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TOWNSHIP OF LEEDS AND THE THOUSAND ISLANDS

**Briar Hill Waste Disposal Site
2019 Annual Monitoring, Development and
Operations Report**



Appendix D-Monitoring and Screening Checklist

General Information and Instructions

General Information: The checklist is to be completed, and submitted with the Monitoring Report.

Instructions: A complete checklist consists of:

- (a) a completed and signed checklist, including any additional pages of information which can be attached as needed to provide further details where indicated.
- (b) completed contact information for the Competent Environmental Practitioner (CEP)
- (c) self-declaration that CEP(s) meet(s) the qualifications as set out below and in Section 1.2 of the Technical Guidance Document.

Definition of Groundwater CEP:

For groundwater, the CEP must have expertise in hydrogeology and meet one of the following:

- (a) the person holds a licence, limited licence or temporary licence under the *Professional Engineers Act*; or
- (b) the person holds a certificate of registration under the *Professional Geoscientists Act, 2000* and is a practicing member, temporary member or limited member of the Association of Professional Geoscientists of Ontario. O. Reg. 66/08, s. 2..

Definition of Surface water CEP:

A CEP for surface water assessments is a scientist, professional engineer or professional geoscientist as described in (a) and (b) above with demonstrated experience and post-secondary education, either a diploma or degree, in hydrology, aquatic ecology, limnology, aquatic biology, physical geography with specialization in surface water, and/or water resource management.

The type of scientific work that a CEP performs must be consistent with that person's education and experience. If an individual has appropriate training and credentials in both groundwater and surface water and is responsible for both areas of expertise, the CEP may then complete and validate both sections of the checklist.

Monitoring Report and Site Information	
Waste Disposal Site Name	Briar Hill (Lyndhurst) Waste Disposal Site
Location (e.g. street address, lot, concession)	Lot 8, Concession 11, in the Township of Leeds and the Thousand Islands
GPS Location (taken within the property boundary at front gate/ front entry)	443244.01 N, 761015.37 W
Municipality	Township of Leeds and the Thousand Islands
Client and/or Site Owner	The Corporation of the Township of Leeds and the Thousand Islands
Monitoring Period (Year)	2019
This Monitoring Report is being submitted under the following:	
Environmental Compliance Approval Number:	A442103
Director's Order No.:	NA
Provincial Officer's Order No.:	NA
Other:	NA

Report Submission Frequency	<input checked="" type="radio"/> Annual <input type="radio"/> Other		
The site is: (Operation Status)	<input checked="" type="radio"/> Open <input type="radio"/> Inactive <input type="radio"/> Closed		
Does your Site have a Total Approved Capacity?	<input checked="" type="radio"/> Yes <input type="radio"/> No		
If yes, please specify Total Approved Capacity	85,600.00	Units	Cubic Metres
Does your Site have a Maximum Approved Fill Rate?	<input type="radio"/> Yes <input checked="" type="radio"/> No		
If yes, please specify Maximum Approved Fill Rate	NA	Units	
Total Waste Received within Monitoring Period (Year)	2,029	Units	Cubic Metres
Total Waste Received within Monitoring Period (Year) <i>Methodology</i>	Difference between volumes from annual surveys.		
Estimated Remaining Capacity	55,290	Units	Cubic Metres
Estimated Remaining Capacity <i>Methodology</i>	Approved capacity minus current waste volume, as determined by survey.		
Estimated Remaining Capacity <i>Date Last Determined</i>	December 16, 2019		
Non-Hazardous Approved Waste Types	<input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Industrial, Commercial & Institutional (IC&I) <input type="checkbox"/> Source Separated Organics (Green Bin) <input type="checkbox"/> Tires	<input type="checkbox"/> Contaminated Soil <input type="checkbox"/> Wood Waste <input type="checkbox"/> Blue Box Material <input type="checkbox"/> Processed Organics <input checked="" type="checkbox"/> Leaf and Yard Waste	<input type="checkbox"/> Food Processing/Preparation Operations Waste <input type="checkbox"/> Hauled Sewage Other: <input type="text"/>
Subject Waste Approved Waste Classes: Hazardous & Liquid Industrial <i>(separate waste classes by comma)</i>			
Year Site Opened <i>(enter the Calendar Year only)</i>		Current ECA Issue Date	August 20, 2015
Is your Site required to submit Financial Assurance?	<input type="radio"/> Yes <input checked="" type="radio"/> No		
Describe how your Landfill is designed.	<input checked="" type="radio"/> Natural Attenuation only <input type="radio"/> Fully engineered Facility <input type="radio"/> Partially engineered Facility		
Does your Site have an approved Contaminant Attenuation Zone?	<input checked="" type="radio"/> Yes <input type="radio"/> No		

If closed, specify C of A, control or authorizing document closure date:

Has the nature of the operations at the site changed during this monitoring period?

Yes

No

Type Here

If yes, provide details:

Have any measurements been taken since the last reporting period that indicate landfill gas volumes have exceeded the MOE limits for subsurface or adjacent buildings? (i.e. exceeded the LEL for methane)

Yes

No

Groundwater WDS Verification:

Based on all available information about the site and site knowledge, it is my opinion that:

Sampling and Monitoring Program Status:

<p>1) The monitoring program continues to effectively characterize site conditions and any groundwater discharges from the site. All monitoring wells are confirmed to be in good condition and are secure:</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>	<p>See report for details. Some minor repairs to monitoring wells were completed in 2019, and may require additional attention in 2020.</p>
<p>2) All groundwater, leachate and WDS gas sampling and monitoring for the monitoring period being reported on was successfully completed as required by Certificate(s) of Approval or other relevant authorizing/control document (s):</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> Not Applicable</p>	<p>If no, list exceptions below or attach information.</p>

Groundwater Sampling Location	Description/Explanation for change (change in name or location, additions, deletions)	Date
OW19	Unable to sample due to dry conditions during October sampling event. See report for details.	October 2019
Type Here	Type Here	Select Date

3) a) Is landfill gas being monitored or controlled at the site?	<input checked="" type="radio"/> Yes <input type="radio"/> No
--	--

If yes to 3(a), please answer the next two questions below.

b) Have any measurements been taken since the last reporting period that indicate landfill gas is present in the subsurface at levels exceeding criteria established for the site?	<input type="radio"/> Yes <input checked="" type="radio"/> No
--	--

c) Has the sampling and monitoring identified under 3(a) for the monitoring period being reported on was successfully completed in accordance with established protocols, frequencies, locations, and parameters developed as per the Technical Guidance Document , or MECP concurrence.	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable	If no, list exceptions below or attach additional information.
--	--	--

Groundwater Sampling Location	Description/Explanation for change (change in name or location, additions, deletions)	Date
OW19	Unable to sample due to dry conditions. See report for details.	October 2019
Type Here	Type Here	Select Date

4) All field work for groundwater investigations was done in accordance with standard operating procedures as established/outlined per the Technical Guidance Document (including internal/external QA/QC requirements) (Note: A SOP can be from a published source, developed internally by the site owner's consultant, or adopted by the consultant from another organization):	<input checked="" type="radio"/> Yes <input type="radio"/> No	See report for details.
--	--	-------------------------

Sampling and Monitoring Program Results/WDS Conditions and Assessment:

<p>5) The site has an adequate buffer, Contaminant Attenuation Zone (CAZ) and/or contingency plan in place. Design and operational measures, including the size and configuration of any CAZ, are adequate to prevent potential human health impacts and impairment of the environment.</p>	<p><input type="radio"/> Yes <input checked="" type="radio"/> No</p>	<p>Development of additional CAZ for the Site is ongoing.</p>	
<p>6) The site meets compliance and assessment criteria.</p>	<p><input type="radio"/> Yes <input checked="" type="radio"/> No</p>	<p>See previous comment and report for details.</p>	
<p>7) The site continues to perform as anticipated. There have been no unusual trends/ changes in measured leachate and groundwater levels or concentrations.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>	<p>If no, list exceptions and explain reason for increase/change (Type Here):</p>	
<p>1) Is one or more of the following risk reduction practices in place at the site:</p> <p>(a) There is minimal reliance on natural attenuation of leachate due to the presence of an effective waste liner and active leachate collection/ treatment; or</p> <p>(b) There is a predictive monitoring program in-place (modeled indicator concentrations projected over time for key locations); or</p> <p>(c) The site meets the following two conditions (typically achieved after 15 years or longer of site operation):</p> <p><i>i.</i> The site has developed stable leachate mound(s) and stable leachate plume geometry/concentrations; and</p> <p><i>ii.</i> Seasonal and annual water levels and water quality fluctuations are well understood.</p>	<p><input type="radio"/> Yes <input checked="" type="radio"/> No</p>	<p>Note which practice(s):</p>	<p><input type="checkbox"/> (a) <input type="checkbox"/> (b) <input type="checkbox"/> (c) As discussed in report.</p>
<p>9) Have trigger values for contingency plans or site remedial actions been exceeded (where they exist):</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> Not Applicable</p>	<p>See report for discussion.</p>	

Groundwater CEP Declaration:

I am a licensed professional Engineer or a registered professional geoscientist in Ontario with expertise in hydrogeology, as defined in Appendix D under Instructions. Where additional expertise was needed to evaluate the site monitoring data, I have relied on individuals who I believe to be experts in the relevant discipline, who have co-signed the compliance monitoring report or monitoring program status report, and who have provided evidence to me of their credentials.

I have examined the applicable Certificate of Approval and any other environmental authorizing or control documents that apply to the site. I have read and followed, as deemed appropriate for this Site in my professional judgement, the Monitoring and Reporting for Waste Disposal Sites Groundwater and Surface Water Technical Guidance Document (MOE, 2010, or as amended), and associated monitoring and sampling guidance documents, as amended from time to time. I have reviewed all of the data collected for the above-referenced site for the monitoring period(s) identified in this checklist. Except as otherwise agreed with the ministry for certain parameters, all of the analytical work has been undertaken by a laboratory which is accredited for the parameters analyzed to ISO/IEC 17025:2005 (E)- General requirements for the competence of testing and calibration laboratories, or as amended from time to time by the ministry.

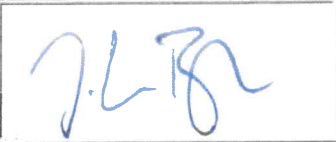
The completion of this Checklist is a requirement of the MECP. As always, we rely upon the MECP to undertake a complete review the report(s) provided regarding the waste disposal site/landfill, and provide their comments and acceptance of our interpretation, conclusions and recommendations. The Checklist should in no way supersede the MECP's responsibility to undertake their complete review of our report(s) to ensure Site compliance with environmental regulations, standards and/or approvals. If any exceptions or potential concerns have been noted in the questions in the checklist attached to this declaration, it is my opinion that these exceptions and concerns are minor in nature and will be rectified for the next monitoring/reporting period. Where this is not the case, the circumstances concerning the exception or potential concern and my client's proposed action have been documented in writing to the Ministry of the Environment District Manager in a letter from me dated:

2020-03-23

Recommendations:

Based on my technical review of the monitoring results for the waste disposal site:

<p><input type="radio"/> No changes to the monitoring program are recommended</p> <p><input checked="" type="radio"/> The following change(s) to the monitoring program is/are recommended:</p>	<p>see report for recommendations</p> <p>The completion of this Checklist is a requirement of the MECP. As always, we rely upon the MECP, to undertake a complete review of the report(s) provided regarding the waste disposal site/landfill, and provide their comments and acceptance of our interpretation, conclusions and recommendations. This Checklist should in no way supersede the MECP's responsibility to undertake their complete review of our report(s) to ensure compliance with the environmental regulations, standards, and approvals</p>
<p><input checked="" type="radio"/> No Changes to site design and operation are recommended</p> <p><input type="radio"/> The following change(s) to the site design and operation is/are recommended:</p>	

Name:	John Pyke		
Seal:	Add Image		
Signature:		Date:	March 23, 2020
CEP Contact Information:	John Pyke		
Company:	Malroz Engineering Inc.		
Address:	308 Wellington St., 2nd Floor, Kingston ON		
Telephone No.:	613-548-3446 ext. 34	Fax No.:	Type Here
E-mail Address:	pyke@malroz.com		
Co-signers for additional expertise provided:			
Signature:	<input type="text"/>	Date:	Select Date
Signature:	<input type="text"/>	Date:	Select Date

Surface Water WDS Verification:

Provide the name of surface water body/bodies potentially receiving the WDS effluent and the approximate distance to the waterbody (including the nearest surface water body/bodies to the site):

Name (s)	unnamed creek
Distance(s)	north of the Site

Based on all available information and site knowledge, it is my opinion that:

Sampling and Monitoring Program Status:

<p>1) The current surface water monitoring program continues to effectively characterize the surface water conditions, and includes data that relates upstream/background and downstream receiving water conditions:</p>	<input checked="" type="radio"/> Yes <input type="radio"/> No	See report for discussion.
<p>2) All surface water sampling for the monitoring period being reported was successfully completed in accordance with the Certificate(s) of Approval or relevant authorizing/control document(s) (if applicable):</p>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not applicable (No C of A, authorizing / control document applies)	If no, specify below or provide details in an attachment.

Surface Water Sampling Location	Description/Explanation for change (change in name or location, additions, deletions)	Date
Type Here	Type Here	Select Date

<p>3) a) Some or all surface water sampling and monitoring program requirements for the monitoring period have been established outside of a ministry C of A or authorizing/control document, or MECP concurrence.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> Not Applicable</p>
--	---

<p>b) If yes, all surface water sampling and monitoring identified under 3 (a) was successfully completed in accordance with the established program from the site, including sampling protocols, frequencies, locations and parameters) as developed per the Technical Guidance Document:</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> Not Applicable</p>	<p>If no, specify below or provide details in an attachment.</p>
--	---	--

Surface Water Sampling Location	Description/Explanation for change (change in name or location, additions, deletions)	Date
Type Here	Type Here	Select Date

<p>4) All field work for surface water investigations was done in accordance with standard operating procedures, including internal/external QA/QC requirements, as established/outlined as per the Technical Guidance Document, MOE 2010, or as amended. (Note: A SOP can be from a published source, developed internally by the site owner's consultant, or adopted by the consultant from another organization):</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>	<p>See report for discussion.</p>
--	---	-----------------------------------

Sampling and Monitoring Program Results/WDS Conditions and Assessment:

5) The receiving water body meets surface water-related compliance criteria and assessment criteria: i.e., there are no exceedences of criteria, based on MECP legislation, regulations, Water Management Policies, Guidelines and Provincial Water Quality Objectives and other assessment criteria (e.g., CWQGs, APVs), as noted in Table A or Table B in the Technical Guidance Document (Section 4.6):

Yes

No

If no, list parameters that exceed criteria outlined above and the amount/percentage of the exceedance as per the table below or provide details in an attachment:

Parameter	Compliance or Assessment Criteria or Background	Amount by which Compliance or Assessment Criteria or Background Exceeded
e.g. Nickel	e.g. C of A limit, PWQO, background	e.g. X% above PWQO
See report for discussion.		
6) In my opinion, any exceedances listed in Question 5 are the result of non-WDS related influences (such as background, road salting, sampling site conditions)?	<input checked="" type="radio"/> Yes <input type="radio"/> No	<p>If yes, specify (Type Here): See report for discussion.</p> <p>Background conditions show several exceedances of criteria. See report for details.</p>

<p>7) All monitoring program surface water parameter concentrations fall within a stable or decreasing trend. The site is not characterized by historical ranges of concentrations above assessment and compliance criteria.</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>	<p>If no, list parameters and stations that is outside the expected range. Identify whether parameter concentrations show an increasing trend or are within a high historical range (Type Here)</p> <p>See report for details.</p>
<p>8) For the monitoring program parameters, does the water quality in the groundwater zones adjacent to surface water receivers exceed assessment or compliance criteria (e.g. , PWQOs, CWQGs, or toxicity values for aquatic biota (APVs)):</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> Not Known</p> <p><input type="radio"/> Not Applicable</p>	<p>If yes, provide details and whether remedial measures are necessary (Type Here):</p> <p>See report for discussion.</p>
<p>9) Have trigger values for contingency plans or site remedial actions been exceeded (where they exist):</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> Not Applicable</p>	<p>If yes, list value(s) that are/have been exceeded and follow-up action taken (Type Here):</p> <p>See report for discussion.</p>

Surface Water CEP Declaration:

I, the undersigned hereby declare that I am a Competent Environmental Practitioner as defined in Appendix D under Instructions, holding the necessary level of experience and education to design surface water monitoring and sampling programs, conduct appropriate surface water investigations and interpret the related data as it pertains to the site for this monitoring period.

I have examined the applicable Certificate of Approval and any other environmental authorizing or control documents that apply to the site. I have read and followed, as deemed appropriate for this Site in my professional judgement, the Monitoring and Reporting for Waste Disposal Sites Groundwater and Surface Water Technical Guidance Document (MECP, 2010, or as amended) and associated monitoring and sampling guidance documents, as amended from time to time. I have reviewed all of the data collected for the above-referenced site for the monitoring period(s) identified in this checklist. Except as otherwise agreed with the ministry for certain parameters, all of the analytical work has been undertaken by a laboratory which is accredited for the parameters analysed to ISO/IEC 17025:2005 (E)- General requirements for the competence of testing and calibration laboratories, or as amended from time to time by the ministry.

The completion of this Checklist is a requirement of the MECP. As always, we rely upon the MOE to undertake a complete review the report(s) provided regarding the waste disposal site/landfill, and provide their comments and acceptance of our interpretation, conclusions and recommendations. This Checklist should in no way supersede the MECP responsibility to undertake their complete review of our report(s) to ensure compliance with environmental regulations, standards and approvals.


If any exceptions or potential concerns have been noted in the questions in the checklist attached to this declaration, it is my opinion that these exceptions and concerns are minor in nature or will be rectified for future monitoring events. Where this is not the case, the circumstances concerning the exception or potential concern and my client's proposed action have been documented in writing to the Ministry of the Environment District Manager in a letter from me dated:

2020-03-23

Recommendations:

Based on my technical review of the monitoring results for the waste disposal site:

<p><input checked="" type="radio"/> No Changes to the monitoring program are recommended</p> <p><input type="radio"/> The following change(s) to the monitoring program is/are recommended:</p>	<p>The completion of this Checklist is a requirement of the MECP. As always, we rely upon the MECP, to undertake a complete review of the report(s) provided regarding the waste disposal site/landfill, and provide their comments and acceptance of our interpretation, conclusions and recommendations. This Checklist should in no way supersede the MECP's responsibility to undertake their complete review of our report(s) to ensure compliance with the environmental regulations, standards, and approvalsType Here</p>
<p><input checked="" type="radio"/> No changes to the site design and operation are recommended</p> <p><input type="radio"/> The following change(s) to the site design and operation is/are recommended:</p>	<p>Type Here</p>

CEP Signature		
Relevant Discipline	Geo-scientist with relevant experience and training.	
Date:	March 23, 2020	
CEP Contact Information:	John Pyke	
Company:	Malroz Engineering Inc.	
Address:	308 Wellington St., 2nd Floor, Kingston ON	
Telephone No.:	613-548-3446 ext. 34	
Fax No. :	Type Here	
E-mail Address:	pyke@malroz.com	
Save As		Print Form

NOTICE TO READER

This document has been prepared by Malroz Engineering Inc. (Malroz) on behalf of the Township of Leeds and the Thousand Islands (TLTI), in fulfilment of Condition 6(6) of Amended Environmental Compliance Approval (ECA) No. A442103.

Malroz has relied upon site observations and previous reports to provide historic data and the conceptual understanding of the site. Malroz accepts no responsibility for the integrity of the data provided by TLTI or for missing historic data. Any third-party use or reliance of this report, or decisions made based on this report, are the responsibilities of the third parties. Malroz accepts no responsibility for damages suffered by any third party as a result of decisions made or actions taken based on the contents of this report.

This document has been prepared for TLTI for submission to the Ministry of Environment, Conservation and Parks (*MECP*) as required by the ECA. Unauthorized re-use of this document for any other purpose, or by third parties without the express written consent of Malroz shall be at such party's sole risk.

This page is an integral part of this document and must remain with it at all times.

Respectfully Submitted,

MALROZ ENGINEERING INC.



per: Robert Varcoe, G.I.T.
Environmental Scientist



and: John Pyke, P. Geo.
Project Manager



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1.0 Introduction

The Briar Hill waste disposal site (the Site) operates under Amended Environmental Compliance Approval (ECA) No. A442103 issued by the Ministry of Environment, Conservation and Parks (MECP), dated August 20, 2015 (see Appendix A). The Site is located at 104 Turk Rock Rd on part of Lot 18, Concession 11 in the Township of Leeds and the Thousand Islands (TLTI), Ontario (Figure 1 and Figure 2, Appendix B). In accordance with the ECA, a monitoring, development and operations report (AMR) is to be completed annually.

Malroz was retained by TLTI to conduct the semi-annual monitoring of the groundwater and surface water at the Site, and report on the development and operations of the Site. This document presents our methodology, results and interpretation, in accordance with the ECA. This report was prepared on behalf of the TLTI, using data collected by Malroz and available information provided by TLTI staff.

1.1 Ownership and Key Personnel

The Site is owned and maintained by the Corporation of the Township of Leeds and the Thousand Islands. Key contacts for the Site are as follows:

Municipal Contact

Adam Goheen
Director of Operations
1233 Prince Street, P.O. Box 280
Lansdowne, Ontario, K0E 1L0
613-659-2415 ext. 213
directoroperations@townshipleeds.on.ca

Environmental Professional Contact

John Pyke, P. Geo.
Project Manager
308 Wellington St.
Kingston, Ontario, K7K 7A8
613-548-3446 ext. 34
pyke@malroz.com

2.0 Background

The geology, hydrogeology, physiography, and hydrology of the Site are described in this section, based on our review of collected data, including site observations and previous reports on investigations at the Site.

2.1 Geological Setting

Geological mapping from the Ontario Geological Survey¹ (OGS, 2011) indicates that bedrock underlying the southern two-thirds of the Site comprises Precambrian granitic gneiss, with the northern portion of the Site underlain by carbonate metasedimentary rocks (OGS, 2011, Hewitt, 1964). Well records for bedrock wells BW1 and BW2 (Appendix E) suggest two distinct lithologies are present at the Site, with BW1 set in metasedimentary and BW2 in granitic bedrock (Figure 3, Appendix B). The inferred contact between the two lithologies runs approximately southwest to northeast, just north of the active fill area, and transecting the former waste mound.

Several bedrock outcrops are present on Site, mainly in the south portion of the Site by the Tackaberry Quarry, as well as in the forested area north of the waste fill area. Water well records show that the overburden consists of clay and sand, and ranges from approximately 3 to 11 metres thick (refer to Appendix E).

2.2 Hydrogeologic Setting

Groundwater elevation data collected during the 2019 monitoring program indicates a north to north-westerly flow in the overburden, towards an unnamed tributary of Morton Creek, just north of the Site. Based on monitoring and survey data, the overburden groundwater from the Site appears to discharge to the unnamed stream north of the Site (see Table 1, Appendix C).

Artesian conditions observed at deeper groundwater well OW15-D suggests an upwards gradient and potential discharge to the stream located north of the Site. Groundwater elevations suggest that the groundwater flow in the bedrock is towards the north. However, it is notable that these wells are not screened within the same unit: BW2-D is screened within the granitic gneiss, while BW1 and OW15-D are within calcareous metasedimentary bedrock. The influence of the various geologic units on the bedrock hydrogeology has not been fully assessed.

¹ Bedrock Geology (GIS database MRD126-REV1), Ontario Ministry of Northern Development and Mines, 2011.

We understand that there are two residential properties downgradient, and within 500 m of the Site: 122 Turk Rock Road, and 151 Fortune Line Road. The residential property located north of the creek at 122 Turk Rock Road reportedly does not have a private drinking water well, and drinking water is trucked to the residence and stored in a cistern².

We understand that a residential well associated with the property at 151 Briar Hill Road, located upgradient and south of the Site, is screened within the bedrock.

2.3 Surface Water Features

An unnamed tributary to Morton Creek flows east to west and is located north of the Site. The creek flows through a culvert under Turk Rock Road, and westward past OW17, OW15-S&D, and OW24. The unnamed creek continues west under Fortune Line Road and eventually flows into Morton Creek. From the confluence of Morton Creek and the unnamed stream, Morton Creek flows approximately 3 km and discharges into Whitefish Lake, which is part of the Rideau Waterway.

During the 2019 monitoring program Malroz observed improvements to the culvert under Fortune Line Road, in the vicinity of SW5 (see Appendix I). We also observed improvements to a tile drain discharge which directs water from an adjacent field to the north east of the Site. This tile drain appears to discharge into the unnamed tributary to Morton Creek approximately 5 metres from surface water station SW1.

2.4 MECP Review

Comments and recommendations regarding the 2015, 2016, 2017, and 2018 groundwater monitoring programs were provided by the MECP in a memorandum dated February 12, 2020 (Appendix D), as summarized in the table below:

MECP Comment	Response
The MECP endorses amendment of the ECA to recognize the lands purchased north of the site (see northern CAZ, Figure 2) as a contamination attenuation zone (CAZ), and recommends that the use of these lands for leachate attenuation be registered on title.	Malroz will coordinate with TLTI regarding the purchase of the proposed western CAZ lands, and to have the ECA amended to recognize the lands north and west of the site as CAZ lands.

² Solid Non-Hazardous Waste Disposal Site Inspection Report, Ministry of Environment and Climate Change, March 6, 2015

<p>The MECP endorses the acquisition of lands to the west of the site (see proposed western CAZ, Figure 2) for use as a CAZ, and recommends that the use of these lands for leachate attenuation be registered on title.</p>	
<p>The MECP endorses reduced monitoring at wells L10, L11, and L2 VOC analyses should continue at all monitoring wells in which VOCs have historically been detected</p>	<p>Malroz will apply to the MECP to reduce the frequency of monitoring at wells L10, L11, and L2 to annual, and to cease analysis of VOCs from wells without historical detections of VOCs.</p>
<p>Wells L10 and OW15-D should be further evaluated to determine if they are installed into bedrock Borehole logs and well construction diagrams should be included in future monitoring reports</p>	<p>Available borehole logs and well construction diagrams will be included in future monitoring reports.</p>
<p>An effective barrier should be placed around OW24 to prevent damage from farm equipment</p>	<p>Malroz will consult with TLTI and evaluate the placement of a barrier or a reflective flag around OW24</p>
<p>The MECP endorsed the abandonment of wells OW6, OW7, and L8, in accordance with the Wells Regulation</p>	<p>Wells OW6, OW7, and L8 were abandoned in accordance with O. Reg. 903. on October 28, 2019.</p>
<p>The MECP supports the development of a trigger mechanism for contingency action and subsequent re-evaluation of the groundwater monitoring program</p>	<p>Pending updates to the monitoring program, next steps in development of a trigger mechanism will be evaluated.</p>
<p>Hydraulic conductivity estimates should be included in future monitoring reports</p>	<p>Hydraulic conductivity testing will be conducted at select wells in various lithologic units during the 2020 groundwater monitoring program</p>

3.0 Development and Operations

3.1 Waste Disposal Site Description

The Site operates under ECA No. A442103, amended in 2015, which permits a 2.4 hectare waste disposal area and transfer site within a total site area of 16 hectares. The Site accepts non-hazardous waste from within the TLTI.

The corners of the landfilling area are marked and secured by fencing. The site is adjacent to an active sand and gravel pit to the south, an agricultural property and a forested area to the west, and an agricultural/residential property to the north. Turk Rock Road is adjacent to the eastern property boundary, and a forested area is present further to the east.

Waste was previously deposited at the Briar Hill landfill on the northeastern segment of the Site (Figure 2, Appendix B). Following the closure of the former waste fill area, filling activities began to the west, near the centre of the property. The leased land located to the west of the Site and the purchased land located to the north of the Site are intended to serve as a buffer zone for contaminant attenuation. We understand that the registration of the new property as a CAZ is on-going.

Information regarding Site operations in 2019 was provided through attendant logbooks, site observations, and site investigations.

3.2 Site Access

The Site is accessed from Turk Rock Road off Briar Hill Road. Geodetic coordinates for the Site entrance are as follows (2013 Site survey):

Zone: NAD 83, 18T
Easting: 0407020.1 m (+/- 0.5 m)
Northing: 4933135.1 m (+/- 0.5 m)

3.3 Service Area

Only waste that is generated within the boundaries of the TLTI is accepted at the Site. According to the 2016 census, the population of TLTI was 9,465³.

3.4 Method of Waste Disposal

The Briar Hill Waste Disposal Site operates as an area fill site. On a bi-weekly basis, the waste is contoured, compacted and covered. Manco Recycling Systems, now Environmental 360 solutions (E360), provides recycling bin rentals for the Site and

³ 2016 Census Profile, Leeds and the Thousand Islands, Ontario. Statistics Canada.

provides pickup and processing services for recycling materials dropped off by TLTI residents.

Burning of waste at the Site was carried out in accordance to condition 2(6) (a) of the ECA, which permits the burning of segregated, clean wood and brush at the landfill provided it is completed in compliance with the Ministry of the Environment document “Guideline C-7, Burning at Landfill Sites” (dated April 1994). All other types of waste burning are prohibited at the Site. According to discussions with the Site’s attendant, burning occurs at the Site prior to compactor’s arrival, so that ashes can be included in the compaction.

No spills or emergencies, as described by condition 5 of the ECA, occurred at the Site in 2019.

3.5 Hours of Operation

Hours of operation are as follows:

Monday	8:30a.m. - 4:45 p.m.
Wednesday	8:30 a.m. - 4:45 p.m.
Thursday	8:30 a.m. - 4:45 p.m.
Saturday	8:30 a.m. - 4:45 p.m.

The entrance and exit gates are locked and no waste is received at the Site during non-operating hours. The Site was supervised by a site attendant during operating hours. A program is in place to inspect incoming waste loads for compliance. Daily records of site operations and conditions are kept by the Attendant and have been provided in Appendix F. Signs and labels at the Site are in accordance with ECA condition 2.

3.6 Waste Characteristics

According to the ECA, only solid non-hazardous municipal waste as defined under O. Reg. 347 is accepted at the Site. We understand loads of waste are inspected by site staff prior to their acceptance at the Site. Based on the daily attendant logs, waste loads were rejected on 17 occasions due to out-of-township residents, on 3 occasions due to oversized trailer loads, and on 1 occasion due to non-accepted waste types (Appendix F).

The site serves as a recycling depot operated by TLTI staff and serviced by E360.

3.7 Phasing of Site Usage

We understand that waste at the site is compacted using a CAT compactor and covered with sand fill bi-weekly. Material is brought in from off-site.

3.8 Site Inspections

Daily site inspections were undertaken at the Site (Appendix F). The following comments were noted:

- Windblown litter was reported frequently along the fence and entranceway.
- Animals (birds, rodents) were occasionally reported present around the Site.
- Some ponded water was observed after rainfall.

Malroz undertook an inspection of the Briar Hill Landfill on May 15 and October 9, 2019 (Appendix G). The following observations were made:

- Minor ponding of water at the base of brush stockpile.
- Windblown litter is a continued concern; however, attendants have reportedly been cleaning up the litter daily.
- The perimeter fence has fallen near and to the left of the entrance gate.

3.9 Record of Complaints

No complaints were reportedly received at the Site in 2019.

3.10 Record Keeping

Field notes and Site records are maintained at the Township offices, 1233 Prince Street, Lansdowne, Ontario.

3.11 Remaining Site Capacity

The maximum volumetric capacity approved for the Site is 85,600 m³ as reported in the ECA Section 7(4). This volume includes the waste, daily cover, intermediate cover and final cover. The volume does not include historical volume of waste deposited prior to May 2003 within the 1.5 hectare area of the former landfill.

In December 2019, Malroz conducted a capacity survey at the Site. The survey identified a total of 2,029 m³ of waste was deposited in 2019. According to the 2016 BluMetric survey, and considering the amount deposited from 2017 to 2019, the total volume of waste deposited at the Site is approximately 30,310 m³ with a remaining capacity of 55,290 m³. Based on the approved capacity of the Site, as reported in the ECA, and using an average rate of fill of 1,720 m³ (average based on the last three years), the estimated remaining capacity of the site is approximately 32 years.

4.0 Description of Monitoring Program

Groundwater and surface water monitoring are conducted on a semi-annual basis in the spring and fall, in accordance with the ECA. Results of the environmental monitoring are reported to the MECP on an annual basis by March 31 of the year following the reporting period. The current monitoring plan for the Site utilizes the Ontario Drinking Water Standards (ODWS) to assess groundwater conditions and Provincial Water Quality Objectives (PWQO) to assess surface water conditions.

Field work for the 2019 monitoring program was conducted during the spring (May 14-15) and fall (October 9-10). Groundwater and surface water programs are detailed in Sections 4.1 and 4.2 below.

4.1 Groundwater Monitoring Program

The 2019 groundwater monitoring program consisted of sampling 15 overburden monitoring wells and four bedrock monitoring wells (see Appendix H, and Figure 2, Appendix B).

Groundwater monitoring was conducted at each of the monitoring wells prior to sampling and included in the groundwater sampling program. Monitoring included collecting methane measurements, depth to water, depth to well bottom, and visual and olfactory evaluation of the groundwater during sample purging.

Methane concentrations were calculated based the difference between full gas response and responses in methane elimination mode using an RKI Eagle 2.

4.2 Surface Water Monitoring Program

The surface water monitoring program includes collecting samples at three active surface water sampling stations located around the Site: SW1, SW4 and SW5. The surface water monitoring program is provided in Appendix H. Results from surface water sampling are presented in Section 5.

4.3 Variations in Monitoring and Reporting

In 2019, Malroz followed the groundwater and surface water programs as specified in the ECA with the following variations:

- Due to dry conditions, overburden monitoring well OW22 was not sampled during the spring or fall, and OW19 was not sampled during the fall.

Field measurements of groundwater pH during the 2019 sampling event were low when compared to historical values. The low pH values during the 2019 sampling event are

inferred to be the result of an anomaly or equipment error. Future monitoring will continue to evaluate pH.

Historical groundwater VOC analytical results provided in the 2018 AMR incorrectly reported measurable concentrations of 1,4 dichlorobenzene and 1,1 dichloroethane at well OW24, where the measurable concentrations of these parameters should have been reported at well OW19. The historical groundwater VOC results table has been corrected, and is provided in Appendix K.

4.4 Data Quality Evaluation

Samples were collected using laboratory supplied sample bottles containing preservatives appropriate for each parameter. Samples were submitted to Caduceon Laboratories (*Caduceon*) for analyses. *Caduceon* is a Canadian Association for Laboratory Accreditation (CALA) accredited laboratory that uses MECP recognized methods to conduct laboratory analyses.

5.0 Discussion of Results

Results of the 2019 groundwater and surface water programs are presented below. Results have been compared to applicable standards and any observed exceedances are highlighted.

5.1 Well Inspection

Well inspections were undertaken by Malroz during the May, 2019 sampling event. Well inspections included a visual inspection of accessible portions of the well piezometer, casing, cap, lock, and well seal. Based on the inspections, wells classified as described below:

- Good – the well is in good condition with no maintenance required.
- Fair – exhibits some minor deficiencies, however well integrity is not compromised.
- Poor – well integrity is compromised and the well requires maintenance or abandonment.

Results of the well inspections are summarized in Table 2 (Appendix C), and we provide the following comments:

- OW24 was found with the casing knocked over during the May sampling event. This is the third time in three years that this well has been found knocked over, and may indicate that its location is interfering with activities

occurring in the adjacent field. Field staff reset the well casing and placed concrete around the base of the casing for support. Further discussion with TLTI about protecting this well and actions to enhance protection of the well are being considered.

5.2 Monitoring Well Abandonment

Monitoring wells L8, OW6 and OW7 were abandoned in accordance with O. Reg. 903 on October 28, 2019 by Canadian Environmental Drilling and Contractors Inc., a licensed well contractor (see photos in Appendix I). Well abandonment records are provided in Appendix E.

5.3 Landfill Gas and Water Level Monitoring

Results from groundwater monitoring are presented in Table 3 (Appendix C) and inferred groundwater contours for the overburden and bedrock groundwater units at the Site are presented in Figures 4 and 5 (Appendix B).

Methane concentrations were not detected during monitoring, with the following exceptions:

- OW19 was reported at >100% of the lower explosive limit (LEL) during spring and fall sampling events. OW19 is located downgradient of the active fill area, adjacent to the recycling area.
- Low concentrations of methane were detected at OW1, OW17, OW24 and L2 during the spring sampling event and at OW7R1 and OW24 during the fall sampling event.

5.4 Overburden Groundwater Evaluation

Overburden groundwater chemistry results are presented in Table 4a (Appendix C). The groundwater chemistry at the Site is characterized by 15 overburden wells.

Monitoring well OW21 was previously used to assess background groundwater quality at the site. OW21 is located downgradient from the quarry and has historically exhibited elevated concentrations of nitrates indicating potential impacts from the quarry or nearby agricultural activities. Given the potential for groundwater impacts due quarry operations at OW21, we have used monitoring well OW20, located in an agricultural field and up-gradient from the waste mound, to assess background groundwater quality. The background overburden groundwater exhibited elevated concentrations of COD, DOC, TSS, and total phosphorus, which may be related to agricultural activities.

OW19, located adjacent to the active waste area, and L11, located within the former fill area, have historically been used to characterize the leachate at the Site. During review of the 2018 AMR, the MECP used BW3-S to characterize leachate. Wells OW19, L11, and BW3-S have been used to characterize leachate at the Site.

Common leachate indicators dissolved organic carbon (DOC), conductivity, chloride, and boron are elevated in OW19, L11, and BW3-S, and are therefore used as leachate indicator parameters (LIPs) at the Site.

Results from OW6R1 and OW7R1, located north and downgradient of the waste fill area, indicate that concentrations of LIPs are elevated compared to background, and leachate is present in these wells. Concentrations of LIPs boron, conductivity, and DOC, at OW6R1 and OW7R1 are generally lower than at leachate well OW19, suggesting that attenuation is occurring in the marsh area downgradient and north of the Site. Exceptions to this include chloride concentrations at OW6R1 which were elevated when compared to OW19. Elevated chloride concentrations at OW6R1 may be the result of road salting operations from adjacent roads.

Wells OW17 and OW18, located the north of the unnamed stream, exhibited slightly elevated concentrations of conductivity and chloride when compared to the background. Given that groundwater elevations at OW18 were higher than at OW17 during both sampling events in 2019, and historically between 2017-2018, groundwater appears to be flowing southward towards the unnamed stream from the area of OW17 and OW18. This supports our conceptual groundwater model that the groundwater in the area of the Site is discharging to the stream. Slightly elevated concentrations of LIPs at these locations appears to be the result of agricultural activities, and not related to leachate from the WDS.

Evidence of leachate is present northwest of the Site at OW15-S, however, decreased concentrations of LIPs when compared to leachate wells suggest that attenuation is occurring downgradient from the waste mound.

Concentrations of LIPs at OW24, located northwest of OW15-S, are slightly elevated when compared to background well OW20. However, concentrations of LIPs at OW24 are lower than historical analytical results from the residential well at 151 Fortune Line Road (see Appendix K), as discussed in correspondence from the MECP. Given that concentrations of LIPs at OW24 are lower than 151 Fortune Line Road, and that the inferred direction of groundwater flow at OW24 is southward towards the unnamed

stream, it appears that the elevated concentrations of LIPs at OW24 are not related to leachate.

Results from the VOC analyses met the ODWS criteria (Table 5, Appendix C). The May sampling event identified that downgradient well OW15-S and leachate well OW19 detected one or more of the following parameters: 1,4-dichlorobenzene, 1,1-dichloroethane, 4-isopropyltoluene, tetrachloroethylene, and 1,1,1-trichloroethane. VOC parameters were not detected in the aforementioned overburden wells during the October sampling event.

Results from 2019 indicate that leachate is migrating to the north and to a lesser extent to the west from the Site within the overburden, and likely discharging to surface water features.

The following exceedances of the ODWS were reported in 2019. With the exception of nitrate (health based parameter), the ODWS criteria represents aesthetic objectives or operational guidelines and are not indicative of a threat to human health. Background well OW20 exceeded the OWDS for DOC during the spring and hardness during spring and fall sampling events.

<u>Parameter</u>	<u>Spring</u>	<u>Fall</u>
Alkalinity	OW15-S	OW15-S, OW7R1
Chloride	OW1	none
DOC	L2, L11, OW7R1, OW15-S, OW17, OW18, OW19, OW20, OW24	OW7R1, OW15-S, OW19, OW25
Hardness	All wells sampled	All wells sampled
Iron	OW7R1, OW15-S, OW19, OW24	OW7R1, OW15-S, OW24
Manganese	OW7R1, OW17, OW19, OW24	OW7R1, OW17, OW24
Nitrate	OW21	OW21
TDS	L11, OW1, OW6R1, OW15-S, OW19	OW1, OW6R1, OW7R1, OW15-S,

Historical overburden analytical results are presented in Appendix K, and trend graphs for LIPs are presented in Appendix L. Graphs of the LIPs show that

Concentrations of LIPs at downgradient well OW15-S are generally elevated when compared to background, indicating that leachate is migrating to the northwest. However, concentrations at OW15-S are generally lower than leachate well OW19, indicating that attenuation is occurring.

Historical concentrations of LIPs at monitoring well OW24 are generally comparable to background well OW20, suggesting leachate is not impacting the area north of the stream, towards Fortune Line Road. Historical LIP concentrations in OW18 are only marginally elevated compared to background well OW20 and may be related to road salting. This is consistent with the conceptual site model which suggests groundwater is discharging to the stream.

Historical concentrations of LIPs boron and DOC at monitoring wells L2, L11, and OW1, located north and inferred to be cross gradient of the former landfill area, are generally similar to background concentrations. However, concentrations of chloride and conductivity are elevated when compared to background concentrations. Considering the proximity of these wells to Turk Rock Road and the driveway into the Site, it is possible that road salt is impacting the groundwater at these locations. Trend graphs of LIPs in the former landfill area suggest that this area is relatively stable, and reduced monitoring in this area should be considered.

Measurable concentrations of VOC parameters have historically been identified at monitoring wells L10, OW15-S, OW15-D, OW19, and OW22 at levels below the ODWS. VOC parameters inferred to be the result of leachate have not been detected at other wells. In accordance with the MECP 2018 AMR review a reduction of VOC analyses to include only wells where VOCs have historically been detected should be considered.

5.5 **Bedrock Groundwater Evaluation**

Bedrock groundwater chemistry results are presented in Table 4b (Appendix C). Bedrock groundwater quality at the Site has historically been characterized by wells BW1, BW2-S and BW2-D. Monitoring wells L10 and OW15-D have historically been included as overburden wells. Based on the depths at which L10 (approximately 20.5 mbg) and OW15-D (approximately 9.7 mbg) are installed, we have inferred that these wells are installed into bedrock. L10 and OW15-D have therefore been included in the bedrock groundwater evaluation for the Site. Because water well records and/or borehole logs for L10 or OW15-D were not available, the lithologies and screen depths cannot be confirmed at this time.

We note that bedrock wells at the Site are installed into two distinct geologic units. Based on water well records, BW1 is screened in metasedimentary rock at a depth of 24 meters, and BW2-S and BW2-D are screened in granitic gneiss at depths of 12 and 24 meters respectively. Based on mapping by the OGS (OGS, 2011), well L10 is inferred to be installed into granitic gneiss and OW15-D is inferred to be installed into calcareous metasedimentary bedrock.

The conceptual site model suggests that the vertical groundwater gradient is downwards in the area of the WDS, and upwards in the area of the unnamed tributary of Morton Creek.

BW2-S/D is located up-gradient of the Site and represents background bedrock groundwater conditions. BW2-S exhibits elevated levels of hardness, TDS, and nitrate, which may be caused by nearby agricultural, quarry activities, and/or the natural composition of the bedrock.

BW1, located downgradient and adjacent to active and former waste fill areas, exhibited elevated concentrations of LIPs conductivity and boron when compared to BW2-S/D. L10, located in the area of the former fill area, exhibited elevated concentrations of LIPs DOC, conductivity, chloride and boron.

OW15-D, located downgradient and northwest of the Site, exhibited slightly elevated concentrations of conductivity and boron, when compared to background. Artesian conditions were observed at OW15-D during the may sampling event. An upward vertical hydraulic gradient has historically been observed at OW15-S/D, and we infer that groundwater in this area is discharging to the unnamed tributary. Therefore, impact to the quality of deeper groundwater is mitigated by the upwards vertical gradient observed.

Results from the bedrock groundwater VOC analyses met the ODWS criteria (Table 5, Appendix B). Concentrations of 1,1-Dichloroethane, cis-1,2-Dichloroethylene, ethyl benzene, isopropyl benzene were detected L10, and tetrachloroethylene was detected at OW15-D during one or more sampling events in 2019.

The following exceedances of the ODWS were reported in 2019. With the exception of nitrate (health based parameter), which may be related to quarry or agricultural activities up-gradient from the Site, these exceedances represent aesthetic objectives or operational guidelines, and are not indicative of a threat to human health.

<u>Parameter</u>	<u>Summer</u>	<u>Fall</u>
Alkalinity	L10	L10
Aluminum	None	L10
DOC	BW1, BW2-S, OW15-D, L10	OW15-D, L10
Hardness	BW1, BW2-S, BW2-D, OW15D, L10	BW1, BW2-S, BW2-D, OW15D, L10
Iron	BW1, OW15-D, L10	BW1, OW15-D, L10
Manganese	BW1, OW15-D, L10	BW1, OW15-D, L10
Nitrate	None	BW2-S
TDS	BW1, BW2-S, OW15-D, L10	BW2-S, OW15-D, L10

Historical bedrock analytical results are presented in Appendix K, and trend graphs for LIPs are presented in Appendix L. Concentrations of LIPs in downgradient well OW15-D are significantly attenuated compared to leachate well OW19

5.6 Reasonable Use Policy

The amended ECA (August 20, 2015) states that the Site is to follow the Ministry Guideline B-7 “Incorporation of the Reasonable Use Concept into MOEE Groundwater Management Activities” to assess groundwater quality. Reasonable Use Limits (RULs) are calculated for the analyzed parameters using background groundwater concentrations and corresponding drinking water standards (refer to Table 6, Appendix C). Overburden well OW20 was used to calculate RULs applied to compliance wells OW1, OW18, and OW24. Bedrock well BW2-S was used to calculate RULs for compliance well OW15-D.

Exceedances of the following overburden RULs were observed in 2019:

<u>Parameter</u>	<u>Spring</u>	<u>Fall</u>
Alkalinity	OW1	OW1,
Aluminum	OW1, OW18	OW1, OW24
Barium	OW1	OW1
Chloride	OW1	none
DOC	OW18, OW24	OW24
Hardness	OW1, OW18, OW24	OW1, OW18, OW24
Iron	OW24	OW24
Manganese	OW24	OW24
Nitrate	None	OW1
TDS	OW1	OW1

Exceedances of overburden RULs for DOC and chloride may be leachate related. LIP exceedances were observed at OW1, OW18, and OW24. However, other LIPs met the RUL criteria, which suggests that a non-leachate source may be influencing groundwater quality. Exceedances of RULs for TDS, hardness, sodium, aluminum, iron, and barium are may be the result of outside factors such as background inputs, agricultural activities, and/or quarrying, and are not expected to be leachate related. Groundwater should continue to be monitored at these locations and compared to RULs in future reports.

Bedrock compliance well OW15-D exceeded bedrock RULs for alkalinity, DOC, hardness, barium, iron, and manganese. Exceedances of bedrock the RUL for DOC may be leachate related, however, other LIPs met the bedrock RUL criteria. This suggests that a non-leachate source may be influencing water quality.

In our opinion the Site reasonably conforms to MECP Guideline B-7, based on the inclusion of proposed CAZ lands to the north and west of the Site (Figure 2, Appendix A). Based on the 2019 analyses, the existing and proposed CAZ areas appear adequate.

5.7 Surface Water Evaluation

Surface water chemistry has been compared to the Provincial Water Quality Objectives (PWQO) and the Table A and B criteria as described in the *MOECC 2010* guidance document for Monitoring and Reporting for Waste Disposal Sites.

The surface water analyses at the Site is characterized by three sampling stations: SW1, SW4 and SW5. Descriptions of the surface water stations and conditions at the time of sampling are provided in Table 7 (Appendix C). SW1 is located upstream of the Site, adjacent to Turk Rock Road and was used to characterize the surface water background conditions for the Site. SW1 was improved in 2019 and receives drainage water from the field to the northeast. SW4 and SW5 are located downstream of the Site, approximately 200 m and 400 m west of the Site, respectively.

Results of the surface water analyses are presented in Table 8 (Appendix C). Background station SW1 exhibited elevated levels of total phosphorus, cadmium, copper, and iron, and exceeded either the PWQO or CWQG for these parameters.

SW4 and SW5 exceeded the PWQO reference criteria for total phosphorus and iron during at least on sampling event in 2019. Concentrations of these parameters were below the APV, where applicable. Exceedances of the CWQG for cadmium were observed at SW4 and SW5 during one or more sampling events.

Historical surface water data is presented in Appendix K, and surface water chemistry trend graphs are presented in Appendix L. Trend graphs indicate that concentrations of LIPs at downstream surface water stations SW4 and SW5 are generally stable and similar to background station SW1. Historical results suggest that leachate has little to no impact on the surface water at or beyond SW5.

6.0 Conclusions & Recommendations

The Briar Hill WDS is an active site currently accepting non-hazardous solid waste. Based on the approved capacity of the site and the volume of waste deposited to date, the landfill has an estimated life span of 32 years.

The Site is subject to Ministry Guideline B-7. Water level monitoring results indicate a general north-westerly groundwater flow direction in the overburden. Analytical groundwater results from 2019 indicate that leachate is migrating to the northwest from the Site, and wells south of the unnamed stream (located north of the Site) exceeded one or more RULs. However, attenuation of leachate appears to be occurring in wells north and west of the Site, and leachate impacted groundwater does not appear to be migrating beyond the unnamed stream, likely as a result of groundwater discharge to the stream.

Exceedances of RULs at wells north of the Site indicates the potential for leachate impacts to the unnamed stream. However, surface water results at sampling locations downstream of the Site indicate that concentrations of LIPs are generally similar to background conditions, suggesting that leachate is not significantly impacting the surface water downstream of the Site.

The following recommendations are offered:

1. Monitoring should continue twice per year, in conformance with the ECA.
2. Evaluation and development of a revised VOC sampling program in consultation with the MECP.
3. Reduce the sampling frequency at wells L2, L10, and L11 to annual.
4. Request historical borehole logs and well construction diagrams from TLTI and the MECP, and use them to further evaluate the installation of wells L10 and OW15-D.

5. Install a fixed protection barrier and/or reflective flag adjacent to well OW24 to improve visibility and assist agricultural vehicle operators in navigating around the well.
6. Acquire the property west of the site for CAZ lands, and apply to have the ECA amended to recognise lands to the north and west of the site as CAZ lands.
7. Conduct hydraulic conductivity tests at select wells during the 2020 monitoring program.
8. Consideration of a re-scoped monitoring program and development a trigger mechanism when a sufficient dataset is available (ongoing).

7.0 References

Annual Monitoring, Development and Operations Report for Briar Hill WDS. Malroz Engineering, 2015, 2016, 2017, 2018.

Andrew Day. Annual Groundwater and Surface Water Monitoring Report for Briar Hill WDS (ECA No. 442103), Township of Leeds and the Thousand Islands, 2012-2013-2014.

Hewitt, D.F. (1964) *Geological notes for maps Nos. 2053 and 2054 Madoc-Gananoque Area*, Ministry of Natural Resources, GC 12, 33p (reprinted 1974). Accompanied by Maps 2053 and 2054, scale 1:126,720.

Ontario Drinking Water Standards (ODWS) from Ontario Regulation 169/03 of the Safe Drinking Water Act (2002). Last amendment: O. Reg. 373/15.

Ontario Geological Survey (2011), *Bedrock geology of Ontario*, Ontario Geological Survey, Miscellaneous Release–Data 126 - Revision 1, map scale 1:250,000.

Provincial Water Quality Objectives (PWQO) from the Ministry of Environment and Energy's Water Management Policies & Guidelines, July 1994.

Technical Guidance Document: Monitoring and Reporting for Waste Disposal Sites Groundwater and Surface Water. Ministry of the Environment, November 2010.

Appendix A
Amended Environmental Compliance
Approval No. A442103

AMENDED ENVIRONMENTAL COMPLIANCE APPROVAL

NUMBER A442103

Issue Date: August 20, 2015

The Corporation of the Township of Leeds and the Thousand Islands
1233 Prince St Lansdowne
Post Office Box, No. 280
Leeds and the Thousand Islands, Ontario
K0E 1L0

Site Location: Briar Hill Landfill Site, Ward 2, Township of Leeds and the Thousand Islands
Lot 18, Concession 11
Leeds and the Thousand Islands Township, United Counties of Leeds and Grenville

You have applied under section 20.2 of Part II.1 of the Environmental Protection Act, R.S.O. 1990, c. E. 19 (Environmental Protection Act) for approval of:

the use and operation of 2.4 hectare waste disposal/transfer site within a total site area of 16 hectares.

For the purpose of this environmental compliance approval, the following definitions apply:

"Approval " means this Environmental Compliance Approval and any Schedules to it, including the application and supporting documentation listed in Schedule "A";

"Contaminating Life Span" means contaminating life span as defined in Ontario Regulation 232/98;

"Director" means any *Ministry* employee appointed in writing by the Minister pursuant to section 5 of the EPA as a Director for the purposes of Part II.1 of the *EPA*;

"District Manager" means the District Manager of the local district office of the *Ministry* in which the *Site* is geographically located;

"EPA " means *Environmental Protection Act* , R.S.O. 1990, c. E. 19, as amended;

"Ministry" means the Ministry of the Environment and Climate Change;

"NMA " means *Nutrient Management Act* , 2002, S.O. 2002, c. 4, as amended;

"Ontario Drinking Water Quality Standards" means Ontario Regulation 169/03 (Ontario Drinking

Water Quality Standards) as amended;

"*Operator*" means any person, other than the *Owner's* employees, authorized by the *Owner* as having the charge, management or control of any aspect of the *Site* and includes its successors or assigns;

"*Owner*" means any person that is responsible for the establishment or operation of the *Site* being approved by this *Approval*, and includes the Corporation of the Township of Leeds and the Thousand Islands and its successors and assigns;

"*OWRA* " means the *Ontario Water Resources Act* , R.S.O. 1990, c. O.40, as amended;

"*PA* " means the *Pesticides Act* , R.S.O. 1990, c. P-11, as amended;

"*Provincial Officer*" means any person designated in writing by the Minister as a provincial officer pursuant to Section 5 of the *OWRA*, Section 5 of the *EPA*, Section 17 of the *PA*, Section 4 of the *NMA*, or Section 8 of the *SDWA*;

"*Refrigerant Appliances*" means household appliances which use, or may use refrigerants, and which include, but is not restricted to, refrigerators, freezers and air-conditioning systems;

"*Regional Director* " means the Regional Director of the local Regional Office of the *Ministry* in which the *Site* is located;

"*Regulation 347* " or "*Reg. 347* " means Regulation 347, R.R.O. 1990, made under the *EPA*, as amended;

"*SDWA*" means *Safe Drinking Water Act*, 2002, S.O. 2002, c. 32, as amended;

"*Site* " means the entire waste disposal site, including the buffer lands, and contaminant attenuation zone at Briar Hill Landfill Site, Ward 2, Township of Leeds and the Thousand Islands, Lot 18, Concession 11, Leeds and the Thousand Islands Township, United Counties of Leeds and Grenville; and

"*Trained Personnel*" means personnel knowledgeable in the following through instruction and/or practice:

- a. relevant waste management legislation, regulations and guidelines;
- b. major environmental concerns pertaining to the waste to be handled;
- c. occupational health and safety concerns pertaining to the processes and wastes to be handled;
- d. management procedures including the use and operation of equipment for the processes and wastes to be handled;
- e. emergency response procedures;
- f. specific written procedures for the control of nuisance conditions;
- g. specific written procedures for refusal of unacceptable waste loads; and
- h. the requirements of this *Approval*.

You are hereby notified that this environmental compliance approval is issued to you subject to the terms and

conditions outlined below:

TERMS AND CONDITIONS

1. GENERAL

Compliance

- (1) The *Owner* and *Operator* shall ensure compliance with all the conditions of this *Approval* and shall ensure that any person authorized to carry out work on or operate any aspect of the *Site* is notified of this *Approval* and the conditions herein and shall take all reasonable measures to ensure any such person complies with the same.
- (2) Any person authorized to carry out work on or operate any aspect of the *Site* shall comply with the conditions of this *Approval*.

In Accordance

- (3) Except as otherwise provided by this *Approval*, the *Site* shall be designed, developed, built, operated and maintained in accordance with the documentation listed in the attached Schedule "A".

Interpretation

- (4) Where there is a conflict between a provision of any document listed in Schedule "A" in this *Approval*, and the conditions of this *Approval*, the conditions in this *Approval* shall take precedence.
- (5) Where there is a conflict between the application and a provision in any document listed in Schedule "A", the application shall take precedence, unless it is clear that the purpose of the document was to amend the application and that the *Ministry* approved the amendment.
- (6) Where there is a conflict between any two documents listed in Schedule "A", the document bearing the most recent date shall take precedence.
- (7) The conditions of this *Approval* are severable. If any condition of this *Approval*, or the application of any condition of this *Approval* to any circumstance, is held invalid or unenforceable, the application of such condition to other circumstances and the remainder of this *Approval* shall not be affected thereby.

