

# Hazardous Materials Storage Pollution Prevention Checklist

Facility Name:

Date:

Inspector Name:

## Storage Area Assessment

| Checklist Item   | Yes                      | No                       | N/A                      | Comments             |
|--|--------------------------|--------------------------|--------------------------|----------------------|
| Are hazardous materials stored in designated areas?    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| Are containers properly labeled?                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| Are containers closed and in good condition?           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| Is incompatible material segregation maintained?       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| Are secondary containment systems in place and intact? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| Is the storage area free from spills and leaks?        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |

## Pollution Prevention Measures

| Checklist Item                                 | Yes                      | No                       | N/A                      | Comments             |
|--|--------------------------|--------------------------|--------------------------|----------------------|
| Are spill kits accessible and fully stocked?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| Is staff trained in spill response procedures? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| Is proper waste disposal observed?             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |
| Are emergency contact numbers posted?          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="text"/> |

Is routine inspection of storage area documented?

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**Additional Comments**

Inspector Signature:

Date: