

Dangerous Goods Storage Checklist

Site Information

Site/Facility Name*: _____

Site Location*: _____

Inspector Name*: _____

Inspection Date*: _____

Dangerous Goods Details

Dangerous Goods Class*: _____ > Options: Explosives, Flammable Gases, Flammable Liquids, Flammable Solids, Oxidizing Agents, Toxic Substances, Radioactive Material, Corrosives, Miscellaneous, Other

UN Number: _____

Quantity on hand (kg/L)*: _____

Storage & Compliance

Storage Condition Checklist:

Condition	Compliant	Comments

Options for 'Compliant': Yes, No, N/A

Emergency Preparedness

Spill Kit Available

Fire Extinguisher Type: _____ > Options: Foam, Dry Chemical, CO2, Water, Other

Current SDS Accessible

Findings & Sign-off

Deficiencies Found

Actions Required / Corrective Measures*: (Fill only if applicable)