Other Legal Obligations

- (8) The issuance of, and compliance with, this *Approval* does not:
- (a) relieve any person of any obligation to comply with any provision of any applicable statute, regulation or other legal requirement; or
 - (b) limit in any way the authority of the *Ministry* to require certain steps be taken or to require the *Owner* and *Operator* to furnish any further information related to compliance with this *Approval*.

Adverse Effect

- (9) The *Owner* and *Operator* shall take steps to minimize and ameliorate any adverse effect on the natural environment or impairment of water quality resulting from the *Site*, including such accelerated or additional monitoring as may be necessary to determine the nature and extent of the effect or impairment.
- (10) Despite an *Owner*, *Operator* or any other person fulfilling any obligations imposed by this *Approval* the person remains responsible for any contravention of any other condition of this *Approval* or any applicable statute, regulation, or other legal requirement resulting from any act or omission that caused the adverse effect to the natural environment or impairment of water quality.

Change of Ownership

- (11) The *Owner* shall notify the *Director*, in writing, and forward a copy of the notification to the *District Manager*, within 30 days of the occurrence of any changes in the following information:
- (a) the ownership of the *Site*;
 - (b) the *Operator* of the *Site*;
 - (c) the address of the *Owner* or *Operator*; and
 - (d) the partners, where the *Owner* or *Operator* is or at any time becomes a partnership and a copy of the most recent declaration filed under the *Business Names Act*, R. S. O. 1990, c. B.17, shall be included in the notification.
- (12) No portion of this *Site* shall be transferred or encumbered prior to or after closing of the *Site* unless the *Director* is notified in advance and sufficient financial assurance is deposited with the *Ministry* to ensure that these conditions will be carried out.
- (13) In the event of any change in ownership of the *Site*, other than change to a successor municipality, the *Owner* shall notify the successor of and provide the successor with a copy of this *Approval*, and the *Owner* shall provide a copy of the notification to the *District Manager* and the *Director*.

Registration on Title Requirement

- (14) Prior to dealing with the property in any way, the *Owner* shall provide a copy of this *Approval*

and any amendments, to any person who will acquire an interest in the property as a result of the dealing.

- (15) (a) Within thirty (30) calendar days from the date of issuance of this *Approval*, the *Owner* shall submit to the *Director* a completed Certificate of Requirement which shall include:
- (i) a plan of survey prepared, signed and sealed by an Ontario Land Surveyor, which shows the area of the *Site* where waste has been or is to be deposited at the *Site*;
 - (ii) proof of ownership of the *Site*;
 - (iii) a letter signed by a member of the Law Society of Upper Canada or other qualified legal practitioner acceptable to the *Director*, verifying the legal description provided in the Certificate of Requirement;
 - (iv) the legal abstract of the property; and
 - (v) any supporting documents including a registerable description of the *Site*.
- (b) Within fifteen (15) calendar days of receiving a Certificate of Requirement authorized by the *Director*, the *Owner* shall:
- (i) register the Certificate of Requirement in the appropriate Land Registry Office on the title to the property; and
 - (ii) submit to the *Director* written verification that the Certificate of Requirement has been registered on title.

Inspections by the Ministry

- (16) No person shall hinder or obstruct a *Provincial Officer* from carrying out any and all inspections authorized by the *OWRA*, the *EPA*, the *PA*, the *SDWA* or the *NMA*, of any place to which this *Approval* relates, and without limiting the foregoing:
- (a) to enter upon the premises where the approved works are located, or the location where the records required by the conditions of this *Approval* are kept;
 - (b) to have access to, inspect, and copy any records required to be kept by the conditions of this *Approval*;
 - (c) to inspect the *Site*, related equipment and appurtenances;
 - (d) to inspect the practices, procedures, or operations required by the conditions of this *Approval*; and
 - (e) to sample and monitor for the purposes of assessing compliance with the terms and conditions of this *Approval* or the *EPA*, the *OWRA*, the *PA*, the *SDWA* or the *NMA*.

Information and Record Retention

- (17) (a) Except as authorized in writing by the *Director*, all records required by this *Approval* shall be retained at the *Site* for a minimum of two (2) years from their date of creation.
- (b) The *Owner* shall retain all documentation listed in Schedule "A" for as long as this *Approval* is valid.
- (c) All monthly summary reports are to be kept at the *Site* until they are included in the Annual

Report.

- (d) The *Owner* shall retain employee training records as long as the employee is working at the *Site*.
 - (e) The *Owner* shall make all of the above documents available for inspection upon request of *Ministry* staff.
- (18) The receipt of any information by the *Ministry* or the failure of the *Ministry* to prosecute any person or to require any person to take any action under this *Approval* or under any statute, regulation or other legal requirement, in relation to the information, shall not be construed as:
- (a) an approval, waiver, or justification by the *Ministry* of any act or omission of any person that contravenes any term or condition of this *Approval* or any statute, regulation or other legal requirement; or
 - (b) acceptance by the *Ministry* of the information's completeness or accuracy.
- (19) The *Owner* shall ensure that a copy of this *Approval*, in its entirety and including all its Notices of Amendment, and documentation listed in Schedule "A", are retained at the *Site* at all times.
- (20) Any information related to this *Approval* and contained in *Ministry* files may be made available to the public in accordance with the provisions of the Freedom of Information and Protection of Privacy Act, RSO 1990, CF-31.

2. SITE OPERATION

Operation

- (1) The *Site* shall be operated and maintained at all times including management and disposal of all waste, in accordance with the *EPA, Regulation 347*, and the conditions of this *Approval*. At no time shall the discharge of a contaminant that causes or is likely to cause an adverse effect be permitted.

Signs

- (2) A sign shall be installed and maintained at the main entrance/exit to the *Site* on which is legibly displayed the following information:
- (a) the name of the *Site* and *Owner*;
 - (b) the number of the *Approval*;
 - (c) the name of the *Operator*;
 - (d) the normal hours of operation;
 - (e) the allowable and prohibited waste types;
 - (f) the telephone number to which complaints may be directed;
 - (g) a warning against unauthorized access;
 - (h) a twenty-four (24) hour emergency telephone number (if different from above); and
 - (i) a warning against dumping outside the *Site*.

- (3) The *Owner* shall install and maintain signs to direct vehicles to working face and recycling areas.
- (4) The *Owner* shall provide signs at the recycling area informing users what materials are acceptable and directing users to appropriate storage areas.

Vermin, Vectors, Dust, Litter, Odour, Noise and Traffic

- (5) The *Site* shall be operated and maintained such that the vermin, vectors, dust, litter, odour, noise and traffic do not create a nuisance.

Burning Waste Prohibited

- (6) (a) Burning of waste at the *Site* is prohibited.
- (b) Notwithstanding Condition 2. (6) (a) above, burning of segregated, clean wood and brush at the landfill may be carried out in strict compliance with the Ministry of the Environment Document titled "Guideline C-7, Burning at Landfill Sites" dated April 1994.

Site Access

- (7) Waste shall only be accepted on during the following time periods:
 - Monday 8:30 a.m. - 4:45 p.m.
 - Wednesday 8:30 a.m. - 4:45 p.m.
 - Thursday 8:30 a.m. - 4:45 p.m.
 - Saturday 8:30 a.m. - 4:45 p.m.
- (8) On-site equipment used for daily site preparation and closing activities may be operated one (1) hour before and one (1) hour after the hours of operation approved by this *Approval*.
- (9) With the prior written approval from the *District Manager*, the time periods may be extended to accommodate seasonal or unusual quantities of waste.

Site Security

- (10) No waste shall be received, landfilled or removed from the *Site* unless a site supervisor or an attendant is present and supervises the operations during operating hours. The *Site* shall be closed when a site attendant is not present to supervise landfilling operations.
- (11) The *Site* shall be operated and maintained in a safe and secure manner. During non-operating hours, the *Site* entrance and exit gates shall be locked and the *Site* shall be secured against access by unauthorized persons.

Stormwater Management

- (12) The *Site* shall be maintained to prevent erosion or washing of fill, liner or cover material. Regular grading shall be carried out to drain rain water from fill areas and to prevent standing water.

3. EMPLOYEE TRAINING

- (1) A training plan for all employees that operate any aspect of the *Site* shall be developed and implemented by the *Owner* or the *Operator*. Only *Trained Personnel* shall operate any aspect of the *Site* or carry out any activity required under this *Approval* .

4. COMPLAINTS RESPONSE PROCEDURE

- (1) If at any time the *Owner* receives complaints regarding the operation of the *Site*, the *Owner* shall respond to these complaints according to the following procedure:
 - (a) The *Owner* shall record and number each complaint, either electronically or in a log book, and shall include the following information: the nature of the complaint, the name, address and the telephone number of the complainant if the complainant will provide this information and the time and date of the complaint;
 - (b) The *Owner*, upon notification of the complaint, shall initiate appropriate steps to determine possible causes of the complaint, proceed to take the necessary actions to eliminate the cause of the complaint and forward a formal reply to the complainant; and
 - (c) The *Owner* shall complete and retain on-site a report written within one (1) week of the complaint date, listing the actions taken to resolve the complaint and any recommendations for remedial measures, and managerial or operational changes to reasonably avoid the recurrence of similar incidents.

5. EMERGENCY RESPONSE

- (1) All Spills as defined in the *EPA* shall be immediately reported to the **Ministry's Spills Action Centre at 1-800-268-6060** and shall be recorded in the log book as to the nature of the emergency situation, and the action taken for clean-up, correction and prevention of future occurrences.
- (2) In addition, the *Owner* shall submit, to the *District Manager* a written report within three (3) business days of the emergency situation, outlining the nature of the incident, remedial measures taken, handling of waste generated as a result of the emergency situation and the measures taken to prevent future occurrences at the *Site*.
- (3) All wastes resulting from an emergency situation shall be managed and disposed of in

accordance with *O.Reg. 347*.

- (4) All equipment and materials required to handle the emergency situations shall be:
 - (a) kept on hand at all times that waste landfilling and/or handling is undertaken at the *Site*; and
 - (b) adequately maintained and kept in good repair.
- (5) The *Owner* shall ensure that the emergency response personnel are familiar with the use of such equipment and its location(s).

6. INSPECTIONS, RECORD KEEPING AND REPORTING

Daily Log Book

- (1) A daily log shall be maintained in written or electronic format and shall include the following information:
 - (a) the type, date and time of arrival, hauler, and quantity (tonnes) of all waste and cover material received at the *Site*.
 - (b) Notwithstanding condition 6 (1)(a), for household users a count of number of users and an estimated quantity of waste may be recorded;
 - (c) the area of the *Site* in which waste disposal operations are taking place;
 - (d) a record of litter collection activities and the application of any dust suppressants;
 - (e) a record of the daily inspections; and
 - (f) a description of any out-of-service period of any control, treatment, disposal or monitoring facilities, the reasons for the loss of service, and action taken to restore and maintain service.
- (2) Any information requested, by the *Director* or a *Provincial Officer*, concerning the *Site* and its operation under this *Approval*, including but not limited to any records required to be kept by this *Approval* shall be provided to the *Ministry*, upon request.

Daily Inspections and Log Book

- (3) An inspection of the entire *Site* and all equipment on the *Site* shall be conducted each day the *Site* is in operation to ensure that: the *Site* is secure; that the operation of the *Site* is not causing any nuisances; that the operation of the *Site* is not causing any adverse effects on the environment and that the *Site* is being operated in compliance with this *Approval*. Any deficiencies discovered as a result of the inspection shall be remedied immediately, including temporarily ceasing operations at the *Site* if needed.
- (4) A record of the inspections shall be kept in a daily log book that includes:
 - (a) the name and signature of person that conducted the inspection;
 - (b) the date and time of the inspection;
 - (c) the list of any deficiencies discovered;
 - (d) the recommendations for remedial action; and
 - (e) the date, time and description of actions taken.

- (5) A record shall be kept in the daily log book of all refusals of waste shipments, the reason(s) for refusal, and the origin of the waste, if known.

Annual Report

- (6) A written report on the development, operation and monitoring of the *Site*, shall be completed annually (the “Annual Report”). The Annual Report shall be submitted to the *District Manager*, by March 31st of the year following the period being reported upon.
- (7) The Annual Report shall include but not be limited to the following information:
- (a) the results and an interpretive analysis of the results of all leachate, groundwater surface water and landfill gas monitoring, including an assessment of the need to amend the monitoring programs;
 - (b) an assessment of the operation and performance of all engineered facilities, the need to amend the design or operation of the *Site*, and the adequacy of and need to implement the contingency plans;
 - (c) site plans showing the existing contours of the *Site*; areas of landfilling operation during the reporting period; areas of intended operation during the next reporting period; areas of excavation during the reporting period; the progress of final cover, vegetative cover, and any intermediate cover application; facilities existing, added or removed during the reporting period; and site preparations and facilities planned for installation during the next reporting period;
 - (d) calculations of the volume of waste, daily and intermediate cover, and final cover deposited or placed at the *Site* during the reporting period and a calculation of the total volume of *Site* capacity used during the reporting period;
 - (e) a calculation of the remaining capacity of the *Site* and an estimate of the remaining *Site* life;
 - (f) a summary of the weekly, maximum daily and total annual quantity (tonnes) of waste received at the *Site*;
 - (g) a summary of any complaints received and the responses made;
 - (h) a discussion of any operational problems encountered at the *Site* and corrective action taken;
 - (i) any changes to the Design and Operations Report and the Closure Plan that have been approved by the *Director* since the last *Annual Report*;
 - (j) a report on the status of all monitoring wells and a statement as to compliance with *Ontario Regulation 903*; and
 - (k) any other information with respect to the *Site* which the *Regional Director* may require from time to time.

7. LANDFILL DESIGN AND DEVELOPMENT

Approved Waste Types

- (1) Only municipal waste as defined under *Reg. 347* being solid non-hazardous shall be accepted at the *Site* for landfilling.
- (2) The *Owner* shall develop and implement a program to inspect waste to ensure that the waste received at the *Site* is of a type approved for acceptance under this *Approval*.
- (3) The *Owner* shall ensure that all loads of waste are properly inspected by *Trained personnel* prior to acceptance at the *Site* and that the waste vehicles are directed to the appropriate areas for disposal or transfer of the waste. The *Owner* shall notify the *District Manager*, in writing, of load rejections at the *Site* within one (1) business day from their occurrence.

Capacity

- (4) Maximum volumetric capacity approved for the *Site*, consisting of the waste, daily cover, intermediate cover and the final cover is 85,600 cubic metres. This volume does not include the historical volume of waste deposited prior to May 2003 within the 1.5 hectare area of the old landfill.

Service Area

- (5) Only waste that is generated within the boundaries of the Township of Leeds and the Thousand Islands may be accepted at the *Site*.

Design and Operations Report

- (6) Within one hundred and eighty (180) days from the date of this *Approval*, the *Owner* shall submit for the *Director's* approval, a Design and Operations Report that includes as a minimum the following information:
 - (a) proposed landfill design including the footprint, final contours, capacity and an estimate of the amount of existing waste;
 - (b) an estimate of waste types and quantities to be landfilled at the site and recycling and resource recovering activities at the *Site*;
 - (c) location and description of the access road and the on-site roads at the *Site*;
 - (d) description and location of the fencing and the gate(s);
 - (e) screening of the *Site* from the public, both visual and the protection from the noise impact;
 - (f) details of the clean surface water drainage from the *Site* and any works required to prevent extraneous surface water from contacting the active working face;
 - (g) description of the fill method, the equipment used at the *Site*, the areas used for various fill methods of landfilling, and timelines for various phases of the *Site* development;
 - (h) the operating hours of the *Site* and the hours for the various activities to be undertaken at the *Site*, including waste compaction, waste coverage and other activities within the *Site*;

- (i) details on winter operations;
- (j) the equipment used and the procedures used for waste deposition, spreading and covering (if sludge is disposed);
- (k) details on supervision and monitoring of the activities at the *Site*;
- (l) details on handling of other wastes, including the types and amounts of wastes handled, storage locations, storage facility design/description and the frequency of removal from the *Site*;
- (m) details on housekeeping practices undertaken to control noise, dust, litter, odour, rodents, insects and other disease vectors, scavenging birds or animals;
- (n) details on the closure of the *Site*, including the description of the final cover and its estimated permeability, its thickness, the source of the final cover material, the thickness of the top soil and the vegetation proposed for the closed waste mound, as well as the timeframe for the progressive waste coverage;
- (o) monitoring program for the surface and ground water;
- (p) site-specific trigger mechanism program for the implementation of the groundwater and surface water, contingency measures and a description of such measures;
- (q) landfill gas control or management required at the *Site*;
- (r) maintenance activities proposed for the *Site* and for the monitoring well network, including the type of the activities, the frequency of the activities and the personnel responsible for them;
- (s) inspection activities proposed for the *Site*, including the frequency of the activities and the personnel responsible for them;
- (t) details of training provided for the personnel responsible for the activities at the *Site*;
- (u) contingency plans for the emergency situations that may occur at the *Site*;
- (v) storm water management, including the location and the design of any works required;
- (w) closure plan for the old landfill site including for the Fill Beyond Approved Limit area; and
- (x) any other information relevant to the design and operation of the *Site* or the information required by the *District Manager*.

Cover

- (7) Alternative materials to soil may be used as weekly and interim cover material, based on an application with supporting information and applicable fee for a trial use or permanent use, submitted by the *Owner* to the *Director*, copied to the *District Manager* and as approved by the *Director* via an amendment to this *Approval*. The alternative material shall be non-hazardous according to *Reg. 347* and will be expected to perform at least as well as soil in relation to the following functions:
 - (a) Control of blowing litter, odours, dust, landfill gas, gulls, vectors, vermin and fires;
 - (b) Provision for an aesthetic condition of the landfill during the active life of the *Site*;
 - (c) Provision for vehicle access to the active tipping face; and
 - (d) Compatibility with the design of the *Site* for groundwater protection, leachate management and landfill gas management.
- (8) Cover material shall be applied as follows:
 - (a) **Weekly** Cover - Weather permitting, deposited waste shall be covered **weekly** in a manner

- acceptable to the *District Manager* so that no waste is exposed to the atmosphere;
- (b) Intermediate Cover - In areas where landfilling has been temporarily discontinued for six (6) months or more, a minimum thickness of 300 millimetre of soil cover or an approved thickness of alternative cover material shall be placed; and
 - (c) Final Cover - In areas where landfilling has been completed to final contours, a minimum 600 millimetre thick layer of soil of medium permeability and 150 millimetres of top soil (vegetative cover) shall be placed. Fill areas shall be progressively completed and rehabilitated as landfill development reaches final contours.

8. LANDFILL MONITORING

Landfill Gas

- (1) The *Owner* shall ensure that any buildings or structures at the *Site* contain adequate ventilation systems to relieve any possible landfill gas accumulation to prevent methane concentration reaching the levels within its explosive range. Routine monitoring for explosive methane gas levels shall be conducted in all buildings or structures at the *Site*, especially enclosed structures which at times are occupied by people.

Compliance

- (2) The *Site* shall be operated in such a way as to ensure compliance with the following:
 - (a) Reasonable Use Guideline B-7 for the protection of the groundwater at the *Site*; and
 - (b) Provincial Water Quality Objectives included in the July 1994 publication entitled *Water Management Policies, Guidelines, Provincial Water Quality Objectives*, as amended from time to time or limits set by the *Regional Director*, for the protection of the surface water at and off the *Site*.

Surface Water and Groundwater

- (3) The *Owner* shall monitor surface water and ground water in accordance with the monitoring programs outlined in documents listed in the attached Schedule "A".
- (4) A certified Professional Geoscientist or Engineer possessing appropriate hydrogeologic training and experience shall execute or directly supervise the execution of the groundwater monitoring and reporting program.

Groundwater Wells and Monitors

- (5) The *Owner* shall ensure that all groundwater monitoring wells which form part of the monitoring program are properly capped, locked and protected from damage.

- (6) Where landfilling is to proceed around monitoring wells, suitable extensions shall be added to the wells and the wells shall be properly re-secured.
- (7) Any groundwater monitoring well included in the on-going monitoring program that is damaged shall be assessed, repaired, replaced or decommissioned by the *Owner*, as required.
 - (a) The *Owner* shall repair or replace any monitoring well which is destroyed or in any way made to be inoperable for sampling such that no more than one regular sampling event is missed.
 - (b) All monitoring wells which are no longer required as part of the groundwater monitoring program, and have been approved by the *Director* for abandonment, shall be decommissioned by the *Owner*, as required, in accordance with *O.Reg. 903*, to prevent contamination through the abandoned well. A report on the decommissioning of the well shall be included in the Annual Report for the period during which the well was decommissioned.

Trigger Mechanisms and Contingency Plans

- (8)
 - (a) Within one (1) year from the date of this *Approval*, the *Owner* shall submit to the *Director*, for approval, and copies to the *District Manager*, details of a trigger mechanisms plan for surface water and groundwater quality monitoring for the purpose of initiating investigative activities into the cause of increased contaminant concentrations.
 - (b) Within one (1) year from the date of this *Approval*, the *Owner* shall submit to the *Director* for approval, and copies to the *District Manager*, details of a contingency plan to be implemented in the event that the surface water or groundwater quality exceeds any trigger mechanism.
- (9) In the event of a confirmed exceedance of a site-specific trigger level relating to leachate mounding or groundwater or surface water impacts due to leachate, the *Owner* shall immediately notify the *District Manager*, and an investigation into the cause and the need for implementation of remedial or contingency actions shall be carried out by the *Owner* in accordance with the approved trigger mechanisms and associated contingency plans.
- (10) If monitoring results, investigative activities and/or trigger mechanisms indicate the need to implement contingency measures, the *Owner* shall ensure that the following steps are taken:
 - (a) The *Owner* shall notify the *District Manager*, in writing of the need to implement contingency measures, no later than 30 days after confirmation of the exceedances;
 - (b) Detailed plans, specifications and descriptions for the design, operation and maintenance of the contingency measures shall be prepared and submitted by the *Owner* to the *District Manager* for approval; and
 - (c) The contingency measures shall be implemented by the *Owner* upon approval by the *District Manager*.

- (11) The *Owner* shall ensure that any proposed changes to the site-specific trigger levels for leachate impacts to the surface water or groundwater, are approved in advance by the *Director* via an amendment to this *Approval*.

Changes to the Monitoring Plan

- (12) The *Owner* may request to make changes to the monitoring program(s) to the *District Manager* in accordance with the recommendations of the annual report. The *Owner* shall make clear reference to the proposed changes in a separate letter that shall accompany the annual report.
- (13) Within fourteen (14) days of receiving the written correspondence from the *District Manager* confirming that the *District Manager* is in agreement with the proposed changes to the environmental monitoring program, the *Owner* shall forward a letter identifying the proposed changes and a copy of the correspondences from the *District Manager* and all other correspondences and responses related to the changes to the monitoring program, to the *Director* requesting the *Approval* be amended to approve the proposed changes to the environmental monitoring plan prior to implementation.
- (14) In the event any other changes to the environmental monitoring program are proposed outside of the recommendation of the annual report, the *Owner* shall follow current *Ministry* procedures for seeking approval for amending the *Approval*.

9. CLOSURE PLAN

- (1) At least 3 years prior to the anticipated date of closure of this *Site*, the *Owner* shall submit to the *Director* for approval, with copies to the *District Manager*, a detailed *Site* closure plan pertaining to the termination of landfilling operations at this *Site*, post-closure inspection, maintenance and monitoring, and end use. The plan shall include but not be limited to the following information:
- (a) a plan showing *Site* appearance after closure;
 - (b) a description of the proposed end use of the *Site*;
 - (c) a description of the procedures for closure of the *Site*, including:
 - (i) advance notification of the public of the landfill closure;
 - (ii) posting of a sign at the *Site* entrance indicating the landfill is closed and identifying any alternative waste disposal arrangements;
 - (iii) completion, inspection and maintenance of the final cover and landscaping;
 - (iv) *Site* security;
 - (v) removal of unnecessary landfill-related structures, buildings and facilities;
 - (vi) final construction of any control, treatment, disposal and monitoring facilities for leachate, groundwater, surface water and landfill gas; and
 - (vii) a schedule indicating the time-period for implementing sub-conditions (i) to (vi) above;
 - (d) descriptions of the procedures for post-closure care of the *Site*, including:

- (i) operation, inspection and maintenance of the control, treatment, disposal and monitoring facilities for leachate, groundwater, surface water and landfill gas;
 - (ii) record keeping and reporting; and
 - (iii) complaint contact and response procedures;
 - (e) an assessment of the adequacy of and need to implement the contingency plans for leachate and methane gas; and
 - (f) an updated estimate of the *contaminating life span* of the *Site*, based on the results of the monitoring programs to date.
- (2) The *Site* shall be closed in accordance with the closure plan as approved by the *Director*.

10. WASTE DIVERSION

- (1) The *Owner* shall ensure that:
- (a) all bins and waste storage areas are clearly labelled;
 - (b) all lids or doors on bins shall be kept closed during non-operating hours and during high wind events; and
 - (c) if necessary to prevent litter, waste storage areas shall be covered during high winds events.
- (2) The *Owner* shall only accept *Refrigerant Appliances* that have been tagged to indicate that the refrigerant has been removed by a licensed technician. The tag number shall be recorded in the log book and shall remain affixed to the appliance until transferred from the *Site*;
- (3) Propane cylinders shall be stored in a segregated area in a manner which prevents cylinders from being knocked over or cylinder valves from breaking.
- (4) The *Owner* shall transfer waste and recyclable materials from the *Site* as follows:
- (a) recyclable materials shall be transferred off-site once their storage bins are full;
 - (b) scrap metal shall be transferred off-site at least twice a year;
 - (c) tires shall be transferred off-site as soon as a load for the contractor hired by the *Owner* has accumulated or as soon as the accumulated volume exceeds the storage capacity of its bunker; and
 - (d) immediately, in the event that waste is creating an odour or vector problem.
- (5) The *Owner* shall notify the appropriate contractors that waste and recyclable wastes that are to be transferred off-site are ready for removal. Appropriate notice time, as determined by the contract shall be accommodated in the notification procedure.
- (6) Collection, storage and transfer of Waste Electrical and Electronic Equipment shall be in accordance with the guideline titled "Collection Site Organizing & Operating Waste Electrical and Electronic Equipment (WEEE) Guidebook" dated March 11, 2010 as amended prepared by Ontario Electronic Stewardship and the documents in Schedule "A", the guideline shall take precedence.

SCHEDULE "A"

1. "Application for a Certificate of Approval for a Waste Disposal Site (Landfill)" dated May 8, 1981.
2. Report prepared by A.J. Graham Engineering Consultants Ltd. entitled "Environmental Considerations for Expansion of an Existing Sanitary Landfill Site, Township of Rear of Leeds and Lansdowne" dated March 30, 1981 (revised edition).
3. Letter dated April 13, 1982 from A.M. Landon, Clerk-Treasurer of the Township of Rear of Leeds and Lansdowne to P.R. Moore of the Ministry of the Environment.
4. Letter dated September 8, 1982 from A.M. Landon of the Township of Rear of Leeds and Lansdowne to P.R. Moore of the Ministry of the Environment.
5. Letter dated September 9, 2003 from Paula A. Formanek, Branch Manager, Trow Associates Inc. to Peter Taylor, Senior Environmental Officer, Ministry of the Environment, including the letter report Re: Subsurface Investigation, Briar Hill Landfill Site A442103.
6. Report titled "Township of Leeds and the Thousand Island, Briar Hill Waste Disposal Site ECA No. A442103, 2012, 2013 and 2014 Groundwater and Surface Water Monitoring Report" dated April 2015 prepared by .

The reasons for the imposition of these terms and conditions are as follows:

GENERAL

- The reason for Conditions 1(1), (2), (4), (5), (6), (7), (8), (9), (10), (17), (18) and (19) is to clarify the legal rights and responsibilities of the *Owner* and *Operator* under this *Approval* .
- The reasons for Conditions 1(3) and 7(6) are to ensure that the *Site* is designed, operated, monitored and maintained in accordance with the application and supporting documentation submitted by the *Owner*, and not in a manner which the *Director* has not been asked to consider.
- The reasons for Condition 1(11) are to ensure that the *Site* is operated under the corporate name which appears on the application form submitted for this *approval* and to ensure that the *Director* is informed of any changes.
- The reasons for Condition 1(12) are to restrict potential transfer or encumbrance of the *Site* without the approval of the *Director* and to ensure that any transfer of encumbrance can be made only on the basis that it will not endanger compliance with this *Approval* .
- The reason for Condition 1(13) is to ensure that the successor is aware of its legal responsibilities.

- The reasons for Condition 1(14) and (15) are that the Part II.1 *Director* is an individual with authority pursuant to Section 197 of the Environmental Protection Act to require registration on title and provide any person with an interest in property before dealing with the property in any way to give a copy of the *Approval* to any person who will acquire an interest in the property as a result of the dealing.
- The reason for Condition 1(16) is to ensure that appropriate Ministry staff has ready access to the Site for inspection of facilities, equipment, practices and operations required by the conditions in this *Approval*. This Condition is supplementary to the powers of entry afforded a Provincial Officer pursuant to the *Act*, the *OWRA*, the *PA*, the *NMA* and the *SDWA*.
- Condition 1 (20) has been included in order to clarify what information may be subject to the *Freedom of Information Act*.

SITE OPERATION

- The reasons for Conditions 2(1), 2(5) and 6(3) are to ensure that the *Site* is operated, inspected and maintained in an environmentally acceptable manner and does not result in a hazard or nuisance to the natural environment or any person.
- The reason for Conditions 2 (2), 2(3) and 2(4) is to ensure that users of the *Site* are fully aware of important information and restrictions related to *Site* operations and access under this *Approval*.
- The reasons for Conditions 2(6) (a) and (b) are open burning of municipal waste is unacceptable because of concerns with air emissions, smoke and other nuisance effects, and the potential fire hazard and to make sure burning of brush and wood are carried out in accordance with *Ministry* guidelines.
- The reasons for Condition 2(7), 2(8) and 2(9) are to specify the hours of operation for the landfill site and a mechanism for amendment of the hours of operation, as required.
- The reasons for Condition 2(10) and 2(11) are to ensure that the *Site* is supervised by properly trained staff in a manner which does not result in a hazard or nuisance to the natural environment or any person and to ensure the controlled access and integrity of the *Site* by preventing unauthorized access when the *Site* is closed and no site attendant is on duty.
- The reason for condition 2(12) is to ensure the stormwater within the *Site* is managed in a in a manner which does not result in a hazard or nuisance to the natural environment.

EMPLOYEE TRAINING

- The reason for Condition 3(1) is to ensure that the *Site* is supervised and operated by properly trained staff in a manner which does not result in a hazard or nuisance to the natural environment or any person.

COMPLAINTS RESPONSE PROCEDURE

- The reason for Condition 4(1) is to ensure that any complaints regarding landfill operations at this *Site* are responded to in a timely and efficient manner.

EMERGENCY RESPONSE

- Conditions 5(1) and 5(2) are included to ensure that emergency situations are reported to the Ministry to ensure public health and safety and environmental protection.
- Conditions 5(3), 5(4) and 5(5) are included to ensure that emergency situations are handled in a manner to minimize the likelihood of an adverse effect and to ensure public health and safety and environmental protection.

RECORD KEEPING AND REPORTING

- The reason for Conditions 6(1) and 6(2) is to ensure that accurate waste records are maintained to ensure compliance with the conditions in this *Approval* (such as fill rate, site capacity, record keeping, annual reporting, and financial assurance requirements), the *EPA* and its regulations.
- The reason for Conditions 6(4) and 6(5) is to ensure that detailed records of *Site* inspections are recorded and maintained for inspection and information purposes.
- The reasons for Conditions 6(6) and 6(7) are to ensure that regular review of site development, operations and monitoring data is documented and any possible improvements to site design, operations or monitoring programs are identified. An annual report is an important tool used in reviewing site activities and for determining the effectiveness of site design.

LANDFILL DESIGN AND DEVELOPMENT

- The reason for Conditions 7(1) to 7(5) inclusive is to specify the approved areas from which waste may be accepted at the *Site* and the types and amounts of waste that may be accepted for disposal at the *Site*, based on the *Owner*'s application and supporting documentation.
- Condition 7(7) is to provide the *Owner* the process for getting the approval for alternative daily and intermediate cover material.
- The reasons for Condition 7(8) are to ensure that daily/weekly and intermediate cover are used to control potential nuisance effects, to facilitate vehicle access on the *Site*, and to ensure an acceptable site appearance is maintained. The proper closure of a landfill site requires the application of a final cover which is aesthetically pleasing, controls infiltration, and is suitable for the end use planned for the *Site*.

LANDFILL MONITORING

- Reasons for Condition 8(1) are to ensure that off-site migration of landfill gas is monitored and all buildings at the *Site* are free of any landfill gas accumulation, which due to a methane gas component may be explosive and thus create a danger to any persons at the *Site*.
- Condition 8(2) is included to provide the groundwater and surface water limits to prevent water pollution at the *Site*.
- Conditions 8(3) and 8(4) are included to require the *Owner* to demonstrate that the *Site* is performing as designed and the impacts on the natural environment are acceptable. Regular monitoring allows for the analysis of trends over time and ensures that there is an early warning of potential problems so that any necessary remedial/contingency action can be taken.
- Conditions 8(5), 8(6) and 8(7) are included to ensure the integrity of the groundwater monitoring network so that accurate monitoring results are achieved and the natural environment is protected.
- Conditions 8(8) to 8(11) inclusive are added to ensure the *Owner* has a plan with an organized set of procedures for identifying and responding to potential issues relating to groundwater and surface water contamination at the *Site's* compliance point.
- Conditions 8(12), 8(13) and 8(14) are included to streamline the approval of the changes to the monitoring plan.

CLOSURE PLAN

- The reasons for Condition 9 are to ensure that final closure of the *Site* is completed in an aesthetically pleasing manner, in accordance with Ministry standards, and to ensure the long-term protection of the health and safety of the public and the environment.

WASTE DIVERSION

- Condition 10 is included to ensure that the recyclable materials are stored in their temporary storage location and transferred off-site in a manner as to minimize a likelihood of an adverse effect or a hazard to the natural environment or any person.

Upon issuance of the environmental compliance approval, I hereby revoke Approval No(s). A442103 issued on September 27, 1982 and notices of amendment.

In accordance with Section 139 of the Environmental Protection Act, you may by written Notice served upon me and the Environmental Review Tribunal within 15 days after receipt of this Notice, require a hearing by the Tribunal. Section 142 of the Environmental Protection Act provides that the Notice requiring the hearing shall state:

1. The portions of the environmental compliance approval or each term or condition in the environmental compliance approval in respect of which the hearing is required, and;

2. The grounds on which you intend to rely at the hearing in relation to each portion appealed.

Pursuant to subsection 139(3) of the Environmental Protection Act, a hearing may not be required with respect to any terms and conditions in this environmental compliance approval, if the terms and conditions are substantially the same as those contained in an approval that is amended or revoked by this environmental compliance approval.

The Notice should also include:

3. The name of the appellant;
4. The address of the appellant;
5. The environmental compliance approval number;
6. The date of the environmental compliance approval;
7. The name of the Director, and;
8. The municipality or municipalities within which the project is to be engaged in.

And the Notice should be signed and dated by the appellant.

This Notice must be served upon:

The Secretary*
Environmental Review Tribunal
655 Bay Street, Suite 1500
Toronto, Ontario
M5G 1E5

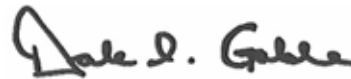
AND

The Director appointed for the purposes of Part II.1 of
the Environmental Protection Act
Ministry of the Environment and Climate Change
135 St. Clair Avenue West, 1st Floor
Toronto, Ontario
M4V 1P5

*** Further information on the Environmental Review Tribunal's requirements for an appeal can be obtained directly from the Tribunal at: Tel: (416) 212-6349, Fax: (416) 314-3717 or www.ert.gov.on.ca**

The above noted activity is approved under s.20.3 of Part II.1 of the Environmental Protection Act.

DATED AT TORONTO this 20th day of August, 2015



Dale Gable, P.Eng.

Director

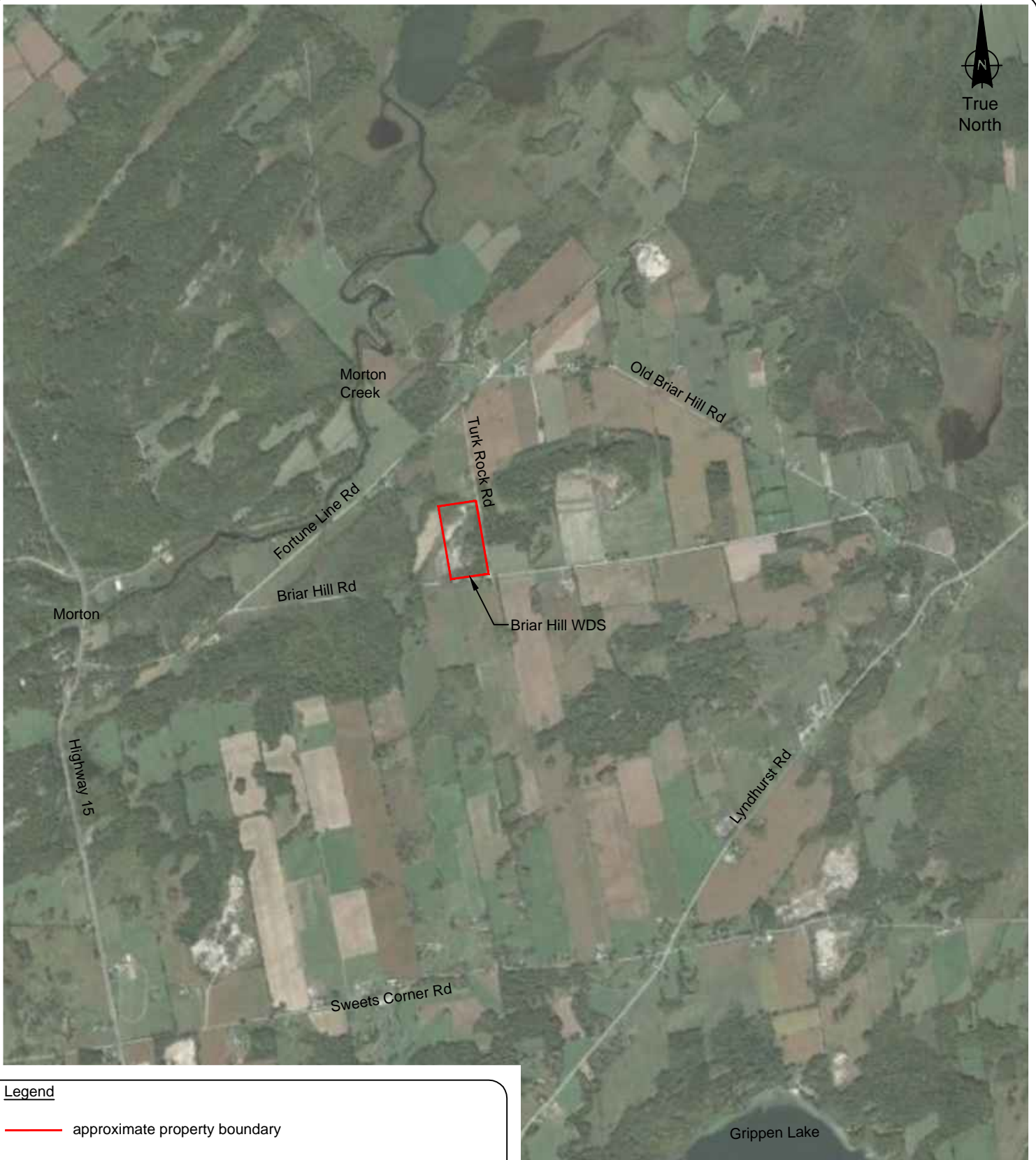
appointed for the purposes of Part II.1 of the
Environmental Protection Act

RM/

c: District Manager, MOECC Kingston - District

Appendix B

Figures



Legend

approximate property boundary

Note: figure based on Malroz field observations and Google Earth imagery

Site Location Plan

2019 Monitoring, Development and Operations Report
 Briar Hill Waste Disposal Site
 Township of Leeds and the Thousand Islands

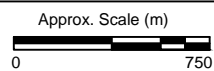
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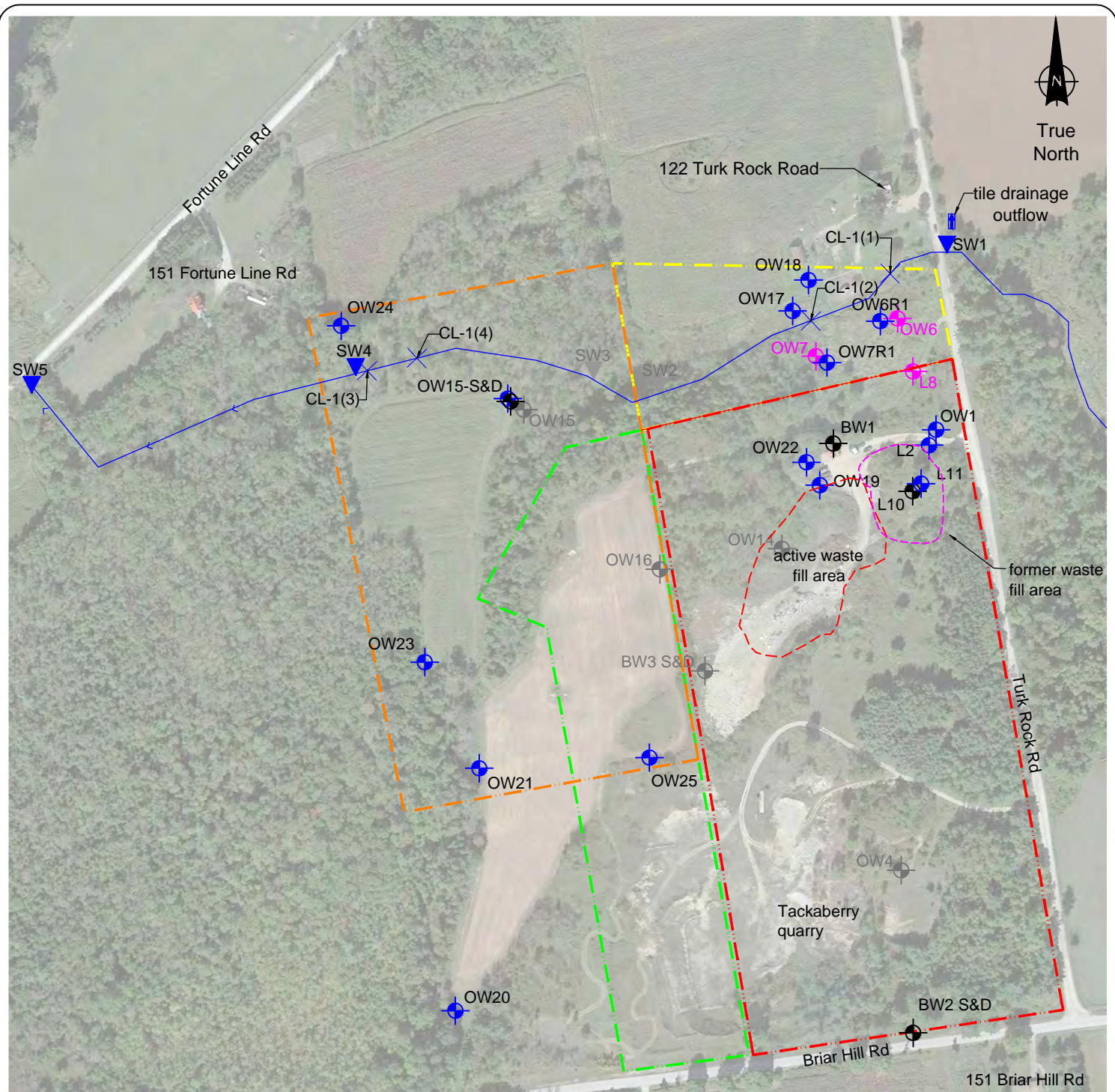
Figure

1



Rev	Date	Description	By	Chkd
R0	2020/03/26	issued in final	MW	RV





Legend	
	bedrock monitoring well location
	overburden monitoring well location
	abandoned/destroyed monitoring well location
	monitoring well abandoned in 2019
	surface water monitoring location
	surface water station not in monitoring program
	approximate landfill active waste fill area
	approximate landfill former waste fill area
	existing property boundary
	drainage creek
	northern CAZ
	proposed western CAZ
	extent of Part 2 described in By-Law 07-71 leased from Tackaberry
	stream survey point



Site Plan

2019 Monitoring, Development and Operations Report
 Briar Hill Waste Disposal Site
 Township of Leeds and the Thousand Islands

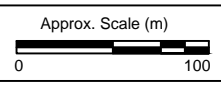
Note: Figure based on Malroz field observations and Google Earth imagery

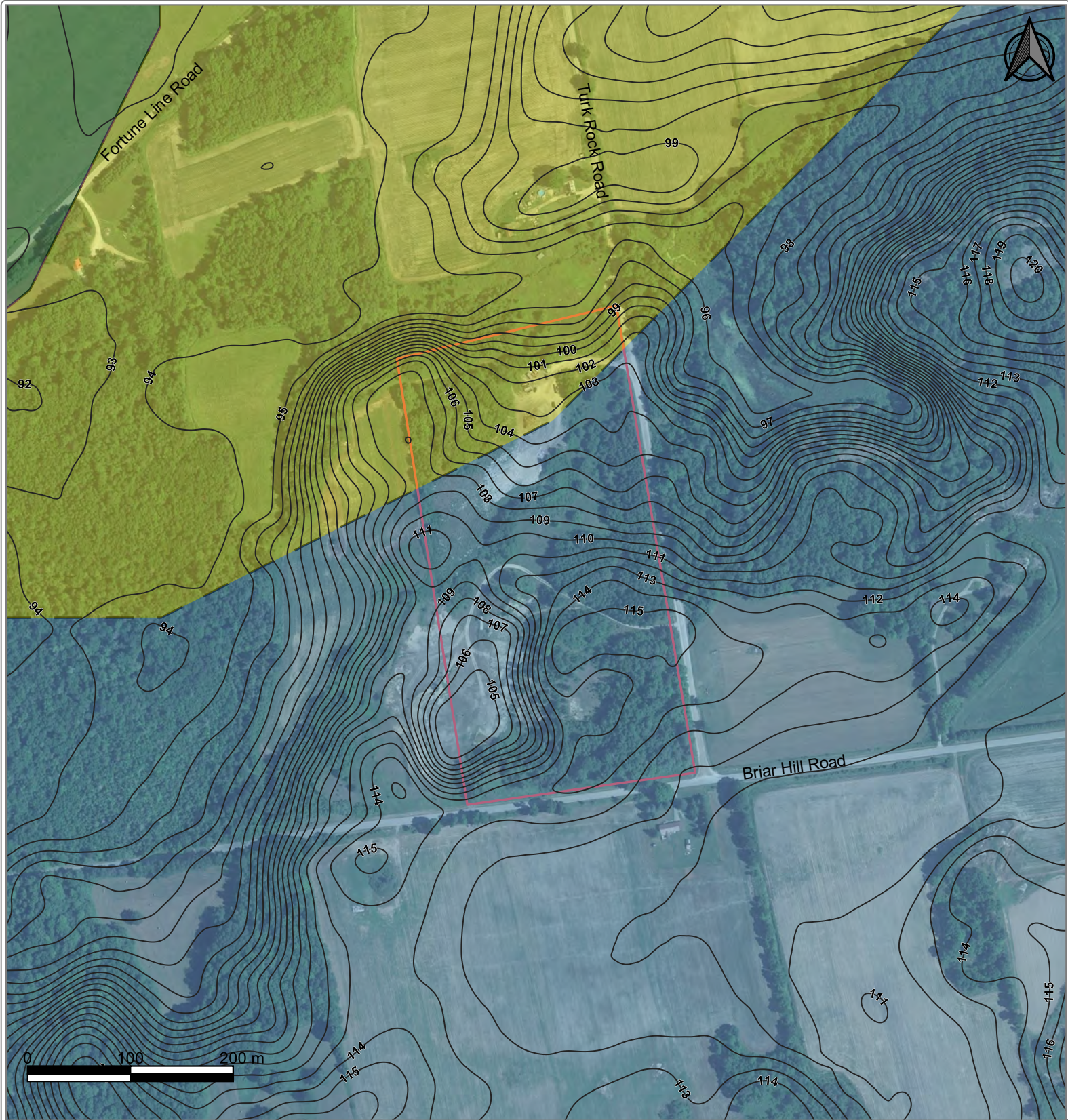
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Figure
2



Rev	Date	Description	By	Chkd
R0	2020/03/26	issued in final	MW	RV





Bedrock Geology

Lithology

- conglomerate, wacke, quartz arenite, arkose limestone, siltstone, chert, minor iron formation, minor metavolcanic rocks
- granitic gneisses with metasedimentary xenoliths, migmatites, injection gneisses, pegmatites
- marble, calc-silicate rocks, skarn, tectonic breccias
- approximate lithologic contact

- ~~105~~ topographic contours
- approximate property boundary

Data Sources: Bedrock Geology of Ontario, Ontario Geologic Survey, 2011; Digital Raster Project Eastern Ontario, Ministry of Natural Resources and Forestry, 2014; Google Earth Imagery; Malroz Field Observations.

R0	2020/03/26	issued in final	RV	JP
Rev	Date	Description	By	Chkd

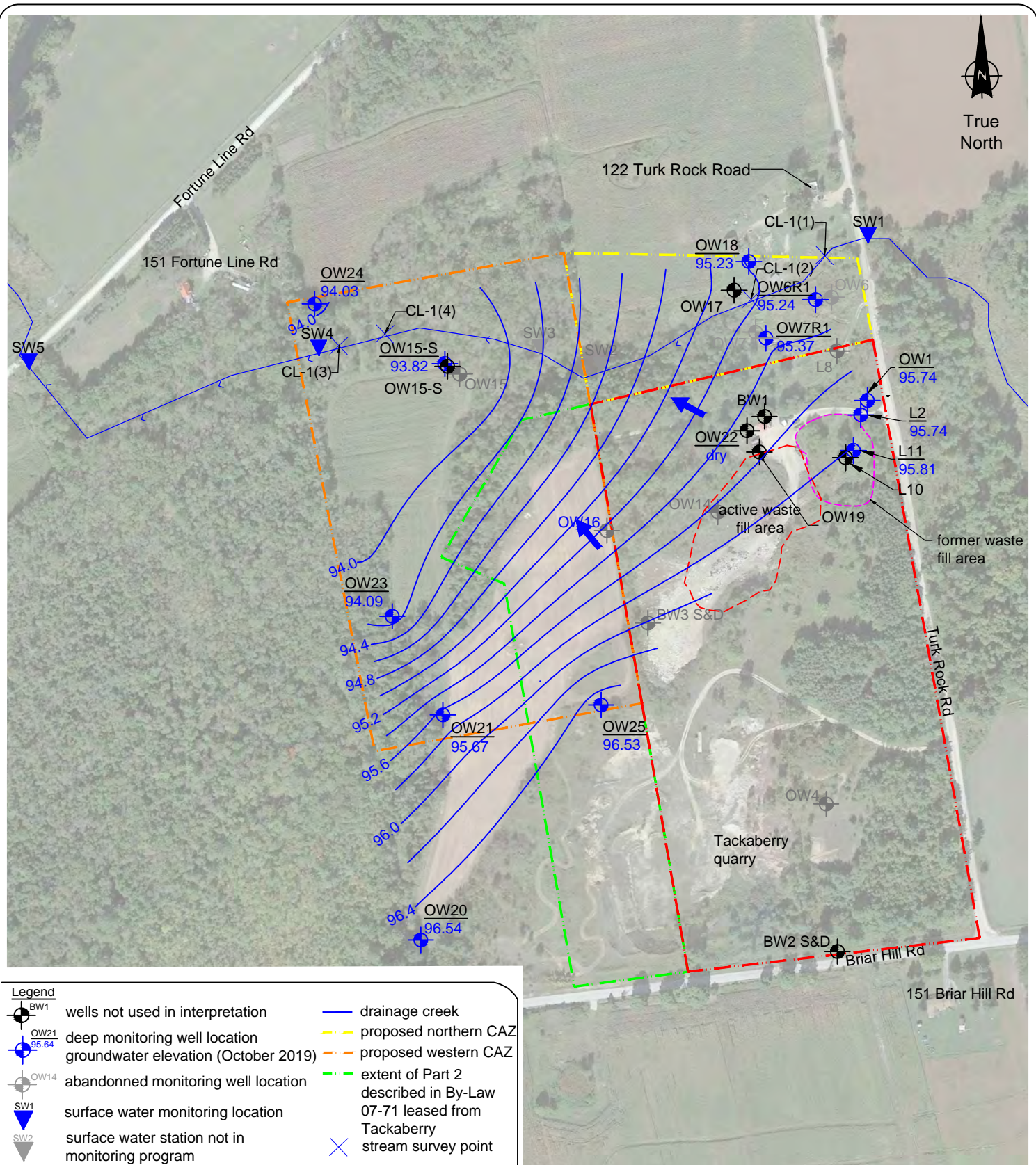
Bedrock Geology

2019 Monitoring, Development and Operations Report
 Briar Hill Waste Disposal Site
 Township of Leeds and the Thousand Islands

File: 1036-110.00

Figure
3





Legend

- wells not used in interpretation
- deep monitoring well location
- abandoned monitoring well location
- surface water monitoring location
- surface water station not in monitoring program
- inferred shallow groundwater contours
- inferred direction of shallow groundwater flow
- approximate landfill active waste fill area
- approximate landfill former waste fill area
- existing property boundary
- drainage creek
- proposed northern CAZ
- proposed western CAZ
- extent of Part 2 described in By-Law 07-71 leased from Tackaberry
- stream survey point

Shallow Groundwater Contours (October 2019)

2019 Monitoring, Development and Operations Report
Briar Hill Waste Disposal Site
Township of Leeds and the Thousand Islands

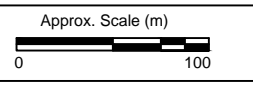
Note: figure based on Malroz field observations and Google Earth imagery

File: 1036-110.00

Figure
4

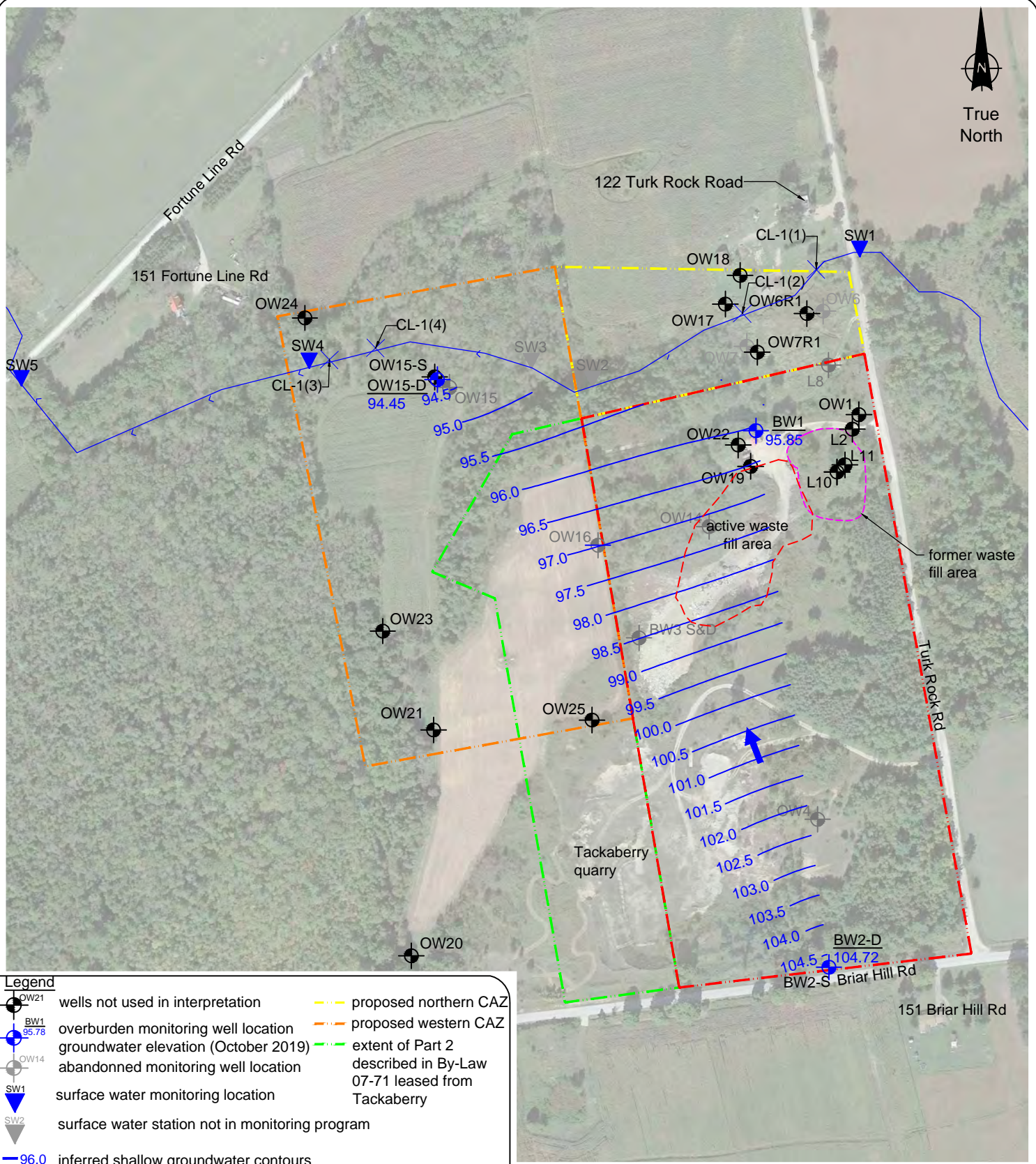


Rev	Date	Description	By	Chkd
R0	2020/03/26	issued in final	MW	RV





True North



Legend

- wells not used in interpretation
- overburden monitoring well location
groundwater elevation (October 2019)
- abandoned monitoring well location
- surface water monitoring location
- surface water station not in monitoring program
- 96.0 inferred shallow groundwater contours
- inferred direction of shallow groundwater flow
- approximate landfill active waste fill area
- approximate landfill former waste fill area
- existing property boundary
- drainage creek
- proposed northern CAZ
- proposed western CAZ
- extent of Part 2 described in By-Law 07-71 leased from Tackaberry

Deep Groundwater Contours (October 2019)

2019 Monitoring, Development and Operations Report
Briar Hill Waste Disposal Site
Township of Leeds and the Thousand Islands

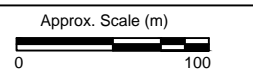
Note: figure based on Malroz field observations and Google Earth imagery

File: 1036-110.00

Figure
5



Rev	Date	Description	By	Chkd
R0	2020/03/26	issued in final	MW	RV



Appendix C
Tables

Table 1
Surface Water Survey

Station ID	Northing (m)	Easting (m)	Invert Elevation (m)	Nearest Groundwater Monitor	Groundwater Elevations (m)*		Nearest Water Body Invert Relative to Groundwater (m)	
					Spring 2019	Fall 2019	Spring 2019	Fall 2019
SW 1	040733	4933270	94.76	-	-	-	-	-
TD-1(1)	-	-	94.91	-	-	-	-	-
CL-1(1)	406998	4933252	94.34	OW17	95.38	95.06	+1.04	+0.72
TD-2(1)	-	-	94.79	-	-	-	-	-
TD-1(2)	-	-	94.50	-	-	-	-	-
CL-1(2)	406942	4933225	94.10	OW6R1	95.45	95.24	+1.35	+1.14
TD-2(2)	-	-	94.71	-	-	-	-	-
SW4	406634	4933207	93.16	-	-	-	-	-
TD-1(3)	-	-	93.46	-	-	-	-	-
CL-1(3)	406633	4933216	93.14	OW24	94.41	94.03	+1.27	+0.89
TD-2(3)	-	-	93.45	-	-	-	-	-
TD-1(4)	-	-	93.55	-	-	-	-	-
CL-1(4)	406668	4933232	93.27	OW15-S	94.22	93.75	+0.95	+0.48
TD-2(4)	-	-	93.49	-	-	-	-	-

Notes:

- TD# edge of stream (survey station #)
- SW surface water point
- CL# centerline of stream (survey station #)
- denotes not measured

survey based on Malroz survey from April 24, 2018

* groundwater elevations taken from nearest shallow groundwater monitoring well

Data Input: MW
 Data Check: RV

Table 2
Well Inspection Results

Well ID	Well Type	Well Construction	Well Integrity			Well Observations
	Protective casing	Material	Locked	Capped	Condition ^[1]	Remarks
OW1	white 2" PVC pipe	2" schedule 40 PVC	Y	J-Plug	good	
OW6R1	steel monument	2" schedule 40 PVC	Y	J-Plug	good	
OW7R1	steel monument	2" schedule 40 PVC	Y	J-Plug	good	
OW15-S	steel monument	2" schedule 40 PVC	Y	J-Plug	good	
OW15-D	steel monument	2" schedule 40 PVC	Y	J-Plug	good	
OW17	steel monument	2" schedule 40 PVC	Y	J-Plug	good	
OW18	steel monument	2" schedule 40 PVC	Y	J-Plug	good	
OW19	white 2" PVC pipe	2" schedule 40 PVC	Y	J-Plug	good	
OW20	steel monument	2" schedule 40 PVC	Y	J-Plug	good	
OW21	steel monument	2" schedule 40 PVC	Y	J-Plug	good	
OW22	steel monument	2" schedule 40 PVC	Y	J-Plug	good	
OW23	steel monument	2" schedule 40 PVC	Y	J-Plug	good	
OW24	steel monument	2" schedule 40 PVC	Y	J-Plug	good ^[2]	casing was repaired with concrete
OW25	steel monument	2" schedule 40 PVC	Y	J-Plug	good	
BW1	steel monument	2" schedule 40 PVC	Y	Slip cap	good	
BW2-S	flush mount	2" schedule 40 PVC	N	J-Plug	good	nested with BW2-D
BW2-D		1-1/4" schedule 40 PVC	N	J-Plug	good	nested with BW2-S
L2	black 2" PVC pipe	2" schedule 40 PVC	Y	J-Plug	good	
L10	black 2" PVC pipe	2" schedule 40 PVC	Y	J-Plug	good	
L11	black 2" PVC pipe	2" schedule 40 PVC	Y	J-Plug	good	

Notes: well inspection completed on May 15, 2019

Data Input: MW
 Data Checked: RF

¹ well conditions classified as:

- good (no maintenance required),
- fair (optional maintenance required),
- poor (requires maintenance or abandonment)

² well was found heaved in May 2019, but has been repaired by placing concrete around the base

Table 3
Groundwater Monitoring Results

Location	DTW (mbTOP)	TOP Elevation (masl)	Grade Elevation (masl)	Groundwater Elevation (masl)	Methane Concentration (%LEL)	Observations		
						Colour	Odour	Sediment
May 14 & 15, 2019								
BW1	6.76	102.83	101.87	96.07	nr	clear	none	none
BW2-D ^[1]	8.57	114.13	-	105.56	nr	clear	none	none
BW2-S ^[1]	6.23	114.13	-	107.90	nr	cloudy	none	some
OW1	6.82	102.79	101.85	95.97	<1	rusty, turbid	none	some
OW6R1	0.72	96.17	95.59	95.45	nr	cloudy	none	some
OW7R1	1.15	96.78	96.05	95.63	nr	rust brown	none	some
OW15-D	artesian	94.70	-	-	nr	cloudy grey	none	abundant
OW15-S	0.41	94.63	94.04	94.22	nr	cloudy grey	none	abundant
OW17	0.58	95.96	94.87	95.38	<1	cloudy grey/brown	none	abundant
OW18	1.52	97.17	96.18	95.65	nr	cloudy grey/brown	none	abundant
OW19	3.30	103.40	102.30	100.10	>100	clear	sulphur	trace
OW20	3.41	100.82	99.96	97.41	nr	cloudy grey	none	abundant
OW21	1.11	97.20	96.48	96.09	nr	clear	none	trace organics
OW22	5.14	102.99	102.18	97.85	nr	insufficient water to sample		
OW23	0.64	95.05	94.04	94.41	nr	cloudy grey	none	some
OW24	0.15	94.56	93.68	94.41	9	cloudy brown	none	abundant
OW25	9.77	107.00	106.30	97.23	nr	cloudy	none	none
L2	7.27	103.24	102.23	95.97	<1	rusty, turbid	none	some
L10	8.25	104.20	103.41	95.95	nr	clear	sulphur	none
L11	9.26	104.50	103.38	95.24	nr	clear	sulphur	none
October 9 & 10, 2019								
BW1	6.98	102.83	101.87	95.85	nr	clear	none	none
BW2-D ^[1]	9.41	114.13	-	104.72	nr	clear	sulphur	none
BW2-S ^[1]	8.77	114.13	-	105.36	nr	clear	none	trace
OW1	7.05	102.79	101.85	95.74	nr	rusty, turbid	none	trace
OW6R1	0.93	96.17	95.59	95.24	nr	brown	none	some
OW7R1	1.41	96.78	96.05	95.37	<1 ^[a]	clear	none	none
OW15-D	0.25	94.70	94.04	94.45	nr	grey	sulphur	abundant
OW15-S	0.88	94.63	94.04	93.75	nr	grey	none	abundant
OW17	0.90	95.96	94.87	95.06	nr	grey	none	abundant
OW18	1.94	97.17	96.18	95.23	nr	grey	none	abundant
OW19	dry	103.40	102.30	-	>100	dry		
OW20	4.28	100.82	99.96	96.54	nr	grey	none	abundant
OW21	1.53	97.20	96.48	95.67	nr	clear	none	trace
OW22	dry	102.99	102.18	-	nr	dry		
OW23	0.96	95.05	94.04	94.09	nr	grey	none	abundant
OW24	0.53	94.56	93.68	94.03	5 ^a	grey	none	abundant
OW25	10.47	107.00	106.30	96.53	nr	turbid	none	trace
L2	7.50	103.24	102.23	95.74	nr	rusty, turbid	none	trace
L10	8.48	104.20	103.41	95.72	nr	clear	sulphur	none
L11	8.69	104.50	103.38	95.81	nr	clear	none	trace

Notes:

- LEL lower explosive limit
- nr no response
- DTW depth to water
- not measured/not available/not applicable
- masl meters above mean sea level
- mbTOP meters below top of piezometer

^[1] elevation of wells based on survey data provided by the Township of Leeds and the Thousand Islands and Malroz 2017 survey

^[a] full gas response

Data Input: BL
 Data Check: MW

Table 4a Overburden Groundwater Analytical Results

PARAMETERS			Alkalinity	N - Ammonia	BOD	COD	DOC	Conductivity	Hardness	pH	Phenols	Phosphorus (total)	Total Dissolved Solids	Total Suspended Solids	Total Kjeldahl - N	Chloride	N - Nitrate	N - Nitrite	Sulphate	Mercury	Aluminum	Arsenic	Barium	Boron	
Groundwater Sampling Location	Sample ID	Date	Units	mg/L	mg/L	mg/L	mg/L	mg/L	µmho/cm	mg/L	pH Units	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	
			RL	5	0.01	3	5	0.2	1	1	6.5 - 8.5	0.002	0.01	1	3	0.1	0.5	0.05	0.05	1	0.0002	0.01	0.001	0.001	0.001
			ODWS	30-500 OG			5 AO		80-100 OG		6.5 - 8.5 OG		500 AO			250 AO	10 CS	1 CS	500 AO	0.001 CS	0.1 OG	0.01 CS	1 CS	5 CS	
L11	19-W012	14-May-19		460	0.03	<	11	5.7	957	537	7.41	<	0.13	509	98	0.5	13.5	3.30	<	18	<	0.08	<	0.539	0.067
L11	19-W036	10-Oct-19		365	0.03	<	< 5	1.9	718	410	7.97	<	0.09	374	42	0.2	7.4	0.36	<	5	<	0.07	<	0.358	0.019
L2	19-W018	15-May-19		353	0.05	<	47	6.1	815	413	7.64	<	0.85	429	1460	0.7	46.1	0.33	<	5	<	0.06	<	0.394	0.010
L2	19-W038	10-Oct-19		448	0.10	<	21	2.3	926	526	7.98	<	0.28	492	780	0.5	31.1	1.39	<	9	<	0.08	0.0001	0.724	0.012
OW1*	19-W019	15-May-19		372	0.03	<	36	4.6	1580	571	7.58	<	0.15	863	280	0.3	280.0	1.99	<	24	<	0.08	<	0.643	0.040
OW1*	19-W039	10-Oct-19		492	0.04	<	31	2.9	1380	646	7.96	<	0.27	749	300	0.5	120.0	8.07	<	60	<	0.10	< 0.0003	0.803	0.074
OW15S	19-W003	14-May-19		531	0.03	4	4500	10.8	1240	695	7.67	<	534	670	507000	48.1	70.8	<	46	<	0.08	0.0028	0.454	0.253	
OW15S	19-W026	9-Oct-19		560	0.11	<	1900	8.6	1250	670	7.88	<	130	673	12000	4.4	93.8	<	45	<	0.09	0.0029	0.485	0.286	
OW17	19-W022	15-May-19		293	0.07	<	40	7.9	699	369	7.89	<	1.45	363	13900	0.4	17.4	0.19	<	51	<	0.05	<	0.277	0.025
OW17	19-W041	10-Oct-19		305	0.09	<	74	2.5	749	380	8.00	<	5.45	391	14000	1.1	41.4	<	40	<	0.05	0.0002	0.314	0.037	
OW18*	19-W014	14-May-19		330	0.05	<	53	7.2	793	441	7.68	<	3.90	399	38000	0.5	19.7	7.15	<	33	<	0.07	0.0002	0.215	0.035
OW18*	19-W040	10-Oct-19		300	0.06	<	36	2.1	689	386	8.08	<	3.56	358	16000	0.3	16.6	<	51	<	0.06	0.0001	0.257	0.011	
OW19	19-W017	15-May-19		495	4.75	7	87	21.5	1340	459	7.28	<	0.24	727	50	8.3	92.7	0.17	<	63	<	0.07	0.0016	0.293	0.415
OW19	-	9-Oct-19	dry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
OW20	19-W009	14-May-19		227	0.06	7	1600	14.8	464	269	8.08	<	79.0	240	231000	2.7	1.2	0.06	<	21	<	0.04	0.0003	0.167	0.007
OW20	19-W030	9-Oct-19		226	0.08	3	70	3.2	464	263	8.16	<	56.4	240	188000	1.9	<	<	<	18	<	0.04	0.0003	0.185	0.005
OW21	19-W008	14-May-19		191	0.04	<	24	2.6	563	311	8.00	<	0.71	292	670	0.2	12.0	15.8	<	15	<	0.06	<	0.325	0.023
OW21	19-W029	9-Oct-19		198	0.04	<	< 5	2.9	521	286	8.09	<	0.17	270	650	0.1	9.7	11.5	<	15	<	0.06	<	0.311	0.022
OW22	-	14-May-19	IW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
OW22	-	9-Oct-19	IW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
OW23	19-W007	14-May-19		198	0.14	<	34	2.9	464	256	8.05	<	1.80	240	4700	0.4	4.8	0.10	<	35	<	0.04	0.0005	0.140	0.068
OW23	19-W028	9-Oct-19		203	0.18	<	37	2.9	466	250	8.05	<	1.63	241	27000	0.5	2.8	<	<	38	<	0.06	0.0006	0.155	0.072
OW24*	19-W005	14-May-19		235	0.34	<	26	8.1	619	203	7.83	<	0.39	321	750	0.7	8.3	0.10	<	74	<	0.04	0.0018	0.105	0.073
OW24*	19-W025	9-Oct-19		237	0.29	5	710	4.8	578	200	8.06	<	3.03	300	24000	1.5	8.4	<	55	<	0.09	0.0013	0.058	0.081	
OW25	19-W006	14-May-19		245	0.10	<	18	2.9	482	284	7.85	<	0.17	249	660	0.1	0.7	1.00	<	6	<	0.06	<	0.540	0.013
OW25	19-W031	9-Oct-19		230	0.07	<	20	5.7	458	264	8.08	<	0.26	237	1150	0.2	<	1.4	<	3	<	0.04	<	0.487	0.008
OW6R1	19-W011	14-May-19		434	0.04	<	9	3.9	1150	476	7.64	<	0.62	619	800	0.3	93.0	0.88	<	21	<	0.08	<	0.843	0.070
OW6R1	19-W043	10-Oct-19		425	0.06	<	52	2.4	1230	482	7.79	<	5.57	661	48500	0.9	144.0	0.89	<	19	<	0.08	< 0.0003	0.868	0.071
OW7R1	19-W010	14-May-19		289	2.40	<	17	9.0	863	351	7.56	<	0.39	456	2200	2.7	67.0	0.10	<	51	<	0.10	0.0002	0.310	0.204
OW7R1	19-W042	10-Oct-19		537	2.46	<	18	7.6	1270	591	7.60	<	0.08	688	76	2.7	74.8	<	63	<	0.10	< 0.0003	0.565	0.390	
RULs				368				3.95		173			389			126	2.6	0.29	260	0.0003	0.061	0.0032	0.392	1.26	

(table cont'd)

Table 4a Overburden Groundwater Analytical Results (continued)

PARAMETERS			Cadmium	Calcium	Chromium	Cobalt	Copper	Iron	Lead	Magnesium	Manganese	Potassium	Silver	Sodium	Strontium	Uranium	Vanadium	Zinc	Temperature (field)	pH (Field)	DO (Field)	Conductivity (Field)	Un-ionized Ammonia (Field) ^[1]	
Groundwater Sampling Location	Sample ID	Date	Units	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	°C	pH Units	mg/L	mS/cm	mg/L	
			RL	0.00015	0.02	0.001	0.0001	0.0001	0.005	0.0002	0.02	0.001	0.1	0.0001	0.2	0.001	0.0005	0.005	0.005	-	-	-	-	-
			ODWS	0.005		0.05		1	0.3	0.01	0.05			200	0.02		5	15	6.5-8.5					
			CS			CS		AO	AO	CS	AO			AO [a]	CS		AO	AO	OG					
L11	19-W012	14-May-19		0.000056	159	0.002	0.0013	0.0017	<	0.00004	34.0	0.002	6.7	<	8.5	0.311	0.00061	<	0.013	9.52	6.95	6.51	0.882	<
L11	19-W036	10-Oct-19		0.000043	117	<	0.0008	0.0028	0.041	0.00005	28.5	0.002	3.2	<	9.2	0.209	0.00047	<	0.006	9.01	5.87	4.46	1.24	<
L2	19-W018	15-May-19		<	117	0.001	<	0.0003	0.009	<	29.4	<	1.2	<	13.0	0.167	0.00019	<	<	10.43	7.34	5.73	0.84	<
L2	19-W038	10-Oct-19		<	146	<	0.0005	0.0013	0.005	<	39.1	0.003	1.6	<	19.2	0.192	0.00035	<	<	8.76	6.02	11.75	1.61	<
OW1*	19-W019	15-May-19		<	156	0.002	<	0.0018	<	0.00009	44.0	<	3.3	<	95.7	0.235	0.00066	<	<	11.66	7.42	8.44	1.52	<
OW1*	19-W039	10-Oct-19		< 0.000029	178	<	0.0006	0.0018	0.065	< 0.00009	49.0	0.006	5.2	<	76.6	0.322	0.00124	<	<	9.34	5.90	8.41	2.36	<
OW15S	19-W003	14-May-19		<	152	0.001	0.0001	0.0024	1.99	0.00015	76.6	0.046	3.5	<	41.2	0.886	<	0.005	<	7.55	7.32	0.00	1.27	<
OW15S	19-W026	9-Oct-19		< 0.000029	150	<	0.0005	0.0002	1.84	< 0.00009	71.8	0.047	4.1	<	44.4	0.845	0.00028	0.005	<	12.12	5.69	5.52	1.94	<
OW17	19-W022	15-May-19		0.000018	86.8	0.002	0.0002	0.0002	0.008	<	37.1	0.083	1.7	<	9.2	0.314	0.00053	<	<	8.61	7.56	1.42	0.682	<
OW17	19-W041	10-Oct-19		<	86.5	<	0.0004	0.0019	0.089	0.00004	39.9	0.068	2.2	<	14.6	0.369	0.00057	<	<	11.26	6.42	7.43	1.16	<
OW18*	19-W014	14-May-19		<	108	0.002	0.0002	0.0031	<	<	41.6	0.007	15.4	<	7.7	0.224	0.00245	<	<	7.05	7.33	0.00	0.816	<
OW18*	19-W040	10-Oct-19		<	88.3	<	0.0005	0.0003	0.007	<	40.1	0.016	2.4	<	8.3	0.175	0.00319	<	<	9.60	6.40	1.50	1.21	<
OW19	19-W017	15-May-19		<	123	0.002	0.0011	0.0003	17.7	0.00018	36.9	1.24	50.8	<	92.5	0.564	0.00071	<	<	9.71	7.18	2.90	1.38	0.01
OW19	-	9-Oct-19	dry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
OW20	19-W009	14-May-19		<	58.8	<	<	<	0.036	<	29.7	0.017	1.6	<	4.8	0.141	0.00100	<	<	8.22	7.85	2.83	0.473	<
OW20	19-W030	9-Oct-19		<	58.5	<	0.0003	<	0.048	0.00002	28.4	0.017	1.6	<	4.8	0.142	0.00101	<	<	9.95	6.53	8.81	0.828	<
OW21	19-W008	14-May-19		<	75.7	0.002	<	0.0002	<	<	29.6	<	1.4	<	3.9	0.148	0.00071	<	<	8.00	7.73	4.35	0.579	<
OW21	19-W029	9-Oct-19		<	70.4	<	0.0002	0.0013	0.020	0.00003	26.7	<	1.4	<	4.1	0.14	0.00084	<	<	10.76	6.48	9.38	0.918	<
OW22	-	14-May-19	IW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
OW22	-	9-Oct-19	IW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
OW23	19-W007	14-May-19		<	56.2	<	<	0.0002	0.077	0.00004	28.1	0.013	1.8	<	6.6	0.478	0.00035	<	<	7.33	7.88	2.42	0.47	<
OW23	19-W028	9-Oct-19		<	54.3	<	0.0002	0.0004	0.134	0.00008	27.9	0.015	2.0	<	7.5	0.516	0.00034	<	<	10.24	6.57	4.69	0.852	<
OW24*	19-W005	14-May-19		<	49.8	0.001	0.0002	0.0008	3.35	0.00008	19.0	0.341	1.1	<	72.7	0.413	0.00217	<	<	6.89	7.18	0.00	0.672	<
OW24*	19-W025	9-Oct-19		<	50.6	<	0.0003	0.0010	5.07	0.00028	18.0	0.287	1.2	<	51.7	0.334	0.00395	<	<	9.56	6.35	12.42	1.02	<
OW25	19-W006	14-May-19		<	73.0	0.002	<	0.0002	0.011	<	24.8	<	1.3	<	3.7	0.087	0.00029	<	<	9.01	7.65	6.45	0.498	<
OW25	19-W031	9-Oct-19		<	67.4	<	0.0002	0.0007	0.028	<	23.3	<	1.1	<	2.0	0.081	0.00094	<	<	9.98	6.39	11.99	0.80	<
OW6R1	19-W011	14-May-19		<	133	<	0.0002	0.0007	0.008	<	35.0	0.006	2.8	<	87.3	0.295	0.00047	<	<	7.06	7.23	1.90	1.15	<
OW6R1	19-W043	10-Oct-19		< 0.000029	133	<	0.0005	0.0005	<	< 0.00009	36.4	0.002	3.1	<	83.2	0.326	0.00054	<	<	10.23	5.57	2.98	2.03	<
OW7R1	19-W010	14-May-19		0.000031	101	0.001	0.0049	0.0021	0.691	0.00007	23.9	0.448	14.7	<	48.1	0.305	0.00036	<	<	6.68	7.15	0.00	0.894	<
OW7R1	19-W042	10-Oct-19		0.000039	169	<	0.0105	0.0015	1.76	< 0.00009	41.0	0.706	21.7	<	66.4	0.570	0.00079	<	<	11.51	5.47	5.57	2.19	<
RULs				0.001		0.0129		0.5002	0.188	0.026		0.0364		102.4		0.0058		2.503						

Notes: concentration exceeds the Ontario Drinking Water Standards
 concentration exceeds the Reasonable Use Limits
 monitoring well used to characterize leachate
 monitoring well used to assess background conditions
 "-" denotes not analyzed
 "RL" denotes reporting limit
 "<" denotes results below reporting limit
 "<###" elevated RL
 "OW###" and "L###" denote groundwater monitoring well ID
 groundwater samples analyzed for metals were field filtered using 0.45 micron filters
^[a] the local medical health officer should be notified when the sodium concentration exceeds 20 mg/L
 [1] Un-ionized Ammonia calculated using field parameters for pH and temperature
 AO aesthetic objective OG operational objective CS chemical standards
 * denotes compliance well for reasonable use policy
 IW denotes insufficient water in well to sample

Data Input: RV
 Data Check: MW

Table 4b Bedrock Groundwater Analytical Results

PARAMETERS			Alkalinity	N - Ammonia	BOD	COD	DOC	Conductivity	Hardness	pH	Phenols	Phosphorus (total)	Total Dissolved Solids	Total Suspended Solids	N - Total Kjeldahl	Chloride	N - Nitrate	N - Nitrite	Sulphate	Mercury	Aluminum	Arsenic	Barium	Boron	
Groundwater Sampling Location	Sample ID	Date	Units	mg/L	mg/L	mg/L	mg/L	mg/L	µmho/cm	mg/L	pH Units	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	
			RL	5	0.01	3	5	0.2	1	1	0	0.002	0.01	1	3	0.1	0.5	0.05	0.05	1	0.00002	0.01	0.0001	0.001	0.005
			ODWS	30-500 OG			5 AO		80-100 OG	6.5 - 8.5 OG			500 AO			250 AO	10 CS	1 CS	500 AO	0.001 CS	0.1 OG	0.01 CS	1 CS	5 CS	
BW1*	19-W016	15-May-19		394	0.95	<	19	7.7	980	443	7.64	<	<	522	7	1.3	52.8	0.17	<	48	<	0.07	0.0002	0.143	0.742
BW1*	19-W034	9-Oct-19		266	0.75	<	10	5	710	318	7.98	<	0.03	369	4	1	56.7	<	<	39	<	0.06	0.0002	0.101	0.721
BW2-D	19-W021	15-May-19		195	0.02	<	6	3.9	510	245	7.94	<	<	264	3	0.1	31.9	0.46	<	16	<	0.05	0.0001	0.130	<
BW2-D	19-W033	9-Oct-19		244	0.04	<	5	3.4	619	297	8.06	<	0.41	321	90	2.1	51.1	5.98	<	17	<	0.06	0.0002	0.144	<
BW2-S	19-W020	15-May-19		253	0.04	<	16	6.2	997	277	7.84	<	0.22	532	585	0.4	78.9	9.85	<	99	<	0.05	0.0005	0.025	0.014
BW2-S	19-W032	9-Oct-19		258	0.05	<	27	3.7	985	286	8.01	<	0.25	525	520	0.4	98.6	10.2	<	100	<	0.07	0.0005	0.025	0.014
OW15D*	19-W002	14-May-19		463	0.90	<	62	5.2	1150	595	7.42	<	3.92	619	9300	1.3	70.4	<	<	46	<	0.08	0.0008	0.477	0.256
OW15D*	19-W027	9-Oct-19		460	1.08	<	31	5.8	1130	569	7.78	<	0.80	605	28000	1.3	90.9	<	<	46	<	0.10	0.0007	0.447	0.235
L10*	19-W015	14-May-19		731	10.5	<	56	16.4	1760	813	7.15	<	0.05	966	36	12.5	109.0	<	<	68	<	0.10	0.0002	0.127	1.22
L10*	19-W037	10-Oct-19		769	11.7	<	74	11.9	1750	806	7.79	<	0.07	959	50	13.8	91.1	< 0.5	< 0.5	21	<	0.12	< 0.0005	0.127	1.21
RULs				383				4.5		199				577		163	7.7	0.7	337	0.0003	0.172	0.0029	0.275	1.27	

(table cont'd)

Table 4b Bedrock Groundwater Analytical Results (continued)

PARAMETERS			Cadmium	Calcium	Chromium	Cobalt	Copper	Iron	Lead	Magnesium	Manganese	Potassium	Silver	Sodium	Strontium	Uranium	Vanadium	Zinc	Temperature (field)	pH (Field)	DO (Field)	Conductivity (Field)	Unionized Ammonia (Field) ⁽¹⁾
Groundwater Sampling Location	Sample ID	Date	Units	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	°C	pH Units	mg/L	mg/L	mg/L
			RL	0.000015	0.02	0.001	0.0001	0.0001	0.005	0.00002	0.02	0.001	0.1	0.0001	0.2	0.001	0.00005	0.005	0.005				
ODWS			0.005		0.05		1	0.3	0.01		0.05			200	0.02		5	15	6.5-8.5				
			CS		CS		AO	AO	CS		AO			AO [a]	CS		AO	AO		OG			
BW1	19-W016	15-May-19	<	116	0.046	0.0002	0.0002	0.803	0.00003	37.2	0.152	4.5	<	40.2	3.22	0.00125	<	<	9.49	7.71	3.60	1.03	<
BW1	19-W034	9-Oct-19	<	85.8	<	0.0003	0.0001	0.622	<	25.2	0.105	3.9	<	34.6	2.33	0.0009	<	<	10.97	6.07	3.55	1.21	<
BW2-D	19-W021	15-May-19	<	62.1	0.001	<	0.0011	0.008	0.00014	21.8	0.005	1.6	<	9.6	0.135	0.00084	<	0.006	11.93	7.57	1.25	0.515	<
BW2-D	19-W033	9-Oct-19	<	74.2	<	0.0003	0.0002	0.094	<	27.1	0.021	1.9	<	19.3	0.163	0.00182	<	0.027	10.83	6.15	0.94	1.10	<
BW2-S	19-W020	15-May-19	0.000047	70.7	<	0.0001	0.0014	<	0.00009	24.4	0.004	3.1	<	113	0.214	0.00966	<	0.007	12.44	7.54	4.13	0.98	<
BW2-S	19-W032	9-Oct-19	0.000064	74.2	<	0.0003	0.0013	0.017	0.00003	24.4	0.001	3.3	<	116	0.222	0.0107	<	0.007	11.93	6.31	12.20	0.176	<
OW15D*	19-W002	14-May-19	<	154	0.007	0.0004	<	1.87	0.00002	51.2	0.189	9.4	<	41.4	0.594	0.00213	<	<	8.75	6.82	0.00	1.19	<
OW15D*	19-W027	9-Oct-19	< 0.000029	147	<	0.0008	0.0009	2.07	0.00013	49.1	0.181	9.7	<	42.7	0.542	0.00261	0.008	0.005	9.61	5.56	0.00	1.94	<
L10	19-W015	14-May-19	<	209	0.002	0.0004	0.0023	8.15	0.00013	70.7	0.070	36.7	<	86.3	0.888	0.00033	0.006	<	9.86	6.75	0.00	1.77	0.01
L10	19-W037	10-Oct-19	0.000061	206	<	0.0009	< 0.0003	8.45	< 0.0002	70.7	0.068	40.7	< 0.0002	92.2	0.926	0.00046	<	<	8.88	5.47	2.82	2.91	<
RULs			0.001		0.0138		0.5008	0.252	0.0027		0.0669			161.9		0.0136		2.507					

Notes: 0.046 concentration exceeds the Ontario Drinking Water Standards
0.000061 concentration exceeds the Reasonable Use Limits
19-W021 monitoring well used to assess background conditions
 "-" denotes not analyzed
 "RL" denotes reporting limit
 "BW###" denotes bedrock groundwater monitoring well ID
 "LF" denotes low flow sampling method used
 groundwater denotes concentration exceeds the Ontario Drinking Water Standards
^(a) the local medical health officer should be notified when the sodium concentration exceeds 20 mg/L
 [1] Unionized Ammonia calculated using field parameters for pH and temperature
 AO aesthetic objective OG operational objective CS chemical standards
 * denotes compliance well for reasonable use policy

Data Input: RV
 Data Check: MW

Table 5 Groundwater VOC Analyses

Monitoring Location	Date	Sample ID	Parameter	Acetone	Benzene	Bromobenzene	Bromochloromethane	Bromoform	Bromomethane	Carbon tetrachloride	Chloroethane	Chlorobenzene	Chloroform	Chloromethane	2-Chlorotoluene	4-Chlorotoluene	1,2-Dibromo-3-Chloropropane	Dibromochloromethane	Dibromomethane	Dichlorodifluoromethane	1,2-Dibromoethane	1,2-Dichlorobenzene	1,3-Dichlorobenzene	1,4-Dichlorobenzene		
				Units	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L
				RL	30	0.5	0.4	2	5	0.5	0.2	3	0.5	1	2	0.2	0.2	0.6	2	0.1	2	0.2	0.5	0.5	0.5	0.5
				ODWS	1						2 CS		80 CS										200 CS			5 CS
BW1	2019-May-14	19-W016		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
BW1	2019-Oct-09	19-W034		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
BW2-D	2019-May-14	19-W021		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
BW2-D	2019-Oct-09	19-W033		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
BW2-S	2019-May-14	19-W020		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
BW2-S	2019-Oct-09	19-W032		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
L10	2019-May-14	19-W015		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
L10	2019-Oct-10	19-W037		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
L11	2019-May-14	19-W012		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
L11	2019-Oct-10	19-W036		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
L2	2019-May-14	19-W018		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
L2	2019-Oct-10	19-W038		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW1	2019-May-14	19-W019		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW1	2019-Oct-10	19-W039		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW15-D	2019-May-14	19-W002		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW15-D	2019-Oct-09	19-W027		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW15-S	2019-May-14	19-W003		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW15-S	2019-Oct-09	19-W026		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW17	2019-May-14	19-W022		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW17	2019-Oct-10	19-W041		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW18	2019-May-14	19-W014		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW18	2019-Oct-10	19-W040		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW19	2019-May-14	19-W017		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	1.8		
OW19	2019-Oct-10	-	dry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
OW20	2019-May-14	19-W009		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW20	2019-Oct-09	19-W030		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW21	2019-May-14	19-W008		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW21	2019-Oct-09	19-W029		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW22	2019-May-14	-	IW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
OW22	2019-Oct-10	-	IW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
OW23	2019-May-14	19-W007		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW23	2019-Oct-09	19-W028		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW24	2019-May-14	19-W005		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW24	2019-Oct-09	19-W025		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW25	2019-May-14	19-W006		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW25	2019-Oct-09	19-W031		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW6R1	2019-May-14	19-W011		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW6R1	2019-Oct-10	19-W043		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW7R1	2019-May-14	19-W010		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW7R1	2019-Oct-10	19-W042		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		

(table cont'd)

Table 5 Groundwater VOC Analyses (continued)

Monitoring Location	Date	Sample ID	Parameter	1,1-Dichloroethane	1,2-Dichloroethane	1,1-Dichloroethylene	cis-1,2-Dichloroethylene	trans-1,2-Dichloroethylene	1,2-Dichloropropane	1,3-Dichloropropane	2,2-Dichloropropane	1,3-Dichloropropene, cis+trans	cis-1,3-Dichloropropene	1,3-Dichloropropene, trans	1,1-Dichloropropene	Ethyl Benzene	Hexachlorobutadiene	n-Hexane	Methyl Ethyl Ketone	Isopropylbenzene	4-Isopropyltoluene	Methyl Butyl Ketone	Methyl Isobutyl Ketone	MTBE	Methylene Chloride		
				Units	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L
				RL	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.2	0.2	0.5	0.5	0.5	0.2	0.5	0.6	5	20	0.2	0.2	5	20	2	5
				ODWS		5 CS	14 CS											140 CS									
BW1	2019-May-14	19-W016		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
BW1	2019-Oct-09	19-W034		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
BW2-D	2019-May-14	19-W021		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
BW2-D	2019-Oct-09	19-W033		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
BW2-S	2019-May-14	19-W020		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
BW2-S	2019-Oct-09	19-W032		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
L10	2019-May-14	19-W015		<	<	<	0.8	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
L10	2019-Oct-10	19-W037		0.8	<	<	1.1	<	<	<	<	<	<	<	<	3.6	<	<	<	0.4	<	<	<	<	<		
L11	2019-May-14	19-W012		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
L11	2019-Oct-10	19-W036		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
L2	2019-May-14	19-W018		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
L2	2019-Oct-10	19-W038		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW1	2019-May-14	19-W019		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW1	2019-Oct-10	19-W039		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW15-D	2019-May-14	19-W002		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW15-D	2019-Oct-09	19-W027		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW15-S	2019-May-14	19-W003		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW15-S	2019-Oct-09	19-W026		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW17	2019-May-14	19-W022		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW17	2019-Oct-10	19-W041		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW18	2019-May-14	19-W014		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW18	2019-Oct-10	19-W040		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW19	2019-May-14	19-W017		8.3	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	0.2	<	<	<	<		
OW19	2019-Oct-10	-	dry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
OW20	2019-May-14	19-W009		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW20	2019-Oct-09	19-W030		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW21	2019-May-14	19-W008		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW21	2019-Oct-09	19-W029		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW22	2019-May-14	-	IW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
OW22	2019-Oct-10	-	IW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
OW23	2019-May-14	19-W007		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW23	2019-Oct-09	19-W028		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW24	2019-May-14	19-W005		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW24	2019-Oct-09	19-W025		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW25	2019-May-14	19-W006		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW25	2019-Oct-09	19-W031		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW6R1	2019-May-14	19-W011		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW6R1	2019-Oct-10	19-W043		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW7R1	2019-May-14	19-W010		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		
OW7R1	2019-Oct-10	19-W042		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<		

(table cont'd)

Table 5 Groundwater VOC Analyses (continued)

Monitoring Location	Date	Sample ID	Parameter	Naphthalene	n-Butylbenzene	n-Propylbenzene	sec-Butylbenzene	Styrene	tert-Butylbenzene	1,1,1,2-Tetrachloroethane	1,1,2,2-Tetrachloroethane	Tetrachloroethylene	Toluene	1,2,3-Trichlorobenzene	1,2,4-Trichlorobenzene	1,1,1-Trichloroethane	1,1,2-Trichloroethane	Trichloroethylene	Trichlorofluoromethane	1,2,3-Trichloropropane	1,2,4-Trimethylbenzene	1,3,5-Trimethylbenzene	Vinyl chloride	m+p-Xylenes	o-Xylene	Xylenes (Total)			
				Units	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L	µg/L
				RL	0.4	0.4	0.1	0.1	0.5	0.1	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5	5	0.5	1	0.1	0.2	1	0.5	1.1
				ODWS											10 CS	60 CS					5 CS					1 CS			90
BW1	2019-May-14	19-W016		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
BW1	2019-Oct-09	19-W034		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
BW2-D	2019-May-14	19-W021		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
BW2-D	2019-Oct-09	19-W033		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
BW2-S	2019-May-14	19-W020		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
BW2-S	2019-Oct-09	19-W032		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
L10	2019-May-14	19-W015		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
L10	2019-Oct-10	19-W037		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
L11	2019-May-14	19-W012		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
L11	2019-Oct-10	19-W036		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
L2	2019-May-14	19-W018		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
L2	2019-Oct-10	19-W038		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW1	2019-May-14	19-W019		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW1	2019-Oct-10	19-W039		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW15-D	2019-May-14	19-W002		<	<	<	<	<	<	<	<	1.9	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW15-D	2019-Oct-09	19-W027		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW15-S	2019-May-14	19-W003		<	<	<	<	<	<	<	<	0.8	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW15-S	2019-Oct-09	19-W026		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW17	2019-May-14	19-W022		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW17	2019-Oct-10	19-W041		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW18	2019-May-14	19-W014		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW18	2019-Oct-10	19-W040		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW19	2019-May-14	19-W017		<	<	<	<	<	<	<	<	<	<	<	<	1.7	<	<	<	<	<	<	<	<	<	<			
OW19	2019-Oct-10	-	dry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
OW20	2019-May-14	19-W009		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW20	2019-Oct-09	19-W030		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW21	2019-May-14	19-W008		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW21	2019-Oct-09	19-W029		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW22	2019-May-14	-	IW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
OW22	2019-Oct-10	-	IW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
OW23	2019-May-14	19-W007		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW23	2019-Oct-09	19-W028		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW24	2019-May-14	19-W005		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW24	2019-Oct-09	19-W025		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW25	2019-May-14	19-W006		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW25	2019-Oct-09	19-W031		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW6R1	2019-May-14	19-W011		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW6R1	2019-Oct-10	19-W043		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW7R1	2019-May-14	19-W010		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			
OW7R1	2019-Oct-10	19-W042		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<			

Notes: "-" denotes not analyzed
 "RL" denotes reporting limit
 "<" denotes results below reporting limit
 "OW/BW###" and "L##" denote groundwater monitoring well ID
 "LF" denotes low flow sampling method used
 denotes concentration exceeds the Ontario Drinking Water Standards
 AO indicates aesthetic objective OG indicates operational objective CS Chemical standards
 IW denotes insufficient water in well to sample

monitoring well used to characterize leachate
 monitoring well used to assess background conditions

Data Input: RV
 Data Check: MW

Table 6a - Reasonable Use Limits (Overdurden Wells)

Parameter	Units	ODWSOG Concentration Limit (C _r)	OW20 mean Background Concentration 2015-2019 (C _b)	Constant (x)	Reasonable Use Limit (C _m)
Alkalinity	mg/L	500	235	0.5	368
DOC	mg/L	5	2.90	0.5	3.95
Hardness	mg/L	100	246	0.5	173
Total Dissolved Solids	mg/L	500	278	0.5	389
Chloride	mg/L	250	1.54	0.5	126
N - Nitrate	mg/L	10	0.1	0.25	2.6
N - Nitrite	mg/L	1	0.05	0.25	0.29
Sulphate	mg/L	500	20.8	0.5	260
Mercury	mg/L	0.001	0.0001	0.25	0.0003
Aluminum	mg/L	0.1	0.021	0.5	0.061
Arsenic	mg/L	0.01	0.0009	0.25	0.0032
Barium	mg/L	1	0.190	0.25	0.392
Boron	mg/L	5	0.009	0.25	1.26
Cadmium	mg/L	0.005	0.0001	0.25	0.001
Chromium	mg/L	0.05	0.0006	0.25	0.0129
Copper	mg/L	1	0.0004	0.5	0.5002
Iron	mg/L	0.3	0.077	0.5	0.188
Lead	mg/L	0.01	0.0001	0.25	0.0026
Manganese	mg/L	0.05	0.0227	0.5	0.0364
Sodium	mg/L	200	4.89	0.5	102.4
Uranium	mg/L	0.02	0.0011	0.25	0.0058
Zinc	mg/L	5	0.005	0.5	2.503

Notes: reasonable use calculation based on MOE Guideline B-7

Data Input: RV

$$C_m = C_b + x(C_r - C_b)$$

Data Check: ZL

C_b = background concentration

x = constant; 0.5 non-health parameter, 0.25 for health parameter

C_r = max conc. acceptable in water (Ontario Drinking Water Standards and Operational Guidelines)

C_m = max degradation

Table 6b - Reasonable Use Limits (Bedrock Wells)

Parameter	Units	ODWSOG Concentration Limit (C _r)	BW2-S mean Background Concentration 2007-2019 (C _b)	Constant (x)	Reasonable Use Limit (C _m)
Alkalinity	mg/L	500	265	0.5	383
DOC	mg/L	5	4.01	0.5	4.50
Hardness	mg/L	100	297	0.5	199
Total Dissolved Solids	mg/L	500	655	0.5	577
Chloride	mg/L	250	76.80	0.5	163
N - Nitrate	mg/L	10	7.0	0.25	7.7
N - Nitrite	mg/L	1	0.61	0.25	0.70
Sulphate	mg/L	500	173.5	0.5	337
Mercury	mg/L	0.001	0.0001	0.25	0.0003
Aluminum	mg/L	0.1	0.244	0.5	0.172
Arsenic	mg/L	0.01	0.0006	0.25	0.0029
Barium	mg/L	1	0.034	0.25	0.275
Boron	mg/L	5	0.026	0.25	1.27
Cadmium	mg/L	0.005	0.0001	0.25	0.001
Chromium	mg/L	0.05	0.0017	0.25	0.0138
Copper	mg/L	1	0.0017	0.5	0.5008
Iron	mg/L	0.3	0.204	0.5	0.252
Lead	mg/L	0.01	0.0002	0.25	0.0027
Manganese	mg/L	0.05	0.0839	0.5	0.0669
Sodium	mg/L	200	123.86	0.5	161.9
Uranium	mg/L	0.02	0.0114	0.25	0.0136
Zinc	mg/L	5	0.015	0.5	2.507

Notes: reasonable use calculation based on MOE Guideline B-7

Data Input: RV

$$C_m = C_b + x(C_r - C_b)$$

Data Check: ZL

C_b = background concentration

x = constant; 0.5 non-health parameter, 0.25 for health parameter

C_r = max conc. acceptable in water (Ontario Drinking Water Standards and Operational Guidelines)

C_m = max degradation

Table 7
Surface Water Station Descriptions

Station	Coordinates (NAD 1983, UTM Zone 18N)				Flow Conditions		Notes
	May-19		Oct-19		19-May-14	19-Oct-19	
	Northing (m)	Easting (m)	Northing (m)	Easting (m)			
SW1	4933271	407034	4933274	407034	lotic	lotic	Located upstream from the Briar Hill landfill, adjacent to Turk Rock Road. SW1 is intended to represent background surface water quality for the landfill site.
SW4	4933205	406631	4933212	406632	lotic	lotic	Located approximately 300m downstream from the Briar Hill landfill waste area, in a forested area between two agricultural fields. SW4 is located downstream of the culvert running under the agricultural access road, in the vicinity of OW24, northwest of the site.
SW5	4933202	406401	4933194	406402	lotic	lentic	Located approximately 500m downstream from the Briar Hill landfill waste area, next to Fortune Line Road. The sampling location is upstream of the culvert running under Fortune Line Road.

Note: surface water station locations surveyed using a Garmin handheld GPS

Data Input: RV
 Data Check: MW

Table 8 Surface Water Analytical Results

Surface Water Sampling Location	Date Sampled	Sample ID	Alkalinity	Ammonia (N)	Ammonia(U) (N)(lab)	BOD	COD	DOC	Conductivity	Hardness	pH	Phenols	Phosphorus (total)	Phosphorus, total dissolved	TDS	TSS	N - Total Kjeldahl	Chloride	N - Nitrate	N - Nitrite	Sulphate	Aluminum - Dissolved	Mercury	Arsenic	Barium	Boron
Units			mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	µmho/cm	mg/L	pH Units	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L
		RL	5	0.01	0.01	3	5	0.2	1	1		0.001	0.01	0.002	3	3	0.1	0.5	0.05	0.05	1	0.001	0.0001	0.0001	0.001	0.005
		PWQO	(note a)		0.02						6.5-8.5	0.001	0.02									0.075 ^[b]	0.0002	0.005		0.2
		Table A: Aquatic Protection Value				0.1					6.0 - 9.0	0.04 ^[b]						180			100			0.15	2.3	3.55
		Table B: Canadian Water Quality Guideline										0.004 ^[b]						128	2.9	0.06						1.5
SW1	19/May/14	19-W013	117	0.06	<	<3	30	12.0	281	156	8.10	<	0.07	0.030	144	13	0.8	4.8	2.18	<	9	0.04	<0.00002	0.0003	0.064	0.008
SW1	19/Oct/09	19-W035	190	0.13	<	<3	35	<	439	229	8.07	<	0.07	0.038	227	1520	0.8	7.2	0.26	<	26	0.04	<	0.0003	0.124	0.009
SW4	19/May/14	19-W004	127	0.09	<	<3	26	10.7	308	171	8.07	<	0.08	0.032	158	18	0.8	5.7	2.28	<	11	0.04	<0.00002	0.0003	0.075	0.010
SW4	19/Oct/09	19-W024	227	0.23	0.02	<3	20	<	518	261	8.14	<	0.04	0.021	268	4	0.7	15.9	0.33	<	25	0.05	<	0.0003	0.168	0.036
SW5	19/May/14	19-W001	131	0.08	<	<3	31	10.2	316	177	8.06	<	0.08	0.332	162	82	0.8	5.9	1.88	<	10	0.04	<0.00002	0.0003	0.084	0.011
SW5	19/Oct/09	19-W023	228	0.16	0.01	<3	26	<	519	275	8.10	<	0.04	0.017	269	<3	0.6	14.9	0.30	<	27	0.05	<	0.0003	0.172	0.033

(table cont'd)

Table 8 Surface Water Analytical Results (continued)

Surface Water Sampling Location	Date Sampled	Sample ID	Cadmium	Calcium	Chromium	Cobalt	Copper	Iron	Lead	Magnesium	Manganese	Nickel	Potassium	Silver	Sodium	Strontium	Vanadium	Zinc	Temperature (field)	pH (field)	DO (field)	Ammonia, unionized (field) [1]
Units			mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	°C	pH Units	mg/L	mg/L
RL			0.000015	0.02	0.001	0.0001	0.0001	0.005	0.00002	0.02	0.001	0.01	0.1	0.0001	0.2	0.001	0.005	0.005				0.01
PWQO			0.0005 ^[c]		(note d)	0.0009	0.005 ^[e]	0.3	0.005 ^[f]			0.025		0.0001			0.006	0.02			(note g)	0.02
Table A: Aquatic Protection Value			0.00021		0.064		0.0069	1	0.002									0.089				0.1
Table B: Canadian Water Quality Guideline			0.000017															0.03				
SW1	19/May/14	19-W013	0.000029	36.3	0.002	0.0004	0.0025	0.639	0.00038	12.6	0.018	<	0.9	<	3.8	0.142	<	0.008	9.73	7.87	6.17	0.0008
SW1	19/Oct/09	19-W035	0.000025	57.1	<	0.0003	0.0008	0.782	0.00035	21.0	0.108	<	1.8	<	5.7	0.243	<	0.007	11.50	6.30	9.00	0.0001
SW4	19/May/14	19-W004	0.000030	40.3	0.005	0.0006	0.0030	0.783	0.00057	13.9	0.027	<	1.1	<	4.5	0.154	<	0.009	8.27	8.29	7.97	0.0028
SW4	19/Oct/09	19-W024	<	65.6	<	0.0004	0.0005	0.407	0.00009	23.7	0.115	<	2.8	<	9.6	0.261	<	<	7.71	6.16	10.88	0.0001
SW5	19/May/14	19-W001	0.000024	42.5	0.002	0.0004	0.0021	0.754	0.00039	14.4	0.033	<	1.2	<	4.6	0.164	<	0.009	8.13	7.69	5.05	0.0006
SW5	19/Oct/09	19-W023	<	69.4	<	0.0002	0.0004	0.291	0.00004	24.6	0.066	<	2.6	<	9.4	0.280	<	<	7.54	6.40	9.20	0.0001

Notes:

"-" denotes not analyzed
 "RL" denotes reporting limit
 "<" denotes result below reporting limit
 "SW ###" denotes surface water station ID

Shading indicates parameters exceeding guideline criteria
 [Pink] denotes concentration exceeds the PWQO
 [Light Green] denotes concentration exceeds Table A: APV
 [Yellow] denotes concentration exceeds Table B: CWQG
 [White] denotes background surface water station

[1] Unionized Ammonia calculated using field parameters for pH and temperature
 [a] Alkalinity should not be decreased by more than 25% of the natural concentration
 [b] Aluminum criteria: >6.5 - 9.0 pH = 0.075 mg/L, >5.5 - 6.5 pH = <10% above natural background concentration
 [c] Cadmium criteria: 0-100 mg/L Hardness = 0.0001 mg/L, >100 mg/L Hardness = 0.0005 mg/L
 [d] Chromium reported as total, published standards are for Chromium VI (0.001 mg/L) and Chromium III (0.0089 mg/L)
 [e] Copper criteria: 0-20 mg/L Hardness = 0.001 mg/L, >20 mg/L Hardness = 0.005 mg/L
 [f] Lead criteria: <30 mg/L Hardness = 0.001 mg/L, 30 to 80 mg/L Hardness = 0.003 mg/L, >80 mg/L Hardness = 0.005 mg/L
 [g] PWQO for minimum DO concentration set at conservative value based on highest temperature and warm water biota
 DO criteria: 0°C -5°C = ≥7mg/L 5°C-10°C = ≥ 6mg/L 10°C-20°C = ≥5mg/L 20°C-25°C = ≥ 4mg/L
 [h] Table A and Table B standards apply only to Phenol
 Metals are reported as "total" with the exception of Aluminum and Mercury (reported as dissolved)

Input: RV
 Check: MW

Appendix D
MECP Correspondence

MEMORANDUM

DATE: February 12, 2020

TO: Nathalie Matthews
Senior Environmental Officer
Kingston District Office
Eastern Region

FROM: Shawn Kinney
Hydrogeologist
Water Resources Unit
Technical Support Section
Eastern Region

RE: Briar Hill Waste Disposal Site A442103, Township of Leeds and the Thousand Islands, 2015, 2016, 2017 and 2018 Annual Monitoring Reports.

I have reviewed the hydrogeologic aspects of the documents entitled:

- *“Briar Hill Waste Disposal Site, 2015-2016 Annual Monitoring, Development and Operations Report”*, Malroz Engineering Inc., June 2017.
- *“Briar Hill Waste Disposal Site, 2017 Annual Monitoring, Development and Operations Report”*, Malroz Engineering Inc., March 2018.
- *“Briar Hill Waste Disposal Site, 2018 Annual Monitoring, Development and Operations Report”*, Malroz Engineering Inc., March 2019.

Based upon the information provided for review, I offer the following comments for your consideration.

Summary

- Leachate impacts exceed the Guideline B-7 criteria for sodium, iron and manganese at the proposed northwest CAZ boundary 300 metres northwest of the active fill area.
- Although leachate impacts exceed B-7 criteria at the proposed northwest CAZ boundary (OW 24), the groundwater quality here is superior to well water quality historically observed at the nearest residence. Leachate impacted groundwater currently does not threaten neighbouring well water supplies, but continued monitoring is required.
- The primary pathway for leachate migration is northward from the fill area through overburden towards an un-named tributary of Morton Creek and westward onto the proposed western CAZ.

- The potential exists for surface water impacts at the unnamed creek located approximately 100 metres north of the active fill area.
- The northern CAZ lands have been purchased. I endorse amendment of the ECA to recognize these lands as a CAZ. I recommend that the use of these lands for leachate attenuation be registered on title.
- I endorse the acquisition of the proposed western CAZ lands. These should be recognized as a CAZ within the ECA. I recommend that the use of these lands for leachate attenuation be registered on title.
- Twice yearly groundwater monitoring should continue. The established parameters list must conform with, but not be limited to, Schedule 5 of the Landfill Standards Guideline.
- I endorse reduced monitoring at wells L10, L11, and L2. Twice annual monitoring at well OW 1 should continue because it is a down-gradient property boundary well.
- I do not object to further evaluation of L10 and OW15D to determine if they are bedrock wells.
- I recommend that annual VOC monitoring continue at all monitoring wells in which any of these compounds have been historically detected.
- The well owners should consider placing an effective barrier around the OW 24 casing (e.g. concrete well tile, etc.).
- I endorse the consultant's recommendation to abandon unused monitoring wells OW6, OW7 and L8 in accordance with the Wells Regulation.
- I do not object to the consultant's proposal to develop a trigger mechanism for contingency action and subsequent re-evaluation of the groundwater monitoring program.
- Borehole log diagrams had been provided in reports prepared by previous consultants. This practice appears to have been discontinued. Future monitoring reports must include borehole log and well construction diagrams for the monitoring wells constructed at this site.
- The reports are silent regarding hydraulic conductivity. Future monitoring reports must include reliable hydraulic conductivity estimates.

Certificate of Approval

The Briar Hill (Ward 2) Waste Disposal Site operates under Certificate of Approval A442103. The site is licensed for the use and operation of a 2.4-hectare landfill site within a total site area of 16 hectares. The site is licensed to receive domestic and commercial waste. The area landfilling method is used. The landfill operates as a naturally attenuating site.

Geology

The site geology consists of glacial ice-contact sand and gravel deposits within bedrock valleys. Ontario Geological Survey mapping indicates that Precambrian metamorphic sedimentary bedrock underlies the site. Boreholes BW-1, BW-2, and BW-3 penetrate bedrock. I have previously examined borehole logs provided in earlier consultant's reports and had noted the following:

- Overburden: Sand and Gravel: 3 to 11 metres thick
- Bedrock: Precambrian
 - (north portion): Carbonate metasedimentary rocks (e.g. marble, etc.)
 - (south portion): Granitic gneiss

Borehole log diagrams had been provided in reports prepared by previous consultants. This practice appears to have been discontinued. Future monitoring reports must include borehole log and well construction diagrams for the monitoring wells constructed at this site.

Hydrogeologic Conditions

Hydraulic Conductivity

The reports are silent regarding hydraulic conductivity. I am unable to advise you regarding subsurface leachate migration rates. Future monitoring reports must include reliable hydraulic conductivity estimates.

Horizontal and Vertical Hydraulic Gradient

Table 3 of the 2018 annual monitoring report presents static water level elevations measured during April and November 2018. Figures 4 and 5 of the same report depict the consultant's interpreted groundwater level contours.

Horizontal: The consultant interprets radial hydraulic gradients outward from the active fill area to the west (OW-15), north (Morton Creek tributary) and east (Turk Rock Road).

Vertical: The consultant interprets upward hydraulic gradients from the underlying bedrock to the overlying overburden.

Groundwater Flow Direction and Velocity

Based upon interpreted static water level contours (Figure 4), shallow groundwater is interpreted to migrate from the fill area toward the Morton Creek tributary (proposed Northern CAZ) and westward onto an adjacent property (proposed Western CAZ).

As noted above, the documents are silent regarding hydraulic conductivity estimates I am unable to advise you regarding groundwater flow velocity.

Conceptual Model

The primary leachate migration pathway occurs within the sand deposits overlying the bedrock. Leachate-impacted groundwater would flow northward towards the un-named tributary of Morton Creek located approximately 100 m north of the active fill area and westward onto the adjacent land parcel.

Persistent trace amounts of Volatile Organic Compounds observed at the OW 15 location 200 metres west of the site suggests a westward leachate migration component.

Background Water Quality

I have examined the historical groundwater quality data provided in Appendix L of the 2018 Monitoring Report. I note that the monitoring wells designated at “OW 20” (overburden) and “BH 2D” (bedrock) yielded groundwater samples having the lowest median concentrations of total dissolved solids during the five most recent sampling events.

Figure 2 of the 2018 Report depicts overburden monitor OW 20 located approximately 250 metres southwest of the active fill area. The same figure depicts bedrock monitor BH 2D located approximately 250 metres south of the active fill area.

