

Contractor Hazardous Materials (HM) Checklist

(Quarterly Inspection of each storage area "maintain on file for one year")

Date and Time: _____

Contracted Company: _____

COR's Name & Directorate: _____

Contract Company POC: _____

Assessment Type: _____

Site Location: _____

COR's Phone Number: _____

POC Phone Number: _____

<u>QUESTIONS</u>	<u>POINTS:</u>	<u>POSSIBLE</u>	<u>EARNED</u>	<u>COMMENTS</u>
1. Are any JBLM restricted hazardous materials being stored or used that are not authorized by the JBLM Pollution Prevention Program?		10	[_____]	_____
2. Do storage areas for in-use and un-used HM products meet authorized product storage requirements? (Area properly labeled; MSDS's available; provides cover for materials; has secondary containment that will contain 110% of the total volume of the largest container: fire extinguisher and alarm system in case of large spill (horn, bell, triangle)	CRITICAL	10	[_____]	_____
3. Are the HM storage areas free of clutter and debris? (Empty boxes; trash; Unorganized)		10	[_____]	_____
4. Are HM containers properly labeled? (Product will have the manufacture label or equivalent label affixed to the container. No faded or non-legible labels. Container must be compatible with product being used.)	CRITICAL	10	[_____]	_____
5. Are HM containers serviceable? (No leaking, holes, lids tightly closed to prevent spillage.)	CRITICAL	10	[_____]	_____
6. Are HM secured and or stacked to prevent damage to containers as needed?	CRITICAL	10	[_____]	_____
7. Are leaks into the secondary containment cleaned up?	CRITICAL	10	[_____]	_____

TOTAL POINTS [Possible: _____ Earned: _____] [Score: _____ % Rated: _____]

COMMENTS:

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COMMENTS CONTINUED:

Inspector/Assessor Name: *(Print)* _____

Signature: _____