

# Compliance Self-Audit Checklist

## Instructions:

1. Please refer to the Florida Automotive Recyclers' Handbook (the Workbook) as you complete each question on this checklist to ensure that you correctly answer each compliance question below.
2. Unless otherwise noted below, each question on this form is asking you to **assess the current conditions and operations** at your auto recycling facility. Most compliance problems described in the Workbook can easily be corrected within a few days.

***If you cannot answer whether or not you are in compliance with a requirement during your self-audit, you are probably in violation of state or federal rules that could result in penalties if you are inspected.***

Fix the problem as soon as you can, and make a note in the "Corrective Actions" section of the compliance checklist describing the specific action that you took to return to compliance, along with the date. **Keep this record** to show an inspector that you took quick action to fix any problems.

3. Some compliance questions are broken down into more specific questions. Answer all of these specific questions before answering the first question in that section.
4. Other compliance assistance resources can be found on-line at the web site below:  
[http://www.dep.state.fl.us/waste/quick\\_topics/publications/default.htm](http://www.dep.state.fl.us/waste/quick_topics/publications/default.htm)



Salvage yard name \_\_\_\_\_  
Date Completed: \_\_\_\_\_  
Name: \_\_\_\_\_

# notes

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# chapter 1 • waste management

## compliance checklist

if yes

if no

- |                          |   |  |  |                          |       |              |  |                |  |                          |       |            |  |                |  |                          |       |            |  |                |  |
|--------------------------|---|--|--|--------------------------|-------|--------------|--|----------------|--|--------------------------|-------|------------|--|----------------|--|--------------------------|-------|------------|--|----------------|--|
| 1.                       | Does your facility <b>inspect incoming vehicles</b> for leaks and place drip pans under any leaks found?<br><i>Refer to page 2 in the Workbook.</i>   | <input checked="" type="checkbox"/>  |  |                          |       |              |  |                |  |                          |       |            |  |                |  |                          |       |            |  |                |  |
| 2.                       | Does your facility <b>drain all fluids</b> into appropriate containers over an impervious surface before crushing or storing the vehicle?<br><i>Refer to page 2 in the Workbook.</i>  | <input type="checkbox"/>   | <b>Fix the problem</b>                               |                          |       |              |  |                |  |                          |       |            |  |                |  |                          |       |            |  |                |  |
| 3.                       | Does your facility <b>maintain safety equipment</b> , such as a spill control kit, which is accessible to all employees?<br><i>Refer to page 4 in the Workbook.</i>   | <input type="checkbox"/>   | <b>Fix the problem</b>                               |                          |       |              |  |                |  |                          |       |            |  |                |  |                          |       |            |  |                |  |
| 4.                       | Are all of your facility's <b>containers in good condition</b> , i.e. no rust, leaks or defects?<br><i>Refer to page 6 in the Workbook.</i>   | <input type="checkbox"/>   | <b>Fix the problem</b>                               |                          |       |              |  |                |  |                          |       |            |  |                |  |                          |       |            |  |                |  |
| 5.                       | Are all of your facility's <b>containers properly labeled</b> with the type of waste and "Hazardous Waste" if applicable?<br><i>Refer to pages 6-7 in the Workbook.</i>   | <input type="checkbox"/>   | <b>Fix the problem</b>                               |                          |       |              |  |                |  |                          |       |            |  |                |  |                          |       |            |  |                |  |
| 6.                       | Has your facility conducted a complete and accurate <b>hazardous waste determination</b> on each waste stream?<br><i>Refer to pages 11-12 in the Workbook for instructions on how to conduct a hazardous waste determination.</i> | <input type="checkbox"/>   | Complete the determination process before proceeding |                          |       |              |  |                |  |                          |       |            |  |                |  |                          |       |            |  |                |  |
| 7.                       | Does your facility <b>generate hazardous waste</b> ?<br><i>Refer to pages 9-12 in the Workbook for an explanation of what materials are included in the regulatory definition of hazardous waste.</i>                             | <input type="checkbox"/>   | <b>Fix the problem</b>                               |                          |       |              |  |                |  |                          |       |            |  |                |  |                          |       |            |  |                |  |
| 8.                       | What is the maximum amount of hazardous waste your facility generates in any calendar month?<br><i>The amount determines your facility's Hazardous Waste Generator Status (category). Refer to pages 9-12 in the Workbook.</i>    | <table border="1" style="margin: auto;"> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">_____</td> <td style="text-align: center;"><b>CESQG</b></td> </tr> <tr> <td></td> <td style="text-align: center;">(enter amount)</td> <td></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">_____</td> <td style="text-align: center;"><b>SQG</b></td> </tr> <tr> <td></td> <td style="text-align: center;">(enter amount)</td> <td></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">_____</td> <td style="text-align: center;"><b>LQG</b></td> </tr> <tr> <td></td> <td style="text-align: center;">(enter amount)</td> <td></td> </tr> </table> |  | <input type="checkbox"/> | _____ | <b>CESQG</b> |  | (enter amount) |  | <input type="checkbox"/> | _____ | <b>SQG</b> |  | (enter amount) |  | <input type="checkbox"/> | _____ | <b>LQG</b> |  | (enter amount) |  |
| <input type="checkbox"/> | _____   | <b>CESQG</b>   |  |                          |       |              |  |                |  |                          |       |            |  |                |  |                          |       |            |  |                |  |
|                          | (enter amount)  |  |  |                          |       |              |  |                |  |                          |       |            |  |                |  |                          |       |            |  |                |  |
| <input type="checkbox"/> | _____   | <b>SQG</b>   |  |                          |       |              |  |                |  |                          |       |            |  |                |  |                          |       |            |  |                |  |
|                          | (enter amount)  |  |  |                          |       |              |  |                |  |                          |       |            |  |                |  |                          |       |            |  |                |  |
| <input type="checkbox"/> | _____   | <b>LQG</b>   |  |                          |       |              |  |                |  |                          |       |            |  |                |  |                          |       |            |  |                |  |
|                          | (enter amount)  |  |  |                          |       |              |  |                |  |                          |       |            |  |                |  |                          |       |            |  |                |  |
| 9.                       | Does your facility <b>store hazardous waste</b> on site before treatment or disposal?<br><i>Refer to page 7 in the Workbook.</i>  | <input type="checkbox"/>   | <b>Fix the problem</b>                               |                          |       |              |  |                |  |                          |       |            |  |                |  |                          |       |            |  |                |  |

