POST THIS FORM BY LAB WASTE ACCUMULATION AREA.

Laboratory Waste Collection Area Inspection Form

Inspect the Lab Waste Accumulation Area **WEEKLY**, and document the results of the inspection on this form.

Date	Comments	Corrective Action Taken

*****Comments: Indicate one of the following:
A. Containers in good condition, no spills observed
B. Containers in good condition, spills observed and cleaned up
C. Container broken and replaced, no spills observed
D. Container broken and replaced, spills observed and cleaned up
E. Other (please explain)

ONCE COMPLETED FORWARD TO:
ENVIRONMENTAL HEALTH AND SAFETY
ST. CLEMENTS HALL