Median overburden groundwater quality in the five most recent OW 20 samples conformed to the Provincial Drinking Water Criteria with the following exceptions:

Parameter	Median Overburden GW Conc.(mg/l)	ODWS/O (mg/l)	Excess Factor
Hardness	249	100	2 x

Median bedrock groundwater quality in the five most recent BH 2D samples conformed to the Provincial Drinking Water Criteria with the following exceptions:

Parameter	Median Bedrock GW Conc.(mg/l)	ODWS/O (mg/l)	Excess Factor
Hardness	269	100	3 x

Under Reasonable Use Guideline B-7, landfill leachate discharge that increases the concentrations of these parameters in groundwater at the downgradient property boundaries is unacceptable.

Leachate Water Quality

Of the currently functioning monitoring wells, monitor OW19 yields the most severely contaminated groundwater samples. However, the OW19 impacts are less than what was historically observed in the monitoring wells designated as BW3 S&D.

The BW3 monitors were located between the western edge of the active fill area and the existing property boundary. These well were abandoned or damaged between December 2010 and June 2011 and have not yielded samples since that time.

The historical (December 2010) BW 3S data still represents the worst-case scenario for the purposes of determining risk to local groundwater and surface water resources. Until such time as more severe impacts are observed in an alternate well, I note the following contaminants of concern:

- Drinking Water Quality (ref: Ontario Drinking Water Standards, Objectives and Guidelines)

Parameter	Leachate Conc. (mg/l)	ODWS/O (mg/l)	Excess Factor
Iron	24.1	0.3	80 x
Manganese	1.52	0.05	30 x
Hardness	1070	249 (bkgrnd)	4 x
Dissolved Organic Carbon	20.7	5	4 x
Total Dissolved Solids	1630	500	3 x
Alkalinity	1140	500	2 x
Barium	1.06	1	1 x
Sodium	200	200	1 x

- Surface Water Quality (ref: Canadian Water Quality Guidelines for the Protection of Aquatic Life)

Parameter	Leachate Conc. (mg/l)	CWQG (mg/l)	Excess Factor
Ammonia	25 (total)	0.019 (unionized)	pH/temp variable
Iron	24.1	0.3	80 x
Manganese	1.52	0.43	4 x
Chloride	231	120	2 x
Arsenic	0.008	0.005	1 x
Zinc	0.007	0.007	1 x
Selenium	0.001	0.001	1 x

Groundwater samples from BW3-S were not analyzed for volatile organic compounds (or VOC's) or total Phosphorus. I cannot discount these parameters as potential contaminants of

concern. The presence of VOC's in groundwater downgradient of the fill area should reasonably be considered indicative of leachate impacts.

Downgradient Water Quality

Site-Specific Reasonable Use Criteria

Based on median background water quality and the Ontario Drinking Water Standards and Objectives, the following are the Reasonable Use Criteria for the above-tabulated contaminants of concern:

Parameter	Median Background (OW-20, mg/l)	ODWS/O (mg/l)	B-7 Criterion (mg/l)
Iron	<0.1	0.3	0.15
Manganese	0.015	0.05	0.033
Hardness	249	100	249
Dissolved Organic Carbon	2.3	5	3.7
Total Dissolved Solids	246	500	373
Alkalinity	230	500	365
Barium	0.174	1	0.381
Sodium	4.83	20	12.4

Background concentrations of Hardness (bolded) exceed the drinking water criteria. Under Reasonable Use Guideline B-7, the acceptable concentration of this parameter is the background concentration.

Guideline B-7 Compliance

Appendix L of the 2018 Report presents the most recent groundwater quality data. I have compared the reported quality of groundwater near current and proposed property boundaries to the site-specific Reasonable Use Criteria. I note the following:

Parameter	B-7 Criterion (mg/l)	E OW 1 (mg/l)	NE OW 18 (mg/l)	NW OW 24 (mg/l)	W OW 23 (mg/l)
Iron	0.15	0.009	0.006	0.321 (2 x) stable	0.169 (1 x) no trend
Manganese	0.033	<0.001	0.012	0.047 (1 x) decreasing	0.014
Hardness	249	706 (3 x) stable	404 (2 x) no trend	250	245
Dissolved Organic Carbon	3.7	3.1	4.8 (1 x) no trend	3.7	3
Total Dissolved Solids	373	1047 (3 x) probably	431 (1 x) probably	306	244

		increasing	increasing		
Alkalinity	365	483 (1 x) no trend	320	264	211
Barium	0.381	0.817 (2 x) increasing	0.225	0.159	0.132
Sodium	12.4	144 (11 x) increasing	8.6	49.2 (4 x) increasing	6.9

The low levels of iron, manganese and dissolved organic carbon at OW. 1 suggest that the increasing poor groundwater quality at this location may be attributable to road salt rather than landfill leachate.

The excess sodium concentration of 49.2 mg/L at OW 24 occurs with recent detections of 1,4-dichlorobenzene (0.3 ug/L) and 1,1-dichloroethane (19.3 ug/L). This, combined with substantial distance from any road salt source, suggests a landfill leachate cause.

I note that the elevated sodium, iron and manganese levels observed at OW 24 are substantially less than the median sodium (75 mg/L), iron (1.68 mg/L) and manganese (0.106 mg/L) levels historically observed at the nearest residential well located at 151 Fortune Line Road.

I conclude that, although leachate impacts technically exceed B-7 criteria at the proposed northwest CAZ boundary, the groundwater quality is currently better than the well water quality of the nearest residence. Leachate impacted groundwater does not threaten the residential water supply, but continued monitoring is required.

Groundwater / Surface Water Interaction

I have compared the groundwater quality at monitors located adjacent to the surface water receiver to the CWQG's for the above-identified site-specific contaminants of concern for surface water. I note the following:

Parameter	CWQG (mg/l)	OW 6R1	OW 7R1	OW15S
Ammonia	0.019 (unionized)	0.03 total	2.33 total	0.29 total
Iron	0.3	<0.1	1.83 (6 x)	1.74 (6 x)
Manganese	0.43	0.1	0.707 (2 x)	0.044 (1 x)
Chloride	120	149 (1 x)	59.8	73.7
Arsenic	0.005	<0.001	0.003	0.0027
Zinc	0.007	<0.005	<0.005	<0.005
Selenium	0.001	No data	No data	No data

These wells were also noted to contain 1,1 dichloroethane at concentrations of 0.1 to 0.2 ug/L, suggesting a landfill leachate origin.

The potential exists for leachate-impacted groundwater to discharge to the un-named tributary of Morton Creek located approximately 100 m north of the active fill area. I will defer to an appropriately qualified Surface Water Scientist regarding the implications of this.

Compliance Action Plan

Section 2.4, page 3 of the 2018 report states that the northern CAZ lands depicted in Figure 2 of Appendix A have been purchased. I endorse amendment of the ECA to recognize these lands as a CAZ. I recommend that the use of these lands for leachate attenuation be registered on title.

The proposed western CAZ lands depicted in Figure 2 of Appendix A are a substantial improvement over the status quo. I endorse the acquisition of these lands and recognition as a CAZ within the ECA. Like the northern CAZ, I recommend that the use of these lands for leachate attenuation be registered on title.

Groundwater Monitoring Program and Reporting

Section 6.0, page 14 of the 2018 report recommends the following:

- Continued twice yearly monitoring in compliance with the ECA. I concur. The established parameters list must conform with, but not be limited to, Schedule 5 of the Landfill Standards Guideline

Other Comments

- The consultant recommends reduced monitoring at wells L10, L11, L2 and OW1 near the former landfill area. I endorse reduced monitoring at L10, L11, and L2. Twice annual monitoring at well OW 1 should continue because it is a down-gradient property boundary well.
- The consultant proposes further evaluation of L10 and OW15D to determine if they are bedrock wells. I do not object to this proposal.
- The consultant proposes an evaluation of changes to the VOC monitoring plan. VOC's are additional indicators of potential landfill leachate impacts. I recommend that annual VOC monitoring continue at all monitoring wells in which any of these compounds have been historically detected.
- The consultants note that the casing of monitor OW24 is repeatedly knocked over, possibly during agricultural activities. The well owners should consider placing an effective barrier around the casing (e.g. concrete well tile, etc.) to reduce the likelihood of future damage.
- I endorse the consultant's recommendation to abandon unused monitoring wells OW6, OW7 and L8 in accordance with the Wells Regulation.

- I do not object to the consultant's proposal to develop a trigger mechanism for contingency action and subsequent re-evaluation of the groundwater monitoring program.

Shawn Kinney, P. Geo

cc: Dana Cruikshank (Surface Water Unit)
GW LG LT 01 02 Briar Hill WDS (A442103)
SK # 4330-APDQTM / 6116-AXBN52 / 3325-BATKD7

e.c. Victor Castro (Water Resources Unit, A)
Jim Mahoney (Technical Support Section A)
Roberto Sacilotto (Kingston District Office)

Appendix E
Water Well Records



Measurements recorded in: Metric Imperial

No Tag

Well Owner's Information

First Name, Last Name / Organization (Township of Leeds and the Thousand Islands), E-mail Address, Mailing Address (1233 Prince St. P.O. Box 280 Landsdowne), Municipality (Landsdowne), Province (ON), Postal Code (K0E1L0), Telephone No. (613 659 0415)

Well Location

Address of Well Location (114 Turk Rock Rd), Township, Lot, Concession, City/Town/Village (Lundhurst), Province (Ontario), Postal Code (K0E1N0), UTM Coordinates (NAD 83 18T 406944 4933205)

Overburden and Bedrock Materials/Abandonment Sealing Record (see instructions on the back of this form)

Table with columns: General Colour, Most Common Material (Peat), Other Materials, General Description (Wet), Depth (m/ft) From (0) To (6'). Includes handwritten note: 3 MW's Abandoned on site in Cluster

Annular Space table with columns: Depth Set at (m/ft) From, To; Type of Sealant Used (Hole Plug); Volume Placed (m³/ft³)

Method of Construction and Well Use table with checkboxes for Cable Tool, Rotary, Boring, etc.

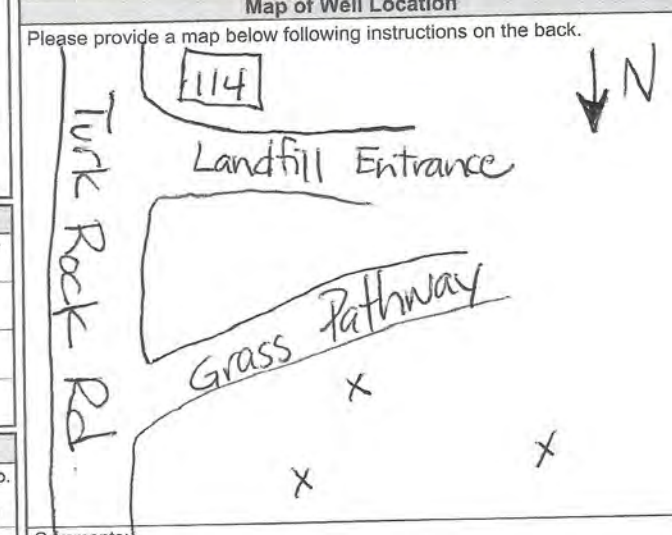
Construction Record - Casing table with columns: Inside Diameter, Open Hole OR Material, Wall Thickness, Depth (m/ft) From, To. Includes Status of Well checkboxes.

Construction Record - Screen table with columns: Outside Diameter, Material, Slot No., Depth (m/ft) From, To.

Water Details and Hole Diameter table with columns for water found at depth and hole diameter.

Well Contractor and Well Technician Information table with fields for Business Name, Address, E-mail, and Technician Name.

Results of Well Yield Testing table with columns: Draw Down, Recovery, Time, Water Level. Includes checkboxes for test results.



Well Contractor and Well Technician Information table (continued) with fields for Business Telephone No., Name of Well Technician, Signature, and Date Submitted.

Ministry Use Only table with fields for Well owner's information package delivered, Date Package Delivered, Date Work Completed, and Audit No. (322228).

Instructions for Completing Form

- For use in the **Province of Ontario** only. This document is a permanent **legal** document. Please retain for future reference.
- All Sections **must** be completed in full to avoid delays in processing. Further instructions and explanations are available on the back of this form.
- Questions regarding completing this application can be directed to the Water Well Management Coordinator at 416-235-6203.
- **All metre measurements shall be reported to 1/10th of a metre.**
- Please print clearly in blue or black ink only.

Well Owner's Information and Location of Well Information

MUN		CON		LOT	
-----	--	-----	--	-----	--

LEEDS + GRENVILLE **REAR OF LEEDS + LANSOWANE** 18 11
 RR#/Street Number/Name City/Town/Village Site/Compartment/Block/Tract etc.
114 TURK ROCK R.D **TW3**
 GPS Reading NAD Zone Easting Northing Unit Make/Model Mode of Operation
 8.3 18 406860 4793002 MAGELLAN Undifferentiated Averaged
 Differentiated, specify

Log of Overburden and Bedrock Materials (see instructions)

General Colour	Most common material	Other Materials	General Description	Depth	
				From	Metres To
BROWN	SAND + GRAVEL	DEEP SCREEN SET	14.9 TO 11.9	0	3.3
GREY	GRANITE	SHALLOW SCREEN SET	7.7 TO 4.7	3.3	14.3
RED GREY	GRANITE	BACK FILL MATERIAL		14.3	15.2
		15.2 TO 10.9	SAND		
		10.9 TO 8.4	BENTONITE		
		8.4 TO 4.5	SAND		
		4.5 TO 2.4	BENTONITE		

Hole Diameter

Depth From	Metres To	Diameter Centimetres
0	3.5	25.4
3.5	15.2	15.25

Water Record

Water found at 14.3 Metres / Kind of Water Fresh Sulphur Gas Salty Minerals Other: **UNTESTED**

7.6 m Fresh Sulphur Gas Salty Minerals Other: **UNTESTED**

After test of well yield, water was Clear and sediment free Other, specify _____

Chlorinated Yes No

Construction Record

Inside diam centimetres	Material	Wall thickness centimetres	Depth From	Metres To
15.8	<input checked="" type="checkbox"/> Steel <input type="checkbox"/> Fibreglass <input type="checkbox"/> Plastic <input type="checkbox"/> Concrete <input type="checkbox"/> Galvanized	.48	0	3.5

Casing

Steel Fibreglass Plastic Concrete Galvanized

Steel Fibreglass Plastic Concrete Galvanized

Screen

Outside diam Steel Fibreglass Plastic Concrete Galvanized Slot No. _____

No Casing or Screen

Open hole _____ **3.5 15.2**

Test of Well Yield

Pumping test method	Draw Down		Recovery	
	Time min	Water Level Metres	Time min	Water Level Metres
Pump intake set at - (metres)	Static Level			
Pumping rate - (litres/min)	1		1	
Duration of pumping _____ hrs + _____ min	2		2	
Final water level end of pumping _____ metres	3		3	
Recommended pump type, <input type="checkbox"/> Shallow <input type="checkbox"/> Deep	4		4	
Recommended pump depth, _____ metres	5		5	
Recommended pump rate, (litres/min)	10		10	
If flowing give rate - (litres/min)	15		15	
	20		20	
	25		25	
If pumping discontinued, give reason.	30		30	
	40		40	
	50		50	
	60		60	

Plugging and Sealing Record Annular space Abandonment

Depth set at - Metres From	To	Material and type (bentonite slurry, neat cement slurry) etc.	Volume Placed (cubic metres)
3.5	0	CEMENT SLURRY	.2

Method of Construction

Cable Tool Rotary (air) Diamond Digging Rotary (conventional) Air percussion Jetting Other Rotary (reverse) Boring Driving

Water Use

Domestic Industrial Public Supply Other Stock Commercial Not used MONITOR Irrigation Municipal Cooling & air conditioning

Final Status of Well

Water Supply Recharge well Unfinished Abandoned, (Other) Observation well Abandoned, insufficient supply Dewatering MONITOR Test Hole Abandoned, poor quality Replacement well

Location of Well

In diagram below show distances of well from road, lot line, and building. Indicate north by arrow.

Audit No. **z 37625** Date Well Completed **06 3 21**

Was the well owner's information package delivered? Yes No Date Delivered _____

Well Contractor/Technician Information

Name of Well Contractor **JACK KNOX WELLDRIILLING** Well Contractor's Licence No. **3202**

Business Address (street name, number, city etc.) **GLENBURNIE**

Name of Well Technician (last name, first name) **Knox John** Well Technician's Licence No. **2879**

Signature of Technician/Contractor **John Knox** Date Submitted _____

Ministry Use Only

Data Source _____ Contractor **3202**

Date Received **APR 11 2006** Date of Inspection _____

Remarks _____ Well Record Number _____



Well Record for Well Cluster - Part 1 of 3 (Only for Multiple Test Holes or Dewatering Wells) Regulation 903 Ontario Water Resources Act

All measurements recorded in: Metric Imperial

Follow instructions on the front and back of this form. Print or Type

Well Tag No. of Deepest Well: (Print Well Tag No.) A175283 Well # on Drawing of Deepest Well:

Well Cluster Location Information

Address of Well Location (Street Number(s)/Name(s), RR, if available) Briar Hill & Turk Rock Rd. Lot(s) 17 & 18 Concession(s) 11 Geographic Township Leeds & 1000 Islands County/District/Upper Tier Municipality Leeds & Grenville United

Mandatory Attachments/Additional Information [X] Land Owner Consent Form must be attached. [X] Detailed Drawing of All Well Locations must be attached. I, the person constructing the well, will promptly submit to the Director, on request, any additional information in my custody or control related to any well in the well cluster that I have constructed.

Well Details

Table with columns: Well # on Drawing, UTM Coordinates (Zone, Easting, Northing), Hole Depth (m/ft), Hole Diameter (cm/in), Method of Construction, Casing Material; Diameter (cm/in), Casing (m/ft) From/To, Screen Interval (m/ft) From/To, Annular Space Material (m/ft) From/To, Material, Overburden/Bedrock or Abandonment Filing Material Intervals (m/ft), Static Water Level (m/ft), Date of Completion (yyyy/mm/dd)

Well Contractor and Well Technician Information

Business Name of Well Contractor: Aardvaak Drilling Inc. Business Address: 25C Lewis Rd, Guelph, ON. Well Contractor's Licence No.: 7238. Business E-mail Address: info@aaardvaakdrillinginc.com. Name of Well Technician: Kyle Smith. Well Technician's Licence No.: 3591. Signature of Well Technician: Kyle Smith. Date Submitted: 2015/10/01.

Date First Well in Cluster Constructed or Abandoned (yyyy/mm/dd): 2015/09/22. Date Last Well in Cluster Completed (yyyy/mm/dd): 2015/09/24.

Ministry Use Only. Date Received (yyyy/mm/dd): [blank]. Audit No.: C 24076. Comments: [blank].

Well Abandonment. Person Abandoning the Wells: [blank]. Name: [blank]. (Print or Type) - See instruction 11 on the back of this form.



Ontario

Ministry of
the Environment

Well Record for Well Cluster - Part 3
Detailed Drawing of All Well Locations

15-099-08

Note: This Well Record for Well Cluster Part 3 - Detailed Drawing of all Well Locations, must be attached to Parts 1 and 2. The drawing must include all property boundaries, an arrow indicating the North direction, all named roads and sufficient measurements to locate all wells in the cluster in relation to fixed points. The drawing must show the location of each well and each well must be numbered on the drawing to match number used for that well on the Well Record for Well Cluster Parts 1 and 2. The well with the well tag must be clearly identified on the Drawing.
UTM coordinates should appear beside each well, if space permits. Additional comments on wells can be included on the drawing

Well Tag Number: # A175 283

"Well Record for Well Cluster" Form Audit Number: # C24076





Print only in spaces provided. Mark correct box with a checkmark, where applicable.

11

3615987

Municipality 36016 Con COM 02

LEEDS

County or District: Merrickville-Wolford; Township/Borough/City/Town/Village: Township of Leeds, 1900 IS; Con block tract survey, etc.: Con 2; Lot: 18; Owner's surname: Township of Leeds; First Name: ; Address: Bruner Hill; Date completed: 25 02 03

Zone, Easting, Northing, RC, Elevation, RC, Basin Code, ii, iii, iv

LOG OF OVERBURDEN AND BEDROCK MATERIALS (see instructions)

Table with columns: General colour, Most common material, Other materials, General description, Depth - feet (From, To). Handwritten entry: Brown Sand, Peat & Clay, wet soft, 0 to 8.

31, 32

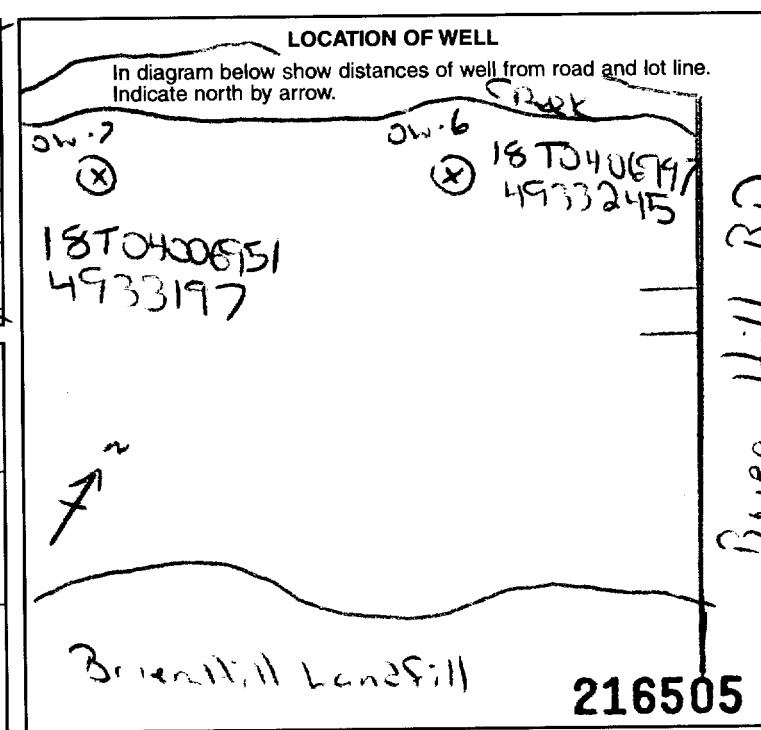
41 WATER RECORD. Water found at - feet: 2.5; Kind of water: Fresh, Salty, Sulphur, Minerals, Gas.

51 CASING & OPEN HOLE RECORD. Inside diam inches: 2; Material: Open hole; Wall thickness inches: ; Depth - feet: 0 to 8.

SCREEN. Sizes of opening (Slot No.): 0.10; Diameter: 1 inches; Length: 5 feet; Material and type: PVC; Depth at top of screen: 2.5 feet.

61 PLUGGING & SEALING RECORD. Annular space checked; Depth set at - feet: 0 to 2.5; Material and type: SAND.

71 PUMPING TEST. Pumping test method: Pump; Pumping rate: ; Duration of pumping: ; Water levels during: 15, 30, 45, 60 minutes.



54 FINAL STATUS OF WELL. 1 Water supply, 2 Observation well, 3 Test hole, 4 Recharge well, 5 Abandoned, insufficient supply, 6 Abandoned, poor quality, 7 Abandoned (Other), 8 Dewatering, 9 Unfinished, 10 Replacement well.

55-56 WATER USE. 1 Domestic, 2 Stock, 3 Irrigation, 4 Industrial, 5 Commercial, 6 Municipal, 7 Public supply, 8 Cooling & air conditioning, 9 Not use, 10 Other.

57 METHOD OF CONSTRUCTION. 1 Cable tool, 2 Rotary (conventional), 3 Rotary (reverse), 4 Rotary (air), 5 Air percussion, 6 Boring, 7 Diamond, 8 Jetting, 9 Driving, 10 Digging, 11 Other.

Name of Well Contractor: G.R.T. Drilling LTD; Well Contractor's Licence No.: 2085; Address: RR6 Napanee; Name of Well Technician: Tom Harris; Well Technician's Licence No.: T-2251; Submission date: 01 mo 08 yr 03.

MINISTRY USE ONLY. Data source: 7085; Date received: OCT 07 2003; Date of inspection; Inspector; Remarks.

Print only in spaces provided.
Mark correct box with a checkmark, where applicable.

11

3615993

Municipality **36017** Con. **KON**

LEEDS

County or District **Markham & Wolfords** Township/Borough/City/Town/Village **LEEDS and the Township of** Con block tract survey, etc. **11** Lot **18**

Owner's surname **Township of Leeds** First Name _____ Address of Well Location **Brien Hill dump** Date completed **28 10 31 03**

Zone Easting Northing RC Elevation RC Basin Code ii iii iv

LOG OF OVERBURDEN AND BEDROCK MATERIALS (see instructions)

General colour	Most common material	Other materials	General description	Depth - feet	
				From	To
		2"			
		Well ABANDONMENT			

31 _____ 32 _____

41 WATER RECORD

Water found at - feet	Kind of water					
10-13	<input type="checkbox"/> Fresh	<input type="checkbox"/> Salty	<input type="checkbox"/> Sulphur	<input type="checkbox"/> Minerals	<input type="checkbox"/> Gas	<input type="checkbox"/> Other
15-18	<input type="checkbox"/> Fresh	<input type="checkbox"/> Salty	<input type="checkbox"/> Sulphur	<input type="checkbox"/> Minerals	<input type="checkbox"/> Gas	<input type="checkbox"/> Other
20-23	<input type="checkbox"/> Fresh	<input type="checkbox"/> Salty	<input type="checkbox"/> Sulphur	<input type="checkbox"/> Minerals	<input type="checkbox"/> Gas	<input type="checkbox"/> Other
25-28	<input type="checkbox"/> Fresh	<input type="checkbox"/> Salty	<input type="checkbox"/> Sulphur	<input type="checkbox"/> Minerals	<input type="checkbox"/> Gas	<input type="checkbox"/> Other
30-33	<input type="checkbox"/> Fresh	<input type="checkbox"/> Salty	<input type="checkbox"/> Sulphur	<input type="checkbox"/> Minerals	<input type="checkbox"/> Gas	<input type="checkbox"/> Other

51 CASING & OPEN HOLE RECORD

Inside diam inches	Material	Wall thickness inches	Depth - feet	
			From	To
2	<input type="checkbox"/> Steel	1/4	0	31
17-18	<input type="checkbox"/> Galvanized			20-23
24-25	<input type="checkbox"/> Steel			27-30

54 SIZES OF OPENING (Slot No.) 31-33 _____ Diameter 34-38 _____ Length 39-40 _____

55 SCREEN Material and type _____ Depth at top of screen 41-44 _____

61 PLUGGING & SEALING RECORD

Annular space Abandonment

Depth set at - feet		Material and type (Cement grout, bentonite, etc.)
From	To	
0	31	Bentonite
18-21	22-25	
26-29	30-33	

71 PUMPING TEST

Pumping test method Pump Bailer

Pumping rate _____ GPM

Duration of pumping _____ Hours _____ Mins

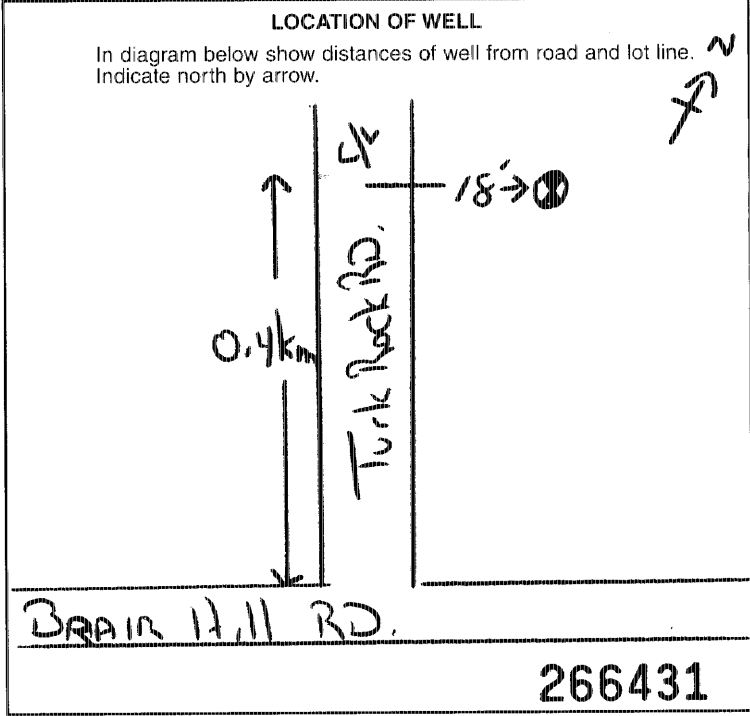
Static level	Water level end of pumping	Water levels during			
19-21	22-24	15 minutes	30 minutes	45 minutes	60 minutes
_____ feet	_____ feet	_____ feet	_____ feet	_____ feet	_____ feet

If flowing give rate _____ GPM

Recommended pump type Shallow Deep

Recommended pump setting _____ feet

Recommended pump rate _____ GPM



54 FINAL STATUS OF WELL

Water supply Abandoned, insufficient supply Unfinished

Observation well Abandoned, poor quality Replacement well

Test hole Abandoned (Other)

Recharge well Dewatering

55-56 WATER USE

Domestic Commercial Not use

Stock Municipal Other

Irrigation Public supply

Industrial Cooling & air conditioning

57 METHOD OF CONSTRUCTION

Cable tool Air percussion Driving

Rotary (conventional) Boring Digging

Rotary (reverse) Diamond Other

Rotary (air) Jetting

Name of Well Contractor **G.E.T. Drilling LTD.** Well Contractor's Licence No. **7085**

Address **RR6 Napanee**

Name of Well Technician **Tom Harrison** Well Technician's Licence No. **T-2251**

Signature of Technician/Contractor _____ Submission date **29 mo 10 yr 03**

MINISTRY USE ONLY

Data source **7085** Contractor **7085** Date received **NOV 07 2003**

Date of inspection _____ Inspector _____

Remarks _____

Master Well Owner's and Land Owner's Information

First Name: _____ Last Name: _____ E-mail Address: _____
 Township of Leeds and the 1000 Island
 Mailing Address (Street Number/Name, RR): 1 JESSIE ST. Municipality: Lonsdowne Province: ON Postal Code: K0E1L0G1 Telephone No. (inc. area code): 36592415

Location and Construction of the Master Well in the Cluster

Address of Well Location (Street Number/Name, RR): 102-114 Turk Rock RD Township: Leeds and the 1000 Island Lot: 18 Concession: 2
 County/District/Municipality: Leeds and Grenville County City/Town/Village: Brier Hill Province: Ontario Postal Code: K0E1L0G1
 UTM Coordinates: Zone: 18 Easting: 406914 Northing: 4933272 GPS Unit Make: Garmin Model: MAP53 Mode of Operation: Undifferentiated Averaged
 Differentiated, specify _____

Overburden and Bedrock Materials (see instructions on the back of this form)

General Colour	Most Common Material	Other Materials	General Description	Depth (Metres)	
				From	To
Grey	clay	s.H		0	3.04
Grey	Sand	s.H		3.04	5.18
Grey	clay	s.H		5.18	6.09

Hole Details

Depth (Metres)	Diameter (Centimetres)	
	From	To
0	6.09	15.24 cm

Water Use

Public Industrial Not used Other, specify _____
 Domestic Commercial Dewatering
 Livestock Municipal Monitoring
 Irrigation Test Hole Cooling & Air Conditioning

Method of Construction

Cable Tool Air Percussion Digging
 Rotary (Conventional) Diamond Boring
 Rotary (Reverse) Jetting Other, specify _____
 Rotary (Air) Driving

Status of Well

Test Hole Abandoned, Insufficient Supply
 Replacement Well Abandoned, Poor Water Quality
 Dewatering Well Other, specify _____
 Alteration (Construction) Abandoned, other, specify _____

No Casing and Screen Used Yes No

Static Water Level Test Yes No M/A Metres

Screen

Galvanized Steel Fibreglass Concrete Plastic
 Outside Diameter (Centimetres): 5.08 cm Slot No.: 0.10

Water Details

Water found at Depth: 3.05 Metres Gas Fresh Salty Sulphur Minerals
 Water found at Depth: _____ Metres Gas Fresh Salty Sulphur Minerals
 Water found at Depth: _____ Metres Gas Fresh Salty Sulphur Minerals

Disinfected Yes No If no, provide reason: Test Hole Date Master Well Completed (yyyy/mm/dd): 2010 01 05

Cluster Information (Please also fill out the additional Cluster Well Information for Well Construction for each parcel of land and cluster.)

Total Wells in Cluster: 3 Please indicate Number of Cluster Well Information Log Sheets Submitted: one
 Total Wells on this Property: ?

Location of Well Cluster

Detailed Map must be provided as an attachment no larger than legal size (8.5" x 14"). Sketches are not allowed.
 Check box to confirm detailed map is provided as per Section 11.1 (3)

Consent to release additional information concerning the cluster to the Director upon request

Construction Details

Inside Diameter (Centimetres)	Material (steel, plastic, fibreglass, concrete, galvanized)	Wall Thickness	Depth (Metres)	
			From	To
5.08	Plastic casing	5cm 40	0	3.96
5.08	Plastic Screen	3cm 40	3.96	6.09

Annular Space/Abandonment Sealing Record

Depth Set at (Metres)	Type of Sealant Used (Material and Type)	Volume Used (Cubic Metres)
0	Bentonite chips	
2.13	#3 Sand	

Well Contractor and Well Technician Information

Business Name of Well Contractor: G.E.T. Drilling LTD Well Contractor's Licence No.: 710815
 Business Address (Street No./Name, number, RR): 278 Drive-in RD Municipality: Napanee
 Province: ON Postal Code: K7R3L1 Business E-mail Address: get.drilling@sympatico.ca
 Bus. Telephone No. (inc. area code): 6133544767 Name of Well Technician (Last Name, First Name): Turnbull, Mike
 Well Technician's Licence No.: 3042 Signature of Technician: _____ Date Submitted (yyyy/mm/dd): 2010 01 20

Audit No.: M 02168 Well Contractor No.: _____
 Date Received (yyyy/mm/dd): JAN 28 2010 Date of Inspection (yyyy/mm/dd): _____
 Remarks: _____

Well Tag No. for Master Well (Print Well Tag No.)
A092772

Property Owner's Information

First Name: Township of Leeds and the 1000 Island Last Name: _____ Mailing Address (Street No./Name, RR): 1 Jessie St Municipality: Leensdowne

Province: ON Postal Code: K0E1L0 E-mail Address: _____ Telephone No. (inc. area code): 6136592415

Cluster Well Information

Address of Well Location (Street Number/Name, RR): 102-114 Turk Rock Rd. Lot: 18 Concession: 2 Township: Leeds and the 1000 ISH. County/District/Municipality: Leed and Grenville

City/Town/Village: Brier Hill Province: Ontario Postal Code: K0E1L0 GPS Unit Make: Garmin Model: map 63 Unit Mode of Operation: Undifferentiated Averaged Differentiated, specify: _____

Signature of Technician/Contractor: _____ Date (yyyy/mm/dd): 2010 01 05

Well # on Sketch	UTM Coordinates		Full Depth of Hole (metres)	Hole Diameter (cm)	Method of Construction	Casing Material	Casing Length (metres)	Screen Interval (metres)		Annular Space Sealant Used	Static Water Level (metres)	Abandonment Sealant Used	Comments	Date of Completion (yyyy/mm/dd)
	Zone	Easting						Northing	From					
# 2	18	406941	4933232	3.65	15.24	Boring	PVC	1.52	1.52	3.65	Bentonite	N/A		2010 01 05
# 3	18	406934	4933109	2.89	15.24	Boring	PVC	1.37	1.37	2.89	Bentonite	N/A		2010 01 05

Well Contractor and Well Technician Information

Business Name of Well Contractor: GET Drilling LTD Business Address (Street Number/Name, RR): 276 Drive-in Rd Municipality: Napanee Province: ON

Postal Code: K7R3L1 Business Telephone No. (inc. area code): 6133544767 Well Contractor's Licence No.: 7083 Business E-mail Address: get.drilling@sympatico.ca

Name of Well Technician (First Name, Last Name): Mike Turnbull Well Technician's Licence No.: 3042 Date Submitted (yyyy/mm/dd): 2010 01 20 Signature of Technician: _____

Date 1st Well in Cluster Constructed (yyyy/mm/dd): 2010 01 05 Date Last Well in Cluster Constructed (yyyy/mm/dd): 2010 01 05

Ministry Use Only

Date Received (yyyy/mm/dd): IAN 28 2010 Date Inspected (yyyy/mm/dd): _____

Audit No.: c07462 Remarks: MOZ168

Imagery Date: Jul 25, 2005

41°39'41.20"N 76°09'15.57"W elev: 101 m

Imagery © 2010 DigitalGlobe
© 2009 Google
© 2008 Terra Atlas

Google
Eye alt: 531 m

Location of Well Cluster
TAG # A092272
Brier Hill Landfill

TUCK ROCK RD

Landfill

Replacement

WELL #2

WELL #1

WELL #3

Barn

House

RT

JAN 28 2010

C-7085 m02168 C07462

3/3

Appendix F
Attendant's Log Book

WARD 2

LYNDHURST

2019

BRIAR HILL WASTE DISPOSAL SITE

YEAR 2019 OPERATIONAL CONFORMANCE QUESTIONNAIRE

Preparation of an annual site development and operations report is a requirement of Certificate of Approval No. A442103 for the Briar Hill Waste Disposal Site. In order to prepare a report for the year 2019, answers are required to the following questions.

1. Was there signage at the main entrance to the site posted in accordance with the requirements of condition 2 of the C of A, including but not limited to the following information?

- name of site and owner
- name of operating authority
- hours of operation
- Certificate of Approval # for site
- type of wastes accepted and prohibited at landfill
- warning against unauthorized access
- 24 hr telephone # for reporting emergencies
- telephone number to which complaints may be directed
- a warning against dumping outside the site

Yes No

2. Were there signs in place to direct vehicles to the working face of the landfill and to recycling areas?

Yes No *also ATTENDANT.*

3. Where there signs in place at the recycling area informing users of what materials are acceptable and directing users to the appropriate storage area?

Yes No

4. Was the entrance gate to the site locked during non-operating hours?

Yes No

5. Did a vermin or vector outbreak occur at the site during 2019?

Yes No

6. Was the site supervised by a site attendant during the posted open hours for the site?

Yes No

Briar Hill WDS - 2019 Operations Questionnaire

7. Are the corners of the landfilling area marked with corner posts that are visible throughout the year? Yes No

8. Was burning of wastes at the site limited to brush and segregated, clean wood and conducted in accordance with Condition 2(6) of the C of A? Yes No

9. Were site litter inspection and pick up programs carried out at the site? Yes No

10. Were there any operational problems encountered at the WDS during 2019? Yes No

If yes describe the problem and action taken.

11. Were there any complaints received pertaining to the WDS? Yes No

If yes describe complaints and action taken.

12. Have all personnel involved in activities at the WDS undergone specific training as precondition 3 of the C of A? Yes No

Please provide training details below.

13. Were brush and clean wood segregated from other material for burning at the site? Yes No

14. Were scrap and white metal, tires and construction wastes segregated and stored separately at the site for off-site disposal or recycling? Yes No

Briar Hill WDS - 2019 Operations Questionnaire

15. Did the site receive wastes from outside the Township of Leeds and the Thousand Islands?
Yes ___ No

16. Please provide an estimate of waste types and quantities received at the Site in 2019.
Types: _____
Quantity: _____

17. Please provide a brief description of the fill method and equipment used at the Site .
CAT COMPACTOR AND SOLID COVER
BACKHOV USED TO COMPACT BINS AND SITE CLEANUP.

18. The operational plan for the site calls for an area fill method of disposal with the wastes to be compacted and covered with fill weekly. Were these procedures followed ?
Yes ___ No ___

19. In addition to the requirements described in question 18, was intermediate or final cover and applied as described in condition 7(8) of the C of A? Yes ___ No ___

20. Did the operator maintain daily records and daily inspections as described in Condition 6 of the C of A? Yes No ___

21. Is there a program in place to inspect waste for compliance and to ensure all loads are inspected by trained personnel as described in condition 6 of the C of A? Yes ___ No ___

22. Does the landfill undertake waste diversion as described in Condition 10 of the C of A?
Yes No ___

23. Were any loads of wastes refused access to the site for disposal purposes?
Yes No ___
DAILY LOGS.

If yes, were records pertaining to the refused wastes maintained as required by the Certificate of Approval?
Yes No ___
DAILY LOGS.

Briar Hill WDS - 2019 Operations Questionnaire

24. What was the population serviced by the landfill in 2019? _____

25. Does the Township accept waste from any industrial facilities located within the Township?
If so which facilitates and what type of waste is accepted. *NO*

26. Did any spills or emergencies, as described by condition 5 of the C of A, occur at the Site in 2019?
Yes _____ No

27. Was routine monitoring for explosive methane gas conducted in all buildings and structures at the Site?
Yes _____ No

28. Is there a storm water management program in place at the Site?
Yes No _____

If yes, please describe briefly.

SITE GRADING.



DATE: Jan 26/2019 TIME: 4:35 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: Yes / ~~No~~

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 103

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Jan 28/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 30

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Jan 30/2019 TIME: 2:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 30

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Jan 31 / 2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: Yes / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 28

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Feb 2 / 2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 86

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / ~~No~~

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Feb 4 / 2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 36

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: FEB 6 / 2019 TIME: 4:30 STAFF: John Stalder

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: Yes / ~~No~~ _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 33

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: FEB 7 / 2019 TIME: 8:30 STAFF: John Tappan

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 31

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Tappan

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



Township of
**Leeds and the
Thousand Islands**

1233 Prince Street, P.O. Box 280
Lansdowne, ON K0E 1L0

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: FEB 9 / 2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 96

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: FEB 11 / 2019 TIME: 8:30 STAFF: John Staffea

DEFICIENCIES OBSERVED:

Ponded Water: Yes / ~~No~~
Windblown Litter: ~~Yes~~ / No
Leachate Springs: Yes / ~~No~~
Animals: Yes / ~~No~~
Other: Yes / ~~No~~

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 48

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Staffea

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Feb 13/2019 TIME: 9:25 STAFF: John Tallon

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 19

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / ~~No~~

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: FEB 14 / 2019 TIME: 2:15 STAFF: John Jafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____

Windblown Litter: ~~Yes~~ / No _____

Leachate Springs: Yes / ~~No~~ _____

Animals: Yes / ~~No~~ _____

Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 27

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Feb 16 / 2019 TIME: 8:45 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 96

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Feb 20/2019 TIME: 9:30 STAFF: John Stallard

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 55

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
 IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
 DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
 DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
 DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
 If YES, Complaint File Number (s): _____

SIGNATURE: John Stallard

OFFICE USE:
 Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Feb 21/2019 TIME: 7:15 STAFF: John Stalrod

DEFICIENCIES OBSERVED:

Description / Location

- Ponded Water: Yes / ~~No~~ _____
- Windblown Litter: Yes / ~~No~~ _____
- Leachate Springs: Yes / ~~No~~ _____
- Animals: Yes / ~~No~~ _____
- Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 45

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:
Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Feb 23 / 2019 TIME: 4:40 STAFF: John S Taftford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 106

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John S Taftford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Feb 25/2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

- Ponded Water: Yes / ~~No~~ _____
- Windblown Litter: Yes / No _____
- Leachate Springs: Yes / ~~No~~ _____
- Animals: Yes / ~~No~~ _____
- Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 36

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / ~~No~~

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / ~~No~~

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Feb 27 / 2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 25

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / ~~No~~

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Feb 28 / 2019 TIME: 9:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 33

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: MAR 2 / 2019 TIME: 8:15 STAFF: John Stafflaw

DEFICIENCIES OBSERVED:

Description / Location

- Ponded Water: Yes / ~~No~~ _____
- Windblown Litter: ~~Yes~~ / No _____
- Leachate Springs: Yes / ~~No~~ _____
- Animals: Yes / ~~No~~ _____
- Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 104

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafflaw

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Mar 7/2019 TIME: 8:20 STAFF: John Tallford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 45

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Tallford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Mar 6/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: Yes / ~~No~~ _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
8:40	ELridge	Garbage and recycling	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 30

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: MAR 7 / 2019 TIME: 8:25 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:50	Matisse	Garbage and Recycling	3/4	Y

TOTAL COUNT OF HOUSEHOLD USERS: 35

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:
Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Mar 9 / 2019 TIME: 4:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

- Ponded Water: Yes / ~~No~~ _____
- Windblown Litter: ~~Yes~~ / No _____
- Leachate Springs: Yes / ~~No~~ _____
- Animals: Yes / ~~No~~ _____
- Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:40	Standen	Garbage and Recycling	FULL	Y

TOTAL COUNT OF HOUSEHOLD USERS: 101

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
 IF NO: Waste Sent To: NOT

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
 DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
 DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / ~~No~~
 DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
 If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:
 Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Mar 11/2019 TIME: 4:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:50	STANDEN	Garbage and Recycling	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 30

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: March 17/11 TIME: 8:30 AM STAFF: Dustin Jackson

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No

Windblown Litter: Yes / No By fences

Leachate Springs: Yes / No

Animals: Yes / No Birds

Other: Yes / No

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 77

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: Picked up litter that was not frozen around the bins

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: MAR 14/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

Along entrance way

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

MAR 13/2019 compacted garbage and covered

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10:45</u>	<u>MATISSE</u>	<u>Garbage and Recycling</u>	<u>1/2</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 27

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: ~~Yes~~ / No

DETAILS: picked up LITTER

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: MAR 16/2019 TIME: 4:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
2:45	unknown	Not From our Township

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 98

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: MAR 18/2019 TIME: 8:30 STAFF: John Staffor

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

Along entrance way

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Started spring cleanup

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>1:20</u>	<u>Standen</u>	<u>Garbage and Recycling</u>	<u>3/4</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 46

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Mar 20/2019 TIME: 8:25 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~
 Windblown Litter: ~~Yes~~ / No
 Leachate Springs: Yes / ~~No~~
 Animals: Yes / ~~No~~
 Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up Litter still lots there

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
8:30	ELVidge	Garbage and Recycling	1/8	Y

TOTAL COUNT OF HOUSEHOLD USERS: 50

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: MAR 21/2019 TIME: 8:35 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up LITTER around Bins
Requested backhoe To compact bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:10	Mattisse	Garbage and Recycling	1/2	Y
11:25	Mattisse	"	1/2	Y
11:55	Mattisse	"	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 32

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: MAR 23/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

its a Saturday way to busy to pick wind blown litter

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 82

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: MAR 25/2019 TIME: 8:25 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:15	Standen	Garbage and Recycling	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: _____

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
 IF NO: Waste Sent To: 51

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
 DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
 DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
 DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
 If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:
 Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: MAR 27/2019 TIME: 11:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~
 Windblown Litter: Yes / ~~No~~ Along entrance way
 Leachate Springs: Yes / ~~No~~
 Animals: Yes / ~~No~~
 Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Requested backhoe on MAR 21 To Clean along Fenceline has not shown up yet

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

MAR 26/2019 Garbage compacted and covered

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>8:35</u>	<u>ELVidge</u>	<u>Garbage and Recycling</u>	<u>✓</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 47

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: ~~Yes~~ / No

DETAILS: Garbage compacted and covered

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: MAR 28/2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:20	Matisse	Garbage and Recycling	Full	Y
10:40	Matisse	Recycling	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 34

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: MAR 30 / 2019 TIME: 4:35 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water: Yes / No

Windblown Litter: Yes / No

Leachate Springs: Yes / No

Animals: Yes / No

Other: Yes / No

Description / Location

Caused from heavy rain

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 98

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: APR 1/2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

Description / Location

Along entrance way and around bins

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Litter is frozen to the ground

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:20	Standen	Garbage and Recycling	3/4	Y
11:25	Standen	Recycling	1/4	Y
12:30	Standen	Garbage and Recycling	1/4	Y

TOTAL COUNT OF HOUSEHOLD USERS: 52

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: APR 3/2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked litter around bins most is still frozen

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
8:30	ELVidge	Garbage and Recycling	1/4	✓

TOTAL COUNT OF HOUSEHOLD USERS: 41

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: APR 4/2019 TIME: 9:05 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Had extra help today got 90% of wind
blown LITTER picked up

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:55	matisse	Garbage and Recycling	Full	✓
12:35	STander	Garbage	3/4	✓

TOTAL COUNT OF HOUSEHOLD USERS: 45

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: APR 6/2019 TIME: 8:45 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 103

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: APR 9/2019 TIME: 9:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: Yes / ~~No~~ _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:45	Standard	Garbage and Recycling	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 34

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: APR 10/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 45

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: ~~Yes~~ / No

DETAILS: Compacted garbage and covered APR 9/2019

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: APR 11/2019 TIME: 8:45 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

My supervisor sent extra help to clean up windblown litter

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:15	Matisse	Garbage and Recycling	3/4	Y

TOTAL COUNT OF HOUSEHOLD USERS: 51

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: APR 13/2019 TIME: 9:00 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No
 Windblown Litter: Yes / No
 Leachate Springs: Yes / No
 Animals: Yes / No
 Other: Yes / No

RECOMMENDED ACTIONS / ACTIONS TAKEN:

High winds today more windblown litter
to pick up

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Lots of large loads including brush garbage
recycling ~~brush~~ all from Township residence

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 116

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: APR 15/2019 TIME: 10:00 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	<input checked="" type="checkbox"/> / <input type="checkbox"/>	Base of garbage face
Windblown Litter:	<input checked="" type="checkbox"/> / <input type="checkbox"/>	
Leachate Springs:	Yes / <input checked="" type="checkbox"/> No	
Animals:	Yes / <input checked="" type="checkbox"/> No	
Other:	Yes / <input checked="" type="checkbox"/> No	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Heavy rains some standing water not much
Picked up wind blown litter Along bins
2:25 Bachoe compacted bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
11:15	Sanden	

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:10	Sanden	Garbage and Recycling	FULL	Y
11:15	TLTJ Resident	"	FULL	Y
11:30	"	"	FULL	Y
11:45	"	Brush	FULL	Y
12:05	Sanden	BRUSH	FULL	Y

TOTAL COUNT OF HOUSEHOLD USERS: 42

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: *John Stafford*



DATE: APR 17/2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
8:30	ELVIDGE	Garbage and Recycling	1/4	Y
11:50	TLTI Resident	Brush	FULL	/
2:20	TLTI "	Brush	FULL	/
2:45	"	Furniture	FULL	Y
3:15	"	Scrap metal	FULL	Y

TOTAL COUNT OF HOUSEHOLD USERS: 61

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford



DATE: APR 19/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

3 more loads of brush
Fire department brought Trailer load of burnt
Antique FULL load of clean burning material. Furniture

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:55	MATISSE	Garbage and Recycling	FULL	Y
11:10	TLTI Resident	Scrap metal and Garbage	FULL	Y
1:30	"	Brush	FULL	Y
3:00	"	Brush	FULL	Y

TOTAL COUNT OF HOUSEHOLD USERS: 63

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford



DATE: APR 20/2019 TIME: 4:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

About 12 full loads consisting of brush scrap metal
garbage and recycling and furniture came in today

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 97

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: APR 24/2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up wind blown litter around Bin and along entrance way.

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:05	TLTI Resident	Clean wood and leaves	FULL	Y
11:20	Standen	Garbage Recycling	FULL	Y
3:50	TLTI Resident	Brush	FULL	Y
4:25	TLTI Resident	Brush	FULL	Y

TOTAL COUNT OF HOUSEHOLD USERS: 62

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: ~~Yes~~ / No

DETAILS: APR 23 Compacted garbage and covered

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: APR 25/2019 TIME: 4:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up Litter around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
1:35	Unknown	not from this Township

OTHER COMMENTS / OBSERVATIONS

5 Full loads of Brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
1:15	TLTI Resident	metal	1/2	Y
3:50	TLTI Resident	Garbage and Recycling	FULL	Y
3:55	TLTI Resident	FURNITURE	FULL	Y

TOTAL COUNT OF HOUSEHOLD USERS: 58

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: APR 27/2019 TIME: 4:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / No	<u>Due to heavy rain</u>
Windblown Litter:	Yes / No	
Leachate Springs:	Yes / No	
Animals:	Yes / No	
Other:	Yes / No	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

TLTI Residents of FULL loads consisting of scrap metal furniture garbage and brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 126

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: APR 29 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up wind blown litter along entrance way

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

2 more full loads of brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:55	Standen	Garbage and Recycling	FULL	Y
12:45	Standen	"	"	Y
1:30	TLTI Resident	Brush	FULL	Y
2:00	TLTI Resident	Shingles and scrap metal	FULL	Y

TOTAL COUNT OF HOUSEHOLD USERS: 65

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: May 1/2019 TIME: 9:00 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Bachae compacted bins

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>8:30</u>	<u>EL vidge</u>	<u>Garbage Recycling</u>	<u>1/4</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 35

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: MAY 2/2019 TIME: 4:00 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:30	MATTISSE	Garbage, Recycling	FULL	Y

TOTAL COUNT OF HOUSEHOLD USERS: 41

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: MAY 4/2019 TIME: 4:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
		/

OTHER COMMENTS / OBSERVATIONS

6 full loads & half loads consisting of furniture
construction material garbage and brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 115

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:
Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: May 6/2019 TIME: 9:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
12:05	Standen	Garbage Recycling	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 66

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: MA 18/2019 TIME: 3:10 STAFF: John Stifford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Backhoe cleaned active face area and
compacted bins
I cleaned garbage around bins and entranceway

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
1:15	Monique Berry	Double axle dump trailer we only accept half ton trucks

OTHER COMMENTS / OBSERVATIONS

10 Full loads consisting of scrap metal garbage
clean wood for burning brush 1 half load of construction
waste

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
3:10	Elvidge	Leaves	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 71

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stifford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: May 9 / 2019 TIME: 4:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Picked up windblown litter on south side of entrance way. Six full loads of brush today

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:00	Mattisse	Garbage Recycling	1.5LL	Y

TOTAL COUNT OF HOUSEHOLD USERS: 47

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No
IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: ~~Yes~~ / No
DETAILS: Compacted and covered

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / No
If YES, Complaint File Number (s): _____

SIGNATURE: _____

OFFICE USE:
Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: May 11/2019 TIME: 4:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

18 loads of brush. Two loads Furniture

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 127

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
 IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
 DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
 DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
 DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
 If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford



DATE: MAY 13/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

4 loads of Brush from TLI residence

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:20	Standen	Garbage Recycling	Full	✓
1:25	Standen	Brush	Full	✓

TOTAL COUNT OF HOUSEHOLD USERS: 47

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: MAY 15 / 2019 TIME: 4:00 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

5 Full loads of brush from TLTI residence

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
8:30	ELridge	Garbage Recycling	1/4	Y
11:20	Standen	Brush	FULL	Y
2:55	Standen	Brush	FULL	Y

TOTAL COUNT OF HOUSEHOLD USERS: 61

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: MAY 16 / 2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	<input checked="" type="checkbox"/> No	
Windblown Litter:	<input checked="" type="checkbox"/> No	
Leachate Springs:	<input checked="" type="checkbox"/> No	
Animals:	<input checked="" type="checkbox"/> No	
Other:	<input checked="" type="checkbox"/> No	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
9:55	Unknown	Double axle dump trailer we don't accept

OTHER COMMENTS / OBSERVATIONS

4 loads of brush 2 loads of leaves 1/2 load
Construction waste

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:05	mattisse	Garbage Recycling	3/4	Y

TOTAL COUNT OF HOUSEHOLD USERS: 48

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: May 18/19 TIME: 8:30 AM STAFF: Dustin Jackson

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No

Windblown Litter: Yes / No

Leachate Springs: Yes / No

Animals: Yes / No Birds

Other: Yes / No

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: ~~176~~ 176

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: May 22/2019 TIME: 8:20 STAFF: John Stifford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	<input checked="" type="checkbox"/> Yes / <input checked="" type="checkbox"/> No	_____
Windblown Litter:	<input checked="" type="checkbox"/> Yes / <input checked="" type="checkbox"/> No	_____
Leachate Springs:	<input checked="" type="checkbox"/> Yes / <input checked="" type="checkbox"/> No	_____
Animals:	<input checked="" type="checkbox"/> Yes / <input checked="" type="checkbox"/> No	_____
Other:	<input checked="" type="checkbox"/> Yes / <input checked="" type="checkbox"/> No	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked windblown litter along entranceway and around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

10 loads brush & loads leaves 1 1/2 load shingles
1 1/8 load shingles

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:10	Sanden	Garbage Recycling	FULL	Y
12:05	Sanden	"	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 82

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: ON MAY 21 Garbage was compacted and covered

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: May 23 / 2019 TIME: 4:30

STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water: Yes / ~~No~~
Windblown Litter: Yes / ~~No~~
Leachate Springs: Yes / ~~No~~
Animals: Yes / ~~No~~
Other: Yes / ~~No~~

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

lots of brush came in Full load of garbage
and full load of cardboard from home hardware

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:30	Mattisse	Garbage Recycling	Full	/

TOTAL COUNT OF HOUSEHOLD USERS: 56

AREA OF WASTE DISPOSAL:

All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL:

Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT:

Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED:

Yes / No

DETAILS: _____

COMPLAINTS RECEIVED:

Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: _____

John Stafford

OFFICE USE:

Date Reviewed: _____

Reviewer: _____

File Number: _____



DATE: MAY 25 / 2019 TIME: 4:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

- Ponded Water: Yes / ~~No~~ _____
- Windblown Litter: ~~Yes~~ / No _____
- Leachate Springs: Yes / ~~No~~ _____
- Animals: Yes / ~~No~~ _____
- Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

4 loads Brush & 4 loads Miscellaneous

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>9:20</u>	<u>Sanden</u>	<u>FURNITURE</u>	<u>FULL</u>	<u>✓</u>

TOTAL COUNT OF HOUSEHOLD USERS: 126

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: *John Stafford*

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: May 27/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	<u>No</u>	_____
Windblown Litter:	<u>Yes</u>	_____
Leachate Springs:	<u>No</u>	_____
Animals:	<u>No</u>	_____
Other:	<u>No</u>	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

I picked up windblown litter along entrance way and around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
<u>9:40</u>	<u>Unknown</u>	<u>Not from our Township</u>

OTHER COMMENTS / OBSERVATIONS

4 loads brush 2 loads miscellaneous

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>9:50</u>	<u>Sander</u>	<u>Garbage Recycling</u>	<u>1 FULL</u>	<u>Y</u>
<u>11:10</u>	<u>"</u>	<u>"</u>	<u>1/2</u>	<u>Y</u>
<u>12:00</u>	<u>"</u>	<u>Clean lumber to burn</u>	<u>FULL</u>	<u>Y</u>
<u>1:30</u>	<u>"</u>	<u>"</u>	<u>FULL</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 61

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No
IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No
DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No
DETAILS: Water truck came in

DAILY INSPECTION FORM COMPLETED: Yes / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / No
If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: May 29/2019 TIME: 9:00 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

4 Full loads brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
8:45	ELridge	Garbage Recycling	1/8	Y
2:05	Standen	Shingles	1/2	Y
2:05	"	Trailer clean Lumber	FULL	Y

TOTAL COUNT OF HOUSEHOLD USERS: 56

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: ~~Yes~~ / No

DETAILS: Calcium was applied to the road should control the

DAILY INSPECTION FORM COMPLETED: Yes / ~~No~~ DUST all summer

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: May 30/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Homehardware one and a half loads of construction waste and one load garbage.