What your drums should not look like!



Did you know...  
Containers should always remain closed except when adding or removing waste?

## chapter 2 • specific wastes compliance checklist

	<u>if yes</u>	<u>if no</u>
	<input checked="" type="checkbox"/>	
10. Does your facility generate antifreeze? Refer to page 17 in the Workbook.	<input type="checkbox"/>	Skip to Question 11
10a. Is your waste antifreeze being recycled? Refer to page 17 in the Workbook.	Skip to Question 11	<b>Fix the problem</b>
10b. If the antifreeze is not recycled, do you manage it as hazardous waste, send it to a facility authorized to manage waste antifreeze, and keep your disposal records for three years? Refer to page 17 in the Workbook.	<input type="checkbox"/>	<b>Fix the problem</b>
11. Does your facility generate used oil and/or used oil filters? Refer to page 18 in the Workbook.	<input type="checkbox"/>	Skip to Question 14
12. Does your facility properly dispose of used oil and properly manage containers and tanks of used oil? To mark “YES” to this question you must be able to answer “YES” to questions 12a-12e below. Refer to pages 18 and 19 in the Workbook.	<input type="checkbox"/>	<b>Fix the problem</b>
12a. Does your facility label all used oil containers with the words “Used Oil”?	<input type="checkbox"/>	<b>Fix the problem</b>
12b. Does your facility register all tanks over 550 gallons?	<input type="checkbox"/>	<b>Fix the problem</b>
12c. Does your facility follow the requirements for mixing other waste with used oil? <ul style="list-style-type: none"> <li>• If you mix any waste with used oil, do you have permission from your used oil transporter?</li> <li>• If you are an SQG and you mix any hazardous waste with used oil, do you manage the mixture as hazardous waste?</li> <li>• If you are a CESQG and you mix any hazardous waste with used oil and the mixture has more than 1000 parts per million of total chlorine compounds, do you manage the mixture as hazardous waste?</li> </ul>	<input type="checkbox"/>	<b>Fix the problem</b>
12d. For transporting and disposing of your used oil, do you recycle used oil through a used oil transporter that is registered in the state of Florida? Refer to pages 18-19 in the Workbook.	<input type="checkbox"/>	<b>Fix the problem</b>
12e. If leaks or spills of used oil occurred, did you control the leak and clean up the spill as described in the <i>Spills and Leaks</i> section of the Workbook?	<input type="checkbox"/>	<b>Fix the problem</b>

Did you know...

