox"/>	<input type="checkbox"/>	
Container damage/leaks visible?	<input type="checkbox"/>	<input type="checkbox"/>	

During Unloading

Item	Yes	No	Comments
Spill containment in place?	<input type="checkbox"/>	<input type="checkbox"/>	
Ventilation adequate?	<input type="checkbox"/>	<input type="checkbox"/>	
Unloading supervised by trained personnel?	<input type="checkbox"/>	<input type="checkbox"/>	
Waste/disposal containers available?	<input type="checkbox"/>	<input type="checkbox"/>	

Post-Unloading Checks

Item	Yes	No	Comments
Container emptied and cleaned?	<input type="checkbox"/>	<input type="checkbox"/>	

All materials accounted for?

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Any damage/spill reported?

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Area cleaned and inspected?

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Unloading Supervisor Name/Sign

Date

Warehouse Representative Name/Sign

Date