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>11:10</u>	<u>MATTISSE</u>	<u>Garbage Recycling</u>	<u>FULL</u>	<u>✓</u>

TOTAL COUNT OF HOUSEHOLD USERS: 62

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: JUNE 1/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
3:35	Unknown	NOT From our Township

OTHER COMMENTS / OBSERVATIONS

4 loads brush 2 loads furniture

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 130

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE:

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: June 3/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:05	Sanden	Garbage Recycling	FULL	Y

TOTAL COUNT OF HOUSEHOLD USERS: 29

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: JUN 5 / 2019 TIME: 8:50 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

- Ponded Water: Yes / ~~No~~ _____
- Windblown Litter: ~~Yes~~ / No _____
- Leachate Springs: Yes / ~~No~~ _____
- Animals: Yes / ~~No~~ _____
- Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up windblown litter along entrance way and around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

4 loads Brush 1 load Furniture
1/2 load of Steel

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:00	ELvidge	Garbage Recycling	1/4	✓

TOTAL COUNT OF HOUSEHOLD USERS: 49

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: ~~Yes~~ / No

DETAILS: on done & Garbage was compacted and covered

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: June 6/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

5 loads Brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10:45</u>	<u>mattisse</u>	<u>Garbage Recycling</u>	<u>Full</u>	<u>/</u>

TOTAL COUNT OF HOUSEHOLD USERS: 59

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: June 8 / 2019 TIME: 4:45 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

7 FULL loads BRUSH
4 FULL loads MISCELLANEOUS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 150

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: June 10/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up wind blown litter along entrance way
Cleaned up around compost bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:20	Sanden	garbage Recycling	FULL	✓
11:15	Sanden	"	3/4	✓
1:55	Sanden	Furniture	FULL	✓
2:15	Sanden	"	1/2	✓

TOTAL COUNT OF HOUSEHOLD USERS: 60

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: June 12/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

8 Full loads brush. 1/2 load Shingles

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>11:45</u>	<u>ELVidge</u>	<u>Garbage Recycling</u>	<u>1/2</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 56

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: June 13/2019 TIME: 8:50 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Home hardware full load Garbage
2 loads brush 2 loads Leaves FULL

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:30	Matisso	Garbage Recycling	FULL	✓
1:10	Sandsh	Garbage Recycling	3/4	✓

TOTAL COUNT OF HOUSEHOLD USERS: 44

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: June 15/2019 TIME: 4:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

7 loads brush 2 loads Furniture
1 load Shingles

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 129

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: June 17/2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No No _____
 Windblown Litter: Yes / No No _____
 Leachate Springs: Yes / No No _____
 Animals: Yes / No No _____
 Other: Yes / No No _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Picked up windblown litter along entrance way and around bins. Cleaned up garbage somebody brought in after hours

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:40	Stander	Garbage	1 ULC	Y
12:30	Stander	Recycling	3/4	Y

TOTAL COUNT OF HOUSEHOLD USERS: 59

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: June 19/2019 TIME: 4:15 STAFF: John Staffed

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
11:05	Unknown	Not from our township
2:15	Unknown	Not from our Township

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 70

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: ~~Yes~~ / No

DETAILS: Compacted garbage and covered 6/18/2019

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Staffed

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: June 20/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / No	
Windblown Litter:	Yes / No	
Leachate Springs:	Yes / No	
Animals:	Yes / No	
Other:	Yes / No	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Bachor compacted bins And Took Tires away

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:00	matisse	Garbage Recycling	1 full	✓
11:15	Leeds and the Thousand Islands	Construction waste	Full	✓

TOTAL COUNT OF HOUSEHOLD USERS: 38

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: June 27/2019 TIME: 8:15 STAFF: John Taylor

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~
Windblown Litter: Yes / ~~No~~
Leachate Springs: Yes / ~~No~~
Animals: Yes / ~~No~~
Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
10:45	TLTI Resident	Single axle dump truck not accepted
12:15	Unknown	Not from this Township

OTHER COMMENTS / OBSERVATIONS

6 loads Brush 2 loads construction waste

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:30	Sanden	Garbage Recycling	Full	Y
12:20	Sanden	Furniture	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 154

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / ~~No~~

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: June 24/2019 TIME: _____ STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up windblown litter along entrance way

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Backhoe compacted bins and put gravel in driveway

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:25	Standen	Landfill Recycling	Full	✓
12:10	Standen	"	3/4	✓
3:30	Standen	Furniture	Full	✓
4:05	Standen	Recycling	Full	✓

TOTAL COUNT OF HOUSEHOLD USERS: 72

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: June 26/2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up windblown litter Along entrance way

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

6 Full loads brush from T&T Residence

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:05	ELVidge	Garbage Recycling	4	✓
9:35	Stander	Brush	FULL	✓
11:20	Stander	Brush	FULL	✓

TOTAL COUNT OF HOUSEHOLD USERS: 66

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: ~~Yes / No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: June 27/2019 TIME: 7:00 STAFF: John St...

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	<u>Yes / No</u>	_____
Windblown Litter:	<u>Yes / No</u>	_____
Leachate Springs:	<u>Yes / No</u>	_____
Animals:	<u>Yes / No</u>	_____
Other:	<u>Yes / No</u>	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up windblown litter

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>11:05</u>	<u>Matisse</u>	<u>Garbage, Recycling</u>	<u>1000</u>	<u>1</u>

TOTAL COUNT OF HOUSEHOLD USERS: 68

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: June 29 / 2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Pick up windblown litter

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

7 full loads of miscellaneous

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 137

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: July 3/19 TIME: 8:20 AM STAFF: Amy Popplawell

DEFICIENCIES OBSERVED:

Description / Location

- Ponded Water: Yes / No
- Windblown Litter: Yes / No Around bins and driving area
- Leachate Springs: Yes / No
- Animals: Yes / No Birds, crows
- Other: Yes / No

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Spent a couple hours picking up wind blown litter & debris that was over thrown around metal bin.

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

fire still burning upon arrival

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
8:30 am	Eldridge	Garbage & Recy	20 + 10	Yes

TOTAL COUNT OF HOUSEHOLD USERS: 74

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No
DETAILS: Bins & Active face

APPLICATION OF DUST SUPPRESSANT: Yes / No
DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / No
If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]



DATE: July 4/19 TIME: 8:35 AM STAFF: Amy Popplawell

DEFICIENCIES OBSERVED:

Ponded Water: Yes / No

Windblown Litter: Yes / No

Leachate Springs: Yes / No

Animals: Yes / No

Other: Yes / No

Description / Location

Along fences + high grass areas

Skunk/COONS/Birds

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Organized and re packed 2100 bin for over an hour, got all in and closed ready for pickup.

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10:15 AM</u>	<u>Willie</u>	<u>garbage + Recy.</u>	<u>20 + 15</u>	<u>YES</u>
<u>11:28 AM</u>	<u>Willie</u>	<u>"</u>	<u>"</u>	<u>L</u>

TOTAL COUNT OF HOUSEHOLD USERS: _____

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: 69

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: Prim + active face, personal cleanup.

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: site is clean and safe.

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: Popplawell

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: July 6/19 TIME: 8:20 Am STAFF: Amy Tippler

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / <input checked="" type="radio"/> No	_____
Windblown Litter:	<input checked="" type="radio"/> Yes / No	<u>long grass areas</u>
Leachate Springs:	Yes / <input checked="" type="radio"/> No	_____
Animals:	<input checked="" type="radio"/> Yes / No	<u>Crows, birds</u>
Other:	Yes / <input checked="" type="radio"/> No	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

packed the electronic bin, making more room.
picked up litter along driveway coming in, off n on
all morning 4 hrs.

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 164

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: Active face, bins & pickup.

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: Site is clean and organized.

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]



DATE: July 8th / 19 TIME: 8:30 AM STAFF: Rustin Jackson

DEFICIENCIES OBSERVED:

	Yes / <u>No</u>	Description / Location
Ponded Water:	Yes / <u>No</u>	
Windblown Litter:	<u>Yes</u> / <u>No</u>	<u>BY Bins, curd road</u>
Leachate Springs:	Yes / <u>No</u>	
Animals:	<u>Yes</u> / No	<u>Birds, rodents</u>
Other:	Yes / <u>No</u>	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up garbage by the road.

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 105

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: July 16/19 TIME: 8:30 AM STAFF: Dustin Jackson

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / <input checked="" type="radio"/> No	_____
Windblown Litter:	Yes / <input checked="" type="radio"/> No	_____
Leachate Springs:	Yes / <input checked="" type="radio"/> No	_____
Animals:	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<u>Birds, Rodents</u>
Other:	Yes / <input checked="" type="radio"/> No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Had a brush fire had to get the fire department to ~~the~~ get it out

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 83

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: July 15/14 TIME: 8:30 AM STAFF: Dustin Jackson

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / <input checked="" type="radio"/> No	_____
Windblown Litter:	Yes / <input checked="" type="radio"/> No	_____
Leachate Springs:	Yes / <input checked="" type="radio"/> No	_____
Animals:	<input checked="" type="radio"/> Yes / No	<u>Birds, Rodents</u>
Other:	Yes / <input checked="" type="radio"/> No	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Wind Blows bags over to the side of the road, trying to keep up with picking it up.

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 92

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: _____

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: July 13th/19 TIME: 8:30AM STAFF: Dustin Jackson

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No

Windblown Litter: Yes / No BY fences

Leachate Springs: Yes / No

Animals: Yes / No Birds, rodents

Other: Yes / No

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 184

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: July 15/2019 TIME: 8:15 STAFF: John Toftord

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~
 Windblown Litter: ~~Yes~~ / No around Bins entrance way
 Leachate Springs: Yes / ~~No~~
 Animals: Yes / ~~No~~
 Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up litter ALONG entrance way

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

1 FULL load Furniture
4 loads BRUSH

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>12:10</u>	<u>Spandeh</u>	<u>cardboard Recycling</u>	<u>3/4</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 877

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Toftord

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: July 17/2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	<input checked="" type="checkbox"/> No	
Windblown Litter:	<input checked="" type="checkbox"/> No	
Leachate Springs:	<input checked="" type="checkbox"/> No	
Animals:	<input checked="" type="checkbox"/> No	
Other:	<input checked="" type="checkbox"/> No	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Pick up Litter Along entrance way

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

TLTI put new gravel on Road & load brush Full
1 load Furniture 1 Full Load miscellaneous
1 load Shingles

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:05	ELVidge	Garbage Recycling	1/2	✓

TOTAL COUNT OF HOUSEHOLD USERS: 71

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: July 16/2019 compacted garbage and covered

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: July 18/2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
12:45	Unknown	NOT From our Town Ship

OTHER COMMENTS / OBSERVATIONS

4 Full loads brush 2 Full loads miscellaneous

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:10	Matisse	Garbage Recycling	Full	✓

TOTAL COUNT OF HOUSEHOLD USERS: 71

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: July 20 / 2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

- Ponded Water: Yes / No Yes
- Windblown Litter: Yes / No No
- Leachate Springs: Yes / No No
- Animals: Yes / No No
- Other: Yes / No No

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
10:10	UN	NOT FROM TLDI
12:05	UN	"

OTHER COMMENTS / OBSERVATIONS

Two loads furniture Two Loads
Miscellaneous

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 162

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: July 22/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

- Ponded Water: Yes / ~~No~~ _____
- Windblown Litter: ~~Yes~~ / No _____
- Leachate Springs: Yes / ~~No~~ _____
- Animals: Yes / ~~No~~ _____
- Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Pick up windblown litter Along entrance way
Pick up litter around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Full load of cardboard home hardware
Three loads of brush one load clean building materials

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
12:30	Standen	Garbage/ Recycling	Full	✓
1:15	Standen	Brush	Full	✓

TOTAL COUNT OF HOUSEHOLD USERS: 106

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: July 24/2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

around bins and entrance way

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up wind blown litter Along entrance way and around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Back of compacted bins and pushed garbage up

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>8:30</u>	<u>ELVidge</u>	<u>Garbage Recycling</u>	<u>1/4</u>	<u>X</u>

TOTAL COUNT OF HOUSEHOLD USERS: 95

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: July 25/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

High winds lots of new windblown litter
to pick up again

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Home hardware full load clean building materials ⁶ full loads
brush 1/2 load construction waste Bad Storm

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:00	MATISSE	Hardware Recycling	Full	✓

TOTAL COUNT OF HOUSEHOLD USERS: 72

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: July 27/2019 TIME: 8:25 STAFF: John Stofford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~
 Windblown Litter: Yes / ~~No~~
 Leachate Springs: Yes / ~~No~~
 Animals: Yes / ~~No~~
 Other: Yes / ~~No~~

Around bins and entryway

RECOMMENDED ACTIONS / ACTIONS TAKEN:

High winds Today more wind blown litter

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Home hardware with a 1/2 load Steel Strapping
& loads brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 166

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: July 29/2019 TIME: 8:10 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up lots of wind blowing litter

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Put Guide Steaks back in ground ran over by Truck on Saturday & load brush Home Hardware 1/2 load

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
1:05	Standen	Garbage Recycling	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 102

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: July 31/2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up windblowing litter Along entrance way and around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

5 loads brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:35	ELridge	Garbage Recycling	1/2	Y
2:50	STanden	1/2 load brush 2 mattresses		Y

TOTAL COUNT OF HOUSEHOLD USERS: 95

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: ~~Yes~~ / No

DETAILS: Compacted garbage and covered July 30

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: AUG 1 / 2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Small amount of windblown litter

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Pick it up

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

8 Full loads brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>11:05</u>	<u>maTISSE</u>	<u>Garbage Recycling</u>	<u>Full</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 84

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: July 3/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Pick up windblown litter

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
11:50	Unknown	not from TLI
2:15	"	"

OTHER COMMENTS / OBSERVATIONS

4 loads brush 1/2 load construction waste
2 loads Furniture full load garbage camp ground

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 205

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Aug 7th 119 TIME: 8.30 AM STAFF: Dustin Jackson

DEFICIENCIES OBSERVED:

Description / Location

- Ponded Water: Yes / No
- Windblown Litter: Yes / No BT fence
- Leachate Springs: Yes / No
- Animals: Yes / No Birds, Rodent
- Other: Yes / No

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 103

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: Rain

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: AUG 8/19 TIME: 8:30AM STAFF: Dustin Jackson

DEFICIENCIES OBSERVED:

Ponded Water: Yes / No

Windblown Litter: Yes / No

Leachate Springs: Yes / No

Animals: Yes / No

Other: Yes / No

Description / Location

BY FENCES and BINS

BINS, CUDEN

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Cleaned by road and bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
<u>1:30</u>	<u>?</u>	<u>Tried to bring a freezer</u>

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>12:40</u>	<u>Barbara Wells</u>	<u>Household</u>	<u>T/K</u>	<u>YES</u>

TOTAL COUNT OF HOUSEHOLD USERS: 102

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Aug 16th 19 TIME: 8:30 AM STAFF: Dustin Jackson

DEFICIENCIES OBSERVED:

Description / Location

- Ponded Water: Yes / No
- Windblown Litter: Yes / No By fence
- Leachate Springs: Yes / No
- Animals: Yes / No Birds, rodents
- Other: Yes / No

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 170

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Aug 12/17 TIME: 10:30 STAFF: [Signature]

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No

Windblown Litter: Yes / No

Leachate Springs: Yes / No

Animals: Yes / No

Other: Yes / No

no ponding
no litter
no springs
no animals
no other

RECOMMENDED ACTIONS / ACTIONS TAKEN:

no actions taken

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 107

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: litter picked up

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Aug 14/19 TIME: 8:30 AM STAFF: Amy Pappewell

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / <input checked="" type="radio"/> No	_____
Windblown Litter:	<input checked="" type="radio"/> Yes / No	<u>In long grass</u>
Leachate Springs:	Yes / <input checked="" type="radio"/> No	_____
Animals:	<input checked="" type="radio"/> Yes / No	<u>Birds n coons</u>
Other:	Yes / <input checked="" type="radio"/> No	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>8:40</u>	<u>Carl</u>	<u>garbage & Recy.</u>	<u>6 + 5</u>	<input checked="" type="checkbox"/>

TOTAL COUNT OF HOUSEHOLD USERS: 172

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: Amy Pappewell

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Aug 15/19 TIME: 8:30 Am STAFF: Amy Popplewell

DEFICIENCIES OBSERVED:

Ponded Water: Yes / No
 Windblown Litter: Yes / No
 Leachate Springs: Yes / No
 Animals: Yes / No
 Other: Yes / No

Description / Location

in and around long grass

Birds + Coats

RECOMMENDED ACTIONS / ACTIONS TAKEN:

cleaned up metal + around bin. re packed Electronics bin to make more room.

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>11:20</u>	<u>Willy</u>	<u>garbage bag</u>	<u>15 x 12</u>	<input checked="" type="checkbox"/>

TOTAL COUNT OF HOUSEHOLD USERS: 10

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: Popplewell

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Aug 17/19 TIME: 8:30 AM STAFF: Amy Applewell

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No
 Windblown Litter: Yes / No Among long grass
 Leachate Springs: Yes / No
 Animals: Yes / No Birds, coons
 Other: Yes / No

RECOMMENDED ACTIONS / ACTIONS TAKEN:

cleaned metal up in long grass + cardboard around bin.

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 171

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: Bin on Active face.

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: N/A

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: Site ~~was~~ cleanish & organized

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____

DATE: AUG 19/2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / No	
Windblown Litter:	Yes / No	<u>LOTS everywhere</u>
Leachate Springs:	Yes / No	
Animals:	Yes / No	
Other:	Yes / No	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up LITTER Along entrance way

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
<u>3:05</u>	<u>Unknown</u>	<u>NOT From TLTI</u>

OTHER COMMENTS / OBSERVATIONS

3 Full loads brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>1:20</u>	<u>Standen</u>	<u>Garbage</u>	<u>Full</u>	<u>✓</u>
<u>1:30</u>	<u>campground</u>	<u>Recycling</u>	<u>Full</u>	<u>✓</u>
<u>2:35</u>	<u>Standen</u>	<u>brush</u>	<u>Full</u>	<u>✓</u>

TOTAL COUNT OF HOUSEHOLD USERS: 72

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
 IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
 DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
 DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / ~~No~~
 DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
 If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford



DATE: AUG 21 / 2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~
 Windblown Litter: Yes / ~~No~~ Along entrance way around bins
 Leachate Springs: Yes / ~~No~~
 Animals: Yes / ~~No~~
 Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Pick up Garbage around bins and entrance way

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Back hoe pushed up brush and garbage

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
8:45	ELVidge	Garbage Recycling	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 85

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: AUG 22 / 2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water: Yes / No
 Windblown Litter: Yes / No
 Leachate Springs: Yes / No
 Animals: Yes / No
 Other: Yes / No

Description / Location

Small amount due to heavy rain

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>11:00</u>	<u>matisse</u>	<u>Garbage Recycling</u>	<u>FULL</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 89

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: AUG 24 / 2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

6 Loads brush 3 1/2 loads construction waste
2 loads clean building material

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 162

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: AUG 26 / 2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up Litter Along entrance way

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

5 Full loads brush. Burnt brush pile Today

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
12:55	Standen	Garbage Recycling	Full	✓
2:25	Standen	brush	Full	✓
3:55	Standen	brush	Full	✓

TOTAL COUNT OF HOUSEHOLD USERS: 83

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: AUG 28/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<u>Heavy Rain</u>
Windblown Litter:	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	
Leachate Springs:	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	
Animals:	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	
Other:	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

3 loads brush 1 load construction

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>3:10</u>	<u>Campground</u>	<u>Recycling</u>	<u>Full</u>	<u>/</u>
<u>8:30</u>	<u>FLridge</u>	<u>Garbage Recycling</u>	<u>1/4</u>	<u>/</u>

TOTAL COUNT OF HOUSEHOLD USERS: 81

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: AUG 27/compacted garbage and covered

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Aug 29/2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up litter along entrance way around bins and outside of gate

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

7 full loads brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:25	Matisse	Garbage Recycling	Full	Y
4:10	Standeh	brush	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 82

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: AUG 31 / 2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up litter Along entrance way

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
12:50	unknown	Not from TLI

OTHER COMMENTS / OBSERVATIONS

11 loads brush 3 loads Furniture
2 loads construction waste

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 189

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Sept 4th / 14 TIME: 8:30 AM STAFF: Dustin Jackson

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No

Windblown Litter: Yes / No

By Boundaries

Leachate Springs: Yes / No

Animals: Yes / No

Birds

Other: Yes / No

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

6-18-17-19-7-17-9-5-5

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 103

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: Run

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: 

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Sept 5th / 14 TIME: 8:30AM STAFF: Dustin Jackson

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No _____
 Windblown Litter: Yes / No By Boundaries
 Leachate Springs: Yes / No _____
 Animals: Yes / No Birds
 Other: Yes / No _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

2-9-13-18-8-7-9-7-7

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 80

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: _____

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Sept 7/14 TIME: 8.30 AM STAFF: Dustin JOHNSON

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No

Windblown Litter: Yes / No

Ponded

Leachate Springs: Yes / No

Animals: Yes / No

Birds, rodents

Other: Yes / No

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

13-21-30-26-17-18-9-8-4

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 146

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: Rain

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: _____

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Sept 9/19 TIME: 830AM STAFF: Applewell

DEFICIENCIES OBSERVED:

Ponded Water: Yes / No

Windblown Litter: Yes / No

Leachate Springs: Yes / No

Animals: Yes / No

Other: Yes / No

Description / Location

along roadside + long grass

Birds, coons, rodents

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Cleaned up Electronics 30mins, packed cardboard
bin, 10mins. picked up and packed plastics &
metal bins. 45mins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 108

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: manual pick up, bins @ Active face

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: site is clean + safe

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: Applewell

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Sept 11/19 TIME: 8:25 Am STAFF: Applewell

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No

Windblown Litter: Yes / No

a long tall grass & Active face

Leachate Springs: Yes / No

Animals: Yes / No

Birds / rodents / coons

Other: Yes / No

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>8:50 Am</u>	<u>Carl</u>	<u>garbage + Ropy.</u>	<u>8 + 7</u>	<input checked="" type="checkbox"/>

TOTAL COUNT OF HOUSEHOLD USERS: 111

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: Bins, Active face & manual pickup

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: Site is clean & safe.

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: Applewell

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Sept 12/19 TIME: 8:30 AM STAFF: Amy Popplewell

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No

Windblown Litter: Yes / No

Along ditches & longards

Leachate Springs: Yes / No

Animals: Yes / No

Birds, rodents

Other: Yes / No

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Cleaned up around paper bin, raked trash along road side toward Active face.

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10 AM</u>	<u>Wully</u>	<u>Garbage + Recy.</u>	<u>12 + 9</u>	<input checked="" type="checkbox"/>

TOTAL COUNT OF HOUSEHOLD USERS: 108

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: Bins, Active face & manual pickup

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: Site is clean + safe.

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: Popplewell

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Sept 14/19 TIME: 830 am STAFF: Amy Popplewell

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No

Windblown Litter: Yes / No

Leachate Springs: Yes / No

Animals: Yes / No

Other: Yes / No

along grass + ditches
Birds + Rodents

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Cleaned and collected randomly placed tires
& added them to pile.

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 167

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: Site is safe & clean

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Sept 16/2019 TIME: 8:30 STAFF: John Staffa

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: Yes / ~~No~~ _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up wind blown litter around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

These loads were authorized by Nicole Shorts bylaw officer

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>/</u>	<u>Fletcher</u>	<u>garbage</u>	<u>2 loads each 14 cub met</u>	<u>Y</u>
<u>/</u>	<u>"</u>	<u>"</u>	<u>3 loads each 10 cub met</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 83

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / ~~No~~

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / ~~No~~

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Staffa

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Sept 18/2019 TIME: 8:20 STAFF: John Staffor

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up wind blown litter Along entrance way and around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Back hoe compacted steel and pushed garbage and brush up. 7 full loads brush 2 half loads construction

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
8:40	ELWidge	Garbage Recycling	1/4	✓

TOTAL COUNT OF HOUSEHOLD USERS: 62

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Staffor

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Sept 19/2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

windblown litter has been clean up around bins and around compost bins. Windblown litter has been cleaned up until next windy day

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

5 Full loads brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:10	matisse	Garbage Recycling	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 62

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Sat 21 Sept 17 TIME: 8:30 AM STAFF: Rustin Jackson

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No

Windblown Litter: Yes / No

Leachate Springs: Yes / No

Animals: Yes / No

Other: Yes / No

Birds, rodents

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 116

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: _____

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Sept 23 / 2019 TIME: 8:20 STAFF: John Staffor

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up windblown litter along entrance way and around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
1:35	Standen	Garbage Recycling	3/4	Y

TOTAL COUNT OF HOUSEHOLD USERS: 72

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Staffor

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Sept 25/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	<input checked="" type="checkbox"/> No	
Windblown Litter:	<input checked="" type="checkbox"/> No	
Leachate Springs:	<input checked="" type="checkbox"/> No	
Animals:	<input checked="" type="checkbox"/> No	
Other:	<input checked="" type="checkbox"/> No	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up windblown litter along entrance way and around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Two Full half Ton Truck loads of Steel

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
8:40	Elvidge	Garbage Recycling	1/4	!

TOTAL COUNT OF HOUSEHOLD USERS: 54

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: Garbage compacted and covered Sept 24/

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Sept 26/2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

picked up litter around bins and entrance way

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

1/2 load construction waste 3 loads brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:15	matisse	Garbage Recycling	Full	Y
11:10	matisse	Garbage Recycling	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 49

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Sept 28 / 2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / No	
Windblown Litter:	Yes / No	
Leachate Springs:	Yes / No	
Animals:	Yes / No	
Other:	Yes / No	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
1:30	Unknown	Not from our Township

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 129

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Sept 30/2019 TIME: 8:20 STAFF: John Stallo

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up litter around bins and along entrance way

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
12:40	Unknown	Not from our townshp

OTHER COMMENTS / OBSERVATIONS

3 loads brush 1 1/2 load construction waste

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:00	Sander	Garbage Recycling	FULL	Y
11:20	Home Hardware	Garbage	FULL	Y
1:00	"	Cardboard	"	Y
3:30	"	Steel	"	Y

TOTAL COUNT OF HOUSEHOLD USERS: 82

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
If YES, Complaint File Number (s): _____

SIGNATURE: John Stallo

OFFICE USE:
Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: OCT 2 / 2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water: Yes / ~~No~~
Windblown Litter: Yes / ~~No~~
Leachate Springs: Yes / ~~No~~
Animals: Yes / ~~No~~
Other: Yes / ~~No~~

Description / Location

Heavy Rain

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up windblown litter Along entrance way
and around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>8:45</u>	<u>ELvidge</u>	<u>Garbage Recycling</u>	<u>1/4</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 51

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: OCT 3 / 2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: Yes / ~~No~~ _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Backhoe compacted bins push garbage and brush up. 2 loads brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:00	matisse	Garbage	FULL	Y
12:30	"	Recycling	3/4	Y

TOTAL COUNT OF HOUSEHOLD USERS: 69

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Oct 5 / 2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
11:45	Unknown	NOT From our Township

OTHER COMMENTS / OBSERVATIONS

7 loads brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 148

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Oct 7/2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up windblown litter Along entrance way and around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

4 Full loads brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10:45</u>	<u>Standen</u>	<u>Garbage Recycling</u>	<u>3/4</u>	<u>/</u>

TOTAL COUNT OF HOUSEHOLD USERS: 60

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: OCT 9 / 2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up windblown litter along entrance way and around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
<u>3:05</u>	<u>Unknown</u>	<u>Not from our Township</u>

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>8:35</u>	<u>ELVidge</u>	<u>Garbage Recycling</u>	<u>1/4</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 62

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: ~~Yes~~ / No

DETAILS: Compacted garbage and covered on OD's

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: OCT 19/2019 TIME: 8:20 STAFF: John Stoffer

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: Yes / ~~No~~

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

2 1/2 loads of construction waste

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:30	Matisse	Garbage	3/4	Y
12:00	"	Recycling	3/4	Y

TOTAL COUNT OF HOUSEHOLD USERS: 74

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stoffer

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: OCT 12 / 2019 TIME: 4:30 STAFF: _____

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 138

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:
Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: OCT 16 / 2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / No	
Windblown Litter:	Yes / No	
Leachate Springs:	Yes / No	
Animals:	Yes / No	
Other:	Yes / No	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

wind storm lots of wind blown litter

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Home hardware Full load garbage, Home hardware full load cardboard

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:45	Stander	Garbage Recycling	FULL	Y
8:30	Fludige	Garbage Recycling	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 78

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Oct 17/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes/ No	<u>Heavy Rain</u>
Windblown Litter:	Yes/ No	
Leachate Springs:	Yes/ No	
Animals:	Yes/ No	
Other:	Yes/ No	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up windblown litter around bins and along entrance way

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Backhoe compacted steel bin and pushed garbage up

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>11:30</u>	<u>MATISSE</u>	<u>Garbage Recycling</u>	<u>FULL</u>	<u>✓</u>

TOTAL COUNT OF HOUSEHOLD USERS: 32

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Oct 19 / 2019 TIME: 4:40 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

- Ponded Water: Yes / ~~No~~ _____
- Windblown Litter: Yes / ~~No~~ _____
- Leachate Springs: Yes / ~~No~~ _____
- Animals: Yes / ~~No~~ _____
- Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 155

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Oct 21/2019 TIME: 8:55 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

- Ponded Water: Yes / ~~No~~ _____
- Windblown Litter: ~~Yes~~ / No _____
- Leachate Springs: Yes / ~~No~~ _____
- Animals: Yes / ~~No~~ _____
- Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up litter around bins and Along entrance way

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>11:05</u>	<u>Spander</u>	<u>Garbage Recycling</u>	<u>Full</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 60

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Oct 23 / 2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	<input checked="" type="checkbox"/> / <input type="checkbox"/>	<u>Heavy Rain</u>
Windblown Litter:	<input type="checkbox"/> / <input checked="" type="checkbox"/>	
Leachate Springs:	<input type="checkbox"/> / <input checked="" type="checkbox"/>	
Animals:	<input type="checkbox"/> / <input checked="" type="checkbox"/>	
Other:	<input type="checkbox"/> / <input checked="" type="checkbox"/>	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
<u>11:30</u>	<u>Unknowing</u>	<u>NOT from our Township</u>

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>8:35</u>	<u>ELVidge</u>	<u>Garbage Recycling</u>	<u>1/4</u>	<u>/</u>

TOTAL COUNT OF HOUSEHOLD USERS: 41

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: Garbage compacted and covered Oct 22/

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: OCT 24/2019 TIME: 8:15 STAFF: _____

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Home hardware Full load Garbage
4 loads Crush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:10	matisse	Garbage Recycling	Full	<input checked="" type="checkbox"/>
11:05	matisse	"	Full	<input checked="" type="checkbox"/>

TOTAL COUNT OF HOUSEHOLD USERS: 52

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Oct 26 / 2019 TIME: 4:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

8 Loads brush 2 1/2 loads construction wastes
2 Full Steel

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 151

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Oct 28 / 2019 TIME: 8:15 STAFF: John Tafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up windblown litter along entrance way and around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:55	Standard	Garbage Recycling	FULL	✓

TOTAL COUNT OF HOUSEHOLD USERS: 48

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Tafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: OCT 30/2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~
Windblown Litter: ~~Yes~~ / No
Leachate Springs: Yes / ~~No~~
Animals: Yes / ~~No~~
Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up windblown litter along entrance way and around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
12:25	Unknown	Not from our township

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
8:35	ELVidge	Garbage, Recycling	1/8	✓

TOTAL COUNT OF HOUSEHOLD USERS: 68

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: OCT 31 / 2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: Yes / ~~No~~ _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:45	Matisse	Garbage	Full	✓
12:05	"	Recycling	"	"

TOTAL COUNT OF HOUSEHOLD USERS: 35

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Nov 12/2019 TIME: 4:35 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

7 loads brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 172

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



Thousand Islands

Prince Street, P.O. Box 280
Lansdowne, ON K0E 1L0

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Nov 4 / 2019 TIME: 8:10 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up wind blown litter along entrance way and around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

6 loads brush 1 load furniture

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:30	Stanley	Garbage Recycling	Full	/

TOTAL COUNT OF HOUSEHOLD USERS: 102

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Nov 6/19 TIME: 830pm STAFF: Amy Popplewell

DEFICIENCIES OBSERVED:

Ponded Water: Yes / No

Windblown Litter: Yes / No

Leachate Springs: Yes / No

Animals: Yes / No

Other: Yes / No

Description / Location

Along bush & tall grass areas

Birds & rodents

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 84

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: bns, Active face + pickup

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: Site is clean + safe

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: Popplewell

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Nov 7/2019 TIME: 8:15 STAFF: John Stalder

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No
 Windblown Litter: Yes / No
 Leachate Springs: Yes / No
 Animals: Yes / No
 Other: Yes / No

RECOMMENDED ACTIONS / ACTIONS TAKEN:

If There is any windblown litter it has been covered over by snow

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

1 Full load scrap metal ~~load~~ 1 load construction waste 5 loads brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:10	matisse	Garbage, Recycling	Full	✓
11:25	"	"	"	✓

TOTAL COUNT OF HOUSEHOLD USERS: 39

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No
 IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No
 DETAILS: Garbage compacted and covered on mounds

APPLICATION OF DUST SUPPRESSANT: Yes / No
 DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No
 DETAILS: _____

COMPLAINTS RECEIVED: Yes / No
 If YES, Complaint File Number (s): _____

SIGNATURE: John Stalder

OFFICE USE:
 Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Nov 9/2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: Yes / ~~No~~ _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 120

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Nov 13/2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Home hardware full load of cardboard

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
8:45	ELVidge	Garbage Recycling	1/4	Y

TOTAL COUNT OF HOUSEHOLD USERS: 58

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:
Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Nov 14/2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: Yes / ~~No~~ _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Bachoe Pushed garbage and brush back

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:05	matisse	Garbage Recycling	2 full	Y
12:25	"	"	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 30

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
 IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
 DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
 DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
 DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
 If YES, Complaint File Number (s): _____

SIGNATURE: [Signature]

OFFICE USE:
 Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Nov 16/2019 TIME: _____ STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water: Yes / ~~No~~
 Windblown Litter: ~~Yes~~ / No
 Leachate Springs: Yes / ~~No~~
 Animals: Yes / ~~No~~
 Other: Yes / ~~No~~

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

1 Clean up card

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 135

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
 IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
 DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
 DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
 DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
 If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:
 Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Nov 18 / 2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up windblown litter along entrance way

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:30	Standex	Garbage Recycling	3/4	Y

TOTAL COUNT OF HOUSEHOLD USERS: 61

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Nov 20 / 2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: Yes / ~~No~~

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
8:30	EL vidge	Garbage Recycling	1/8	Y
9:35	Stander	BRUSH	1000	Y
1:15	"	"	"	Y

TOTAL COUNT OF HOUSEHOLD USERS: 61

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: ~~Yes~~ / No

DETAILS: Garbage compacted and covered Nov 19

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: _____ TIME: _____ STAFF: _____

DEFICIENCIES OBSERVED:

Ponded Water: Yes / No /

Windblown Litter: Yes / No /

Leachate Springs: Yes / No /

Animals: Yes / No /

Other: Yes / No /

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:50	maTisse	Garbage Recycls	FULL	Y
10:55	"	"	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 54

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: John Duffin

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Nov 23/2019 TIME: _____ STAFF: John Staffow

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 143

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
If YES, Complaint File Number (s): _____

SIGNATURE: John Staffow

OFFICE USE:
Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Nov 25/2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: ~~Yes~~ / No _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up windblown litter around bins and along entrance way

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Home hardware Full load garbage
2 loads construction waste

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:55	Stander	Garbage Recycling	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 54

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
 IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
 DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
 DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
 DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
 If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:
 Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Nov 27/2019 TIME: 8:35 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: Yes / ~~No~~

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

3 Full loads leaves 3 Full loads brush

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
8:40	ELVidge	Garbage Recycling	1/4	/

TOTAL COUNT OF HOUSEHOLD USERS: 58

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:
Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Nov 28/2019 TIME: 8:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up windblown litter along entrance way and around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:10	MATISSE	Garbage Recycling	FULL	Y

TOTAL COUNT OF HOUSEHOLD USERS: 47

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Nov 30/2019 TIME: 4:40 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: Yes / ~~No~~ _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

1 Full load construction waste

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 116

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Dec 2 / 2019 TIME: 8:30 STAFF: John Stallon

DEFICIENCIES OBSERVED:

Ponded Water: Yes / ~~No~~
Windblown Litter: Yes / ~~No~~
Leachate Springs: Yes / ~~No~~
Animals: Yes / ~~No~~
Other: Yes / ~~No~~

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
3:25	Stander	Garbage Recycling	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 33

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
If YES, Complaint File Number (s): _____

SIGNATURE: John Stallon

OFFICE USE:
Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Dec 4 / 2019 TIME: 8.25 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
8:30	ELvidge	Garbage Recycling	1/4	Y

TOTAL COUNT OF HOUSEHOLD USERS: 39

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: ~~Yes~~ / No

DETAILS: Garbage compacted and covered Dec 3

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____

Thousand Islands

DATE: Dec 5/19 TIME: 830am STAFF: Amy Popplewell

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No

Windblown Litter: Yes / No

Leachate Springs: Yes / No

Animals: Yes / No

Birds

Other: Yes / No

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:12	Willys	garbage + Recycling	10 + 10	✓
1:24	" Dial "	" "	" "	✓

TOTAL COUNT OF HOUSEHOLD USERS: 42

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To:

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: Bins + Active Face

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS:

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS:

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s):

SIGNATURE: Popplewell

OFFICE USE:

Date Reviewed: Reviewer: File Number:



DATE: Dec 1 / 2019 TIME: 4:30 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: Yes / ~~No~~

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 118

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Dec 9/2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:15	Stander	Garbage Recycling	1/2	✓

TOTAL COUNT OF HOUSEHOLD USERS: 50

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No
IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~
DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~
DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~
If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:
Date Reviewed: _____ Reviewer: _____ File Number: _____

...and Islands

DATE: Dec 11/2019 TIME: 8:25 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~
Windblown Litter: ~~Yes~~ / No
Leachate Springs: Yes / ~~No~~
Animals: Yes / ~~No~~
Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up LITTER around bins and along entrance way

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
8:30	ELVidge	Garbage Recycling	1/4	/

TOTAL COUNT OF HOUSEHOLD USERS: 33

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Dec 12 / 2019 TIME: 8:20 STAFF: John Stafton

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:30	Matisse	Garbage	FULL	✓
11:45	"	Recycling	"	✓

TOTAL COUNT OF HOUSEHOLD USERS: 49

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafton

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Dec 14/2019 TIME: 8:40 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: Yes / ~~No~~ _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Bachae compacted bins on Dec 12

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 109

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Dec 16/2019 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: Yes / ~~No~~

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

2 FULL brush loads

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10:50</u>	<u>Standen</u>	<u>Garbage, Recycling</u>	<u>full</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 60

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Dec 18/2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____

Windblown Litter: Yes / ~~No~~ _____

Leachate Springs: Yes / ~~No~~ _____

Animals: Yes / ~~No~~ _____

Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Home Hardware Full load garbage

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>8:30</u>	<u>EL vidge</u>	<u>Garbage Recycling</u>	<u>1/2</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 41

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: Garbage compacted and covered on Dec 17

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / ~~No~~

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Dec 19/2019 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~ _____
 Windblown Litter: Yes / ~~No~~ _____
 Leachate Springs: Yes / ~~No~~ _____
 Animals: Yes / ~~No~~ _____
 Other: Yes / ~~No~~ _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:30	MaTisse	Garbage Recycling	FULL	✓
11:45	"	"	"	✓

TOTAL COUNT OF HOUSEHOLD USERS: 47

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Dec 21 / 2019 TIME: 4:35 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: Yes / ~~No~~

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 144

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Dec 23/2019 TIME: 8:30 STAFF: John Staffor

DEFICIENCIES OBSERVED:

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: ~~Yes~~ / No

Other: Yes / ~~No~~

Description / Location

Burn cat from next-door

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Picked up wind blown litter Along entrance way and around bins

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>11:30</u>	<u>STANDER</u>	<u>Garbage Recycling</u>	<u>FULL</u>	<u>✓</u>

TOTAL COUNT OF HOUSEHOLD USERS: 71

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Staffor

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Dec 28 / 2019 TIME: 4:30 STAFF: John Stofson

DEFICIENCIES OBSERVED:

Ponded Water:	Yes / No	_____
Windblown Litter:	Yes / No	_____
Leachate Springs:	Yes / No	_____
Animals:	Yes / No	_____
Other:	Yes / No	_____

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:55	matisse	Garbage Recycling	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 151

AREA OF WASTE DISPOSAL: All waste sent to active face: ~~Yes~~ / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / ~~No~~

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / ~~No~~

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ~~Yes~~ / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If YES, Complaint File Number (s): _____

SIGNATURE: John Stofson

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



DATE: Dec 30 / 2019 TIME: _____ STAFF: _____

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No _____
 Windblown Litter: Yes / No _____
 Leachate Springs: Yes / No _____
 Animals: Yes / No _____
 Other: Yes / No _____

RECOMMENDED ACTIONS / ACTIONS TAKEN:

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
		Closed due to weather conditions

OTHER COMMENTS / OBSERVATIONS

WASTE DISPOSAL SITE DAILY INSPECTION FORM

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: _____

AREA OF WASTE DISPOSAL: All waste sent to active face: Yes / No

IF NO: Waste Sent To: _____

DESCRIPTION OF LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If YES, Complaint File Number (s): _____

SIGNATURE: _____

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____

Appendix G
Malroz Site Inspection

Briar Hill Site Inspection

Date: May 15/19
 Inspected by: RF/mw
 Weather Conditions: sunny (12°C)

Time: 10:30

Inspection Item	condition	notes
Signage is displayed per section 2 (2), (3), and (4) of the ECA.	yes	
Was a site attendant present?	yes	
Were any hazardous or liquid wastes observed being disposed of at the site?	no	e-waste bin,
Are recycling materials being placed in the appropriate bins?	yes	
Were vermin, vectors, dust or litter present?	yes	birds, litter present along fence lines onsite. Attendant had cleaned near gate and northern fence line.
Is litter present at the site? Has a schedule been set for removal if present.	yes, no Schedule (refer to note above)	
Are brush and clean wood segregated from other wastes?	yes	
Are wastes burned at the site?	no	
Is interim cover being applied to the site?	yes	every other Tuesday
Is the property locked outside of posted hours?	yes	
Drainage conditions (e.g. ponded water).	minor	refer to map
Are surfacewater features obstructed?	no	
Are there seeps present?	no	
What is the location of the active fill area?	Southwest side of property	refer to map

refer to figure 1 of the 2018 AMR.

Was waste observed outside of the approved fill area?	no	
Condition of the waste cap (Erosion, repairs needed?)	Good	
Were any unapproved wastes observed at the site?	no	
Are on-site structures in good condition?	Yes	Fence South of the Main gate IS not standing, it has been cut over and you can walk over heavy litter in this area
Were buildings on site monitored for methane gas, as per 8(1) of the ECA?	Yes CO2: NR/- PID: NR	- detected propane leak in morning → to fence

General Comments



Signature

Briar Hill Site Inspection

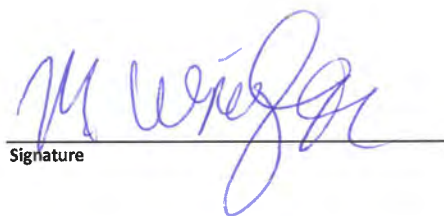
Date: Oct 9/19
 Inspected by: MW/BL
 Weather Conditions: Sunny (17°C)

Time: 14:40

Inspection Item	condition	notes
Signage is displayed per section 2 (2), (3), and (4) of the ECA.	Yes	
Was a site attendant present?	Yes	
Were any hazardous or liquid wastes observed being disposed of at the site?	No	
Are recycling materials being placed in the appropriate bins?	Yes	
Were vermin, vectors, dust or litter present?	No	
Is litter present at the site? Has a schedule been set for removal if present.	Some along northern fence	attendant has been cleaning every day looks really good.
Are brush and clean wood segregated from other wastes?.	Yes	
Are wastes burned at the site?	Yes	'
Is interim cover being applied to the site?	Yes	Every other Tuesday
Is the property locked outside of posted hours?	Yes	
Drainage conditions (e.g. ponded water).	Good	no ponded water
Are surfacewater features obstructed?	No	
Are there seeps present?	No	
What is the location of the active fill area?	SW of the attendant's shed	as on map.

Was waste observed outside of the approved fill area?	no	
Condition of the waste cap (Erosion, repairs needed?)	Good	
Were any unapproved wastes observed at the site?	no	
Are on-site structures in good condition?	yes	
Were buildings on site monitored for methane gas, as per 8(1) of the ECA?	yes	nr/nr

General Comments



Signature

Appendix H
Groundwater and Surface Water
Monitoring and Sampling Program

1036 Briar Hill

Monitoring Tasks:

GPS Wells and SW stations
 Photos of Wells and SW Stations
 Site inspection
 Gas monitoring around buildings or structures at the site
 Measure DTW and DTB in monitoring wells

Sampling Tasks:

Groundwater:

BW1, BW2(s/d), L10, L11, L2, OW1, OW6R1, OW7R1, OW15(s/d), OW17
 OW18, OW19, OW20, OW21, OW22, OW23, OW24, OW25
 Pump required for BW1 and BW2d

Total 20
 Lab criteria: ODWS

Surface Water:

Total SW1, SW4 & SW5
 Lab criteria: 3
 PWQO

Parameters	Groundwater		Surface Water	
Lab	Alkalinity	Arsenic	Alkalinity	Arsenic
	Ammonia	Barium	Ammonia	Barium
	BOD	Boron	Ammonia (UI)(N)	Boron
	COD	Cadmium	BOD	Cadmium
	DOC	Chromium	COD	Chromium
	Conductivity	Calcium	DOC	Calcium
	Hardness	Cobalt	Conductivity	Cobalt
	pH	Copper	Hardness	Copper
	Phenols	Iron	pH	Iron
	Phosphorous, total	Lead	Phenols	Lead
	TDS	Magnesium	Phosphorous, total	Magnesium
	TSS	Manganese	Phosphorous, total dissolved	Manganese
	Total Kjeldahl - N	Potassium	TDS	Nickel
	Chloride	Silver	TSS	Potassium
	Nitrate	Sodium	Total Kjeldahl - N	Silver
	Nitrite	Strontium	Chloride	Sodium
	Sulphate	Uranium	Nitrate	Strontium
	Mercury	Vanadium	Nitrite	Vanadium
	Aluminum	Zinc	Sulphate	Zinc
	Acetone	Ethylbenzene	Aluminum, dissolved	
	Benzene	Hexachlorobutadiene	Mercury, dissolved	
	Bromobenzene	Hexane		
	Bromodichloromethane	Isopropylbenzene		
	Bromoform	4-Isopropyltoluene		
	Bromomethane	Methyl Butyl Ketone		
	Carbon Tetrachloride	Methyl Ethyl Ketone		
	Chloroethane	Methyl Isobutyl Ketone		
	Chloroform	Methyl tert-butyl ether		
	Chloromethane	Chlorobenzene		
	2-Chlorotoluene	Naphthalene		
	4-Chlorotoluene	n-Butylbenzene		
	1,2-Dibromo-3-Chloropropane	n-Propylbenzene		
	Dibromochloromethane	sec-Butylbenzene		
	1,2-Dibromoethane	Styrene		
	Dibromomethane	tert-Butylbenzene		
	1,2-Dichlorobenzene	1,1,1,2-Tetrachloroethane		
	1,3-Dichlorobenzene	1,1,2,2-Tetrachloroethane		
	1,4-Dichlorobenzene	Tetrachloroethylene		
	Dichlorodifluoromethane	Toluene		
	1,1-Dichloroethane	1,2,3-Trichlorobenzene		
	1,2-Dichloroethane	1,2,4-Trichlorobenzene		
	1,1-Dichloroethylene	1,1,1-Trichloroethane		
	cis-1,2-Dichloroethylene	1,1,2-Trichloroethane		
	trans-1,2-Dichloroethylene	Trichloroethylene		
	Methylene Chloride	Trichlorofluoromethane		
	1,2-Dichloropropane	1,2,3-Trichloropropane		
	1,3-Dichloropropane	1,2,4-Trimethylbenzene		
	2,2-Dichloropropane	1,3,5-Trimethylbenzene		
	cis-1,3-Dichloropropene	Vinyl Chloride		
	trans-1,3-Dichloropropene	m/p-Xylene		
	1,3-Dichloropropene, total	o-Xylene		
	1,1-Dichloropropene	Xylenes, total		

Appendix I
Site Photographs



Photo 1: surface water location SW1 (May 2019)

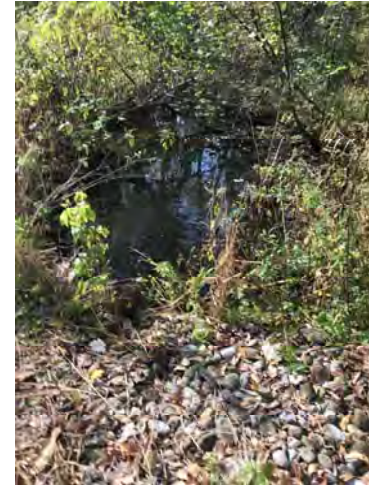


Photo 2: surface water location SW4 (October 2019)



Photo 3: surface water location SW5 (October 2019)



Photo 4: monitoring well BW1 (May 2019)



Photo 5: monitoring well BW2 (s/d) (May 2019)



Photo 6: monitoring well L2
(October 2019)



Photo 7: monitoring well L10
and L11 (October 2019)



Photo 8: monitoring well OW1
(October 2019)



Photo 9: monitoring well OW6R1
(October 2019)



Photo 10: monitoring well OW7R1
(October 2019)



Photo 11: monitoring wells OW15s (left) and OW15d
(right) (May 2019)



Photo 12: monitoring well OW17
(May 2019)



Photo 13: monitoring well OW18
(May 2019)



Photo 14: monitoring Well OW19
(October 2019)



Photo 15: monitoring well OW20
(October 2019)



Photo 16: monitoring well
OW22 (October 2019)



Photo 17: monitoring well OW23
(October 2019)



Photo 18: monitoring well OW24
(October 2019)



Photo 19: monitoring well OW25 (May 2019)



Photo 20: front entrance signage
(October 2019)



Photo 21: cardboard and paper bins, and the attendant shed (October 2019)



Photo 22: view of organic bins (October 2019)



Photo 23: organic bins and plastic bins (October 2019)



Photo 24: scrap metal bin (October 2019)



Photo 25: active waste filling area (October 2019)



Photo 26: Abandonment of monitoring well
L8 (October 2019)



Photo 27: Abandonment of monitoring well
OW7 (October 2019)



Photo 28: Abandonment of monitoring well
OW6 (October 2019)



Photo 29: culvert improvements at SW5
(October 2019)



Photo 30: culvert improvements at SW5
(October 2019)



Photo 31: Tile drain discharge improvements
near SW1 (October 2019)

Appendix J
Laboratory Certificates of Analyses

C.O.C.: G78110

REPORT No. B19-13420

Report To:

Malroz Engineering Inc.
308 Wellington Street, 2nd Floor
Kingston ON K7K 7A8 Canada

Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 14-May-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 29-May-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Surface Water

WATERWORKS NO.

Parameter	Units	R.L.	Client I.D.		19-W001	19-W004	19-W013	
			Reference Method	Date/Site Analyzed	B19-13420-1	B19-13420-2	B19-13420-3	
			Sample I.D.		14-May-19	14-May-19	14-May-19	
			Date Collected					
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	16-May-19/O	131	127	117	
pH @25°C	pH Units		SM 4500H	16-May-19/O	8.06	8.07	8.10	
Conductivity @25°C	µmho/cm	1	SM 2510B	16-May-19/O	316	308	281	
Chloride	mg/L	0.5	SM4110C	27-May-19/O	5.9	5.7	4.8	
Nitrite (N)	mg/L	0.05	SM4110C	27-May-19/O	< 0.05	< 0.05	< 0.05	
Nitrate (N)	mg/L	0.05	SM4110C	27-May-19/O	1.88	2.28	2.18	
Sulphate	mg/L	1	SM4110C	27-May-19/O	10	11	9	
BOD(5 day)	mg/L	3	SM 5210B	16-May-19/K	< 3	< 3	< 3	
Total Suspended Solids	mg/L	3	SM2540D	23-May-19/K	82	18	13	
o-Phosphate (P)	mg/L	0.002	PE4500-S	23-May-19/K	0.332	0.032	0.030	
Phosphorus-Total	mg/L	0.01	E3199A.1	22-May-19/K	0.08	0.08	0.07	
Total Kjeldahl Nitrogen	mg/L	0.1	E3199A.1	22-May-19/K	0.8	0.8	0.8	
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	23-May-19/K	0.08	0.09	0.06	
Ammonia (N)-unionized	mg/L	0.01	CALC	23-May-19/K	< 0.01	< 0.01	< 0.01	
Total Dissolved Solids	mg/L	3	SM 2540D	17-May-19/O	162	158	144	
Dissolved Organic Carbon	mg/L	0.2	EPA 415.1	23-May-19/O	10.2	10.7	12.0	
Phenolics	mg/L	0.001	MOEE 3179	24-May-19/K	< 0.001	< 0.001	< 0.001	
COD	mg/L	5	SM 5220D	28-May-19/O	31	26	30	
Hardness (as CaCO3)	mg/L	1	SM 3120	24-May-19/O	177	171	156	
Aluminum	mg/L	0.01	SM 3120	22-May-19/O	0.04	0.04	0.04	
Arsenic	mg/L	0.0001	EPA 200.8	23-May-19/O	0.0003	0.0003	0.0003	
Barium	mg/L	0.001	SM 3120	24-May-19/O	0.084	0.075	0.064	
Boron	mg/L	0.005	SM 3120	24-May-19/O	0.011	0.010	0.008	
Cadmium	mg/L	0.00015	EPA 200.8	23-May-19/O	0.000024	0.000030	0.000029	
Calcium	mg/L	0.02	SM 3120	24-May-19/O	42.5	40.3	36.3	
Chromium	mg/L	0.001	EPA 200.8	23-May-19/O	0.002	0.005	0.002	
Cobalt	mg/L	0.0001	EPA 200.8	23-May-19/O	0.0004	0.0006	0.0004	



R.L. = Reporting Limit

Test methods may be modified from specified reference method unless indicated by an *

Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
Lab Manager

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C.O.C.: G78110

REPORT No. B19-13420

Report To:

Malroz Engineering Inc.
 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada

Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 14-May-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 29-May-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Surface Water

WATERWORKS NO.

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed	Client I.D.			
					19-W001	19-W004	19-W013	
					Sample I.D.			
					Date Collected			
Copper	mg/L	0.0001	EPA 200.8	23-May-19/O	0.0021	0.0030	0.0025	
Iron	mg/L	0.005	SM 3120	24-May-19/O	0.754	0.783	0.639	
Lead	mg/L	0.00002	EPA 200.8	23-May-19/O	0.00039	0.00057	0.00038	
Magnesium	mg/L	0.02	SM 3120	24-May-19/O	14.4	13.9	12.6	
Manganese	mg/L	0.001	SM 3120	24-May-19/O	0.033	0.027	0.018	
Mercury	mg/L	0.00002	SM 3112 B	21-May-19/O	< 0.00002	< 0.00002	< 0.00002	
Nickel	mg/L	0.01	SM 3120	24-May-19/O	< 0.01	< 0.01	< 0.01	
Potassium	mg/L	0.1	SM 3120	24-May-19/O	1.2	1.1	0.9	
Silver	mg/L	0.0001	EPA 200.8	23-May-19/O	< 0.0001	< 0.0001	< 0.0001	
Sodium	mg/L	0.2	SM 3120	24-May-19/O	4.6	4.5	3.8	
Strontium	mg/L	0.001	SM 3120	24-May-19/O	0.164	0.154	0.142	
Vanadium	mg/L	0.005	SM 3120	24-May-19/O	< 0.005	< 0.005	< 0.005	
Zinc	mg/L	0.005	SM 3120	24-May-19/O	0.009	0.009	0.008	



Michelle Dubien
 Lab Manager

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REPORT No. B19-13421 (i)

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 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada
Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 14-May-19
 DATE REPORTED: 05-Jun-19
 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER: 1036
 WATERWORKS NO.