Used oil is exempt from hazardous waste regulations if it has NOT been mixed or contaminated with hazardous wastes, or it is sent for recycling or burned for energy recovery.

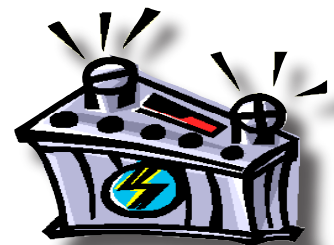


## chapter 2 • specific wastes compliance checklist

	if yes	if no
	<input checked="" type="checkbox"/>	
13. Does your facility manage used oil filters properly? To mark "YES" to this question you must answer "YES" to questions 13a-13d below. Refer to page 20 in the Workbook.	<input type="checkbox"/>	Fix the problem
13a. Are your used oil filters stored in aboveground containers that do not leak?	<input type="checkbox"/>	Fix the problem
13b. Are your used oil filter containers labeled with the words "Used Oil Filters?"	<input type="checkbox"/>	Fix the problem
13c. Are your used oil filter storage containers closed or otherwise protected from weather?	<input type="checkbox"/>	Fix the problem
13d. Are your containers stored on concrete or other impervious surface?	<input type="checkbox"/>	Fix the problem
14. Does your facility generate motor vehicle refrigerants? Refer to page 21 in the Workbook.	<input type="checkbox"/>	Skip to Question 15
14a. For processing of your refrigerants, do you do one or more of the following only: <ul style="list-style-type: none"> <li>• Recover refrigerant from air conditioning units, store it in a container without testing or processing it, and manage it properly?</li> <li>• Reclaim refrigerant, usually by distillation, until all impurities are removed and it meets resale specifications;?</li> <li>• Recycle refrigerants to remove impurities such as oil, air or moisture?</li> <li>• Recharge vehicles using EPA-approved equipment and a certified technician?</li> </ul>	<input type="checkbox"/>	Fix the problem
15. Does your facility generate waste car batteries? Refer to page 22 in the Workbook.	<input type="checkbox"/>	Skip to Question 18
16. Does your facility comply with all requirements for waste batteries as explained below? (To mark "YES" you must answer "YES" to <b>either</b> question <b>16a or 16b</b> , <b>and</b> to both questions <b>16c and 16d</b> below.) Refer to page 22 in the Workbook.	<input type="checkbox"/>	Fix the problem
16a. Are your waste batteries recycled, and do you keep records of recycling for at least three years? Refer to page 22 in the Workbook.		

### Did you know...

Lead acid batteries are exempt from hazardous waste regulations only if they are recycled or returned to a battery manufacturer and documentation is maintained?



