

Universal Waste Inspection Checklist

Consolidation Facility

Chapter 850(3)(A)(13)

(c)(i)	Any disposing, diluting or treating of U/W	<input checked="" type="checkbox"/>	N
(d)	Household hazardous waste (UW) managed correctly	Y	<input checked="" type="checkbox"/>
(e)(i)(ii)	Have all waste been determined	Y	<input checked="" type="checkbox"/>
(e)(iii)	Are waste tracked via Manifest/UBOL/Log	Y	<input checked="" type="checkbox"/>
(e)(vi)	Universal Waste in containers	Y	<input checked="" type="checkbox"/>
	Evidence of breakage, leakage or spillage	<input checked="" type="checkbox"/>	N
	Containers Closed	Y	<input checked="" type="checkbox"/>
	Containers Structurally Sound	Y	<input checked="" type="checkbox"/>
	Containers Compatible	Y	<input checked="" type="checkbox"/>
(e)(vii)	All releases of waste immediately contained	Y	<input checked="" type="checkbox"/>
(e)(ix)	Employees trained	Y	<input checked="" type="checkbox"/>

Waste Specific Requirements (C=CRT, L=Lamps, B=Ballasts, T=Thermostats, MD=Mercury Device, MS=Mercury Switch, MV=Motor Vehicle Mercury Switch)

(e)(xxii-xxvii)	Adequate materials to prevent breakage (All)	Y	<input checked="" type="checkbox"/>
	Sealed when full & after incidental breakage (C/L)	Y	<input checked="" type="checkbox"/>
	Not stacked over 5 ft (C/L)	Y	<input checked="" type="checkbox"/>
	Stored Inside, in a dry area (All)	Y	<input checked="" type="checkbox"/>
	Containers marked with UW type (All)	Y	<input checked="" type="checkbox"/>
	Storage area has sign (All)	Y	<input checked="" type="checkbox"/>
(e)(iv)	Consolidator uses licensed transporter or common carrier	Y	<input checked="" type="checkbox"/>
(g)(i)	Consolidator ships to approved recycling facility	Y	<input checked="" type="checkbox"/>
	Received dates all under 365 days old	Y	<input checked="" type="checkbox"/>
(e)(x)	Weekly Inspections with log:	Y	<input checked="" type="checkbox"/>
(e)(xi)	Secure/lockable storage area:	Y	<input checked="" type="checkbox"/>
(e)(xiv)	Adequate Aisle Space: (able to see labels and dates)	Y	<input checked="" type="checkbox"/>
(e)(xv)	Consolidator complies with import/export requirements	Y	<input checked="" type="checkbox"/>
(g)(iii)	Does facility have EPA ID #	Y	<input checked="" type="checkbox"/>
(g)(iv)	Containers marked with date received at Facility	Y	<input checked="" type="checkbox"/>
(g)(v)	Does facility have an inventory system for tracking	Y	<input checked="" type="checkbox"/>

Record Retention

(e)(xix)	Inspection logs for one year:	Y	<input checked="" type="checkbox"/>
	Manifest/UBOL for three years:	Y	<input checked="" type="checkbox"/>
	Certificates of Recycling for three years:	Y	<input checked="" type="checkbox"/>
	Employee Training Records for three years [from (e)(ix)]: (Current employees and previous three years)	Y	<input checked="" type="checkbox"/>
(e)(xx)	Submit to the Department:		
	Manifest/UBOL within 7 days of shipment	Y	<input checked="" type="checkbox"/>
	Quarterly UW reports per Ch.857.13(C)(2)	Y	<input checked="" type="checkbox"/>

Boxed item checked is a violation.