Client I.D.	19-W002	19-W003	19-W005	19-W006
Sample I.D.	B19-13421-1	B19-13421-2	B19-13421-3	B19-13421-4
Date Collected	14-May-19	14-May-19	14-May-19	14-May-19

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	16-May-19/O	463	531	235	245
pH @25°C	pH Units		SM 4500H	16-May-19/O	7.42	7.67	7.83	7.85
Conductivity @25°C	µmho/cm	1	SM 2510B	16-May-19/O	1150	1240	619	482
Chloride	mg/L	0.5	SM4110C	27-May-19/O	70.4	70.8	8.3	0.7
Nitrite (N)	mg/L	0.05	SM4110C	27-May-19/O	< 0.05	< 0.05	< 0.05	< 0.05
Nitrate (N)	mg/L	0.05	SM4110C	27-May-19/O	< 0.05	< 0.05	0.10	1.00
Sulphate	mg/L	1	SM4110C	27-May-19/O	46	46	74	6
BOD(5 day)	mg/L	3	SM 5210B	15-May-19/K	< 3	4	< 3	< 3
Total Suspended Solids	mg/L	3	SM2540D	23-May-19/K	9300	507000	750	660
Phosphorus-Total	mg/L	0.01	E3199A.1	30-May-19/K	3.92	534	0.39	0.17
Total Kjeldahl Nitrogen	mg/L	0.1	E3199A.1	30-May-19/K	1.3	48.1	0.7	0.1
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	24-May-19/K	0.90	0.03	0.34	0.10
TDS (Calc. from Cond.)	mg/L	1	Calc.	17-May-19	619	670	321	249
Dissolved Organic Carbon	mg/L	0.2	EPA 415.1	23-May-19/O	5.2	10.8	8.1	2.9
Phenolics	mg/L	0.002	MOEE 3179	24-May-19/K	< 0.002	< 0.002	< 0.002	< 0.002
COD	mg/L	5	SM 5220D	28-May-19/O	62	4500	26	18
Hardness (as CaCO3)	mg/L	1	SM 3120	22-May-19/O	595	695	203	284
Aluminum	mg/L	0.01	SM 3120	22-May-19/O	0.08	0.08	0.04	0.06
Arsenic	mg/L	0.0001	EPA 200.8	24-May-19/O	0.0008	0.0028	0.0018	< 0.0001
Barium	mg/L	0.001	SM 3120	22-May-19/O	0.477	0.454	0.105	0.540
Boron	mg/L	0.005	SM 3120	22-May-19/O	0.256	0.253	0.073	0.013
Cadmium	mg/L	0.000015	EPA 200.8	24-May-19/O	< 0.000015	< 0.000015	< 0.000015	< 0.000015
Calcium	mg/L	0.02	SM 3120	22-May-19/O	154	152	49.8	73.0
Chromium	mg/L	0.001	EPA 200.8	24-May-19/O	0.007	0.001	0.001	0.002
Cobalt	mg/L	0.0001	EPA 200.8	24-May-19/O	0.0004	0.0001	0.0002	< 0.0001
Copper	mg/L	0.0001	EPA 200.8	24-May-19/O	< 0.0001	0.0024	0.0008	0.0002
Iron	mg/L	0.005	SM 3120	22-May-19/O	1.87	1.99	3.35	0.011



R.L. = Reporting Limit

Test methods may be modified from specified reference method unless indicated by an *

Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
 Lab Manager

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C.O.C.: G78109

REPORT No. B19-13421 (i)

Report To:

Malroz Engineering Inc.
 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada
Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 14-May-19
 DATE REPORTED: 05-Jun-19
 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER: 1036
 WATERWORKS NO.

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed	Client I.D.	19-W002	19-W003	19-W005	19-W006
					Sample I.D.	19-W002	19-W003	19-W005	19-W006
Lead	mg/L	0.00002	EPA 200.8	24-May-19/O	B19-13421-1	0.00002	0.00015	0.00008	< 0.00002
Magnesium	mg/L	0.02	SM 3120	22-May-19/O	B19-13421-2	51.2	76.6	19.0	24.8
Manganese	mg/L	0.001	SM 3120	22-May-19/O	B19-13421-3	0.189	0.046	0.341	< 0.001
Mercury	mg/L	0.00002	SM 3112 B	22-May-19/O	B19-13421-4	< 0.00002	< 0.00002	< 0.00002	< 0.00002
Potassium	mg/L	0.1	SM 3120	22-May-19/O		9.4	3.5	1.1	1.3
Silver	mg/L	0.0001	EPA 200.8	24-May-19/O		< 0.0001	< 0.0001	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	22-May-19/O		41.4	41.2	72.7	3.7
Strontium	mg/L	0.001	SM 3120	22-May-19/O		0.594	0.886	0.413	0.087
Uranium	mg/L	0.00005	EPA 200.8	24-May-19/O		0.00213	< 0.00005	0.00217	0.00029
Vanadium	mg/L	0.005	SM 3120	22-May-19/O		< 0.005	0.005	< 0.005	< 0.005
Zinc	mg/L	0.005	SM 3120	22-May-19/O		< 0.005	< 0.005	< 0.005	< 0.005



Michelle Dubien
 Lab Manager

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SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Client I.D.		19-W007	19-W008	19-W009	19-W010
			Reference Method	Date/Site Analyzed	B19-13421-5	B19-13421-6	B19-13421-7	B19-13421-8
			Date Collected		14-May-19	14-May-19	14-May-19	14-May-19
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	16-May-19/O	198	191	227	289
pH @25°C	pH Units		SM 4500H	16-May-19/O	8.05	8.00	8.08	7.56
Conductivity @25°C	µmho/cm	1	SM 2510B	16-May-19/O	464	563	464	863
Chloride	mg/L	0.5	SM4110C	27-May-19/O	4.8	12.0	1.2	67.0
Nitrite (N)	mg/L	0.05	SM4110C	27-May-19/O	< 0.05	< 0.05	< 0.05	< 0.05
Nitrate (N)	mg/L	0.05	SM4110C	27-May-19/O	0.10	15.8	0.06	0.10
Sulphate	mg/L	1	SM4110C	27-May-19/O	35	15	21	51
BOD(5 day)	mg/L	3	SM 5210B	15-May-19/K	< 3	< 3	7	< 3
Total Suspended Solids	mg/L	3	SM2540D	23-May-19/K	4700	670	231000	2200
Phosphorus-Total	mg/L	0.01	E3199A.1	30-May-19/K	1.80	0.71	79.0	0.39
Total Kjeldahl Nitrogen	mg/L	0.1	E3199A.1	30-May-19/K	0.4	0.2	2.7	2.7
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	24-May-19/K	0.14	0.04	0.06	2.40
TDS (Calc. from Cond.)	mg/L	1	Calc.	17-May-19	240	292	240	456
Dissolved Organic Carbon	mg/L	0.2	EPA 415.1	23-May-19/O	2.9	2.6	14.8	9.0
Phenolics	mg/L	0.002	MOEE 3179	24-May-19/K	< 0.002	< 0.002	< 0.002	< 0.002
COD	mg/L	5	SM 5220D	28-May-19/O	34	24	1600	17
Hardness (as CaCO3)	mg/L	1	SM 3120	22-May-19/O	256	311	269	351
Aluminum	mg/L	0.01	SM 3120	22-May-19/O	0.04	0.06	0.04	0.06
Arsenic	mg/L	0.0001	EPA 200.8	24-May-19/O	0.0005	< 0.0001	0.0003	0.0002
Barium	mg/L	0.001	SM 3120	22-May-19/O	0.140	0.325	0.167	0.310
Boron	mg/L	0.005	SM 3120	22-May-19/O	0.068	0.023	0.007	0.204
Cadmium	mg/L	0.000015	EPA 200.8	24-May-19/O	< 0.000015	< 0.000015	< 0.000015	0.000031
Calcium	mg/L	0.02	SM 3120	22-May-19/O	56.2	75.7	58.8	101
Chromium	mg/L	0.001	EPA 200.8	24-May-19/O	< 0.001	0.002	< 0.001	0.001
Cobalt	mg/L	0.0001	EPA 200.8	24-May-19/O	< 0.0001	< 0.0001	< 0.0001	0.0049
Copper	mg/L	0.0001	EPA 200.8	24-May-19/O	0.0002	0.0002	< 0.0001	0.0021
Iron	mg/L	0.005	SM 3120	22-May-19/O	0.077	< 0.005	0.036	0.691

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Michelle Dubien
Lab Manager

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 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER: 1036
 WATERWORKS NO.

Client I.D.	19-W007	19-W008	19-W009	19-W010
Sample I.D.	B19-13421-5	B19-13421-6	B19-13421-7	B19-13421-8
Date Collected	14-May-19	14-May-19	14-May-19	14-May-19

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Lead	mg/L	0.00002	EPA 200.8	24-May-19/O	0.00004	< 0.00002	< 0.00002	0.00007
Magnesium	mg/L	0.02	SM 3120	22-May-19/O	28.1	29.6	29.7	23.9
Manganese	mg/L	0.001	SM 3120	22-May-19/O	0.013	< 0.001	0.017	0.448
Mercury	mg/L	0.00002	SM 3112 B	22-May-19/O	< 0.00002	< 0.00002	< 0.00002	< 0.00002
Potassium	mg/L	0.1	SM 3120	22-May-19/O	1.8	1.4	1.6	14.7
Silver	mg/L	0.0001	EPA 200.8	24-May-19/O	< 0.0001	< 0.0001	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	22-May-19/O	6.6	3.9	4.8	48.1
Strontium	mg/L	0.001	SM 3120	22-May-19/O	0.478	0.148	0.141	0.305
Uranium	mg/L	0.00005	EPA 200.8	24-May-19/O	0.00035	0.00071	0.00100	0.00036
Vanadium	mg/L	0.005	SM 3120	22-May-19/O	< 0.005	< 0.005	< 0.005	< 0.005
Zinc	mg/L	0.005	SM 3120	22-May-19/O	< 0.005	< 0.005	< 0.005	< 0.005



Michelle Dubien
 Lab Manager

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Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

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C.O.C.: G78109

REPORT No. B19-13421 (i)

Report To:

Malroz Engineering Inc.
 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada
Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 14-May-19
 DATE REPORTED: 05-Jun-19
 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER: 1036
 WATERWORKS NO.

Client I.D.	19-W011	19-W012	19-W014	19-W015
Sample I.D.	B19-13421-9	B19-13421-10	B19-13421-11	B19-13421-12
Date Collected	14-May-19	14-May-19	14-May-19	14-May-19

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	16-May-19/O	434	460	330	731
pH @25°C	pH Units		SM 4500H	16-May-19/O	7.64	7.41	7.68	7.15
Conductivity @25°C	µmho/cm	1	SM 2510B	16-May-19/O	1150	957	793	1760
Chloride	mg/L	0.5	SM4110C	27-May-19/O	93.0	13.5	19.7	109
Nitrite (N)	mg/L	0.05	SM4110C	27-May-19/O	< 0.05	< 0.05	< 0.05	< 0.05
Nitrate (N)	mg/L	0.05	SM4110C	27-May-19/O	0.88	3.30	7.15	< 0.05
Sulphate	mg/L	1	SM4110C	27-May-19/O	21	18	33	68
BOD(5 day)	mg/L	3	SM 5210B	15-May-19/K	< 3	< 3	< 3	< 3
Total Suspended Solids	mg/L	3	SM2540D	23-May-19/K	800	98	38000	36
Phosphorus-Total	mg/L	0.01	E3199A.1	30-May-19/K	0.62	0.13	3.90	0.05
Total Kjeldahl Nitrogen	mg/L	0.1	E3199A.1	30-May-19/K	0.3	0.5	0.5	12.5
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	24-May-19/K	0.04	0.03	0.05	10.5
TDS (Calc. from Cond.)	mg/L	1	Calc.	17-May-19	619	509	399	966
Dissolved Organic Carbon	mg/L	0.2	EPA 415.1	23-May-19/O	3.9	5.7	7.2	16.4
Phenolics	mg/L	0.002	MOEE 3179	24-May-19/K	< 0.002	< 0.002	< 0.002	< 0.002
COD	mg/L	5	SM 5220D	28-May-19/O	9	11	53	56
Hardness (as CaCO3)	mg/L	1	SM 3120	22-May-19/O	476	537	441	813
Aluminum	mg/L	0.01	SM 3120	22-May-19/O	0.08	0.08	0.07	0.10
Arsenic	mg/L	0.0001	EPA 200.8	24-May-19/O	< 0.0001	< 0.0001	0.0002	0.0002
Barium	mg/L	0.001	SM 3120	22-May-19/O	0.843	0.539	0.215	0.127
Boron	mg/L	0.005	SM 3120	22-May-19/O	0.070	0.067	0.035	1.22
Cadmium	mg/L	0.00015	EPA 200.8	24-May-19/O	< 0.00015	0.000056	< 0.00015	< 0.00015
Calcium	mg/L	0.02	SM 3120	22-May-19/O	133	159	108	209
Chromium	mg/L	0.001	EPA 200.8	24-May-19/O	< 0.001	0.002	0.002	0.002
Cobalt	mg/L	0.0001	EPA 200.8	24-May-19/O	0.0002	0.0013	0.0002	0.0004
Copper	mg/L	0.0001	EPA 200.8	24-May-19/O	0.0007	0.0017	0.0031	0.0023



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Michelle Dubien
 Lab Manager

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DATE RECEIVED: 14-May-19
 DATE REPORTED: 05-Jun-19
 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER: 1036
 WATERWORKS NO.

Client I.D.	19-W011	19-W012	19-W014	19-W015
Sample I.D.	B19-13421-9	B19-13421-10	B19-13421-11	B19-13421-12
Date Collected	14-May-19	14-May-19	14-May-19	14-May-19

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Iron	mg/L	0.005	SM 3120	22-May-19/O	0.008	< 0.005	< 0.005	8.15
Lead	mg/L	0.00002	EPA 200.8	24-May-19/O	< 0.00002	0.00004	< 0.00002	0.00013
Magnesium	mg/L	0.02	SM 3120	22-May-19/O	35.0	34.0	41.6	70.7
Manganese	mg/L	0.001	SM 3120	22-May-19/O	0.006	0.002	0.007	0.070
Mercury	mg/L	0.00002	SM 3112 B	22-May-19/O	< 0.00002	< 0.00002	< 0.00002	< 0.00002
Potassium	mg/L	0.1	SM 3120	22-May-19/O	2.8	6.7	15.4	36.7
Silver	mg/L	0.0001	EPA 200.8	24-May-19/O	< 0.0001	< 0.0001	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	22-May-19/O	87.3	8.5	7.7	86.3
Strontium	mg/L	0.001	SM 3120	22-May-19/O	0.295	0.311	0.224	0.888
Uranium	mg/L	0.00005	EPA 200.8	24-May-19/O	0.00047	0.00061	0.00245	0.00033
Vanadium	mg/L	0.005	SM 3120	22-May-19/O	< 0.005	< 0.005	< 0.005	0.006
Zinc	mg/L	0.005	SM 3120	22-May-19/O	< 0.005	0.013	< 0.005	< 0.005



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DATE RECEIVED: 14-May-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 05-Jun-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed	Client I.D.	19-W002	19-W003	19-W005	19-W006
					Sample I.D.	14-May-19	14-May-19	14-May-19	14-May-19
Acetone	µg/L	30	EPA 8260	24-May-19/R	B19-13421-1	< 30	< 30	< 30	< 30
Benzene	µg/L	0.5	EPA 8260	24-May-19/R	B19-13421-2	< 0.5	< 0.5	< 0.5	< 0.5
Bromobenzene	µg/L	0.4	EPA 8260	24-May-19/R	B19-13421-3	< 0.4	< 0.4	< 0.4	< 0.4
Bromodichloromethane	µg/L	2	EPA 8260	24-May-19/R	B19-13421-4	< 2	< 2	< 2	< 2
Bromoform	µg/L	5	EPA 8260	24-May-19/R		< 5	< 5	< 5	< 5
Bromomethane	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Carbon Tetrachloride	µg/L	0.2	EPA 8260	24-May-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Chloroethane	µg/L	3	EPA 8260	24-May-19/R		< 3	< 3	< 3	< 3
Chloroform	µg/L	1	EPA 8260	24-May-19/R		< 1	< 1	< 1	< 1
Chloromethane	µg/L	2	EPA 8260	24-May-19/R		< 2	< 2	< 2	< 2
Chlorotoluene,2-	µg/L	0.2	EPA 8260	24-May-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Chlorotoluene,4-	µg/L	0.2	EPA 8260	24-May-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	24-May-19/R		< 0.6	< 0.6	< 0.6	< 0.6
Dibromochloromethane	µg/L	2	EPA 8260	24-May-19/R		< 2	< 2	< 2	< 2
Dibromoethane,1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	24-May-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Dibromomethane	µg/L	0.1	EPA 8260	24-May-19/R		< 0.1	< 0.1	< 0.1	< 0.1
Dichlorobenzene,1,2-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,3-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,4-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichlorodifluoromethane	µg/L	2	EPA 8260	24-May-19/R		< 2	< 2	< 2	< 2
Dichloroethane,1,1-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethane,1,2-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethylene,1,1-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5



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 Lab Manager

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REPORT No. B19-13421 (ii)

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 308 Wellington Street, 2nd Floor
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Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 14-May-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 05-Jun-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Client I.D.		19-W002	19-W003	19-W005	19-W006
			Reference Method	Date/Site Analyzed	B19-13421-1	B19-13421-2	B19-13421-3	B19-13421-4
			Date Collected		14-May-19	14-May-19	14-May-19	14-May-19
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	< 5
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	05-Jun-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	05-Jun-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Ethylbenzene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Hexachlorobutadiene	µg/L	0.6	EPA 8260	24-May-19/R	< 0.6	< 0.6	< 0.6	< 0.6
Hexane	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	< 5
Isopropylbenzene	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Methyl Butyl Ketone	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	< 5
Methyl Ethyl Ketone	µg/L	20	EPA 8260	24-May-19/R	< 20	< 20	< 20	< 20
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	24-May-19/R	< 20	< 20	< 20	< 20
Methyl-t-butyl Ether	µg/L	2	EPA 8260	24-May-19/R	< 2	< 2	< 2	< 2
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Naphthalene	µg/L	0.4	EPA 8260	24-May-19/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Butylbenzene	µg/L	0.4	EPA 8260	24-May-19/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Propylbenzene	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	< 0.1
sec-Butylbenzene	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Styrene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
tert-Butylbenzene	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5



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JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER: 1036
 WATERWORKS NO.

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed	Client I.D.	19-W002	19-W003	19-W005	19-W006
					Sample I.D.	14-May-19	14-May-19	14-May-19	14-May-19
Tetrachloroethane,1,1,2,2-	µg/L	0.5	EPA 8260	24-May-19/R	B19-13421-1	< 0.5	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	24-May-19/R	B19-13421-2	1.9	0.8	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	24-May-19/R	B19-13421-3	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,3-	µg/L	0.5	EPA 8260	24-May-19/R	B19-13421-4	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,4-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,1-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,2-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	24-May-19/R		< 5	< 5	< 5	< 5
Trichloropropane,1,2,3-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Trimethylbenzene,1,2,4-	µg/L	1	EPA 8260	24-May-19/R		< 1	< 1	< 1	< 1
Trimethylbenzene,1,3,5-	µg/L	0.1	EPA 8260	24-May-19/R		< 0.1	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	24-May-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	24-May-19/R		< 1.0	< 1.0	< 1.0	< 1.0
Xylene, o-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Xylene, m,p,o-	µg/L	1.1	EPA 8260	05-Jun-19/R		< 1.1	< 1.1	< 1.1	< 1.1



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P.O. NUMBER: 1036

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed	Client I.D.	19-W007	19-W008	19-W009	19-W010
					Sample I.D.	19-W007	19-W008	19-W009	19-W010
					Date Collected	14-May-19	14-May-19	14-May-19	14-May-19
Acetone	µg/L	30	EPA 8260	24-May-19/R	B19-13421-5	< 30	< 30	< 30	< 30
Benzene	µg/L	0.5	EPA 8260	24-May-19/R	B19-13421-6	< 0.5	< 0.5	< 0.5	< 0.5
Bromobenzene	µg/L	0.4	EPA 8260	24-May-19/R	B19-13421-7	< 0.4	< 0.4	< 0.4	< 0.4
Bromodichloromethane	µg/L	2	EPA 8260	24-May-19/R	B19-13421-8	< 2	< 2	< 2	< 2
Bromoform	µg/L	5	EPA 8260	24-May-19/R		< 5	< 5	< 5	< 5
Bromomethane	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Carbon Tetrachloride	µg/L	0.2	EPA 8260	24-May-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Chloroethane	µg/L	3	EPA 8260	24-May-19/R		< 3	< 3	< 3	< 3
Chloroform	µg/L	1	EPA 8260	24-May-19/R		< 1	< 1	< 1	< 1
Chloromethane	µg/L	2	EPA 8260	24-May-19/R		< 2	< 2	< 2	< 2
Chlorotoluene,2-	µg/L	0.2	EPA 8260	24-May-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Chlorotoluene,4-	µg/L	0.2	EPA 8260	24-May-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	24-May-19/R		< 0.6	< 0.6	< 0.6	< 0.6
Dibromochloromethane	µg/L	2	EPA 8260	24-May-19/R		< 2	< 2	< 2	< 2
Dibromoethane,1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	24-May-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Dibromomethane	µg/L	0.1	EPA 8260	24-May-19/R		< 0.1	< 0.1	< 0.1	< 0.1
Dichlorobenzene,1,2-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,3-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,4-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichlorodifluoromethane	µg/L	2	EPA 8260	24-May-19/R		< 2	< 2	< 2	< 2
Dichloroethane,1,1-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethane,1,2-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethylene,1,1-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5



R.L. = Reporting Limit

Test methods may be modified from specified reference method unless indicated by an *

Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
 Lab Manager

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C.O.C.: G78109

REPORT No. B19-13421 (ii)

Report To:

Malroz Engineering Inc.
 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada

Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 14-May-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 05-Jun-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Client I.D.		19-W007	19-W008	19-W009	19-W010
			Reference Method	Date/Site Analyzed	B19-13421-5	B19-13421-6	B19-13421-7	B19-13421-8
			Date Collected		14-May-19	14-May-19	14-May-19	14-May-19
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	< 5
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	05-Jun-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	05-Jun-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Ethylbenzene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Hexachlorobutadiene	µg/L	0.6	EPA 8260	24-May-19/R	< 0.6	< 0.6	< 0.6	< 0.6
Hexane	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	< 5
Isopropylbenzene	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Methyl Butyl Ketone	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	< 5
Methyl Ethyl Ketone	µg/L	20	EPA 8260	24-May-19/R	< 20	< 20	< 20	< 20
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	24-May-19/R	< 20	< 20	< 20	< 20
Methyl-t-butyl Ether	µg/L	2	EPA 8260	24-May-19/R	< 2	< 2	< 2	< 2
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Naphthalene	µg/L	0.4	EPA 8260	24-May-19/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Butylbenzene	µg/L	0.4	EPA 8260	24-May-19/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Propylbenzene	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	< 0.1
sec-Butylbenzene	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Styrene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
tert-Butylbenzene	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5



R.L. = Reporting Limit

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Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
 Lab Manager

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C.O.C.: G78109

REPORT No. B19-13421 (ii)

Report To:

Malroz Engineering Inc.
 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada
Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 14-May-19
 DATE REPORTED: 05-Jun-19
 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER: 1036
 WATERWORKS NO.

Client I.D.	19-W007	19-W008	19-W009	19-W010
Sample I.D.	B19-13421-5	B19-13421-6	B19-13421-7	B19-13421-8
Date Collected	14-May-19	14-May-19	14-May-19	14-May-19

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
			EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Tetrachloroethane, 1,1,2,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene, 1,2,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene, 1,2,4-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane, 1,1,1-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane, 1,1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	< 5
Trichloropropane, 1,2,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trimethylbenzene, 1,2,4-	µg/L	1	EPA 8260	24-May-19/R	< 1	< 1	< 1	< 1
Trimethylbenzene, 1,3,5-	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	24-May-19/R	< 1.0	< 1.0	< 1.0	< 1.0
Xylene, o-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Xylene, m,p,o-	µg/L	1.1	EPA 8260	05-Jun-19/R	< 1.1	< 1.1	< 1.1	< 1.1



R.L. = Reporting Limit

Test methods may be modified from specified reference method unless indicated by an *

Site Analyzed=K-Kingston, W-Windsor, O-Ottawa, R-Richmond Hill, B-Barrie

Michelle Dubien
 Lab Manager

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C.O.C.: G78109

REPORT No. B19-13421 (ii)

Report To:

Malroz Engineering Inc.
 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada

Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 14-May-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 05-Jun-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed	Client I.D.	19-W011	19-W012	19-W014	19-W015
					Sample I.D.	B19-13421-9	B19-13421-10	B19-13421-11	B19-13421-12
Date Collected					14-May-19	14-May-19	14-May-19	14-May-19	14-May-19
Acetone	µg/L	30	EPA 8260	24-May-19/R	< 30	< 30	< 30	< 30	< 30
Benzene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5	< 0.5
Bromobenzene	µg/L	0.4	EPA 8260	24-May-19/R	< 0.4	< 0.4	< 0.4	< 0.4	< 0.4
Bromodichloromethane	µg/L	2	EPA 8260	24-May-19/R	< 2	< 2	< 2	< 2	< 2
Bromoform	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	< 5	< 5
Bromomethane	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5	< 0.5
Carbon Tetrachloride	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2	< 0.2
Chloroethane	µg/L	3	EPA 8260	24-May-19/R	< 3	< 3	< 3	< 3	< 3
Chloroform	µg/L	1	EPA 8260	24-May-19/R	< 1	< 1	< 1	< 1	< 1
Chloromethane	µg/L	2	EPA 8260	24-May-19/R	< 2	< 2	< 2	< 2	< 2
Chlorotoluene,2-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2	< 0.2
Chlorotoluene,4-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2	< 0.2
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	24-May-19/R	< 0.6	< 0.6	< 0.6	< 0.6	< 0.6
Dibromochloromethane	µg/L	2	EPA 8260	24-May-19/R	< 2	< 2	< 2	< 2	< 2
Dibromoethane,1,2-(Ethylene Dibromide)	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2	< 0.2
Dibromomethane	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	< 0.1	< 0.1
Dichlorobenzene,1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,4-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5	< 0.5
Dichlorodifluoromethane	µg/L	2	EPA 8260	24-May-19/R	< 2	< 2	< 2	< 2	< 2
Dichloroethane,1,1-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethane,1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethylene,1,1-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5	0.8
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5	< 0.5



R.L. = Reporting Limit

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Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
 Lab Manager

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C.O.C.: G78109

REPORT No. B19-13421 (ii)

Report To:

Malroz Engineering Inc.
308 Wellington Street, 2nd Floor
Kingston ON K7K 7A8 Canada

Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 14-May-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 05-Jun-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed	Client I.D.			
					19-W011	19-W012	19-W014	19-W015
					Sample I.D.			
					Date Collected			
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	< 5
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	05-Jun-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	05-Jun-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Ethylbenzene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Hexachlorobutadiene	µg/L	0.6	EPA 8260	24-May-19/R	< 0.6	< 0.6	< 0.6	< 0.6
Hexane	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	< 5
Isopropylbenzene	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Methyl Butyl Ketone	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	< 5
Methyl Ethyl Ketone	µg/L	20	EPA 8260	24-May-19/R	< 20	< 20	< 20	< 20
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	24-May-19/R	< 20	< 20	< 20	< 20
Methyl-t-butyl Ether	µg/L	2	EPA 8260	24-May-19/R	< 2	< 2	< 2	< 2
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Naphthalene	µg/L	0.4	EPA 8260	24-May-19/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Butylbenzene	µg/L	0.4	EPA 8260	24-May-19/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Propylbenzene	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	< 0.1
sec-Butylbenzene	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Styrene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
tert-Butylbenzene	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	< 0.1



R.L. = Reporting Limit

Test methods may be modified from specified reference method unless indicated by an *

Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
Lab Manager

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C.O.C.: G78109

REPORT No. B19-13421 (ii)

Report To:

Malroz Engineering Inc.
 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada
Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 14-May-19
 DATE REPORTED: 05-Jun-19
 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER: 1036
 WATERWORKS NO.

Client I.D.	19-W011	19-W012	19-W014	19-W015
Sample I.D.	B19-13421-9	B19-13421-10	B19-13421-11	B19-13421-12
Date Collected	14-May-19	14-May-19	14-May-19	14-May-19

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Tetrachloroethane,1,1,2,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,4-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,1-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	< 5
Trichloropropane,1,2,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trimethylbenzene,1,2,4-	µg/L	1	EPA 8260	24-May-19/R	< 1	< 1	< 1	< 1
Trimethylbenzene,1,3,5-	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	24-May-19/R	< 1.0	< 1.0	< 1.0	< 1.0
Xylene, o-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Xylene, m,p,o-	µg/L	1.1	EPA 8260	05-Jun-19/R	< 1.1	< 1.1	< 1.1	< 1.1



Michelle Dubien
 Lab Manager

R.L. = Reporting Limit

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Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

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C.O.C.: G78111

REPORT No. B19-13596 (i)

Report To:

Malroz Engineering Inc.
308 Wellington Street, 2nd Floor
Kingston ON K7K 7A8 Canada

Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 15-May-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 05-Jun-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Client I.D.		19-W016	19-W017	19-W018	19-W019
			Reference Method	Date/Site Analyzed	B19-13596-1	B19-13596-2	B19-13596-3	B19-13596-4
			Date Collected		15-May-19	15-May-19	15-May-19	15-May-19
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	17-May-19/O	394	495	353	372
pH @25°C	pH Units		SM 4500H	17-May-19/O	7.64	7.28	7.64	7.58
Conductivity @25°C	µmho/cm	1	SM 2510B	17-May-19/O	980	1340	815	1580
Chloride	mg/L	0.5	SM4110C	28-May-19/O	52.8	92.7	46.1	280
Nitrite (N)	mg/L	0.05	SM4110C	28-May-19/O	< 0.05	< 0.05	< 0.05	< 0.05
Nitrate (N)	mg/L	0.05	SM4110C	28-May-19/O	0.17	0.17	0.33	1.99
Sulphate	mg/L	1	SM4110C	28-May-19/O	48	63	5	24
BOD(5 day)	mg/L	3	SM 5210B	16-May-19/K	< 3	7	< 3	< 3
Total Suspended Solids	mg/L	3	SM2540D	28-May-19/K	7	50	1460	280
Phosphorus-Total	mg/L	0.01	E3199A.1	30-May-19/K	< 0.01	0.24	0.85	0.15
Total Kjeldahl Nitrogen	mg/L	0.1	E3199A.1	30-May-19/K	1.3	8.3	0.7	0.3
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	24-May-19/K	0.95	4.75	0.05	0.03
TDS (Calc. from Cond.)	mg/L	1	Calc.	21-May-19	522	727	429	863
Dissolved Organic Carbon	mg/L	0.2	EPA 415.1	27-May-19/O	7.7	21.5	6.1	4.6
Phenolics	mg/L	0.002	MOEE 3179	24-May-19/K	< 0.002	< 0.002	< 0.002	< 0.002
COD	mg/L	5	SM 5220D	29-May-19/O	19	87	47	36
Hardness (as CaCO3)	mg/L	1	SM 3120	23-May-19/O	443	459	413	571
Aluminum	mg/L	0.01	SM 3120	23-May-19/O	0.07	0.07	0.06	0.08
Arsenic	mg/L	0.0001	EPA 200.8	24-May-19/O	0.0002	0.0016	< 0.0001	< 0.0001
Barium	mg/L	0.001	SM 3120	23-May-19/O	0.143	0.293	0.394	0.643
Boron	mg/L	0.005	SM 3120	23-May-19/O	0.742	0.415	0.010	0.040
Cadmium	mg/L	0.000015	EPA 200.8	24-May-19/O	< 0.000015	< 0.000015	< 0.000015	< 0.000015
Calcium	mg/L	0.02	SM 3120	23-May-19/O	116	123	117	156
Chromium	mg/L	0.001	EPA 200.8	24-May-19/O	0.046	0.002	0.001	0.002
Cobalt	mg/L	0.0001	EPA 200.8	24-May-19/O	0.0002	0.0011	< 0.0001	< 0.0001
Copper	mg/L	0.0001	EPA 200.8	24-May-19/O	0.0002	0.0003	0.0003	0.0018
Iron	mg/L	0.005	SM 3120	23-May-19/O	0.803	17.7	0.009	< 0.005



R.L. = Reporting Limit

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Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
Lab Manager

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C.O.C.: G78111

REPORT No. B19-13596 (i)

Report To:

Malroz Engineering Inc.
 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada
Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 15-May-19
 DATE REPORTED: 05-Jun-19
 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER: 1036
 WATERWORKS NO.

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed	Client I.D.	19-W016	19-W017	19-W018	19-W019
					Sample I.D.	19-W016	19-W017	19-W018	19-W019
Date Collected					15-May-19	15-May-19	15-May-19	15-May-19	15-May-19
Lead	mg/L	0.00002	EPA 200.8	24-May-19/O	0.00003	0.00018	< 0.00002	0.00009	
Magnesium	mg/L	0.02	SM 3120	23-May-19/O	37.2	36.9	29.4	44.0	
Manganese	mg/L	0.001	SM 3120	23-May-19/O	0.152	1.24	< 0.001	< 0.001	
Mercury	mg/L	0.00002	SM 3112 B	22-May-19/O	< 0.00002	< 0.00002	< 0.00002	< 0.00002	
Potassium	mg/L	0.1	SM 3120	23-May-19/O	4.5	50.8	1.2	3.3	
Silver	mg/L	0.0001	EPA 200.8	27-May-19/O	< 0.0001	< 0.0001	< 0.0001	< 0.0001	
Sodium	mg/L	0.2	SM 3120	23-May-19/O	40.2	92.5	13.0	95.7	
Strontium	mg/L	0.001	SM 3120	23-May-19/O	3.22	0.564	0.167	0.235	
Uranium	mg/L	0.00005	EPA 200.8	24-May-19/O	0.00125	0.00071	0.00019	0.00066	
Vanadium	mg/L	0.005	SM 3120	23-May-19/O	< 0.005	< 0.005	< 0.005	< 0.005	
Zinc	mg/L	0.005	SM 3120	23-May-19/O	< 0.005	< 0.005	< 0.005	< 0.005	



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JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 05-Jun-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Client I.D.		19-W020	19-W021	19-W022	
			Sample I.D.	Date Collected	B19-13596-5	15-May-19	B19-13596-6	
Reference Method	Date/Site Analyzed							
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	17-May-19/O	253	195	293	
pH @25°C	pH Units		SM 4500H	17-May-19/O	7.84	7.94	7.89	
Conductivity @25°C	µmho/cm	1	SM 2510B	17-May-19/O	997	510	699	
Chloride	mg/L	0.5	SM4110C	28-May-19/O	78.9	31.9	17.4	
Nitrite (N)	mg/L	0.05	SM4110C	28-May-19/O	< 0.05	< 0.05	< 0.05	
Nitrate (N)	mg/L	0.05	SM4110C	28-May-19/O	9.85	0.46	0.19	
Sulphate	mg/L	1	SM4110C	28-May-19/O	99	16	51	
BOD(5 day)	mg/L	3	SM 5210B	16-May-19/K	< 3	< 3	< 3	
Total Suspended Solids	mg/L	3	SM2540D	28-May-19/K	585	3	13900	
Phosphorus-Total	mg/L	0.01	E3199A.1	30-May-19/K	0.22	< 0.01	1.45	
Total Kjeldahl Nitrogen	mg/L	0.1	E3199A.1	30-May-19/K	0.4	0.1	0.4	
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	24-May-19/K	0.04	0.02	0.07	
TDS (Calc. from Cond.)	mg/L	1	Calc.	21-May-19	532	264	363	
Dissolved Organic Carbon	mg/L	0.2	EPA 415.1	27-May-19/O	6.2	3.9	7.9	
Phenolics	mg/L	0.002	MOEE 3179	24-May-19/K	< 0.002	< 0.002	< 0.002	
COD	mg/L	5	SM 5220D	29-May-19/O	16	6	40	
Hardness (as CaCO3)	mg/L	1	SM 3120	23-May-19/O	277	245	369	
Aluminum	mg/L	0.01	SM 3120	23-May-19/O	0.05	0.05	0.05	
Arsenic	mg/L	0.0001	EPA 200.8	24-May-19/O	0.0005	0.0001	< 0.0001	
Barium	mg/L	0.001	SM 3120	23-May-19/O	0.025	0.130	0.277	
Boron	mg/L	0.005	SM 3120	23-May-19/O	0.014	< 0.005	0.025	
Cadmium	mg/L	0.00015	EPA 200.8	24-May-19/O	0.000047	< 0.000015	0.000018	
Calcium	mg/L	0.02	SM 3120	23-May-19/O	70.7	62.1	86.8	
Chromium	mg/L	0.001	EPA 200.8	24-May-19/O	< 0.001	0.001	0.002	
Cobalt	mg/L	0.0001	EPA 200.8	24-May-19/O	0.0001	< 0.0001	0.0002	
Copper	mg/L	0.0001	EPA 200.8	24-May-19/O	0.0014	0.0011	0.0002	
Iron	mg/L	0.005	SM 3120	23-May-19/O	< 0.005	0.008	0.008	



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Michelle Dubien
Lab Manager

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Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
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 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 15-May-19
 DATE REPORTED: 05-Jun-19
 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER: 1036
 WATERWORKS NO.

Client I.D.	19-W020	19-W021	19-W022
Sample I.D.	B19-13596-5	B19-13596-6	B19-13596-7
Date Collected	15-May-19	15-May-19	15-May-19

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Lead	mg/L	0.00002	EPA 200.8	24-May-19/O	0.00009	0.00014	< 0.00002	
Magnesium	mg/L	0.02	SM 3120	23-May-19/O	24.4	21.8	37.1	
Manganese	mg/L	0.001	SM 3120	23-May-19/O	0.004	0.005	0.083	
Mercury	mg/L	0.00002	SM 3112 B	22-May-19/O	< 0.00002	< 0.00002	< 0.00002	
Potassium	mg/L	0.1	SM 3120	23-May-19/O	3.1	1.6	1.7	
Silver	mg/L	0.0001	EPA 200.8	27-May-19/O	< 0.0001	< 0.0001	< 0.0001	
Sodium	mg/L	0.2	SM 3120	23-May-19/O	113	9.6	9.2	
Strontium	mg/L	0.001	SM 3120	23-May-19/O	0.214	0.135	0.314	
Uranium	mg/L	0.00005	EPA 200.8	24-May-19/O	0.00966	0.00084	0.00053	
Vanadium	mg/L	0.005	SM 3120	23-May-19/O	< 0.005	< 0.005	< 0.005	
Zinc	mg/L	0.005	SM 3120	23-May-19/O	0.007	0.006	< 0.005	



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 Lab Manager

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REPORT No. B19-13596 (ii)

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DATE RECEIVED: 15-May-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 05-Jun-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed	Client I.D.	19-W016	19-W017	19-W018	19-W019
					Sample I.D.	15-May-19	15-May-19	15-May-19	15-May-19
Acetone	µg/L	30	EPA 8260	24-May-19/R	B19-13596-1	< 30	< 30	< 30	< 30
Benzene	µg/L	0.5	EPA 8260	24-May-19/R	B19-13596-2	< 0.5	< 0.5	< 0.5	< 0.5
Bromobenzene	µg/L	0.4	EPA 8260	24-May-19/R	B19-13596-3	< 0.4	< 0.4	< 0.4	< 0.4
Bromodichloromethane	µg/L	2	EPA 8260	24-May-19/R	B19-13596-4	< 2	< 2	< 2	< 2
Bromoform	µg/L	5	EPA 8260	24-May-19/R		< 5	< 5	< 5	< 5
Bromomethane	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Carbon Tetrachloride	µg/L	0.2	EPA 8260	24-May-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Chloroethane	µg/L	3	EPA 8260	24-May-19/R		< 3	< 3	< 3	< 3
Chloroform	µg/L	1	EPA 8260	24-May-19/R		< 1	< 1	< 1	< 1
Chloromethane	µg/L	2	EPA 8260	24-May-19/R		< 2	< 2	< 2	< 2
Chlorotoluene,2-	µg/L	0.2	EPA 8260	24-May-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Chlorotoluene,4-	µg/L	0.2	EPA 8260	24-May-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	24-May-19/R		< 0.6	< 0.6	< 0.6	< 0.6
Dibromochloromethane	µg/L	2	EPA 8260	24-May-19/R		< 2	< 2	< 2	< 2
Dibromoethane,1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	24-May-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Dibromomethane	µg/L	0.1	EPA 8260	24-May-19/R		< 0.1	< 0.1	< 0.1	< 0.1
Dichlorobenzene,1,2-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,3-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,4-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	1.8	< 0.5	< 0.5
Dichlorodifluoromethane	µg/L	2	EPA 8260	24-May-19/R		< 2	< 2	< 2	< 2
Dichloroethane,1,1-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	8.3	< 0.5	< 0.5
Dichloroethane,1,2-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethylene,1,1-	µg/L	0.5	EPA 8260	24-May-19/R		< 0.5	< 0.5	< 0.5	< 0.5



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Michelle Dubien
 Lab Manager

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REPORT No. B19-13596 (ii)

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DATE RECEIVED: 15-May-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 05-Jun-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed	Client I.D.			
					19-W016	19-W017	19-W018	19-W019
					Sample I.D.	Sample I.D.	Sample I.D.	Sample I.D.
					Date Collected	Date Collected	Date Collected	Date Collected
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	< 5
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Ethylbenzene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Hexachlorobutadiene	µg/L	0.6	EPA 8260	24-May-19/R	< 0.6	< 0.6	< 0.6	< 0.6
Hexane	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	< 5
Isopropylbenzene	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	0.2	< 0.2	< 0.2
Methyl Butyl Ketone	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	< 5
Methyl Ethyl Ketone	µg/L	20	EPA 8260	24-May-19/R	< 20	< 20	< 20	< 20
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	24-May-19/R	< 20	< 20	< 20	< 20
Methyl-t-butyl Ether	µg/L	2	EPA 8260	24-May-19/R	< 2	< 2	< 2	< 2
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Naphthalene	µg/L	0.4	EPA 8260	24-May-19/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Butylbenzene	µg/L	0.4	EPA 8260	24-May-19/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Propylbenzene	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	< 0.1
sec-Butylbenzene	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Styrene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
tert-Butylbenzene	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5



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 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER: 1036
 WATERWORKS NO.

Client I.D.	19-W016	19-W017	19-W018	19-W019
Sample I.D.	B19-13596-1	B19-13596-2	B19-13596-3	B19-13596-4
Date Collected	15-May-19	15-May-19	15-May-19	15-May-19

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
			EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Tetrachloroethane,1,1,2,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,4-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,1-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	1.7	< 0.5	< 0.5
Trichloroethane,1,1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	< 5
Trichloropropane,1,2,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trimethylbenzene,1,2,4-	µg/L	1	EPA 8260	24-May-19/R	< 1	< 1	< 1	< 1
Trimethylbenzene,1,3,5-	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	24-May-19/R	< 1.0	< 1.0	< 1.0	< 1.0
Xylene, o-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Xylene, m,p,o-	µg/L	1.1	EPA 8260	24-May-19/R	< 1.1	< 1.1	< 1.1	< 1.1



R.L. = Reporting Limit

Test methods may be modified from specified reference method unless indicated by an *

Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
 Lab Manager

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior consent from Caduceon Environmental Laboratories.

C.O.C.: G78111

REPORT No. B19-13596 (ii)

Report To:

Malroz Engineering Inc.
 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada

Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 15-May-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 05-Jun-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed	Client I.D.				
					19-W020	19-W021	19-W022		
					Sample I.D.	B19-13596-5	B19-13596-6	B19-13596-7	
					Date Collected	15-May-19	15-May-19	15-May-19	
Acetone	µg/L	30	EPA 8260	24-May-19/R	< 30	< 30	< 30		
Benzene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5		
Bromobenzene	µg/L	0.4	EPA 8260	24-May-19/R	< 0.4	< 0.4	< 0.4		
Bromodichloromethane	µg/L	2	EPA 8260	24-May-19/R	< 2	< 2	< 2		
Bromoform	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5		
Bromomethane	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5		
Carbon Tetrachloride	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2		
Chloroethane	µg/L	3	EPA 8260	24-May-19/R	< 3	< 3	< 3		
Chloroform	µg/L	1	EPA 8260	24-May-19/R	< 1	< 1	< 1		
Chloromethane	µg/L	2	EPA 8260	24-May-19/R	< 2	< 2	< 2		
Chlorotoluene,2-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2		
Chlorotoluene,4-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2		
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	24-May-19/R	< 0.6	< 0.6	< 0.6		
Dibromochloromethane	µg/L	2	EPA 8260	24-May-19/R	< 2	< 2	< 2		
Dibromoethane,1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2		
Dibromomethane	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1		
Dichlorobenzene,1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5		
Dichlorobenzene,1,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5		
Dichlorobenzene,1,4-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5		
Dichlorodifluoromethane	µg/L	2	EPA 8260	24-May-19/R	< 2	< 2	< 2		
Dichloroethane,1,1-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5		
Dichloroethane,1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5		
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5		
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5		
Dichloroethylene,1,1-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5		



R.L. = Reporting Limit

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Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
 Lab Manager

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C.O.C.: G78111

REPORT No. B19-13596 (ii)

Report To:

Malroz Engineering Inc.
 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada

Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 15-May-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 05-Jun-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Client I.D.		19-W020	19-W021	19-W022	
			Sample I.D.	Date Collected	B19-13596-5	B19-13596-6	B19-13596-7	
Reference Method	Date/Site Analyzed							
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	
Ethylbenzene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	
Hexachlorobutadiene	µg/L	0.6	EPA 8260	24-May-19/R	< 0.6	< 0.6	< 0.6	
Hexane	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	
Isopropylbenzene	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2	
Methyl Butyl Ketone	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5	
Methyl Ethyl Ketone	µg/L	20	EPA 8260	24-May-19/R	< 20	< 20	< 20	
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	24-May-19/R	< 20	< 20	< 20	
Methyl-t-butyl Ether	µg/L	2	EPA 8260	24-May-19/R	< 2	< 2	< 2	
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	
Naphthalene	µg/L	0.4	EPA 8260	24-May-19/R	< 0.4	< 0.4	< 0.4	
n-Butylbenzene	µg/L	0.4	EPA 8260	24-May-19/R	< 0.4	< 0.4	< 0.4	
n-Propylbenzene	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	
sec-Butylbenzene	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	
Styrene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	
tert-Butylbenzene	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1	
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5	



R.L. = Reporting Limit

Test methods may be modified from specified reference method unless indicated by an *

Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
 Lab Manager

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C.O.C.: G78111

REPORT No. B19-13596 (ii)

Report To:

Malroz Engineering Inc.
 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada
Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 15-May-19
 DATE REPORTED: 05-Jun-19
 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER: 1036
 WATERWORKS NO.

Client I.D.	19-W020	19-W021	19-W022
Sample I.D.	B19-13596-5	B19-13596-6	B19-13596-7
Date Collected	15-May-19	15-May-19	15-May-19

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Tetrachloroethane,1,1,2,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,4-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,1-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,2-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	24-May-19/R	< 5	< 5	< 5
Trichloropropane,1,2,3-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5
Trimethylbenzene,1,2,4-	µg/L	1	EPA 8260	24-May-19/R	< 1	< 1	< 1
Trimethylbenzene,1,3,5-	µg/L	0.1	EPA 8260	24-May-19/R	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	24-May-19/R	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	24-May-19/R	< 1.0	< 1.0	< 1.0
Xylene, o-	µg/L	0.5	EPA 8260	24-May-19/R	< 0.5	< 0.5	< 0.5
Xylene, m,p,o-	µg/L	1.1	EPA 8260	24-May-19/R	< 1.1	< 1.1	< 1.1



Michelle Dubien
 Lab Manager

R.L. = Reporting Limit

Test methods may be modified from specified reference method unless indicated by an *

Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

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C.O.C.: G91340

REPORT No. B19-32631

Report To:

Malroz Engineering Inc.
 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada

Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 10-Oct-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 25-Oct-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Surface Water

WATERWORKS NO.

Client I.D.	19-W023	19-W024	19-W035
Sample I.D.	B19-32631-1	B19-32631-2	B19-32631-3
Date Collected	09-Oct-19	09-Oct-19	09-Oct-19

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	10-Oct-19/O	228	227	190	
pH @25°C	pH Units		SM 4500H	10-Oct-19/O	8.10	8.14	8.07	
Conductivity @25°C	µmho/cm	1	SM 2510B	10-Oct-19/O	519	518	439	
Chloride	mg/L	0.5	SM4110C	18-Oct-19/O	14.9	15.9	7.2	
Nitrite (N)	mg/L	0.05	SM4110C	18-Oct-19/O	< 0.05	< 0.05	< 0.05	
Nitrate (N)	mg/L	0.05	SM4110C	18-Oct-19/O	0.30	0.33	0.26	
Sulphate	mg/L	1	SM4110C	18-Oct-19/O	27	25	26	
BOD(5 day)	mg/L	3	SM 5210B	10-Oct-19/K	< 3	< 3	< 3	
Total Suspended Solids	mg/L	3	SM2540D	11-Oct-19/K	< 3	4	1520	
o-Phosphate (P)	mg/L	0.002	PE4500-S	11-Oct-19/K	0.017	0.021	0.038	
Phosphorus-Total	mg/L	0.01	E3199A.1	11-Oct-19/K	0.04	0.04	0.07	
Total Kjeldahl Nitrogen	mg/L	0.1	E3199A.1	11-Oct-19/K	0.6	0.7	0.8	
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	11-Oct-19/K	0.16	0.23	0.13	
Ammonia (N)-unionized	mg/L	0.01	CALC	11-Oct-19/K	0.01	0.02	< 0.01	
Total Dissolved Solids	mg/L	3	SM 2540D	15-Oct-19/O	269	268	227	
Dissolved Organic Carbon	mg/L	0.2	EPA 415.1	16-Oct-19/O	< 0.2	< 0.2	< 0.2	
Phenolics	mg/L	0.001	MOEE 3179	11-Oct-19/K	< 0.001	< 0.001	< 0.001	
COD	mg/L	5	SM 5220D	21-Oct-19/O	26	20	35	
Hardness (as CaCO3)	mg/L	1	SM 3120	15-Oct-19/O	275	261	229	
Aluminum	mg/L	0.01	SM 3120	16-Oct-19/O	0.05	0.05	0.04	
Arsenic	mg/L	0.0001	EPA 200.8	15-Oct-19/O	0.0003	0.0003	0.0003	
Barium	mg/L	0.001	SM 3120	15-Oct-19/O	0.172	0.168	0.124	
Boron	mg/L	0.005	SM 3120	15-Oct-19/O	0.033	0.036	0.009	
Cadmium	mg/L	0.000015	EPA 200.8	15-Oct-19/O	< 0.000015	< 0.000015	0.000025	
Calcium	mg/L	0.02	SM 3120	15-Oct-19/O	69.4	65.6	57.1	
Chromium	mg/L	0.001	EPA 200.8	15-Oct-19/O	< 0.001	< 0.001	< 0.001	
Cobalt	mg/L	0.0001	EPA 200.8	15-Oct-19/O	0.0002	0.0004	0.0003	



R.L. = Reporting Limit

Test methods may be modified from specified reference method unless indicated by an *

Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
 Lab Manager

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C.O.C.: G91340

REPORT No. B19-32631

Report To:

Malroz Engineering Inc.
 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada

Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 10-Oct-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 25-Oct-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Surface Water

WATERWORKS NO.

Client I.D.	19-W023	19-W024	19-W035
Sample I.D.	B19-32631-1	B19-32631-2	B19-32631-3
Date Collected	09-Oct-19	09-Oct-19	09-Oct-19

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Copper	mg/L	0.0001	EPA 200.8	15-Oct-19/O	0.0004	0.0005	0.0008	
Iron	mg/L	0.005	SM 3120	15-Oct-19/O	0.291	0.407	0.782	
Lead	mg/L	0.00002	EPA 200.8	15-Oct-19/O	0.00004	0.00009	0.00035	
Magnesium	mg/L	0.02	SM 3120	15-Oct-19/O	24.6	23.7	21.0	
Manganese	mg/L	0.001	SM 3120	15-Oct-19/O	0.066	0.115	0.108	
Mercury	mg/L	0.00002	SM 3112 B	16-Oct-19/O	< 0.00002	< 0.00002	< 0.00002	
Nickel	mg/L	0.01	SM 3120	15-Oct-19/O	< 0.01	< 0.01	< 0.01	
Potassium	mg/L	0.1	SM 3120	15-Oct-19/O	2.6	2.8	1.8	
Silver	mg/L	0.0001	EPA 200.8	15-Oct-19/O	< 0.0001	< 0.0001	< 0.0001	
Sodium	mg/L	0.2	SM 3120	15-Oct-19/O	9.4	9.6	5.7	
Strontium	mg/L	0.001	SM 3120	15-Oct-19/O	0.280	0.261	0.243	
Vanadium	mg/L	0.005	SM 3120	15-Oct-19/O	< 0.005	< 0.005	< 0.005	
Zinc	mg/L	0.005	SM 3120	15-Oct-19/O	< 0.005	< 0.005	0.007	



R.L. = Reporting Limit

Test methods may be modified from specified reference method unless indicated by an *

Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
 Lab Manager

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C.O.C.: G91339

REPORT No. B19-32637 (i)

Rev. 1

Report To:

Malroz Engineering Inc.
308 Wellington Street, 2nd Floor
Kingston ON K7K 7A8 Canada
Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 09-Oct-19
DATE REPORTED: 20-Jan-20
SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
P.O. NUMBER:
WATERWORKS NO.

Parameter	Units	R.L.	Client I.D.		19-W025	19-W026	19-W027	19-W028
			Reference Method	Date/Site Analyzed	B19-32637-1	B19-32637-2	B19-32637-3	B19-32637-4
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	10-Oct-19/O	237	560	460	203
pH @25°C	pH Units		SM 4500H	10-Oct-19/O	8.06	7.88	7.78	8.05
Conductivity @25°C	µmho/cm	1	SM 2510B	10-Oct-19/O	578	1250	1130	466
Chloride	mg/L	0.5	SM4110C	18-Oct-19/O	8.4	93.8	90.9	2.8
Nitrite (N)	mg/L	0.05	SM4110C	18-Oct-19/O	< 0.05	< 0.05	< 0.05	< 0.05
Nitrate (N)	mg/L	0.05	SM4110C	18-Oct-19/O	< 0.05	< 0.05	< 0.05	< 0.05
Sulphate	mg/L	1	SM4110C	18-Oct-19/O	55	45	46	38
BOD(5 day)	mg/L	3	SM 5210B	10-Oct-19/K	5	< 3	< 3	< 3
Total Suspended Solids	mg/L	3	SM2540D	10-Oct-19/K	24000	12000	28000	27000
Phosphorus-Total	mg/L	0.01	E3199A.1	11-Oct-19/K	3.03	130	0.80	1.63
Total Kjeldahl Nitrogen	mg/L	0.1	E3199A.1	11-Oct-19/K	1.5	4.4	1.3	0.5
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	11-Oct-19/K	0.29	0.11	1.08	0.18
TDS (Calc. from Cond.)	mg/L	1	Calc.	15-Oct-19	300	673	605	241
Dissolved Organic Carbon	mg/L	0.2	EPA 415.2	15-Oct-19/O	4.8	8.6	5.8	2.9
Phenolics	mg/L	0.002	MOEE 3179	11-Oct-19/K	< 0.002	< 0.002	< 0.002	< 0.002
COD	mg/L	5	SM 5220D	21-Oct-19/O	710	1900	31	37
Hardness (as CaCO3)	mg/L	1	SM 3120	15-Oct-19/O	200	670	569	250
Aluminum	mg/L	0.01	SM 3120	15-Oct-19/O	0.09	0.09	0.10	0.06
Arsenic	mg/L	0.0001	EPA 200.8	17-Oct-19/O	0.0013	0.0029	0.0007	0.0006
Barium	mg/L	0.001	SM 3120	15-Oct-19/O	0.058	0.485	0.447	0.155
Boron	mg/L	0.005	SM 3120	15-Oct-19/O	0.081	0.286	0.235	0.072
Cadmium	mg/L	0.000015	EPA 200.8	17-Oct-19/O	< 0.000015	< 0.000029	< 0.000029	< 0.000015
Calcium	mg/L	0.02	SM 3120	15-Oct-19/O	50.6	150	147	54.3
Chromium	mg/L	0.001	EPA 200.8	17-Oct-19/O	< 0.001	< 0.001	< 0.001	< 0.001
Cobalt	mg/L	0.0001	EPA 200.8	17-Oct-19/O	0.0003	0.0005	0.0008	0.0002
Copper	mg/L	0.0001	EPA 200.8	17-Oct-19/O	0.0010	0.0002	0.0009	0.0004
Iron	mg/L	0.005	SM 3120	15-Oct-19/O	5.07	1.84	2.07	0.134



R.L. = Reporting Limit

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Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
Lab Manager

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C.O.C.: G91339

REPORT No. B19-32637 (i)

Rev. 1

Report To:

Malroz Engineering Inc.
 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada
Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 09-Oct-19
 DATE REPORTED: 20-Jan-20
 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER:
 WATERWORKS NO.

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed	Client I.D.	19-W025	19-W026	19-W027	19-W028
					Sample I.D.	19-W025	19-W026	19-W027	19-W028
Lead	mg/L	0.00002	EPA 200.8	17-Oct-19/O	B19-32637-1	0.00028	< 0.00009	0.00013	0.00008
Magnesium	mg/L	0.02	SM 3120	15-Oct-19/O	B19-32637-2	18.0	71.8	49.1	27.9
Manganese	mg/L	0.001	SM 3120	15-Oct-19/O	B19-32637-3	0.287	0.047	0.181	0.015
Mercury	mg/L	0.00002	SM 3112 B	15-Oct-19/O	B19-32637-4	< 0.00002	< 0.00002	< 0.00002	< 0.00002
Potassium	mg/L	0.1	SM 3120	15-Oct-19/O		1.2	4.1	9.7	2.0
Silver	mg/L	0.0001	EPA 200.8	17-Oct-19/O		< 0.0001	< 0.0001	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	15-Oct-19/O		51.7	44.4	42.7	7.5
Strontium	mg/L	0.001	SM 3120	15-Oct-19/O		0.334	0.845	0.542	0.516
Uranium	mg/L	0.00005	EPA 200.8	17-Oct-19/O		0.00395	0.00028	0.00261	0.00034
Vanadium	mg/L	0.005	SM 3120	15-Oct-19/O		< 0.005	0.005	0.008	< 0.005
Zinc	mg/L	0.005	SM 3120	15-Oct-19/O		< 0.005	< 0.005	0.005	< 0.005



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P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Client I.D.		19-W029	19-W030	19-W031	19-W032
			Reference Method	Date/Site Analyzed	B19-32637-5	B19-32637-6	B19-32637-7	B19-32637-8
			Date Collected		09-Oct-19	09-Oct-19	09-Oct-19	09-Oct-19
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	10-Oct-19/O	198	226	230	258
pH @25°C	pH Units		SM 4500H	10-Oct-19/O	8.09	8.16	8.08	8.01
Conductivity @25°C	µmho/cm	1	SM 2510B	10-Oct-19/O	521	464	458	985
Chloride	mg/L	0.5	SM4110C	18-Oct-19/O	9.7	< 0.5	< 0.5	98.6
Nitrite (N)	mg/L	0.05	SM4110C	18-Oct-19/O	< 0.05	< 0.05	< 0.05	< 0.05
Nitrate (N)	mg/L	0.05	SM4110C	18-Oct-19/O	11.5	< 0.05	1.40	10.2
Sulphate	mg/L	1	SM4110C	18-Oct-19/O	15	18	3	100
BOD(5 day)	mg/L	3	SM 5210B	10-Oct-19/K	< 3	3	< 3	< 3
Total Suspended Solids	mg/L	3	SM2540D	10-Oct-19/K	650	188000	1150	520
Phosphorus-Total	mg/L	0.01	E3199A.1	11-Oct-19/K	0.17	56.4	0.26	0.25
Total Kjeldahl Nitrogen	mg/L	0.1	E3199A.1	11-Oct-19/K	0.1	1.9	0.2	0.4
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	11-Oct-19/K	0.04	0.08	0.07	0.05
TDS (Calc. from Cond.)	mg/L	1	Calc.	15-Oct-19	270	240	237	525
Dissolved Organic Carbon	mg/L	0.2	EPA 415.2	15-Oct-19/O	2.9	3.2	5.7	3.7
Phenolics	mg/L	0.002	MOEE 3179	11-Oct-19/K	< 0.002	< 0.002	< 0.002	< 0.002
COD	mg/L	5	SM 5220D	21-Oct-19/O	< 5	70	20	27
Hardness (as CaCO3)	mg/L	1	SM 3120	15-Oct-19/O	286	263	264	286
Aluminum	mg/L	0.01	SM 3120	15-Oct-19/O	0.06	0.04	0.04	0.07
Arsenic	mg/L	0.0001	EPA 200.8	17-Oct-19/O	< 0.0001	0.0003	< 0.0001	0.0005
Barium	mg/L	0.001	SM 3120	15-Oct-19/O	0.311	0.185	0.487	0.025
Boron	mg/L	0.005	SM 3120	15-Oct-19/O	0.022	< 0.005	0.008	0.014
Cadmium	mg/L	0.000015	EPA 200.8	17-Oct-19/O	< 0.000015	< 0.000015	< 0.000015	0.000064
Calcium	mg/L	0.02	SM 3120	15-Oct-19/O	70.4	58.5	67.4	74.2
Chromium	mg/L	0.001	EPA 200.8	17-Oct-19/O	< 0.001	< 0.001	< 0.001	< 0.001
Cobalt	mg/L	0.0001	EPA 200.8	17-Oct-19/O	0.0002	0.0003	0.0002	0.0003
Copper	mg/L	0.0001	EPA 200.8	17-Oct-19/O	0.0013	< 0.0001	0.0007	0.0013
Iron	mg/L	0.005	SM 3120	15-Oct-19/O	0.020	0.048	0.028	0.017



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Michelle Dubien
Lab Manager

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REPORT No. B19-32637 (i)

Rev. 1

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 Kingston ON K7K 7A8 Canada
Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
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 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 09-Oct-19
 DATE REPORTED: 20-Jan-20
 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER:
 WATERWORKS NO.

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed	Client I.D.	19-W029	19-W030	19-W031	19-W032
					Sample I.D.	19-W029	19-W030	19-W031	19-W032
Lead	mg/L	0.00002	EPA 200.8	17-Oct-19/O	B19-32637-5	0.00003	0.00002	< 0.00002	0.00003
Magnesium	mg/L	0.02	SM 3120	15-Oct-19/O	B19-32637-6	26.7	28.4	23.3	24.4
Manganese	mg/L	0.001	SM 3120	15-Oct-19/O	B19-32637-7	< 0.001	0.017	< 0.001	0.001
Mercury	mg/L	0.00002	SM 3112 B	15-Oct-19/O	B19-32637-8	< 0.00002	< 0.00002	< 0.00002	< 0.00002
Potassium	mg/L	0.1	SM 3120	15-Oct-19/O	09-Oct-19	1.4	1.6	1.1	3.3
Silver	mg/L	0.0001	EPA 200.8	17-Oct-19/O	09-Oct-19	< 0.0001	< 0.0001	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	15-Oct-19/O	09-Oct-19	4.1	4.8	2.0	116
Strontium	mg/L	0.001	SM 3120	15-Oct-19/O	09-Oct-19	0.140	0.142	0.081	0.222
Uranium	mg/L	0.00005	EPA 200.8	17-Oct-19/O	09-Oct-19	0.00084	0.00101	0.00094	0.0107
Vanadium	mg/L	0.005	SM 3120	15-Oct-19/O	09-Oct-19	< 0.005	< 0.005	< 0.005	< 0.005
Zinc	mg/L	0.005	SM 3120	15-Oct-19/O	09-Oct-19	< 0.005	< 0.005	< 0.005	0.007



Michelle Dubien
 Lab Manager

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 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER:
 WATERWORKS NO.

Client I.D.	19-W033	19-W034		
Sample I.D.	B19-32637-9	B19-32637-10		
Date Collected	09-Oct-19	09-Oct-19		

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	10-Oct-19/O	244	266		
pH @25°C	pH Units		SM 4500H	10-Oct-19/O	8.06	7.98		
Conductivity @25°C	µmho/cm	1	SM 2510B	10-Oct-19/O	619	710		
Chloride	mg/L	0.5	SM4110C	18-Oct-19/O	51.1	56.7		
Nitrite (N)	mg/L	0.05	SM4110C	18-Oct-19/O	< 0.05	< 0.05		
Nitrate (N)	mg/L	0.05	SM4110C	18-Oct-19/O	5.98	< 0.05		
Sulphate	mg/L	1	SM4110C	18-Oct-19/O	17	39		
BOD(5 day)	mg/L	3	SM 5210B	10-Oct-19/K	< 3	< 3		
Total Suspended Solids	mg/L	3	SM2540D	10-Oct-19/K	90	4		
Phosphorus-Total	mg/L	0.01	E3199A.1	11-Oct-19/K	0.41	0.03		
Total Kjeldahl Nitrogen	mg/L	0.1	E3199A.1	11-Oct-19/K	2.1	1.0		
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	11-Oct-19/K	0.04	0.75		
TDS (Calc. from Cond.)	mg/L	1	Calc.	15-Oct-19	321	369		
Dissolved Organic Carbon	mg/L	0.2	EPA 415.2	15-Oct-19/O	3.4	5.0		
Phenolics	mg/L	0.002	MOEE 3179	11-Oct-19/K	< 0.002	< 0.002		
COD	mg/L	5	SM 5220D	21-Oct-19/O	5	10		
Hardness (as CaCO3)	mg/L	1	SM 3120	15-Oct-19/O	297	318		
Aluminum	mg/L	0.01	SM 3120	15-Oct-19/O	0.06	0.06		
Arsenic	mg/L	0.0001	EPA 200.8	17-Oct-19/O	0.0002	0.0002		
Barium	mg/L	0.001	SM 3120	15-Oct-19/O	0.144	0.101		
Boron	mg/L	0.005	SM 3120	15-Oct-19/O	< 0.005	0.721		
Cadmium	mg/L	0.000015	EPA 200.8	17-Oct-19/O	< 0.000015	< 0.000015		
Calcium	mg/L	0.02	SM 3120	15-Oct-19/O	74.2	85.8		
Chromium	mg/L	0.001	EPA 200.8	17-Oct-19/O	< 0.001	< 0.001		
Cobalt	mg/L	0.0001	EPA 200.8	17-Oct-19/O	0.0003	0.0003		
Copper	mg/L	0.0001	EPA 200.8	17-Oct-19/O	0.0002	0.0001		



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 Lab Manager

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DATE RECEIVED: 09-Oct-19
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 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER:
 WATERWORKS NO.

Client I.D.	19-W033	19-W034		
Sample I.D.	B19-32637-9	B19-32637-10		
Date Collected	09-Oct-19	09-Oct-19		

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Iron	mg/L	0.005	SM 3120	15-Oct-19/O	0.094	0.622		
Lead	mg/L	0.00002	EPA 200.8	17-Oct-19/O	< 0.00002	< 0.00002		
Magnesium	mg/L	0.02	SM 3120	15-Oct-19/O	27.1	25.2		
Manganese	mg/L	0.001	SM 3120	15-Oct-19/O	0.021	0.105		
Mercury	mg/L	0.00002	SM 3112 B	15-Oct-19/O	< 0.00002	< 0.00002		
Potassium	mg/L	0.1	SM 3120	15-Oct-19/O	1.9	3.9		
Silver	mg/L	0.0001	EPA 200.8	17-Oct-19/O	< 0.0001	< 0.0001		
Sodium	mg/L	0.2	SM 3120	15-Oct-19/O	19.3	34.6		
Strontium	mg/L	0.001	SM 3120	15-Oct-19/O	0.163	2.33		
Uranium	mg/L	0.00005	EPA 200.8	17-Oct-19/O	0.00182	0.00090		
Vanadium	mg/L	0.005	SM 3120	15-Oct-19/O	< 0.005	< 0.005		
Zinc	mg/L	0.005	SM 3120	15-Oct-19/O	0.027	< 0.005		



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 Lab Manager

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DATE RECEIVED: 09-Oct-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 20-Jan-20

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed	Client I.D.	19-W025	19-W026	19-W027	19-W028
					Sample I.D.	19-W025	19-W026	19-W027	19-W028
					Date Collected	09-Oct-19	09-Oct-19	09-Oct-19	09-Oct-19
Acetone	µg/L	30	EPA 8260	17-Oct-19/R	B19-32637-1	< 30	< 30	< 30	< 30
Benzene	µg/L	0.5	EPA 8260	17-Oct-19/R	B19-32637-2	< 0.5	< 0.5	< 0.5	< 0.5
Bromobenzene	µg/L	0.4	EPA 8260	17-Oct-19/R	B19-32637-3	< 0.4	< 0.4	< 0.4	< 0.4
Bromodichloromethane	µg/L	2	EPA 8260	17-Oct-19/R	B19-32637-4	< 2	< 2	< 2	< 2
Bromoform	µg/L	5	EPA 8260	17-Oct-19/R		< 5	< 5	< 5	< 5
Bromomethane	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Carbon Tetrachloride	µg/L	0.2	EPA 8260	17-Oct-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Chloroethane	µg/L	3	EPA 8260	17-Oct-19/R		< 3	< 3	< 3	< 3
Chloroform	µg/L	1	EPA 8260	17-Oct-19/R		< 1	< 1	< 1	< 1
Chloromethane	µg/L	2	EPA 8260	17-Oct-19/R		< 2	< 2	< 2	< 2
Chlorotoluene,2-	µg/L	0.2	EPA 8260	17-Oct-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Chlorotoluene,4-	µg/L	0.2	EPA 8260	17-Oct-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	17-Oct-19/R		< 0.6	< 0.6	< 0.6	< 0.6
Dibromochloromethane	µg/L	2	EPA 8260	17-Oct-19/R		< 2	< 2	< 2	< 2
Dibromoethane,1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	17-Oct-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Dibromomethane	µg/L	0.1	EPA 8260	17-Oct-19/R		< 0.1	< 0.1	< 0.1	< 0.1
Dichlorobenzene,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,3-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,4-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichlorodifluoromethane	µg/L	2	EPA 8260	17-Oct-19/R		< 2	< 2	< 2	< 2
Dichloroethane,1,1-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethane,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethylene,1,1-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5



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P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Client I.D.		19-W025	19-W026	19-W027	19-W028
			Reference Method	Date/Site Analyzed	B19-32637-1	B19-32637-2	B19-32637-3	B19-32637-4
			Date Collected		09-Oct-19	09-Oct-19	09-Oct-19	09-Oct-19
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5	< 5	< 5
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Ethylbenzene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Hexachlorobutadiene	µg/L	0.6	EPA 8260	17-Oct-19/R	< 0.6	< 0.6	< 0.6	< 0.6
Hexane	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5	< 5	< 5
Isopropylbenzene	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Methyl Butyl Ketone	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5	< 5	< 5
Methyl Ethyl Ketone	µg/L	20	EPA 8260	17-Oct-19/R	< 20	< 20	< 20	< 20
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	17-Oct-19/R	< 20	< 20	< 20	< 20
Methyl-t-butyl Ether	µg/L	2	EPA 8260	17-Oct-19/R	< 2	< 2	< 2	< 2
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Naphthalene	µg/L	0.4	EPA 8260	17-Oct-19/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Butylbenzene	µg/L	0.4	EPA 8260	17-Oct-19/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Propylbenzene	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1	< 0.1	< 0.1
sec-Butylbenzene	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Styrene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
tert-Butylbenzene	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5



R.L. = Reporting Limit

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Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
 Lab Manager

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C.O.C.: G91339

REPORT No. B19-32637 (ii)

Rev. 1

Report To:

Malroz Engineering Inc.
308 Wellington Street, 2nd Floor
Kingston ON K7K 7A8 Canada
Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 09-Oct-19
DATE REPORTED: 20-Jan-20
SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
P.O. NUMBER:
WATERWORKS NO.

Client I.D.	19-W025	19-W026	19-W027	19-W028
Sample I.D.	B19-32637-1	B19-32637-2	B19-32637-3	B19-32637-4
Date Collected	09-Oct-19	09-Oct-19	09-Oct-19	09-Oct-19

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Tetrachloroethane, 1,1,2,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene, 1,2,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene, 1,2,4-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane, 1,1,1-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane, 1,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5	< 5	< 5
Trichloropropane, 1,2,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trimethylbenzene, 1,2,4-	µg/L	1	EPA 8260	17-Oct-19/R	< 1	< 1	< 1	< 1
Trimethylbenzene, 1,3,5-	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	17-Oct-19/R	< 1.0	< 1.0	< 1.0	< 1.0
Xylene, m,p,o-	µg/L	1.1	EPA 8260	17-Oct-19/R	< 1.1	< 1.1	< 1.1	< 1.1
Xylene, o-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5

1 Revised to remove Bromochloromethane



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Lab Manager

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DATE REPORTED: 20-Jan-20
SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
P.O. NUMBER:
WATERWORKS NO.

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed	Client I.D.	19-W029	19-W030	19-W031	19-W032
					Sample I.D.	19-W029	19-W030	19-W031	19-W032
					Date Collected	09-Oct-19	09-Oct-19	09-Oct-19	09-Oct-19
Acetone	µg/L	30	EPA 8260	17-Oct-19/R	B19-32637-5	< 30	< 30	< 30	< 30
Benzene	µg/L	0.5	EPA 8260	17-Oct-19/R	B19-32637-6	< 0.5	< 0.5	< 0.5	< 0.5
Bromobenzene	µg/L	0.4	EPA 8260	17-Oct-19/R	B19-32637-7	< 0.4	< 0.4	< 0.4	< 0.4
Bromodichloromethane	µg/L	2	EPA 8260	17-Oct-19/R	B19-32637-8	< 2	< 2	< 2	< 2
Bromoform	µg/L	5	EPA 8260	17-Oct-19/R		< 5	< 5	< 5	< 5
Bromomethane	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Carbon Tetrachloride	µg/L	0.2	EPA 8260	17-Oct-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Chloroethane	µg/L	3	EPA 8260	17-Oct-19/R		< 3	< 3	< 3	< 3
Chloroform	µg/L	1	EPA 8260	17-Oct-19/R		< 1	< 1	< 1	< 1
Chloromethane	µg/L	2	EPA 8260	17-Oct-19/R		< 2	< 2	< 2	< 2
Chlorotoluene,2-	µg/L	0.2	EPA 8260	17-Oct-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Chlorotoluene,4-	µg/L	0.2	EPA 8260	17-Oct-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	17-Oct-19/R		< 0.6	< 0.6	< 0.6	< 0.6
Dibromochloromethane	µg/L	2	EPA 8260	17-Oct-19/R		< 2	< 2	< 2	< 2
Dibromoethane,1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	17-Oct-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Dibromomethane	µg/L	0.1	EPA 8260	17-Oct-19/R		< 0.1	< 0.1	< 0.1	< 0.1
Dichlorobenzene,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,3-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,4-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichlorodifluoromethane	µg/L	2	EPA 8260	17-Oct-19/R		< 2	< 2	< 2	< 2
Dichloroethane,1,1-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethane,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethylene,1,1-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5



R.L. = Reporting Limit

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Michelle Dubien
Lab Manager

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REPORT No. B19-32637 (ii)

Rev. 1

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 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada

Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 09-Oct-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 20-Jan-20

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Client I.D.		19-W029	19-W030	19-W031	19-W032
			Reference Method	Date/Site Analyzed	B19-32637-5	B19-32637-6	B19-32637-7	B19-32637-8
			Date Collected		09-Oct-19	09-Oct-19	09-Oct-19	09-Oct-19
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5	< 5	< 5
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Ethylbenzene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Hexachlorobutadiene	µg/L	0.6	EPA 8260	17-Oct-19/R	< 0.6	< 0.6	< 0.6	< 0.6
Hexane	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5	< 5	< 5
Isopropylbenzene	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Methyl Butyl Ketone	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5	< 5	< 5
Methyl Ethyl Ketone	µg/L	20	EPA 8260	17-Oct-19/R	< 20	< 20	< 20	< 20
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	17-Oct-19/R	< 20	< 20	< 20	< 20
Methyl-t-butyl Ether	µg/L	2	EPA 8260	17-Oct-19/R	< 2	< 2	< 2	< 2
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Naphthalene	µg/L	0.4	EPA 8260	17-Oct-19/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Butylbenzene	µg/L	0.4	EPA 8260	17-Oct-19/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Propylbenzene	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1	< 0.1	< 0.1
sec-Butylbenzene	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Styrene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
tert-Butylbenzene	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5



R.L. = Reporting Limit

Test methods may be modified from specified reference method unless indicated by an *

Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
 Lab Manager

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C.O.C.: G91339

REPORT No. B19-32637 (ii)

Rev. 1

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308 Wellington Street, 2nd Floor
Kingston ON K7K 7A8 Canada
Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 09-Oct-19
DATE REPORTED: 20-Jan-20
SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
P.O. NUMBER:
WATERWORKS NO.

Client I.D.	19-W029	19-W030	19-W031	19-W032
Sample I.D.	B19-32637-5	B19-32637-6	B19-32637-7	B19-32637-8
Date Collected	09-Oct-19	09-Oct-19	09-Oct-19	09-Oct-19

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Tetrachloroethane, 1,1,2,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene, 1,2,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene, 1,2,4-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane, 1,1,1-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane, 1,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5	< 5	< 5
Trichloropropane, 1,2,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trimethylbenzene, 1,2,4-	µg/L	1	EPA 8260	17-Oct-19/R	< 1	< 1	< 1	< 1
Trimethylbenzene, 1,3,5-	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	17-Oct-19/R	< 1.0	< 1.0	< 1.0	< 1.0
Xylene, m,p,o-	µg/L	1.1	EPA 8260	17-Oct-19/R	< 1.1	< 1.1	< 1.1	< 1.1
Xylene, o-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5

1 Revised to remove Bromochloromethane



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P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Client I.D.	19-W033	19-W034		
Sample I.D.	B19-32637-9	B19-32637-10		
Date Collected	09-Oct-19	09-Oct-19		

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Acetone	µg/L	30	EPA 8260	17-Oct-19/R	< 30	< 30		
Benzene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Bromobenzene	µg/L	0.4	EPA 8260	17-Oct-19/R	< 0.4	< 0.4		
Bromodichloromethane	µg/L	2	EPA 8260	17-Oct-19/R	< 2	< 2		
Bromoform	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5		
Bromomethane	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Carbon Tetrachloride	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2		
Chloroethane	µg/L	3	EPA 8260	17-Oct-19/R	< 3	< 3		
Chloroform	µg/L	1	EPA 8260	17-Oct-19/R	< 1	< 1		
Chloromethane	µg/L	2	EPA 8260	17-Oct-19/R	< 2	< 2		
Chlorotoluene,2-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2		
Chlorotoluene,4-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2		
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	17-Oct-19/R	< 0.6	< 0.6		
Dibromochloromethane	µg/L	2	EPA 8260	17-Oct-19/R	< 2	< 2		
Dibromoethane,1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2		
Dibromomethane	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1		
Dichlorobenzene,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Dichlorobenzene,1,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Dichlorobenzene,1,4-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Dichlorodifluoromethane	µg/L	2	EPA 8260	17-Oct-19/R	< 2	< 2		
Dichloroethane,1,1-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Dichloroethane,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Dichloroethylene,1,1-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		



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JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 20-Jan-20

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Client I.D.	19-W033	19-W034		
Sample I.D.	B19-32637-9	B19-32637-10		
Date Collected	09-Oct-19	09-Oct-19		

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5		
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2		
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2		
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2		
Ethylbenzene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Hexachlorobutadiene	µg/L	0.6	EPA 8260	17-Oct-19/R	< 0.6	< 0.6		
Hexane	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5		
Isopropylbenzene	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2		
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2		
Methyl Butyl Ketone	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5		
Methyl Ethyl Ketone	µg/L	20	EPA 8260	17-Oct-19/R	< 20	< 20		
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	17-Oct-19/R	< 20	< 20		
Methyl-t-butyl Ether	µg/L	2	EPA 8260	17-Oct-19/R	< 2	< 2		
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Naphthalene	µg/L	0.4	EPA 8260	17-Oct-19/R	< 0.4	< 0.4		
n-Butylbenzene	µg/L	0.4	EPA 8260	17-Oct-19/R	< 0.4	< 0.4		
n-Propylbenzene	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1		
sec-Butylbenzene	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1		
Styrene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
tert-Butylbenzene	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1		



R.L. = Reporting Limit

Test methods may be modified from specified reference method unless indicated by an *

Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
 Lab Manager

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C.O.C.: G91339

REPORT No. B19-32637 (ii)

Rev. 1

Report To:

Malroz Engineering Inc.
 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada
Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 09-Oct-19
 DATE REPORTED: 20-Jan-20
 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER:
 WATERWORKS NO.

Client I.D.	19-W033	19-W034		
Sample I.D.	B19-32637-9	B19-32637-10		
Date Collected	09-Oct-19	09-Oct-19		

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Tetrachloroethane,1,1,2,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Tetrachloroethylene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Toluene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Trichlorobenzene,1,2,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Trichlorobenzene,1,2,4-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Trichloroethane,1,1,1-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Trichloroethane,1,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Trichloroethylene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Trichlorofluoromethane	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5		
Trichloropropane,1,2,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		
Trimethylbenzene,1,2,4-	µg/L	1	EPA 8260	17-Oct-19/R	< 1	< 1		
Trimethylbenzene,1,3,5-	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1		
Vinyl Chloride	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2		
Xylene, m,p-	µg/L	1.0	EPA 8260	17-Oct-19/R	< 1.0	< 1.0		
Xylene, m,p,o-	µg/L	1.1	EPA 8260	17-Oct-19/R	< 1.1	< 1.1		
Xylene, o-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5		

1. Revised to remove Bromochloromethane



R.L. = Reporting Limit

Test methods may be modified from specified reference method unless indicated by an *

Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
 Lab Manager

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C.O.C.: G91336

REPORT No. B19-32756 (i)

Report To:

Malroz Engineering Inc.
308 Wellington Street, 2nd Floor
Kingston ON K7K 7A8 Canada

Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 10-Oct-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 25-Oct-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed	Client I.D.	19-W036	19-W037	19-W038	19-W039
					Sample I.D.	19-W036	19-W037	19-W038	19-W039
Date Collected					10-Oct-19	10-Oct-19	10-Oct-19	10-Oct-19	10-Oct-19
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	15-Oct-19/O	365	769	448	492	
pH @25°C	pH Units		SM 4500H	15-Oct-19/O	7.97	7.79	7.98	7.96	
Conductivity @25°C	µmho/cm	1	SM 2510B	15-Oct-19/O	718	1750	926	1380	
Chloride	mg/L	0.5	SM4110C	21-Oct-19/O	7.4	91.1	31.1	120	
Nitrite (N)	mg/L	0.05	SM4110C	21-Oct-19/O	< 0.05	< 0.5	< 0.05	< 0.05	
Nitrate (N)	mg/L	0.05	SM4110C	21-Oct-19/O	0.36	< 0.5	1.39	8.07	
Sulphate	mg/L	1	SM4110C	21-Oct-19/O	5	21	9	60	
BOD(5 day)	mg/L	3	SM 5210B	11-Oct-19/K	< 3	< 3	< 3	< 3	
Total Suspended Solids	mg/L	3	SM2540D	11-Oct-19/K	42	50	780	300	
Phosphorus-Total	mg/L	0.01	E3199A.1	15-Oct-19/K	0.09	0.07	0.28	0.27	
Total Kjeldahl Nitrogen	mg/L	0.1	E3199A.1	15-Oct-19/K	0.2	13.8	0.5	0.5	
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	16-Oct-19/K	0.03	11.7	0.10	0.04	
TDS (Calc. from Cond.)	mg/L	1	Calc.	17-Oct-19	374	959	492	749	
Dissolved Organic Carbon	mg/L	0.2	EPA 415.1	21-Oct-19/O	1.9	11.9	2.3	2.9	
Phenolics	mg/L	0.002	MOEE 3179	11-Oct-19/K	< 0.002	< 0.002	< 0.002	< 0.002	
COD	mg/L	5	SM 5220D	22-Oct-19/O	< 5	74	21	31	
Hardness (as CaCO3)	mg/L	1	SM 3120	16-Oct-19/O	410	806	526	646	
Aluminum	mg/L	0.01	SM 3120	16-Oct-19/O	0.07	0.12	0.08	0.10	
Arsenic	mg/L	0.0001	EPA 200.8	17-Oct-19/O	< 0.0001	< 0.0005	0.0001	< 0.0003	
Barium	mg/L	0.001	SM 3120	16-Oct-19/O	0.358	0.127	0.724	0.803	
Boron	mg/L	0.005	SM 3120	16-Oct-19/O	0.019	1.21	0.012	0.074	
Cadmium	mg/L	0.000015	EPA 200.8	17-Oct-19/O	0.000043	0.000061	< 0.000015	< 0.000029	
Calcium	mg/L	0.02	SM 3120	16-Oct-19/O	117	206	146	178	
Chromium	mg/L	0.001	EPA 200.8	17-Oct-19/O	< 0.001	< 0.001	< 0.001	< 0.001	
Cobalt	mg/L	0.0001	EPA 200.8	17-Oct-19/O	0.0008	0.0009	0.0005	0.0006	
Copper	mg/L	0.0001	EPA 200.8	17-Oct-19/O	0.0028	< 0.0003	0.0013	0.0018	
Iron	mg/L	0.005	SM 3120	16-Oct-19/O	0.041	8.45	0.005	0.065	



R.L. = Reporting Limit

Test methods may be modified from specified reference method unless indicated by an *

Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
Lab Manager

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C.O.C.: G91336

REPORT No. B19-32756 (i)

Report To:

Malroz Engineering Inc.
 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada
Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 10-Oct-19
 DATE REPORTED: 25-Oct-19
 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER: 1036
 WATERWORKS NO.

Client I.D.	19-W036	19-W037	19-W038	19-W039
Sample I.D.	B19-32756-1	B19-32756-2	B19-32756-3	B19-32756-4
Date Collected	10-Oct-19	10-Oct-19	10-Oct-19	10-Oct-19

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Lead	mg/L	0.00002	EPA 200.8	17-Oct-19/O	0.00005	< 0.0002	< 0.00002	< 0.00009
Magnesium	mg/L	0.02	SM 3120	16-Oct-19/O	28.5	70.7	39.1	49.0
Manganese	mg/L	0.001	SM 3120	16-Oct-19/O	0.002	0.068	0.003	0.006
Mercury	mg/L	0.00002	SM 3112 B	18-Oct-19/O	< 0.00002	< 0.00002	< 0.00002	< 0.00002
Potassium	mg/L	0.1	SM 3120	16-Oct-19/O	3.2	40.7	1.6	5.2
Silver	mg/L	0.0001	EPA 200.8	17-Oct-19/O	< 0.0001	< 0.0002	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	16-Oct-19/O	9.2	92.2	19.2	76.6
Strontium	mg/L	0.001	SM 3120	16-Oct-19/O	0.209	0.926	0.192	0.322
Uranium	mg/L	0.00005	EPA 200.8	17-Oct-19/O	0.00047	0.00046	0.00035	0.00124
Vanadium	mg/L	0.005	SM 3120	16-Oct-19/O	< 0.005	< 0.005	< 0.005	< 0.005
Zinc	mg/L	0.005	SM 3120	16-Oct-19/O	0.006	< 0.005	< 0.005	< 0.005



Michelle Dubien
 Lab Manager

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Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

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Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 10-Oct-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 25-Oct-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Client I.D.		19-W040	19-W041	19-W042	19-W043
			Reference Method	Date/Site Analyzed	B19-32756-5	B19-32756-6	B19-32756-7	B19-32756-8
			Date Collected		10-Oct-19	10-Oct-19	10-Oct-19	10-Oct-19
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	15-Oct-19/O	300	305	537	425
pH @25°C	pH Units		SM 4500H	15-Oct-19/O	8.08	8.00	7.60	7.79
Conductivity @25°C	µmho/cm	1	SM 2510B	15-Oct-19/O	689	749	1270	1230
Chloride	mg/L	0.5	SM4110C	21-Oct-19/O	16.6	41.4	74.8	144
Nitrite (N)	mg/L	0.05	SM4110C	21-Oct-19/O	< 0.05	< 0.05	< 0.05	< 0.05
Nitrate (N)	mg/L	0.05	SM4110C	21-Oct-19/O	< 0.05	< 0.05	< 0.05	0.89
Sulphate	mg/L	1	SM4110C	21-Oct-19/O	51	40	63	19
BOD(5 day)	mg/L	3	SM 5210B	11-Oct-19/K	< 3	< 3	< 3	< 3
Total Suspended Solids	mg/L	3	SM2540D	11-Oct-19/K	16000	14000	76	48500
Phosphorus-Total	mg/L	0.01	E3199A.1	15-Oct-19/K	3.56	5.45	0.08	5.57
Total Kjeldahl Nitrogen	mg/L	0.1	E3199A.1	15-Oct-19/K	0.3	1.1	2.7	0.9
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	16-Oct-19/K	0.06	0.09	2.46	0.06
TDS (Calc. from Cond.)	mg/L	1	Calc.	17-Oct-19	358	391	688	661
Dissolved Organic Carbon	mg/L	0.2	EPA 415.1	21-Oct-19/O	2.1	2.5	7.6	2.4
Phenolics	mg/L	0.002	MOEE 3179	11-Oct-19/K	< 0.002	< 0.002	< 0.002	< 0.002
COD	mg/L	5	SM 5220D	22-Oct-19/O	36	74	18	52
Hardness (as CaCO3)	mg/L	1	SM 3120	16-Oct-19/O	386	380	591	482
Aluminum	mg/L	0.01	SM 3120	16-Oct-19/O	0.06	0.05	0.10	0.08
Arsenic	mg/L	0.0001	EPA 200.8	17-Oct-19/O	0.0001	0.0002	< 0.0003	< 0.0003
Barium	mg/L	0.001	SM 3120	16-Oct-19/O	0.257	0.314	0.565	0.868
Boron	mg/L	0.005	SM 3120	16-Oct-19/O	0.011	0.037	0.390	0.071
Cadmium	mg/L	0.00015	EPA 200.8	17-Oct-19/O	< 0.000015	< 0.000015	0.000039	< 0.000029
Calcium	mg/L	0.02	SM 3120	16-Oct-19/O	88.3	86.5	169	133
Chromium	mg/L	0.001	EPA 200.8	17-Oct-19/O	< 0.001	< 0.001	< 0.001	< 0.001
Cobalt	mg/L	0.0001	EPA 200.8	17-Oct-19/O	0.0005	0.0004	0.0105	0.0005
Copper	mg/L	0.0001	EPA 200.8	17-Oct-19/O	0.0003	0.0019	0.0015	0.0005
Iron	mg/L	0.005	SM 3120	16-Oct-19/O	0.007	0.089	1.76	< 0.005



R.L. = Reporting Limit

Test methods may be modified from specified reference method unless indicated by an *

Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
Lab Manager

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C.O.C.: G91336

REPORT No. B19-32756 (i)

Report To:

Malroz Engineering Inc.
 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada
Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 10-Oct-19
 DATE REPORTED: 25-Oct-19
 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER: 1036
 WATERWORKS NO.

Client I.D.	19-W040	19-W041	19-W042	19-W043
Sample I.D.	B19-32756-5	B19-32756-6	B19-32756-7	B19-32756-8
Date Collected	10-Oct-19	10-Oct-19	10-Oct-19	10-Oct-19

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Lead	mg/L	0.00002	EPA 200.8	17-Oct-19/O	< 0.00002	0.00004	< 0.00009	< 0.00009
Magnesium	mg/L	0.02	SM 3120	16-Oct-19/O	40.1	39.9	41.0	36.4
Manganese	mg/L	0.001	SM 3120	16-Oct-19/O	0.016	0.068	0.706	0.002
Mercury	mg/L	0.00002	SM 3112 B	18-Oct-19/O	< 0.00002	< 0.00002	< 0.00002	< 0.00002
Potassium	mg/L	0.1	SM 3120	16-Oct-19/O	2.4	2.2	21.7	3.1
Silver	mg/L	0.0001	EPA 200.8	17-Oct-19/O	< 0.0001	< 0.0001	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	16-Oct-19/O	8.3	14.6	66.4	83.2
Strontium	mg/L	0.001	SM 3120	16-Oct-19/O	0.175	0.369	0.570	0.326
Uranium	mg/L	0.00005	EPA 200.8	17-Oct-19/O	0.00319	0.00057	0.00079	0.00054
Vanadium	mg/L	0.005	SM 3120	16-Oct-19/O	< 0.005	< 0.005	< 0.005	< 0.005
Zinc	mg/L	0.005	SM 3120	16-Oct-19/O	< 0.005	< 0.005	< 0.005	< 0.005



Michelle Dubien
 Lab Manager

R.L. = Reporting Limit
 Test methods may be modified from specified reference method unless indicated by an *
 Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

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C.O.C.: G91336

REPORT No. B19-32756 (ii)

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 308 Wellington Street, 2nd Floor
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Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 10-Oct-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 25-Oct-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed	Client I.D.	19-W036	19-W037	19-W038	19-W039
					Sample I.D.	10-Oct-19	10-Oct-19	10-Oct-19	10-Oct-19
Acetone	µg/L	30	EPA 8260	17-Oct-19/R	B19-32756-1	< 30	< 30	< 30	< 30
Benzene	µg/L	0.5	EPA 8260	17-Oct-19/R	B19-32756-2	< 0.5	< 0.5	< 0.5	< 0.5
Bromobenzene	µg/L	0.4	EPA 8260	17-Oct-19/R	B19-32756-3	< 0.4	< 0.4	< 0.4	< 0.4
Bromodichloromethane	µg/L	2	EPA 8260	17-Oct-19/R	B19-32756-4	< 2	< 2	< 2	< 2
Bromoform	µg/L	5	EPA 8260	17-Oct-19/R		< 5	< 5	< 5	< 5
Bromomethane	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Carbon Tetrachloride	µg/L	0.2	EPA 8260	17-Oct-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Chloroethane	µg/L	3	EPA 8260	17-Oct-19/R		< 3	< 3	< 3	< 3
Chloroform	µg/L	1	EPA 8260	17-Oct-19/R		< 1	< 1	< 1	< 1
Chloromethane	µg/L	2	EPA 8260	17-Oct-19/R		< 2	< 2	< 2	< 2
Chlorotoluene,2-	µg/L	0.2	EPA 8260	17-Oct-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Chlorotoluene,4-	µg/L	0.2	EPA 8260	17-Oct-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	17-Oct-19/R		< 0.6	< 0.6	< 0.6	< 0.6
Dibromochloromethane	µg/L	2	EPA 8260	17-Oct-19/R		< 2	< 2	< 2	< 2
Dibromoethane,1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	17-Oct-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Dibromomethane	µg/L	0.1	EPA 8260	17-Oct-19/R		< 0.1	< 0.1	< 0.1	< 0.1
Dichlorobenzene,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,3-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,4-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichlorodifluoromethane	µg/L	2	EPA 8260	17-Oct-19/R		< 2	< 2	< 2	< 2
Dichloroethane,1,1-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	0.8	< 0.5	< 0.5
Dichloroethane,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	1.1	< 0.5	< 0.5
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethylene,1,1-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5



R.L. = Reporting Limit

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Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

Michelle Dubien
 Lab Manager

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C.O.C.: G91336

REPORT No. B19-32756 (ii)

Report To:

Malroz Engineering Inc.
 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada

Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 10-Oct-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 25-Oct-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Client I.D.		19-W036	19-W037	19-W038	19-W039
			Reference Method	Date/Site Analyzed	B19-32756-1	B19-32756-2	B19-32756-3	B19-32756-4
			Date Collected		10-Oct-19	10-Oct-19	10-Oct-19	10-Oct-19
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5	< 5	< 5
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Ethylbenzene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	3.6	< 0.5	< 0.5
Hexachlorobutadiene	µg/L	0.6	EPA 8260	17-Oct-19/R	< 0.6	< 0.6	< 0.6	< 0.6
Hexane	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5	< 5	< 5
Isopropylbenzene	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	0.4	< 0.2	< 0.2
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Methyl Butyl Ketone	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5	< 5	< 5
Methyl Ethyl Ketone	µg/L	20	EPA 8260	17-Oct-19/R	< 20	< 20	< 20	< 20
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	17-Oct-19/R	< 20	< 20	< 20	< 20
Methyl-t-butyl Ether	µg/L	2	EPA 8260	17-Oct-19/R	< 2	< 2	< 2	< 2
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Naphthalene	µg/L	0.4	EPA 8260	17-Oct-19/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Butylbenzene	µg/L	0.4	EPA 8260	17-Oct-19/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Propylbenzene	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1	< 0.1	< 0.1
sec-Butylbenzene	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Styrene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
tert-Butylbenzene	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5



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Michelle Dubien
 Lab Manager

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REPORT No. B19-32756 (ii)

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 308 Wellington Street, 2nd Floor
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Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 10-Oct-19
 DATE REPORTED: 25-Oct-19
 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER: 1036
 WATERWORKS NO.

Client I.D.	19-W036	19-W037	19-W038	19-W039
Sample I.D.	B19-32756-1	B19-32756-2	B19-32756-3	B19-32756-4
Date Collected	10-Oct-19	10-Oct-19	10-Oct-19	10-Oct-19

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Tetrachloroethane,1,1,2,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,4-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,1-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5	< 5	< 5
Trichloropropane,1,2,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Trimethylbenzene,1,2,4-	µg/L	1	EPA 8260	17-Oct-19/R	< 1	< 1	< 1	< 1
Trimethylbenzene,1,3,5-	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	17-Oct-19/R	< 1.0	< 1.0	< 1.0	< 1.0
Xylene, m,p,o-	µg/L	1.1	EPA 8260	17-Oct-19/R	< 1.1	< 1.1	< 1.1	< 1.1
Xylene, o-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5



Michelle Dubien
 Lab Manager

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Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 10-Oct-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 25-Oct-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Client I.D.	19-W040	19-W041	19-W042	19-W043
Sample I.D.	B19-32756-5	B19-32756-6	B19-32756-7	B19-32756-8
Date Collected	10-Oct-19	10-Oct-19	10-Oct-19	10-Oct-19

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
			EPA 8260	17-Oct-19/R	< 30	< 30	< 30	< 30
Acetone	µg/L	30	EPA 8260	17-Oct-19/R	< 30	< 30	< 30	< 30
Benzene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Bromobenzene	µg/L	0.4	EPA 8260	17-Oct-19/R	< 0.4	< 0.4	< 0.4	< 0.4
Bromodichloromethane	µg/L	2	EPA 8260	17-Oct-19/R	< 2	< 2	< 2	< 2
Bromoform	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5	< 5	< 5
Bromomethane	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Carbon Tetrachloride	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Chloroethane	µg/L	3	EPA 8260	17-Oct-19/R	< 3	< 3	< 3	< 3
Chloroform	µg/L	1	EPA 8260	17-Oct-19/R	< 1	< 1	< 1	< 1
Chloromethane	µg/L	2	EPA 8260	17-Oct-19/R	< 2	< 2	< 2	< 2
Chlorotoluene,2-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Chlorotoluene,4-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	17-Oct-19/R	< 0.6	< 0.6	< 0.6	< 0.6
Dibromochloromethane	µg/L	2	EPA 8260	17-Oct-19/R	< 2	< 2	< 2	< 2
Dibromoethane,1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Dibromomethane	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Dichlorobenzene,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,4-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichlorodifluoromethane	µg/L	2	EPA 8260	17-Oct-19/R	< 2	< 2	< 2	< 2
Dichloroethane,1,1-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethane,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethylene,1,1-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5



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Michelle Dubien
Lab Manager

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REPORT No. B19-32756 (ii)

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 308 Wellington Street, 2nd Floor
 Kingston ON K7K 7A8 Canada

Attention: Mallory Wright

Caduceon Environmental Laboratories

285 Dalton Ave
 Kingston Ontario K7K 6Z1
 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 10-Oct-19

JOB/PROJECT NO.: Briar Hill

DATE REPORTED: 25-Oct-19

P.O. NUMBER: 1036

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

Parameter	Units	R.L.	Client I.D.		19-W040	19-W041	19-W042	19-W043
			Reference Method	Date/Site Analyzed	B19-32756-5	B19-32756-6	B19-32756-7	B19-32756-8
			Date Collected		10-Oct-19	10-Oct-19	10-Oct-19	10-Oct-19
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5	< 5	< 5
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Ethylbenzene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Hexachlorobutadiene	µg/L	0.6	EPA 8260	17-Oct-19/R	< 0.6	< 0.6	< 0.6	< 0.6
Hexane	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5	< 5	< 5
Isopropylbenzene	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	17-Oct-19/R	< 0.2	< 0.2	< 0.2	< 0.2
Methyl Butyl Ketone	µg/L	5	EPA 8260	17-Oct-19/R	< 5	< 5	< 5	< 5
Methyl Ethyl Ketone	µg/L	20	EPA 8260	17-Oct-19/R	< 20	< 20	< 20	< 20
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	17-Oct-19/R	< 20	< 20	< 20	< 20
Methyl-t-butyl Ether	µg/L	2	EPA 8260	17-Oct-19/R	< 2	< 2	< 2	< 2
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
Naphthalene	µg/L	0.4	EPA 8260	17-Oct-19/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Butylbenzene	µg/L	0.4	EPA 8260	17-Oct-19/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Propylbenzene	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1	< 0.1	< 0.1
sec-Butylbenzene	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Styrene	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5
tert-Butylbenzene	µg/L	0.1	EPA 8260	17-Oct-19/R	< 0.1	< 0.1	< 0.1	< 0.1
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	< 0.5	< 0.5	< 0.5	< 0.5



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 Tel: 613-544-2001
 Fax: 613-544-2770

DATE RECEIVED: 10-Oct-19
 DATE REPORTED: 25-Oct-19
 SAMPLE MATRIX: Groundwater

JOB/PROJECT NO.: Briar Hill
 P.O. NUMBER: 1036
 WATERWORKS NO.

Parameter	Units	R.L.	Reference Method	Date/Site Analyzed	Client I.D.	19-W040	19-W041	19-W042	19-W043
					Sample I.D.	19-W040	19-W041	19-W042	19-W043
Date Collected					10-Oct-19	10-Oct-19	10-Oct-19	10-Oct-19	10-Oct-19
Tetrachloroethane,1,1,2,2-	µg/L	0.5	EPA 8260	17-Oct-19/R	B19-32756-5	< 0.5	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	17-Oct-19/R	B19-32756-6	< 0.5	< 0.5	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	17-Oct-19/R	B19-32756-7	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,3-	µg/L	0.5	EPA 8260	17-Oct-19/R	B19-32756-8	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,4-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,1-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,2-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	17-Oct-19/R		< 5	< 5	< 5	< 5
Trichloropropane,1,2,3-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5
Trimethylbenzene,1,2,4-	µg/L	1	EPA 8260	17-Oct-19/R		< 1	< 1	< 1	< 1
Trimethylbenzene,1,3,5-	µg/L	0.1	EPA 8260	17-Oct-19/R		< 0.1	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	17-Oct-19/R		< 0.2	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	17-Oct-19/R		< 1.0	< 1.0	< 1.0	< 1.0
Xylene, m,p,o-	µg/L	1.1	EPA 8260	17-Oct-19/R		< 1.1	< 1.1	< 1.1	< 1.1
Xylene, o-	µg/L	0.5	EPA 8260	17-Oct-19/R		< 0.5	< 0.5	< 0.5	< 0.5



Michelle Dubien
 Lab Manager

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Appendix K
Historical Analytical Results

Historical Overburden Groundwater Analytical Results

Groundwater Sampling Location	Sample ID	Date	Units	PARAMETERS										Total Suspended Solids	Total Kjeldahl - N	Chloride	N - Nitrate	N - Nitrite	Sulphate	Mercury	Aluminum	Arsenic	Barium	Boron											
				mg/L	mg/L	mg/L	mg/L	mg/L	µmho/cm	mg/L	pH Units	mg/L	mg/L												mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L
				0.01	3	5	0.2	1	80-100	6.5 - 8.5	0.002	0.01	500												3	0.1	0.5	0.05	0.05	0.0002	0.1	0.01	0.001	0.001	0.005
				30-500	0.01	3	5	0.2	1	80-100	6.5 - 8.5	0.002	0.01	500	3	0.1	0.5	0.05	0.05	0.0002	0.1 <td>0.01 <td>0.001 <td>0.001 <td>0.005</td> </td></td></td>	0.01 <td>0.001 <td>0.001 <td>0.005</td> </td></td>	0.001 <td>0.001 <td>0.005</td> </td>	0.001 <td>0.005</td>	0.005										
				OG	AC	OG	AC	OG	AC	OG	AC	OG	AC	OG	AC	OG	AC	OG	AC	OG	AC	OG	AC	OG	AC										
L11	1-Nov-02			384	0.41	<0.5	-	-	766	436	7.45	-	-	476	-	0.49	16	<0.2	<0.2	40	-	<0.005	<0.002	0.479	0.025										
L11	1-Jul-03			455	0.36	nd	-	-	1.8	919	505	7.29	-	524	-	0.55	19	0.3	-	49	-	nd	nd	0.562	0.041										
L11	1-Oct-03			526	0.35	nd	-	-	2.4	873	526	7.16	-	570	-	0.54	22	1.2	-	38.1	-	0.058	nd	0.718	0.046										
L11	1-May-04			560	-	nd	-	-	2.0	911	524	7.15	-	586	-	0.64	21	0.2	-	36.9	-	0.006	nd	0.791	0.053										
L11	1-Nov-04			440	-	nd	-	-	2.7	780	418	7.93	-	454	-	0.64	21	0.8	-	15.7	-	nd	nd	0.524	0.035										
L11	1-May-07			552	0.04	<2	-	-	4.2	1090	513	6.85	-	718	-	1	9	4.12	-	29.8	-	<0.0002	<0.01	0.0004	0.762	0.188									
L11	1-Aug-07			506	0.32	2	-	-	2.0	1110	531	6.58	-	733	-	0.7	10	0.9	-	29	-	<0.0002	0.12	0.0003	0.766	0.082									
L11	1-Oct-07			500	0.51	5	-	-	3.0	967	587	6.37	-	638	-	1.1	63	1.7	-	17	-	<0.0002	0.01	0.0004	0.541	0.241									
L11	1-Jun-08			448	0.15	<2	-	-	3.4	1030	520	6.98	-	564	-	1	11	1.2	-	34	-	<0.01	0.003	0.783	0.098										
L11	1-Sep-08			472	0.77	<2	-	-	2.1	930	489	6.73	-	512	-	1.2	15	1.6	-	15	-	<0.0002	0.02	0.0001	0.611	0.042									
L11	1-Nov-08			516	0.32	4	-	-	1.7	989	533	7.17	-	544	-	1.7	11	1.1	-	18	-	0.04	<0.03	0.728	0.072										
L11	1-Apr-09			502	0.39	<2	-	-	2.5	1050	602	7.15	<0.001	578	-	2	10	2.2	-	38	-	<0.0002	0.03	0.001	0.866	0.091									
L11	1-Apr-09			475	0.4	<2	-	-	2.5	1060	600	7.21	<0.001	583	-	2	10	2.2	-	37	-	<0.0002	0.03	0.0011	0.787	0.089									
L11	1-Nov-09			472	0.77	<2	-	-	2.1	930	489	6.73	<0.001	512	360	1.2	15	1.6	<0.1	15	-	<0.0002	0.02	0.0001	0.611	0.042									
L11	15-Apr-10			577	0.38	<2	-	-	2.4	1130	621	7.48	<0.001	622	114	0.73	14	5.1	<0.1	28	-	<0.0002	<0.01	0.0002	0.861	0.09									
L11	6-Dec-10			388	0.6	<2	-	-	1.75	2.0	1030	478	7.87	<0.001	566	-	0.9	22	1.5	<0.1	17	-	<0.0002	0.1	0.0002	0.615	0.057								
L11	1-Jun-11			531	0.64	<2	-	-	5.7	3.4	1100	575	7.45	<0.001	1.9	607	9180	1.2	11	5.6	<0.1	30	-	<0.0002	0.11	0.0002	0.831	0.12							
L11	1-Nov-11			465	0.96	<2	-	-	1.4	893	414	7.48	<0.001	481	-	1.1	11	1.2	<0.1	11	-	0.0003	0.07	0.0002	0.651	0.046									
L11	30-May-12			443	0.67	5	-	-	2.3	1.3	910	4.96	7.4	<0.001	0.25	501	1930	0.4	23	1.5	<0.1	15	-	<0.0002	0.13	0.0002	0.562	0.041							
L11	11-Jul-13			487	0.06	-	-	-	2.4	1.9	934	-	7.56	<0.001	0.22	607	-	0.22	19	2.48	<0.10	20	-	<0.001	-	<0.001	0.53	0.04							
L11	11-Jul-13			486	0.06	-	-	-	1.9	935	72	7.5	<0.001	0.2	608	-	0.11	19	2.64	<0.10	20	-	<0.001	-	<0.001	0.58	0.05								
L11	25-Oct-13			485	0.094	<2.0	-	-	2.3	990	527	7.5	-	580	2000	0.8	24	2.28	-	16.9	-	<0.0010	0.08	<0.0010	0.56	0.033									
L11	20-Jun-14			568	<0.050	<2.0	-	-	2.3	2.9	1180	667	6.93	0.0018	0.118	712	112	-	14	5.45	<0.10	43.6	-	<0.0010	<0.010	<0.010	0.758	0.13							
L11	24-Oct-14			487	<0.050	<2.0	-	-	1.6	914	525	7.33	<0.010	0.245	574	460	1.21	21	1.7	<0.10	19.3	-	<0.0010	<0.010	<0.010	0.618	0.08								
L11	29-May-15			460	0.08	<2	-	-	2.0	926	159	7.5	<0.001	0.7	530	680	0.7	13	3	<0.05	15	-	<0.0001	0.002	<0.001	0.487	0.07								
L11	17-Nov-15			500	0.04	<2	-	-	46	<0.5	970	55	7.52	<0.001	0.45	548	1190	0.5	1.1	<0.001	<0.001	12	-	<0.001	<0.001	0.421	0.054								
L11	30-Nov-16			512	0.04	<2	-	-	36	1.4	902	5.01	7.2	<0.001	0.53	518	790	0.3	11	0.5	<0.05	12	-	<0.001	0.014	<0.001	0.455	0.042							
L11	17-Nov-17			530	0.67	<2	-	-	1.5	942	433	7.4	0.003	0.18	574	43	0.7	18	0.9	<0.05	18	-	<0.001	<0.001	<0.001	0.476	0.042								
L11	17-Nov-17			531	0.67	<2	-	-	1.5	942	433	7.4	0.003	0.18	574	43	0.7	18	0.9	<0.05	18	-	<0.001	<0.001	<0.001	0.476	0.042								
L11	13-Nov-18			388	0.03	6	-	-	4.5	3.7	789	418	7.52	0.003	0.05	414	600	0.5	13	0.005	10	-	<0.0002	0.07	<0.001	0.374	0.021								
L11	14-May-19			460	0.03	<3	-	-	11	5.7	957	537	7.41	<0.002	0.13	509	98	0.5	14	3.30	<0.05	18	-	<0.0002	0.08	<0.001	0.539	0.067							
L11	19-W012			365	0.03	<3	-	-	1.9	918	410	7.97	<0.002	0.09	374	42	0.2	7	0.36	<0.05	5	-	<0.0002	0.07	<0.0001	0.358	0.019								
L2	1-Nov-02			668	1.14	1.2	-	-	1.060	699	739	6.99	-	684	-	1.5	35	<0.2	<0.2	26.9	-	<0.0002	0.08	<0.002	0.82	0.124									
L2	1-Jul-03			594	1.09	4.1	-	-	2.6	1110	612	7.27	-	652	-	1.44	26	2.5	-	29.2	-	nd	nd	1.57	0.094										
L2	1-Oct-03			534	0.6	nd	-	-	2.2	906	535	7.06	-	606	-	1.09	29	2	-	27.1	-	nd	nd	1.54	0.097										
L2	1-May-04			516	-	nd	-	-	1.4	884	505	7.07	-	558	-	0.79	21	0.8	-	29.4	-	nd	nd	1.22	0.07										
L2	1-May-04			520	-	nd	-	-	1.5	887	511	7.07	-	564	-	0.87	22	1.1	-	31.1	-	nd	nd	1.18	0.066										
L2	1-Nov-04			530	-	nd	-	-	1.7	957	539	7.7	-	512	-	0.88	21	3.1	-	29.8	-	nd	nd	1.42	0.064										
L2	1-May-07			396	0.09	<2	-	-	2.0	802	417	7.25	-	529	-	0.9	15	0.391	-	20.2	-	<0.0002	<0.01	0.0003	0.454	0.016									
L2	1-Aug-07			440	0.05	4	-	-	3.5	1030	365	6.86	-	680	-	0.3	16	2.6	-	12	-	<0.0002	0.52	0.001	0.724	0.028									
L2	1-Oct-07			456	<0.05	4	-	-	1.5	898	511	6.51	-	586	-	1.2	15	1.2	-	31.1	-	<0.0002	<0.01	0.0003	0.839	0.022									
L2	1-Jun-08			323	<0.05	2	-	-	1.1	700	335	7.43	-	385	-	0.7	31	0.6	-	8	-	<0.01	0.004	0.442	0.016										
L2	1-Sep-08			392	<0.05	2	-	-	1.6	783	396	7.23	-	431	-	0.2	8	0.9	-	7	-	<0.01	0.003	0.563	0.013										
L2	1-Nov-08			423	<0.05	2	-	-	1.1	820	451	7.32	-	451	-	0.1	11	1.2	<0.1	9	-	<0.01	<0.03	0.72	0.016										
L2	1-Nov-08			420	<0.05	2	-	-	1.1	816	449	7.33	-	449	-	0.1	11	1.1	<0.1	8	-	<0.01	<0.03	0.73	0.013										
L2	1-Apr-09			385	<0.05	2	-	-	1.2	800	450	7.44	<0.001	440	-	0.4	16	0.6	-	7	-	<0.0002	<0.01	<0.001	0.587										

