

**ANNUAL**

**Grassy Mountain Facility**

**FORM:**

**RA01**

**Inspection Record**

Date of Inspection: _____ Time: _____ AM/PM		PAGE 1 OF 1			
<b>Container Management Unit</b>					
EQUIPMENT / STRUCTURE/ ITEM	INSPECTION ELEMENT	STATUS		IF "NOT OK" STATE REASON	DATE & TIME CORRECTED & INITIALS
		OK	NOT OK		
DRUM DOCK AND PADS:	Fill each sump with water and allow it to remain for 24 hours. Inspect the water level at the end of the 24 hours. A drop in the liquid level might indicate a defective sump				
Inspector's Name: _____ Inspector's Signature: _____					
COMMENTS (IF NEEDED, EXPLAIN THE CORRECTIVE ACTIONS TAKEN):					
<b>IF STATUS NOT OK, MARK THE FOLLOWING</b>					
ENVIRONMENTAL DEPARTMENT CONTACTED:		( ) YES		( ) NO	
REMEDIAL WORK ORDER ISSUED:		( ) YES		WORK ORDER # _____	( ) NO

Last Revised 04/20/01

**SAFETY-KLEEN (LONE and GRASSY MOUNTAIN), INC. TYPE:**

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