## chapter 2 • specific wastes compliance checklist

	<u>if yes</u>	<u>if no</u>
	<input checked="" type="checkbox"/>	
17. If the batteries are not recycled, do you send them to a facility authorized to manage waste batteries and do you keep your battery disposal records for three years? Refer to page 22 in the Workbook.	<input type="checkbox"/>	<b>Fix the problem</b>
17a. When batteries in your facility show signs of leaking or damage, do you place them in an acid-resistant container to prevent the acid from spreading? Refer to page 22 in the Workbook.	<input type="checkbox"/>	<b>Fix the problem</b>
17b. Are batteries in your facility stored upright, no more than four high, in a secure, covered location in secondary containment, or in watertight, acid-resistant containers? Refer to page 22 in the Workbook.	<input type="checkbox"/>	<b>Fix the problem</b>
18. Does your facility collect mercury switches and used fluorescent light bulbs? Refer to page 23 in the Workbook.	<input type="checkbox"/>	<b>Fix the problem</b>
19. Does your facility comply with all requirements for fluorescent/HID light bulbs and mercury switches? Refer to page 23 in the Workbook.	<input type="checkbox"/>	<b>Fix the problem</b>
20. Does your facility operate a sweat furnace? Refer to page 24 in the Workbook.	<input type="checkbox"/>	Skip to Question 21
20a. Does your facility comply with all requirements for operating a sweat furnace? Refer to page 24 in the Workbook.	<input type="checkbox"/>	<b>Fix the problem</b>
21. Does your facility generate waste tires? Refer to page 26 in the Workbook.	<input type="checkbox"/>	Skip to Question 23.
22. Does your facility comply with all requirements for waste tires? (To mark “ <b>YES</b> ” you must answer “ <b>YES</b> ” to questions 22a-22e, or “ <b>NO</b> ” to question 22a and “ <b>YES</b> ” to questions 22c-22e below.) Refer to page 26 in the Workbook.	<input type="checkbox"/>	<b>Fix the problem</b>

### Did you know...

Citrus oil or baking soda can be used to kill mosquito larvae in water collecting in tires?



Don't store more than 1500 tires -- unless you have the proper permit.

## chapter 2 • specific wastes compliance checklist

	<u>if yes</u>	<u>if no</u>
	<input checked="" type="checkbox"/>	
22a. Do you store more than 1,500 tires on-site? <a href="#">Refer to page 26 in the Workbook.</a>	<input type="checkbox"/>	Skip to Question 22c
22b. If yes, have you notified FDEP using form number 62-701.900(20)?	<input type="checkbox"/>	<b>Fix the problem</b>
22c. When your waste tires are transported for disposal, do you do one (or more) of the following: <ul style="list-style-type: none"> <li>• Use another tire collector registered with FDEP? — and/or</li> <li>• Haul your own tires and always transport fewer than 25 tires per load? — or</li> <li>• Haul your own tires and are registered with FDEP as a waste tire collector?</li> </ul>	<input type="checkbox"/>	<b>Fix the problem</b>
22d. Do you send your waste tires to a facility authorized to manage waste tires?	<input type="checkbox"/>	<b>Fix the problem</b>
22e. Do you keep records of your waste tire disposal for at least three years?	<input type="checkbox"/>	<b>Fix the problem</b>
23. Does your shop generate wastewater from one of the following sources: <a href="#">Refer to page 27 in the Workbook.</a> <ul style="list-style-type: none"> <li>• Parts washer?</li> <li>• Hot tank?</li> <li>• Pressure washer?</li> <li>• Oil/water separator?</li> </ul>	<input type="checkbox"/>	Skip to Question 24
23a. Do you have an on-site capture and reuse system for wastewater or a connection to a wastewater treatment facility (with permission to discharge)?	<input type="checkbox"/>	<b>Fix the problem</b>
23b. Have you conducted a hazardous waste determination on wastewater/solvents and sludges?	<input type="checkbox"/>	<b>Fix the problem</b>
23c. Do you maintain records of analytical testing and disposal receipts for three years?	<input type="checkbox"/>	<b>Fix the problem</b>
24. Do you use absorbents (clay, pads, booms or kitty litter) to soak up spills as soon as they occur?	<input type="checkbox"/>	<b>Fix the problem</b>

### Did you know...

Aqueous parts washers are environmentally friendly?

Don't dispose of used absorbents, contaminated soils, or used shop towels in cars to be crushed or shredded!

## chapter 2 • specific wastes compliance checklist

if yes



if no

25. Do you collect contaminated soil as spills and leaks occur?  
Refer to page 30 in the Workbook.



**Fix the  
problem**

26. Do you manage used absorbent, contaminated soil, and shop towels using one or more of the following methods?  
Refer to pages 30-31 in the Workbook.

