

FACILITY WASTE TRACKING RECORDS AND REPORTING

1.0 Objective

The objective of this surveillance is to evaluate how effectively the laboratory is implementing systems and processes to track production, storage, and movement of hazardous, mixed and radioactive wastes. The items to be evaluated include preparation of required reports and documents for tracking waste on site. The Facility Representative or Environmental, Safety, and Health Support Specialist reviews records and interviews personnel to sample the preparation and content of required records. The Facility Representative or Environmental, Safety, and Health Support Specialist evaluates compliance with applicable DOE and regulatory requirements.

2.0 References

- 2.1 40 CFR 264-265
- 2.2 DOE 5400.1, *General Environmental Protection Program*
- 2.3 DOE 5820.2A, *Radioactive Waste Management*

3.0 Surveillance Activities

The Facility Representative or Environmental, Safety, and Health Support Specialist evaluates reports prepared to document waste management activities and methods used to prepare reports. The Facility Representative or Environmental, Safety, and Health Support Specialist also evaluates the accuracy of waste manifests used to track waste on site from generation to disposal or shipment off-site.

In performing this surveillance, the Facility Representative or Environmental, Safety, and Health Support Specialist completes the following activities:

Activity 1 - Review periodic waste management reports.

Activity 2 - Examine selected waste manifests.

Surveillance Guideline
FACILITY WASTE TRACKING RECORDS AND RECORDING

Surveillance No.: _____

Facility: _____

Date Completed: _____

	<u>YES</u>	<u>NO</u>	<u>N/A</u>
1. Has the facility prepared and submitted an annual dangerous waste report documenting total volumes of hazardous waste generated?	_____	_____	_____
2. Are inputs used for calculations of waste volumes traceable to validated/approved documents?	_____	_____	_____
3. Does the annual Dangerous Waste Report include input from all organizations and divisions at the facility that may produce hazardous waste?	_____	_____	_____
4. Does the facility provide timely input for the preparation of a Site Quarterly Hazardous Waste Report?	_____	_____	_____
5. Is input to the Quarterly Hazardous Waste Report substantiated by validated/approved documents or calculations?	_____	_____	_____
6. Has the laboratory certified the accuracy of reports prepared to document waste management or generation?	_____	_____	_____
7. Is containerized waste weight reported as gross weight?	_____	_____	_____
8. In instances where waste can not be weighed, is the weight estimated based on volume?	_____	_____	_____
9. Does each waste manifest include:			
a. Physical and chemical characteristics of waste?	_____	_____	_____
b. Quantity of each major radionuclide present?	_____	_____	_____
c. Weight of waste (including solidification or absorbent media)?	_____	_____	_____
d. Volume of waste (including solidification or absorbent media)?	_____	_____	_____

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FACILITY WASTE TRACKING RECORDS AND REPORTING (cont.)

	<u>YES</u>	<u>NO</u>	<u>N/A</u>
10. Is the waste manifest maintained with the waste package?	_____	_____	_____
11. Is the waste manifest legible?	_____	_____	_____
OTHER:			

NOTES/COMMENTS:

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FACILITY WASTE TRACKING RECORDS AND REPORTING (cont.)

PERSONNEL CONTACTED: _____

**IF MORE SPACE IS NEEDED FOR FINDINGS, OBSERVATIONS, AND FOLLOWUP
ITEMS - USE ADDITIONAL SHEETS**

FINDINGS:

Finding No.: _____

Description: _____

Finding No.: _____

Description: _____

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FACILITY WASTE TRACKING RECORDS AND REPORTING (cont.)

Finding No.: _____

Description: _____

OBSERVATIONS:

Observation No.: _____

Description: _____

Observation No.: _____

Description: _____

Surveillance Guideline
FACILITY WASTE TRACKING RECORDS AND REPORTING (cont.)

Observation No.: _____

Description: _____

FOLLOWUP ITEMS:

Followup Item No.: _____

Description: _____

Followup Item No.: _____

Description: _____

Surveillance Guideline
FACILITY WASTE TRACKING RECORDS AND REPORTING (cont.)

Followup Item No.: _____

Description: _____

LABORATORY MANAGEMENT DEBRIEFED AND RESULTS: _____

Signature: _____ Date: _____

Facility Representative or
Environmental, Safety, and Health Support Specialist