



Hazardous Waste Self Audit

Section: Antifreeze

Self-Audit tips, action steps, and resources

Do not mix antifreeze with used oil, gasoline or fuel, engine degreaser, chlorinated solvents or F listed solvents (i.e. aerosols). If you have a mixture of antifreeze with other fluids, keep them separate and determine whether the mixture is a hazardous waste (i.e. gasoline mixed with antifreeze may be ignitable). Label container used to store waste antifreeze "Waste Antifreeze" and keep the container closed.

Instructions for filling out the Management Plan Form 2

B. Year waste first generated: Estimate if unknown.

C. Shipment or treatment frequency: For example: 2 times per 1 year. Write "to be determined" if you are unsure how often the waste will be disposed.

H. Amount generated per year: If you don't have a history of the amount of waste generated, estimate the amount that will be generated in a year.

If you have not identified a disposal company, see hennepin.us/hazwastedisposalcompanies or write "on-site accumulation." If you write on-site accumulation, you do not need to identify a transporter or disposer in questions J through M, but you will need to choose one later.

← Refer to the tips, action steps and resources to help you complete the audit.

1. Does your business generate or have the potential to generate waste Antifreeze?

- Yes. Fill out the Management Plan Form 2 — Antifreeze below.
- No.

Management Plan Form 2 — Antifreeze

Report how you manage or will manage your wastes. Call 612-348-3777 for assistance.

← Refer to the instructions for more information.

A. Waste name: Antifreeze

B. Year waste was first generated at the site under current ownership:

C. Frequency of shipment or treatment: _____ times per _____ year

D. Source or process of generation (check all that apply):
 Coolant flush or replacement Other (specify) _____

E. On-site management of waste (select one):
 Stored for Shipment
 Other (specify) _____

F. Type of waste storage container(s):
 Pail Drum Original container Aboveground Storage Tank
 Underground storage tank Other (specify) _____

G. On-site storage location of the waste: Indoors Outdoors N/A

H. Amount generated per year: _____ gallons _____ pounds

I. Disposal facility management method: Recycle Burn as Fuel Neutralize
 Wastewater treatment Land Disposal Other (specify) _____

J. Transporter Name _____
Write in "Self" if you transport the waste yourself. Write "to be determined" if you have not yet selected a company.)

K. Transporter ID _____
(Contact your hazardous waste transporter to find out their EPA ID number.)

L. Disposer Name _____
Write in "Self" if you transport the waste yourself. Write "to be determined" if you have not yet selected a company.)

M. Disposer ID _____
(Contact your hazardous waste disposer to find out their EPA ID number.)

Office use only

Waste code: none

Storage container:

Disposal method:

Date entry & initials:

Phys. state: Organic Liquid

Billing code: B

Inv. ID:

Waste inactive: