

SATELLITE ACCUMULATION AREA MONTHLY RCRA INSPECTION REPORT

MONTH	LOCATION/RM NO.	LAB
Drums labeled?	□ Yes □ No	
Labels visible and readable?	□ Yes □ No	
Containers closed or sealed?	🗆 Yes 🗈 No	
Incompatible wastes segregated?	🗆 Yes 🗈 No	
Corrective action needed? (If yes, see below)	🗆 Yes 🗈 No	
Corrective Action notes:		
Action taken:		Date corrected:
Date inspected: Time inspected:	Inspected by (please print):	Initials:

This form is due by the 8th of each month. Email to: <u>hazmat@cooper.edu</u>. Keep a copy near the SAA.