- Collect and store in closed, labeled containers.
- Manage as hazardous waste if needed.
- Use an industrial laundry service for shop towels.
- Use a registered used oil transporter.
- Discard in the trash.\*



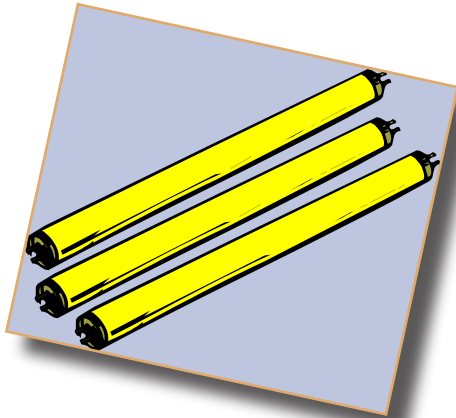
**Fix the  
problem**

\* Check with your local solid waste authority to ensure oily solid wastes can be disposed of in the trash.

27. Do you maintain records of analytical waste determinations and disposal receipts for at least three years?



**Fix the  
problem**



Did you know...

Fluorescent light bulbs contain mercury?

- Don't flush wastewater from your pressure washing or floor cleaning activities down a storm drain or into the soil!
- Make sure you know where your floor drains lead.
- Block your floor drains if they discharge to a septic tank or storm drain.

## chapter 3 • stormwater permitting compliance checklist

if yes

if no



28. Does your facility have a NPDES **Multi-Sector Generic Permit for Industrial Activity (MSGP)** in the current owner's name?

Skip to question 30

Skip to question 29

Refer to page 34 in the Workbook

29. Does rainwater run off the business property, or could it run off the property to any ditch, canal, stream, lake or ocean, or to a city storm sewer through a curb, gutter, ditch, drain, inlet, wetland, or other surface water body?

You need a permit. Refer to the Workbook appendix.

Skip this section. Please proceed to the corrective actions page.

30. Does your facility have a **Stormwater Pollution Prevention Plan (SWPPP)** which identifies possible pollutants, specifies Best Management Practices (BMPs) and includes a site plan drawing of the facility?



**Fix the problem**

Refer to page 35 in the Workbook.

31. Have you conducted **annual employee training** covering stormwater pollution prevention, including analytical sampling, and kept records of the training?



**Fix the problem**

Refer to page 36 in the Workbook.

- 31a. What was the date you last conducted employee training?

Enter date:

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32. Have you completed **quarterly visual monitoring** documenting visual examination of a sample of your stormwater runoff as required by the MSGP?



**Fix the problem**

Refer to page 44 in the Workbook.

- 32a. What was the **date** of your last quarterly visual monitoring event?

Enter date:

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33. Have you completed **quarterly analytical monitoring** during the second and fourth year of your permit coverage?



**Fix the problem**

Refer to page 46 in the Workbook.

- 33a. Did the results from year 2 require further testing in year 4?



- 33b. What was the **date** of your last quarterly monitoring inspection?

Enter date:

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**Fix the problem**

## chapter 3 • stormwater permitting compliance checklist

if yes

if no

34. Have you completed quarterly inspection checklists documenting inspection of the facility as required by the MSGP?

Refer to page 44 in the Workbook.



**Fix the problem**

- 34a. What was the date of your last quarterly inspection?

Enter date:

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35. Have you completed the Annual Comprehensive Site Compliance Assessment as required by the MSGP?

Refer to page 48 in the Workbook.



**Fix the problem**

- 35a. What was the date of your last Annual Comprehensive Site Compliance Assessment?

Enter date:

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36. Have you completed the Non-Stormwater Discharge Certification as required by the MSGP?

Refer to pages 48- 49 in the Workbook.



**Fix the problem**

*You have now completed the questionnaire portion of the self-audit.*

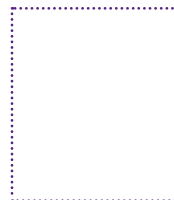
*Please proceed to the next page if your facility had problems which required corrective actions.*





# notes

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Florida Department of Environmental Protection  
Green Yards Program  
2600 Blair Stone Road MS 4560  
Tallahassee, Florida 32399-2400



***Yes! I want to go the extra mile and become a certified Florida Green Yard. Please mail my certification package to the address below:***

Owner's name \_\_\_\_\_

Salvage yard \_\_\_\_\_

Address \_\_\_\_\_

County \_\_\_\_\_

City \_\_\_\_\_

State/Zip \_\_\_\_\_