Historical Overburden Groundwater Analytical Results

PARAMETERS			Alkalinity	N - Ammonia	BOD	COD	DOC	Conductivity	Hardness	pH	Phenols	Phosphorus (total)	Total Dissolved Solids	Total Suspended Solids	Total Kjeldahl - N	Chloride	N - Nitrate	N - Nitrite	Sulphate	Mercury	Aluminum	Arsenic	Barium	Boron
Groundwater Sampling Location	Sample ID	Date	mg/L	mg/L	mg/L	mg/L	µmho/cm	mg/L	pH Units	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L
Units	RL	OG	30-500	0.01	3	5	0.2	1	80-100	6.5 - 8.5	0.002	0.01	1	3	0.1	0.5	0.05	0.01	500	0.00002	0.1	0.0001	0.001	0.005
AC	OG	AC	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG
OW20	17-Nov-15	background	232	0.09	<2	65	<0.5	460	242	7.8	<0.001	2.76	370	13200	0.3	2	<0.1	<0.05	23	<0.0001	0.001	<0.001	0.168	0.01
OW20	5-Jul-16		237	0.08	26	71	<0.5	476	239	7.9	<0.001	1.95	252	8070	<0.1	2	<0.1	<0.05	22	<0.0001	<0.001	0.001	0.175	<0.010
OW20	1-Dec-16		232	0.1	3	72	<0.5	464	206	8	<0.001	2.75	302	6820	0.2	2	<0.1	<0.05	22	<0.0001	0.002	<0.001	0.222	<0.010
OW20	31-Jul-17		251	0.17	8	74	1.3	459	250	7.9	<0.002	45.3	336	120000	2.4	1	<0.1	<0.05	21	<0.0001	0.002	0.002	0.258	<0.01
OW20	16-Nov-17		267	0.27	<60	374	<0.5	482	243	7.8	<0.004	12.3	304	526000	0.8	2	<0.1	<0.05	23	<0.0001	0.007	0.001	0.204	<0.01
OW20	25-Apr-18		226	0.09	6	24	3.1	465	249	8.3	<0.001	0.24	246	233000	0.4	2	0.06	<0.05	19	<0.00002	0.04	0.0017	0.174	0.008
OW20	14-Nov-18		230	0.09	5	105	2.3	463	245	7.75	<0.001	4.55	239	37000	0.3	1	<0.05	<0.05	20	<0.00002	0.04	0.0004	0.192	<
OW20	25-Apr-18		233	0.02	3	<5	2.3	463	253	8.25	<0.001	0.09	245	25	0.1	1	<0.05	<0.05	19	<0.00002	0.04	0.0003	0.154	0.007
OW20	14-May-19		227	0.06	7	1600	14.8	464	269	8.08	<0.002	79.0	240	231000	2.7	1	0.06	<0.05	21	<0.00002	0.04	0.0003	0.167	0.007
OW20	19-W030	Low Flow	226	0.08	3	70	3.2	464	263	8.16	<0.002	56.4	240	188000	1.9	<0.5	<0.05	<0.05	18	<0.00002	0.04	0.0003	0.185	<0.005
OW21	5-Jul-16		219	0.22	51	65	1.0	482	238	7.9	<0.001	3.07	268	5790	0.4	4	<0.1	<0.05	38	<0.0001	<0.001	<0.001	0.113	0.072
OW21	1-Dec-16		251	0.03	<2	39	0.6	512	228	7.9	<0.001	2.38	312	5170	0.3	6	1	<0.05	19	<0.0001	<0.001	<0.001	0.301	0.024
OW21	31-Jul-17		246	0.09	<2	13	<0.5	488	262	7.8	<0.001	0.15	372	568	0.1	7	4.4	<0.05	18	<0.0001	<0.001	<0.001	0.262	0.025
OW21	16-Nov-17		248	0.03	<2	48	2.4	510	269	7.8	<0.001	0.23	336	916	<0.1	8	6	<0.05	20	<0.0001	0.002	<0.001	0.317	0.022
OW21	24-Apr-18		215	0.19	<2	<5	2.0	519	273	8.15	<0.001	2.11	275	2630	0.4	8	10.1	<0.05	17	<0.00002	0.05	<0.00010	0.291	0.02
OW21	14-Nov-18		207	0.02	4	<5	2.3	550	283	7.83	<0.001	0.51	285	1240	0.2	11	12.8	<0.05	16	<0.00002	0.05	<0.0001	0.311	0.022
OW21	14-May-19		191	0.04	<3	24	2.6	563	311	8.00	<0.002	0.71	292	670	0.2	12	15.8	<0.05	15	<0.00002	0.06	<0.0001	0.325	0.023
OW21	19-W029		198	0.04	<3	<5	2.9	521	286	7.9	<0.002	0.17	270	650	0.1	10	11.5	<0.05	15	<0.00002	0.06	<0.0001	0.311	0.022
OW22	17-Nov-15		245	0.06	<2	58	<0.5	507	267	7.8	<0.001	1.48	286	1660	0.4	8	0.69	<0.05	21	<0.0001	<0.001	<0.001	0.268	0.023
OW22	1-Dec-16		227	0.12	<2	41	<0.5	469	205	8	<0.001	2.25	320	5690	0.3	4	<0.1	<0.05	38	<0.0001	<0.001	<0.001	0.123	0.085
OW22	31-Jul-17		717	4.23	N/A	73	9.4	1420	910	7.4	0.006	0.24	902	436	4.4	65	<0.1	<0.05	119	<0.0001	0.001	0.001	0.156	0.266
OW22	25-Apr-18		507	1.8		72	14.8	1430	574	7.85	<0.001	0.24	778	78	1.72	114	0.05	114	<0.00002	0.08	0.0006	0.167	0.26	
OW22-D	4-Jul-16		540	0.98	<30	137	3.0	1230	579	7.2	0.003	5.97	702	20700	1.3	69	<0.1	<0.05	48	<0.0001	<0.001	<0.001	0.512	0.218
OW22-S	4-Jul-16		627	0.12	<60	326	3.8	1350	666	7.3	<0.010	3.56	546	339000	0.6	72	<0.1	<0.05	44	<0.0001	0.109	0.003	0.522	0.208
OW22	15-Dec-01		227	0.12	<2	41	<0.5	469	205	8	<0.001	2.25	320	5690	0.3	4	<0.1	<0.05	38	<0.00010	<0.001	<0.0010	0.117	0.113
OW22	17-Jul-31		717	4.23	N/A	73	9.4	1420	910	7.4	0.006	0.24	902	436	4.4	65	<0.1	<0.05	119	<0.00002	0.001	0.001	0.156	0.266
OW22	25-Apr-18		507	1.8	0	72	0.0	1430	575	7.85	<0.001	0.24	778	0	2.8	93	<0.05	114	<0.00002	0.08	0.0006	0.167	0.260	
OW22	14-May-19	dry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
OW22	9-Oct-19	dry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
OW23	17-Nov-15		216	0.18	<2	75	<0.5	464	242	8	<0.001	3.66	464	8470	0.8	4	<0.1	<0.05	37	<0.0001	<0.001	<0.001	0.103	0.114
OW23	17-Nov-15	DUP	244	0.07	<2	76	<0.5	459	265	7.8	<0.001	3.1	248	2670	0.7	72	<0.1	<0.05	46	<0.0001	<0.001	<0.001	0.501	0.238
OW23	4-Jul-16		246	0.07	<0	73	<0.5	466	268	7.7	<0.001	1.92	392	9470	0.2	6	0.9	<0.05	20	<0.0001	<0.001	<0.001	0.284	0.025
OW23	31-Jul-17		232	0.13	<2	31	0.5	467	246	7.9	<0.001	2	380	2670	0.7	2	<0.1	<0.05	38	<0.0001	0.04	<0.001	0.122	0.08
OW23	16-Nov-17		235	0.1	7	45	1.1	472	234	7.9	<0.001	1.25	382	2610	0.2	5	<0.1	<0.05	40	<0.0001	0.001	<0.001	0.14	0.063
OW23	24-Apr-18		211	0.21	3	25	2.1	462	245	8.19	<0.001	5.1	244	16000	0.7	5	0.06	<0.05	36	<0.00002	0.04	0.0005	0.122	0.065
OW23	14-Nov-18		208	0.13	7	87	3.0	470	240	7.92	<0.001	4.33	243	8000	0.7	5	<0.05	<0.05	38	<0.00002	0.03	0.0007	0.132	0.071
OW23	14-May-19		196	0.14	<3	29	3.2	462	258	8.1	<0.001	1.80	243	6600	0.7	3	0.10	<0.05	35	<0.00002	0.04	0.0005	0.140	0.068
OW23	9-Oct-19		203	0.18	<3	37	2.9	466	250	8.05	<0.002	1.63	241	27000	0.5	3	<0.05	<0.05	36	<0.00002	0.06	0.0006	0.155	0.072
OW24	17-Nov-15		313	0.06	5	52	4.6	633	327	7.7	0.001	1.03	404	1070	0.6	4	<0.1	<0.05	36	<0.0001	<0.001	0.003	0.186	0.04
OW24	4-Jul-16		303	0.23	3	31	2.6	627	324	7.6	0.002	0.24	364	310	0.5	6	<0.1	<0.05	32	<0.0001	<0.001	0.007	0.193	0.04
OW24	1-Dec-16		288	0.06	<2	25	3.4	598	264	7.8	<0.001	0.33	374	248	0.3	8	<0.1	<0.05	39	<0.0001	<0.001	0.001	0.192	0.045
OW24	2-Aug-17		290	0.33	<30	165	5.2	555	318	7.7	<0.001	1.86	372	18500	2.1	7	<0.1	<0.05	47	<0.0001	0.004	0.003	0.14	0.031
OW24	16-Nov-17		307	0.1	<20	134	1.7	616	243	8	<0.001	0.49	402	1470	0.5	8	<0.1	<0.05	48	<0.0001	0.003	0.002	0.129	0.037
OW24	24-Apr-18		290	0.12	2	24	4.4	570	287	8.12	<0.001	1.04	302	2040	0.5	6	0.05	0.06	35	<0.00002	0.06	0.0013	0.164	0.042
OW24	14-Nov-18		253	0.3	3	210	2.3	590	223	7.52	<0.003	5.1	306	6660	10.8	8	<0.1	<0.05	42	<0.0001	0.04	0.0019	0.137	0.048
OW24	24-Apr-18	Low Flow	264	0.1	<2	<5	3.5	579	259	8.07	<0.001													

Historical Overburden Groundwater Analytical Results

PARAMETERS			Calcium	Calcium	Chromium	Cobalt	Copper	Iron	Lead	Magnesium	Manganese	Potassium	Silver	Sodium	Strontium	Uranium	Vanadium	Zinc	Temperature (Field)	pH (Field)	DO (Field)	Conductivity (Field)	Unfiltered Ammonia (Field)
Groundwater Sampling Location	Sample ID	Date	Units	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	°C	pH Units	mg/L	mS/cm	mg/L
			RL	0.00015	0.02	0.001	0.0001	0.0001	0.05	0.0002	0.02	0.061	0.1	0.0001	0.2	0.001	0.0005	0.005	0.005	15	6.5-8.5	-	-
			CS	CS	CS	AO	AO	CS	AO	AO	AO	AO	AO	AO	AO	AO	AO	AO	AO	OG	OG	OG	OG
L11		1-Nov-02	<0.0001	124	<0.005	0.0071	0.0006	0.26	<0.0005	30.8	0.799	3.1	<0.0001	7	0.215	0.0007	<0.0005	<0.005	-	-	-	-	-
L11		1-Jul-03	nd	146	-	-	nd	0.93	nd	33.8	0.905	6.5	-	8.5	-	-	-	nd	-	-	-	-	-
L11		1-Oct-03	nd	153	-	-	0.0006	0.2	0.0008	35.1	0.997	3.8	-	10.3	-	-	-	nd	-	-	-	-	-
L11		1-May-04	nd	156	nd	0.0132	0.0013	0.05	0.001	32.8	1.1	5.2	nd	9.2	0.334	0.001	nd	0.007	-	-	-	-	-
L11		1-Nov-04	nd	121	nd	0.0058	nd	0.15	nd	28	0.757	3.4	nd	7.5	0.231	0.0007	nd	nd	-	-	-	-	-
L11		1-May-07	<0.0002	162	-	-	<0.002	0.369	<0.0002	38.3	0.671	12.2	-	14.9	-	-	-	nd	-	-	-	-	-
L11		1-Aug-07	0.00011	158	-	-	0.004	0.085	0.00022	32.9	0.459	8.7	-	9.6	-	-	-	0.016	-	-	-	-	-
L11		1-Oct-07	<0.0002	161	-	-	<0.002	0.787	<0.0002	40	0.534	9.3	-	21.3	-	-	-	<0.005	-	-	-	-	-
L11		1-Jun-08	<0.0002	159	0.0054	-	0.004	0.034	0.00056	30.1	0.561	10.5	-	8.6	-	-	-	0.017	-	-	-	-	-
L11		1-Sep-08	<0.0002	161	-	-	<0.002	0.094	0.00033	33.1	0.644	8.6	-	9.2	-	-	-	0.01	-	-	-	-	-
L11		1-Nov-08	<0.005	161	-	-	<0.002	0.466	<0.0002	40	0.709	8.3	-	9.5	-	-	-	<0.005	-	-	-	-	-
L11		1-Apr-09	<0.0002	185	0.0008	-	<0.002	0.088	<0.0002	34.1	0.617	12.2	<0.0002	6.6	0.428	0.00103	-	<0.005	-	-	-	-	-
L11		1-Apr-09	<0.0002	184	<0.0002	-	<0.002	0.072	<0.0002	34.1	0.561	12.3	<0.0002	6.6	0.422	0.00084	-	<0.005	-	-	-	-	-
L11		1-Nov-09	<0.0002	144	<0.0002	-	0.0025	0.016	<0.0002	31.5	0.561	12.2	-	7.3	-	-	-	0.018	-	-	-	-	-
L11		15-Apr-10	0.00006	191	<0.002	-	<0.002	0.008	0.00006	35.1	0.662	10.9	-	8.3	-	-	-	0.007	-	-	-	-	-
L11		6-Dec-10	<0.0002	138	<0.002	-	<0.002	0.072	0.00009	32.5	0.67	8.8	-	9.1	-	-	-	<0.005	-	-	-	-	-
L11		1-Jun-11	0.00007	173	0.0032	-	<0.002	0.051	0.00016	34.5	0.505	11.5	-	6.6	-	-	-	0.05	-	-	-	-	-
L11		11-Nov-11	0.0001	138	<0.002	-	<0.002	0.034	0.00014	30.6	0.456	9.9	-	7.8	-	-	-	<0.005	-	-	-	-	-
L11		30-May-12	0.00004	148	<0.002	-	<0.002	0.096	0.00004	30.9	0.437	5.9	-	5.1	-	-	-	<0.005	-	-	-	-	-
L11		11-Jul-13	<0.0001	160	0.003	-	<0.001	<0.03	<0.001	32	0.35	6	-	8	-	-	-	0.02	-	-	-	-	-
L11		11-Jul-13	<0.0001	160	0.001	-	<0.001	<0.03	<0.001	31	0.41	5	-	8	-	-	-	0.02	-	-	-	-	-
L11		25-Oct-13	<0.00043	157	-	-	<0.050	<0.0050	<0.0050	32.8	0.32	5.5	-	9.86	-	-	-	<0.005	-	-	-	-	-
L11		20-Jun-14	0.000132	207	<0.0050	-	0.0027	<0.050	<0.0050	36.7	0.139	10.8	<0.0010	9.2	-	-	-	0.0285	-	-	-	-	-
L11		24-Oct-14	0.000092	155	<0.00050	-	0.0012	<0.050	<0.00050	33.7	0.171	8.4	<0.00010	11.4	-	-	-	0.0126	-	-	-	-	-
L11		23-May-15	0.0001	135	0.005	0.001	0.0019	<0.100	0.001	24.1	0.027	5.4	<0.0001	7.49	0.275	0.0007	0.0089	0.053	-	-	-	-	-
L11		17-Nov-15	0.0001	153	<0.001	0.0023	0.0005	<0.100	0.0002	34.1	0.146	<0.0001	<0.0001	<20000	0.234	0.0008	0.0098	0.02	-	-	-	-	-
L11		30-Nov-16	<0.0001	146	<0.001	0.0031	0.0015	<0.100	<0.0001	33.1	0.125	4.16	-	10.4	0.242	0.0006	<0.0005	0.008	-	-	-	-	-
L11		17-Nov-17	<0.0001	126	<0.0001	0.0029	<0.0005	<0.1	<0.0001	28.6	0.071	4.5	<0.0001	10.4	0.301	0.0007	<0.0005	<0.005	-	-	-	-	-
L11		24-Apr-18	0.00008	168	<0.0001	0.0025	0.0016	0.013	<0.0002	35.4	0.042	7.3	<0.0002	10.7	0.319	0.00086	<0.005	<0.005	-	-	-	-	-
L11		13-Nov-18	0.00036	119	<0.0001	0.0012	0.00004	0.009	0.00004	29.2	0.004	3.4	<0.0001	7.4	0.209	0.0005	<0.005	0.007	-	-	-	-	-
L11		14-May-19	0.00056	159	0.002	0.0013	0.0017	<0.005	0.00004	34.0	0.002	6.7	<0.0001	8.5	0.311	0.00061	<0.005	0.013	9.52	6.95	6.51	0.88	<
L11	19-W012	10-Oct-19	0.00043	117	<0.0001	0.0008	0.0028	0.041	0.00005	28.5	0.002	3.2	<0.0001	9.2	0.209	0.00047	<0.005	0.006	9.01	5.87	4.46	1.24	<
L2		1-Nov-02	<0.0001	165	<0.005	0.0002	<0.002	nd	nd	47.9	0.009	8.4	<0.0001	15	0.43	0.0009	0.0008	<0.005	-	-	-	-	-
L2		1-Jul-03	nd	167	-	-	nd	nd	nd	46.9	0.019	7.5	-	11.4	-	-	-	nd	-	-	-	-	-
L2		1-Oct-03	nd	147	-	-	nd	nd	nd	40.8	0.019	6.6	-	10.5	-	-	-	nd	-	-	-	-	-
L2		1-May-04	nd	138	nd	0.0001	0.0014	nd	nd	38.9	nd	5.2	nd	8.1	0.292	0.0006	nd	nd	-	-	-	-	-
L2		1-Nov-04	nd	136	nd	0.0001	0.0009	nd	nd	39	nd	5	nd	8.3	0.284	0.0007	nd	0.0007	-	-	-	-	-
L2		1-May-07	<0.0002	115	-	-	<0.002	<0.005	<0.0002	31.8	0.015	2.5	-	26.7	-	-	-	0.009	-	-	-	-	-
L2		1-Aug-07	<0.0002	90.5	-	-	0.004	1.32	0.00094	33.7	0.023	3.3	-	11.7	-	-	-	0.012	-	-	-	-	-
L2		1-Oct-07	<0.0002	137	-	-	<0.002	<0.005	<0.0002	41	<0.001	5.5	-	13.6	-	-	-	<0.005	-	-	-	-	-
L2		1-Jun-08	<0.0002	91.3	0.0038	-	<0.002	<0.005	0.00071	25.9	<0.001	1.9	-	16.5	-	-	-	0.007	-	-	-	-	-
L2		1-Sep-08	<0.0002	108	<0.002	-	<0.002	<0.005	0.00031	30.6	<0.001	2.4	-	10.5	-	-	-	0.009	-	-	-	-	-
L2		1-Nov-08	<0.005	-	-	-	<0.002	<0.005	<0.0002	-	0.025	2.9	-	7.2	-	-	-	<0.005	-	-	-	-	-
L2		25-Oct-13	<0.0002	125	<0.0002	-	<0.002	0.032	<0.0002	33.6	0.02	2.2	<0.0002	7.4	0.178	0.00039	-	<0.005	-	-	-	-	-
L2		1-Nov-09	<0.0002	128	0.024	-	<0.002	0.033	<0.0002	39.1	0.001	2.7	-	4.6	-	-	-	<0.005	-	-	-	-	-
L2		1-Apr-10	<0.0002	127	<0.002	-	<0.002	0.024	<0.0002	34.1	0.018	2	-	8.7	-	-	-	<0.005	-	-	-	-	-
L2		7-Dec-10	0.00003	132	<0.002	-	<0.002	0.044	0.00003	30.6	0.001	2.6	-	5.5	-	-	-	<0.005	-	-	-	-	-
L2		1-Jun-11	<0.0002	117	0.0267	-	<0.002	0.174	0.0002	31.4	0.007	2	-	30.6	-	-	-	<0.005	-	-	-	-	-
L2		30-May-12	<0.0002	144	0.002	-	<0.002	0.113	<0.001	42.7	0.008	2.6	-	7.1	-	-	-	<0.005	-	-	-	-	-
L2		11-Jul-13	<0.0001	126	0.004	-	<0.001	<0.03	<0.001	34	<0.01	2	-	25	-	-	-	<0.01	-	-	-	-	-
L2		25-Oct-13	<0.0002	173	-	-	<0.050	<0.0050	<0.0050	30.1	0.223	1.4	-	22.3	-	-	-	0.008	-	-	-	-	-
L2		20-Jun-14	<0.00090	49.5	0.00059	-	<0.010	<0.050	<0.00050	12.3	<0.0010	1.2	<0.00010	19.8	-	-	-	<0.0030	-	-	-	-	-

Historical Overburden Groundwater Analytical Results

PARAMETERS			Caesium	Calcium	Chromium	Cobalt	Copper	Iron	Lead	Magnesium	Manganese	Potassium	Silver	Sodium	Strontium	Uranium	Vanadium	Zinc	Temperature (Field)	pH (Field)	DO (Field)	Conductivity (Field)	Un-ionized Ammonia (Field)
Groundwater Sampling Location	Sample ID	Date	Units	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	°C	pH Units	mg/L	mS/cm	mg/L
RL	ODWS	CS	CS	CS	CS	CS	CS	CS	CS	CS	CS	CS	CS	CS	CS	CS	CS	CS	AO	AO	OG	OG	OG
OW20		17-Nov-15	background	<0.0001	51.7	<0.001	<0.0005	<0.0005	<0.100	<0.0001	27.3	0.048	<10000	<0.0001	<20000	0.133	0.0012	0.003	<0.005	-	-	-	-
OW20		5-Jul-16		<0.0001	51.7	<0.001	<0.0005	0.0012	<0.100	<0.0001	26.6	0.023	1.67	<0.0001	5.24	0.129	0.0012	<0.0005	<0.005	-	-	-	-
OW20		1-Dec-18		<0.0001	43.5	<0.001	<0.0005	<0.0005	0.173	<0.0001	23.8	0.035	1.48	<0.0001	4.03	0.139	0.0002	<0.0005	<0.005	-	-	-	-
OW20		31-Jul-17		<0.0001	51.6	<0.001	<0.0005	<0.0005	<0.1	<0.0001	29.4	0.015	1.78	<0.0001	4.67	0.128	0.0012	0.0023	<0.005	-	-	-	-
OW20		16-Nov-17		<0.0001	53.7	<0.001	<0.0005	<0.0005	<0.1	<0.0001	26.5	0.026	1.52	0.0001	4.83	0.137	0.0017	<0.0005	<0.005	-	-	-	-
OW20		25-Apr-18		<0.000015	54.6	<0.0001	0.0006	0.0003	0.012	0.00005	27.4	0.016	1.7	<0.00002	5.4	0.134	0.00118	<0.005	<0.005	-	-	-	-
OW20		14-Nov-18		<0.00002	53.1	<0.0001	0.0002	<0.00001	0.087	<0.00002	27.3	0.015	1.6	<0.0001	4.8	0.136	0.00054	<0.005	<0.005	-	-	-	-
OW20		25-Apr-18	Low Flow	<0.000015	55.6	<0.0001	0.0006	0.0006	0.009	0.00008	27.7	0.015	1.6	<0.00002	5.4	0.134	0.00133	<0.005	<0.005	-	-	-	-
OW20		14-May-19		<0.000015	58.8	<0.001	<0.0001	<0.0001	0.036	<0.00002	29.7	0.017	1.6	<0.0001	4.8	0.141	0.00100	<0.005	<0.005	8.22	7.85	2.83	0.47
OW20		9-Oct-19		<0.000015	58.5	<0.001	0.0003	<0.0001	0.048	0.00002	28.4	0.017	1.6	<0.0001	4.8	0.142	0.00101	<0.005	<0.005	9.96	6.53	8.81	0.828
OW21		5-Jul-16		<0.0001	51.8	<0.001	<0.0005	<0.0005	0.247	<0.0001	26.4	0.013	1.56	<0.0001	6.46	0.145	0.0002	<0.0005	<0.005	-	-	-	-
OW21		1-Dec-16		<0.0001	54.9	<0.001	<0.0005	<0.0005	<0.100	<0.0001	22.1	<0.0005	1.28	<0.0001	3.31	0.128	0.0009	0.0006	<0.005	-	-	-	-
OW21		31-Jul-17		<0.0001	62.7	0.001	<0.0005	<0.0005	<0.1	<0.0001	25.7	<0.0005	1.28	<0.0001	3.7	0.12	0.0009	0.0022	<0.005	-	-	-	-
OW21		16-Nov-17		<0.0001	66.7	<0.001	<0.0005	<0.0005	<0.1	<0.0001	24.9	<0.0005	1.3	<0.0001	6.43	0.134	0.0008	0.0007	<0.005	-	-	-	-
OW21		24-Apr-18		<0.000015	66.4	<0.0001	<0.00001	0.0002	<0.005	<0.00002	26	<0.001	1.2	<0.0001	4.2	0.13	0.00082	<0.005	<0.005	-	-	-	-
OW21		14-Nov-18		<0.00002	68.8	<0.0001	<0.00001	0.0005	<0.005	<0.00002	27	<0.001	1.4	<0.0001	4.1	0.137	0.00086	<0.005	<0.005	-	-	-	-
OW21		14-May-19		<0.000015	75.7	0.002	<0.0001	0.0002	<0.005	<0.00002	29.6	<0.001	1.4	<0.0001	3.9	0.148	0.00071	<0.005	<0.005	8.00	7.73	4.35	0.58
OW21		9-Oct-19		<0.000015	70.4	<0.001	0.0002	0.0013	0.020	0.00003	29.7	<0.001	1.4	<0.0001	4.1	0.14	0.00084	<0.005	<0.005	10.76	6.48	9.20	0.918
OW22		17-Nov-15		<0.0001	44.9	<0.001	<0.0005	<0.0005	<0.100	<0.0001	25	<0.0005	<10000	<0.0001	<20000	0.117	0.0007	0.0037	<0.005	-	-	-	-
OW22		1-Dec-16		<0.0001	292	0.002	0.0061	<0.0005	<0.100	<0.0001	22.6	0.014	1.72	<0.0001	6.12	0.445	0.0002	<0.0005	<0.005	-	-	-	-
OW22		31-Jul-17		<0.0001	292	0.002	0.0061	<0.0005	<0.100	<0.0001	43.8	2.35	21.3	<0.0001	64.2	0.477	0.0011	0.0051	<0.005	-	-	-	-
OW22		25-Apr-18		<0.00004	161	<0.0001	0.0008	0.0028	<0.005	0.00006	21.2	0.002	25.5	<0.00002	81.3	0.497	0.00165	0.017	<0.005	-	-	-	-
OW22-D		4-Jul-16		<0.0001	145	<0.001	<0.0005	<0.0005	2.11	<0.0001	52.9	0.109	8.18	<0.0001	39.2	0.507	0.0022	<0.0005	<0.005	-	-	-	-
OW22-S		4-Jul-16		<0.0001	141	<0.001	<0.0005	<0.0005	1.14	<0.0001	76	0.065	3.74	<0.0001	38.6	0.767	0.0004	0.0011	<0.005	-	-	-	-
OW22		15-Dec-01		<0.1	44600	<0.001	<0.5	<0.5	<0.0001	22603	14	1720	<0.00002	8120				<0.005	-	-	-	-	-
OW22		17-Jul-01		<0.1	292000	0.002	0.0081	0.5	1970	0.00001	43000	2.35	21300	<0.00002	477	0.0011	5.1	<0.005	-	-	-	-	-
OW22		25-Apr-18		0.054	161000	<0.001	0.0088	0.028	<0.005	0.0006	42000	2	25500	<0.00002	81.3	497	0.00165	17	<0.005	-	-	-	-
OW22		14-May-19	dry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
OW22		9-Oct-19	dry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
OW23		17-Nov-15		<0.0001	51.4	<0.001	<0.0005	<0.0005	<0.100	<0.0001	27.5	0.012	<10000	<0.0001	<20000	0.516	0.0001	0.0026	<0.005	-	-	-	-
OW23		17-Nov-15	DUP	<0.0001	158	<0.001	<0.0005	<0.0005	2.36	<0.0001	53.2	0.079	<10000	<0.0001	41.3	0.672	0.002	0.0092	<0.005	-	-	-	-
OW23		4-Jul-16		<0.0001	65.8	<0.001	<0.0005	<0.0005	<0.100	<0.0001	25.1	<0.0005	1.2	<0.0001	3.36	0.119	0.0008	<0.0005	<0.005	-	-	-	-
OW23		31-Jul-17		<0.0001	52.3	<0.0001	<0.0005	<0.0005	0.256	<0.0001	27.7	0.023	1.72	<0.0001	6.44	0.459	0.0032	0.0014	<0.005	-	-	-	-
OW23		16-Nov-17		<0.0001	52.6	<0.0001	<0.0005	<0.0005	0.106	<0.0001	25	0.015	1.64	<0.0001	7.88	0.464	0.0003	<0.0005	<0.005	-	-	-	-
OW23		24-Apr-18		<0.000015	54.1	<0.0001	<0.00001	0.0001	0.107	0.00002	26.7	0.013	1.7	<0.0001	6.9	0.441	0.00045	<0.005	<0.005	-	-	-	-
OW23		14-Nov-18		<0.00002	53.1	<0.0001	<0.00001	0.0002	0.189	<0.00002	26.2	0.014	1.8	<0.0001	6.8	0.463	0.00032	<0.005	<0.005	-	-	-	-
OW23		14-May-19		<0.000015	56.9	<0.0001	<0.00001	0.0002	0.024	<0.00002	28.1	<0.001	1.9	<0.0001	4.6	0.476	0.00035	<0.005	<0.005	-	-	-	-
OW23		9-Oct-19		<0.000015	54.3	<0.001	0.0002	0.0004	0.134	0.00008	27.9	0.015	2.0	<0.0001	7.5	0.516	0.00034	<0.005	<0.005	7.33	7.88	2.42	0.47
OW24		17-Nov-15		<0.0001	82.8	<0.001	0.0008	<0.0005	0.283	<0.0001	29.1	0.523	204	<0.0001	57.3	0.752	0.0023	0.0041	<0.005	-	-	-	-
OW24		4-Jul-16		<0.0001	78	<0.001	<0.0005	<0.0005	1.3	<0.0001	31.4	0.286	1.84	<0.0001	5.4	0.564	0.0006	<0.0005	<0.005	-	-	-	-
OW24		1-Dec-16		<0.0001	65.6	<0.001	<0.0005	<0.0005	0.115	<0.0001	24.3	0.134	1.76	<0.0001	4.85	0.562	0.0004	<0.0005	<0.005	-	-	-	-
OW24		2-Aug-17		<0.0001	81.7	<0.0001	<0.0005	<0.0005	0.374	<0.0001	27.8	0.094	1.18	<0.0001	11.4	0.549	0.0005	<0.0005	<0.005	-	-	-	-
OW24		16-Nov-17		<0.0001	60.4	<0.0001	<0.0005	<0.0005	0.819	<0.0001	22.5	0.129	1.13	<0.0001	14.8	0.534	0.0011	<0.0005	<0.005	-	-	-	-
OW24		24-Apr-18		<0.000015	71	<0.0001	0.0002	<0.00001	0.208	<0.00002	26.6	0.056	1.5	<0.0001	17	0.538	0.00121	<0.005	<0.005	-	-	-	-
OW24		14-Nov-18		<0.00002	54.2	<0.0001	<0.00001	0.0002	0.321	<0.00002	21.2	0.037	1.9	<0.0001	49.2	0.429	0.0003	<0.005	<0.005	-	-	-	-
OW24		14-May-19	Low Flow	<0.000015	49.8	<0.001	0.0002	0.0008	3.35	0.00008	19.0	0.341	1.1	<0.0001	72.7	0.413	0.00217	<0.005	<0.005	6.89	7.18	0.00	0.67

Historical Bedrock Groundwater Analytical Results

PARAMETERS			Alkalinity	N - Ammonia	BOD	COD	DOC	Conductivity	Hemates	pH	Phenols	Phosphorus (total)	Total Dissolved Solids	Total Suspended Solids	N - Total Kjeldahl	Chloride	N - Nitrate	N - Nitrite	Sulfate	Mercury	Aluminum	Arsenic	Barium	Boron
Groundwater Sampling Location	Sample ID	Date	Units	mg/L	mg/L	mg/L	mg/L	µmho/cm	mg/L	pH Units	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L
			MDL (2019)	30-500	0.01	3	5	0.2	1	80-100	8.5-8.5	0.002	0.01	500	3	0.1	0.5	0.05	0.05	500	0.0002	0.01	0.001	0.001
			OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG	OG
122 Turk Rock Road		31-May-12	238	<0.005	7	12	1.3	553	280	7.95	<0.001	<0.01	304	2	0.4	33.3	6.1	<0.1	31	<0.0002	0.05	0.0003	0.08	0.006
122 Turk Rock Road		1-Nov-12	247	<0.005	3	29	2	313	280	7.9	<0.001	<0.01	318	2	0.2	3.6	5.8	<0.1	32	<0.0002	0.04	0.0004	0.07	<0.005
151 Briar Hill Rd		1-May-07	340	<0.05	<2	-	4	860	440	7.47	-	-	567	-	0.1	88	1.37	-	21.5	<0.0002	0.1	0.0002	0.062	0.008
151 Briar Hill Rd		1-Aug-07	348	<0.05	<2	-	1.3	868	396	7.25	-	-	573	-	1	61	1.4	-	20	<0.0002	0.02	0.0001	0.062	0.008
151 Briar Hill Rd		1-Oct-07	348	<0.05	<2	-	2.2	878	390	6.84	-	-	580	-	0.1	67	1.9	-	25	<0.0002	0.01	0.0002	0.053	<0.005
151 Briar Hill Rd		1-Nov-08	333	<0.05	<2	-	0.8	827	392	7.91	-	-	455	-	0.2	61	2.3	-	22	<0.0002	0.03	<0.03	0.049	<0.005
151 Briar Hill Rd		1-Apr-09	317	<0.05	<2	-	1.1	851	411	7.7	<0.001	<0.01	468	-	0.3	64	1.8	-	21	<0.0002	<0.01	0.0001	0.046	0.011
151 Briar Hill Rd		1-Nov-09	342	<0.05	<2	-	1.3	852	378	7.15	-	-	469	2	<0.1	64	2.2	-	22	<0.0002	<0.01	0.0002	0.056	<0.005
151 Briar Hill Rd		15-Apr-10	328	<0.05	<2	-	1.1	806	380	7.84	-	-	443	10	<0.05	54.8	2.1	<0.1	20	<0.0002	<0.01	<0.0001	0.056	0.005
151 Briar Hill Rd		15-Apr-10	326	<0.05	<2	-	1.1	806	380	7.84	-	-	443	10	<0.05	54.8	2.1	<0.1	20	<0.0002	<0.01	<0.0001	0.056	0.005
151 Briar Hill Rd		10-Dec-10	312	0.14	<2	<5	1	794	341	7.79	<0.001	<0.01	437	-	<0.1	44	2.1	<0.1	17	<0.0002	0.03	<0.0001	0.051	0.005
151 Briar Hill Rd		1-Jun-11	330	<0.05	<2	<5	1	809	397	7.98	<0.001	<0.01	445	4	0.2	54	1.5	<0.1	17	<0.0002	0.03	0.0002	0.057	0.006
151 Briar Hill Rd		11-Nov-11	324	<0.05	<2	<5	0.9	797	418	8.05	<0.001	<0.01	438	-	<0.1	50	2.1	<0.1	19	<0.0002	0.0001	0.0001	0.063	0.01
151 Fortune Line Rd		1-May-07	220	0.2	<2	-	3.3	986	555	7.56	-	-	651	-	0.2	93	0.243	-	144	<0.0002	<0.01	0.0012	0.03	0.324
151 Fortune Line Rd		1-Aug-07	240	0.12	<2	-	2.2	1070	361	7.42	-	-	707	-	0.2	110	0.2	-	130	<0.0002	0.02	0.0003	0.036	0.335
151 Fortune Line Rd		1-Oct-07	240	0.15	<2	-	1.7	1050	355	6.91	-	-	694	-	<0.1	165	<0.1	-	146	<0.0002	<0.01	0.0003	0.031	0.343
151 Fortune Line Rd		1-Nov-08	227	0.06	<2	-	1.4	1070	369	7.94	-	-	588	-	0.2	120	0.1	-	159	<0.0002	0.03	<0.03	0.049	<0.005
151 Fortune Line Rd		1-Nov-09	236	0.05	<2	-	1.7	1020	358	7.78	-	-	559	10	0.2	106	<0.1	-	164	<0.0002	<0.01	0.0004	0.028	0.312
151 Fortune Line Rd		15-Apr-10	210	<0.05	<2	-	1.3	960	353	8.04	<0.001	<0.01	528	18	0.05	93.8	<0.1	<0.1	168	<0.0002	<0.01	0.0009	0.028	0.299
151 Fortune Line Rd		9-Dec-10	225	0.22	<2	6	1.1	1140	358	8.05	<0.001	<0.01	629	-	0.2	126	<0.1	<0.1	167	<0.0002	0.03	<0.0001	0.031	0.368
151 Fortune Line Rd		31-May-12	224	0.08	8	10	1.3	1020	363	7.92	<0.001	<0.01	560	196	12.4	104	0.1	<0.1	159	<0.0002	0.03	<0.0001	0.037	0.312
151 Fortune Line Rd		1-Nov-12	235	0.09	<2	29	1.7	612	368	7.9	<0.001	<0.01	594	10	0.3	118	<0.1	<0.1	145	<0.0002	0.02	<0.0019	0.031	0.381
151 Fortune Line Rd		12-Jul-13	240	0.08	<2	<5	2.5	1070	-	8.2	<0.001	<0.01	696	-	0.11	103	<0.10	<0.10	167	<0.0001	<0.01	<0.0001	0.031	0.4
1757 Summers Road		1-Apr-10	445	<0.05	<2	-	2.5	823	359	7.72	<0.001	<0.01	453	2	0.14	18.9	10	<0.1	30	<0.0002	<0.01	0.0002	0.23	0.051
1757 Summers Road		12-Jul-13	392	<0.02	<2	<5	2.4	831	359	7.72	<0.001	<0.01	540	-	0.15	15	3.19	<0.10	32	<0.0001	<0.01	<0.0001	0.23	0.07
408 Fortune Line Rd.		9-Dec-10	311	0.07	<2	<5	1.2	910	398	7.83	<0.001	<0.01	501	-	<0.1	69	0.1	<0.1	53	<0.0002	0.03	0.0002	0.084	0.068
408 Fortune Line Rd.		31-May-12	330	<0.05	<2	<5	1.3	957	487	8.04	<0.001	0.04	526	4	0.1	80	0.1	<0.1	66	<0.0002	0.04	0.0003	0.1	0.08
408 Fortune Line Rd.		12-Jul-13	324	<0.02	5	18	1.1	830	430	7.84	<0.001	<0.01	540	-	0.15	15	3.19	<0.10	52	<0.0001	<0.01	<0.0001	0.1	0.08
BW1		1-May-07	340	0.27	4	-	10.9	1060	300	7.5	-	-	702	-	0.9	39.3	0.149	-	151	<0.0002	0.01	0.0002	0.165	0.532
BW1		1-Aug-07	328	0.19	6	-	5.3	1020	246	7.47	-	-	614	-	0.6	40	0.5	-	140	0.0005	0.07	0.0003	0.043	0.499
BW1		1-Oct-07	340	<0.05	<2	-	14	1050	290	7.24	-	-	684	-	0.7	61	0.4	-	158	<0.0002	0.01	<0.01	0.042	0.475
BW1		1-Jun-08	296	0.08	<2	<5	3.6	751	270	8.05	-	-	413	-	0.5	19	0.1	-	81	-	<0.01	0.0032	0.042	0.475
BW1		1-Sep-08	308	<0.05	<2	7	2.7	726	371	7.66	-	-	399	-	0.2	18	0.1	-	52	-	0.69	0.028	0.095	0.472
BW1		1-Nov-08	230	<0.05	4	4	1.9	570	245	7.91	-	-	314	-	0.2	14	<0.1	<0.1	46	<0.0002	<0.01	<0.03	0.043	0.523
BW1		1-Apr-09	199	<0.05	<2	-	1.8	511	229	7.98	<0.001	<0.01	281	-	0.1	13	0.2	-	45	<0.0002	0.02	0.0003	0.035	0.506
BW1		1-Nov-09	208	<0.05	<2	<5	2.2	514	222	7.74	<0.001	<0.01	283	25	<0.1	13	<0.1	<0.1	45	<0.0002	<0.01	0.0003	0.041	0.521
BW1		1-Apr-10	258	<0.05	<2	-	4.1	608	279	8.18	<0.001	<0.01	334	26	0.07	18.3	<0.1	<0.1	46	<0.0002	<0.01	0.0007	0.059	0.581
BW1		7-Dec-10	220	0.18	<2	<5	2.3	553	238	8.22	<0.001	<0.01	314	26	0.2	14	<0.1	<0.1	46	<0.0002	0.01	0.0014	0.051	0.578
BW1		1-Jun-11	350	<0.05	<2	<5	4.1	845	407	7.98	<0.001	0.05	465	36	0.2	32	<0.1	<0.1	52	<0.0002	0.04	0.0039	0.086	0.602
BW1		11-Nov-11	316	0.07	<2	19	4.3	780	320	8.09	<0.001	<0.01	429	-	0.3	32	0.1	<0.1	56	<0.0002	0.04	0.0113	0.07	0.622
BW1		11-Nov-11	315	0.08	<2	18	4.4	776	319	8.01	<0.001	<0.01	427	-	0.4	32	<0.1	<0.1	56	<0.0002	0.03	0.0106	0.07	0.628
BW1		30-May-12	392	0.068	<2	22	4.4	808	388	7.84	<0.001	<0.01	469	118	<0.1	37	<0.1	<0.1	56	<0.0002	0.04	0.0039	0.086	0.617
BW1		1-Nov-12	268	0.068	3	<5	2.9	674	308	7.91	<0.001	<0.01	372	30	0.4	28.4	<0.1	<0.1	43	<0.0002	0.02	0.0017	0.056	0.493
BW1		11-Jul-13	387	0.06	<2	<5	4.7	860	-	7.97	<0.001	0.01	559	-	0.23	36	<0.10	<0.10	47	<0.0001	-	<0.01	0.08	0.56
BW1		11-Jul-13	364	0.093	<2	36	4.8	821	387	7.96	<0.001	0.01	554	-	0.22	36	<0.10	<0.10	47	<0.0001	-	<0.01	0.09	0.76
BW1		25-Oct-13	364	0.097	<2	32	4.7	824	387	8	-	-	515	39.6	0.36	32.6	<0.10	<0.10	43.6	-	-	-	0.091	0.543
BW1		20																						

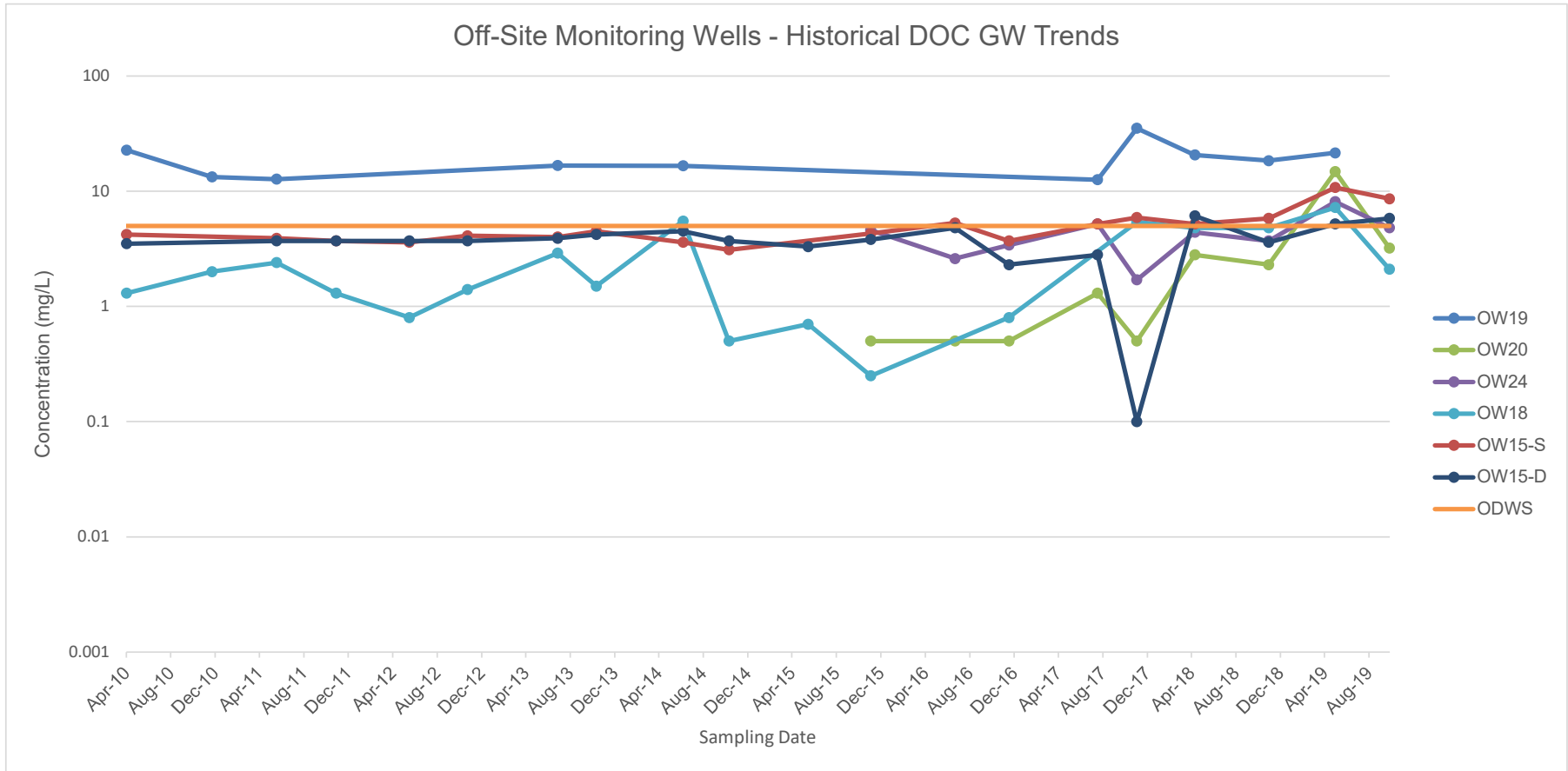
Historical Surface Water Analytical Results

Surface Water Sampling Location	Date Sampled	Sample ID	Alkalinity		Ammonia (N)		Ammonium (N) (lab)		BOD	COD	DOC	Conductivity	Hardness	pH	Phenols	Phosphorus (total)	Phosphorus, total dissolved	TDS	TSS	N - Total Kjeldahl	Chloride	N - Nitrate	N - Nitrite	Sulfate	Aluminum - Dissolved	Mercury	Arsenic	Barium	Boron
			mg/L	mg/L	mg/L	mg/L	mg/L	mg/L																					
RWQC (note a)			0.2	0.02	3	5	0.2	1	1	1	1	6.5-8.5	0.001	0.02	0.001	0.002	3	3	0.1	0.5	0.05	0.05	1	0.001	0.0002	0.0005	0.001	0.005	
Table A: Aquatic Protection Value			0.1									6.0 - 9.0	0.04 ^(h)							180			100	0.075 ^(p)	0.0001	0.0005	0.015	2.3	3.55
Table B: Canadian Water Quality Guideline												0.004 ^(h)								128	2.9	0.06					1.5		
SW1	02/Aug/01		233	0.21	<0.005	1.4	39	11.3	450	244	7.72	-	0.48	-	27.4	12	1.04	6.1	0.2	<0.2	3.4	-	-	-	-	<0.002	0.127	0.014	
SW1	02/Nov/01		182	0.24	<0.005	0.9	22	7.7	434	223	7.94	-	0.44	-	146	8	0.7	7.8	0.4	<0.2	34.5	-	-	-	-	<0.002	0.065	0.014	
SW1	03/Jul/01		206	0.1	0.01	1.9	-	8.7	442	230	7.94	-	0.163	-	260	-	0.71	5.8	0.2	-	20.8	-	-	-	-	nd	0.15	0.02	
SW1	03/Aug/01		227	nd	nd	0.7	-	4.6	493	273	7.89	-	0.125	-	270	-	0.6	11.1	nd	-	37.2	-	-	-	-	nd	0.168	0.022	
SW1	03/Oct/01		185	nd	nd	1.7	-	10.2	462	247	7.92	-	0.075	-	302	-	0.92	6.9	3.3	-	52.4	-	-	-	-	nd	0.129	0.013	
SW1	04/May/01		133	0.06	nd	1.1	-	7.9	282	170	7.98	-	0.105	-	200	-	0.7	4.6	1.6	-	16.8	-	-	-	-	nd	0.086	0.011	
SW1	04/May/01		135	0.07	nd	0.9	-	8.3	276	172	7.93	-	0.105	-	202	9	0.82	4.6	1.7	-	15.7	-	-	-	-	nd	0.088	0.04	
SW1	04/May/01		216	0.04	nd	1.1	-	8.5	465	308	7.7	-	0.08	-	274	6	0.7	7.3	nd	-	20.3	-	-	-	-	nd	0.165	0.024	
SW1	04/Nov/01		198	0.03	nd	0.8	-	8.1	430	229	8.1	-	0.04	-	240	-	0.68	6.5	1.8	-	20.5	-	-	-	-	nd	0.104	0.012	
SW1	04/Nov/01		200	0.03	nd	0.8	-	8.1	430	236	8.1	-	0.048	-	262	-	0.66	7	1.9	-	21	-	-	-	-	nd	0.097	0.009	
SW1	07/May/01		228	<0.05	<0.05	<2	-	7.1	479	244	8.66	-	<0.01	-	316	-	0.7	6.3	0.3	-	16	-	-	-	<0.0003	<0.0005	0.155	0.022	
SW1	07/Aug/01		212	<0.05	<0.05	<2	-	3.1	516	238	7.8	-	0.03	-	341	-	0.5	9	0.2	-	19	-	-	-	0.00006	0.0009	0.183	0.018	
SW1	07/Oct/01		204	<0.05	<0.05	<2	-	7.7	455	237	7.22	-	0.09	-	300	-	0.6	12	0.2	-	22	-	-	-	<0.0003	<0.0005	0.163	0.014	
SW1	08/Jun/01		196	<0.05	<0.05	3	30	10.8	412	214	8.04	-	<0.01	-	227	16	1.3	5	0.2	-	11	-	-	-	<0.0005	<0.0005	0.12	0.016	
SW1	08/Sep/01		214	<0.05	<0.05	<2	-	25	8.5	420	240	7.32	-	0.04	-	258	<2	0.5	8	0.4	-	19	-	-	-	<0.0005	0.152	0.009	
SW1	08/Nov/01		203	0.08	<0.05	<2	-	9.1	443	229	7.96	-	<0.01	-	244	-	0.8	6	0.9	<0.1	22	-	-	-	-	<0.03	0.102	0.006	
SW1	08/Nov/01		202	<0.05	<0.05	<2	-	9.2	445	233	8.05	-	0.05	-	245	-	0.9	6	0.9	<0.1	23	-	-	-	-	<0.03	0.104	0.006	
SW1	09/Apr/09		154	<0.05	<0.05	<2	<5	7.6	343	176	7.9	<0.001	0.08	-	189	4	0.2	5	0.8	<0.1	12	-	-	-	<0.0002	0.002	0.087	<0.005	
SW1	09/Jul/01		228	<0.05	<0.05	<2	23	7.6	472	257	7.82	<0.001	0.05	-	260	10	0.6	7	0.3	<0.1	17	-	-	-	<0.0002	<0.0005	0.164	0.015	
SW1	10/Jun/01		210	<0.05	<0.05	<2	17	7.5	476	237	7.67	<0.001	0.04	-	262	20	0.4	7	0.6	<0.1	26	-	-	-	0.0003	<0.0005	0.124	<0.005	
SW1	10/Jun/01		208	0.05	-	<2	-	9.9	461	232	8.21	<0.001	0.06	-	254	8	0.8	4.6	0.6	<0.1	13	0.01	-	-	<0.0002	0.0006	0.105	0.015	
SW1	10/Aug/17		237	<0.05	<0.05	<2	21	4.6	545	276	8.25	<0.001	0.07	-	300	22	0.5	10	0.4	<0.1	27	0.16	-	-	<0.0002	0.0007	0.215	0.023	
SW1	10/Nov/11		193	0.08	<0.01	<2	21	8.5	424	238	8.14	<0.001	0.02	-	233	16	1.7	6	0.4	<0.1	19	0.03	-	-	<0.0002	<0.0005	0.113	0.009	
SW1	10/Nov/11		193	0.07	<0.01	<2	25	8.5	420	239	8.02	<0.001	0.02	-	231	16	1	6	0.4	<0.1	19	0.03	-	-	<0.0002	<0.0005	0.114	0.011	
SW1	11/Jun/01		232	0.1	<0.05	<2	28	6.3	500	263	7.98	<0.001	0.04	-	275	24	0.8	<1	0.5	0.2	14	0.03	-	-	<0.0002	0.0005	0.171	0.03	
SW1	11/Jun/01		232	0.1	<0.05	<2	26	6.1	499	259	7.98	<0.001	0.02	-	274	26	0.7	<1	0.5	0.2	14	0.03	-	-	<0.0002	0.0006	0.171	0.03	
SW1	11/Aug/19		234	0.01	<0.01	<2	12	4.8	515	278	8.21	<0.001	0.04	-	283	7	0.1	10	0.4	<0.1	20	0.03	-	-	<0.0002	0.0006	0.239	0.018	
SW1	11/Nov/22		211	0.08	<0.01	<2	10	6.7	476	240	8.18	<0.001	0.08	-	262	8	0.5	8	0.7	<0.1	29	0.02	-	-	<0.0002	0.0002	0.133	<0.005	
SW1	12/May/04		200	0.03	<0.005	<2	50	6.8	423	224	8.2	<0.001	0.06	-	233	30	0.7	5.3	0.4	<0.1	15	0.02	-	-	<0.0002	0.006	0.117	0.015	
SW1	12/May/24		200	0.049	<0.005	5	68	6.7	423	223	8.19	<0.001	0.06	-	233	26	1	5.2	0.6	<0.1	15	0.02	-	-	<0.0002	0.0006	0.101	0.013	
SW1	12/Aug/07		203	0.047	<0.005	3	12	6.7	474	273	8.34	<0.001	0.06	-	261	4	0.7	8.7	0.8	<0.1	30	0.03	-	-	<0.0003	0.0003	0.001	0.213	0.017
SW1	12/Aug/07		<3	0.027	<0.005	<2	12	0.5	1	<1	5.86	<0.001	<0.01	-	<3	<2	<0.1	<0.5	0.1	<0.1	<1	<0.01	-	-	<0.0002	<0.0001	<0.001	<0.005	
SW1	12/Oct/31		220	0.057	<0.005	3	47	4.8	519	280	8.02	<0.001	0.14	-	285	22	0.5	9.4	0.2	<0.1	34	0.04	-	-	<0.0002	0.0004	0.192	<0.005	
SW1	12/Oct/31		221	0.064	<0.005	4	55	5.4	520	279	8.02	<0.001	0.13	-	286	20	0.5	9.3	0.5	<0.1	34	0.04	-	-	<0.0002	0.0004	0.195	<0.005	
SW1	12/Oct/31		<3	0.018	<0.005	<2	29	1.3	1	<1	5.89	<0.001	0.06	-	<3	<2	0.1	<0.5	<0.1	<0.1	<1	0.02	-	-	<0.0002	<0.0001	<0.001	<0.005	
SW1	13/Jul/12		230	0.04	<0.02	<1	23	-	463	-	8.2	<0.001	0.07	-	301	4	0.65	7	0.26	<0.1	14	-	-	-	<0.0002	<0.0001	0.12	0.01	
SW1	13/Oct/28		220	0.084	0.00157	<2.0	25	7.6	466	233	8.23	<0.001	0.036	-	265	20.4	0.54	7.3	0.58	<0.1	19	-	-	-	<0.0010	<0.0010	0.101	0.011	
SW1	14/Jun/12		116	0.07	0.00102	<2.0	47	12.1	260	141	7.92	<0.001	0.124	-	186	18.4	0.85	6.4	1.2	<0.1	5.7	-	-	-	<0.0010	<0.0010	0.153	0.014	
SW1	14/Oct/23		213	<0.05	<0.0028	<2.0	56	8.1	441	236	8.2	<0.001	0.094	-	244	11.8	0.73	7.8	0.68	<0.1	17.3	-	-	-	<0.0010	<0.0010	0.153	0.014	
SW1	15/May/28		234	0.24	0.2	2	36	11.1	503	-	8.3	<0.002	0.14	0.01	276	22	0.8	8	0.3	0.08	16	0.009	-	-	<0.0001	<0.001	0.152	0.024	
SW1	15/Dec/03		230	0.04	2.48	<	22	5.7	499	-	8.1	<0.001	0.06	0.03	290	89	0.5	7	1.7	&									

Historical Surface Water Analytical Results (continued)

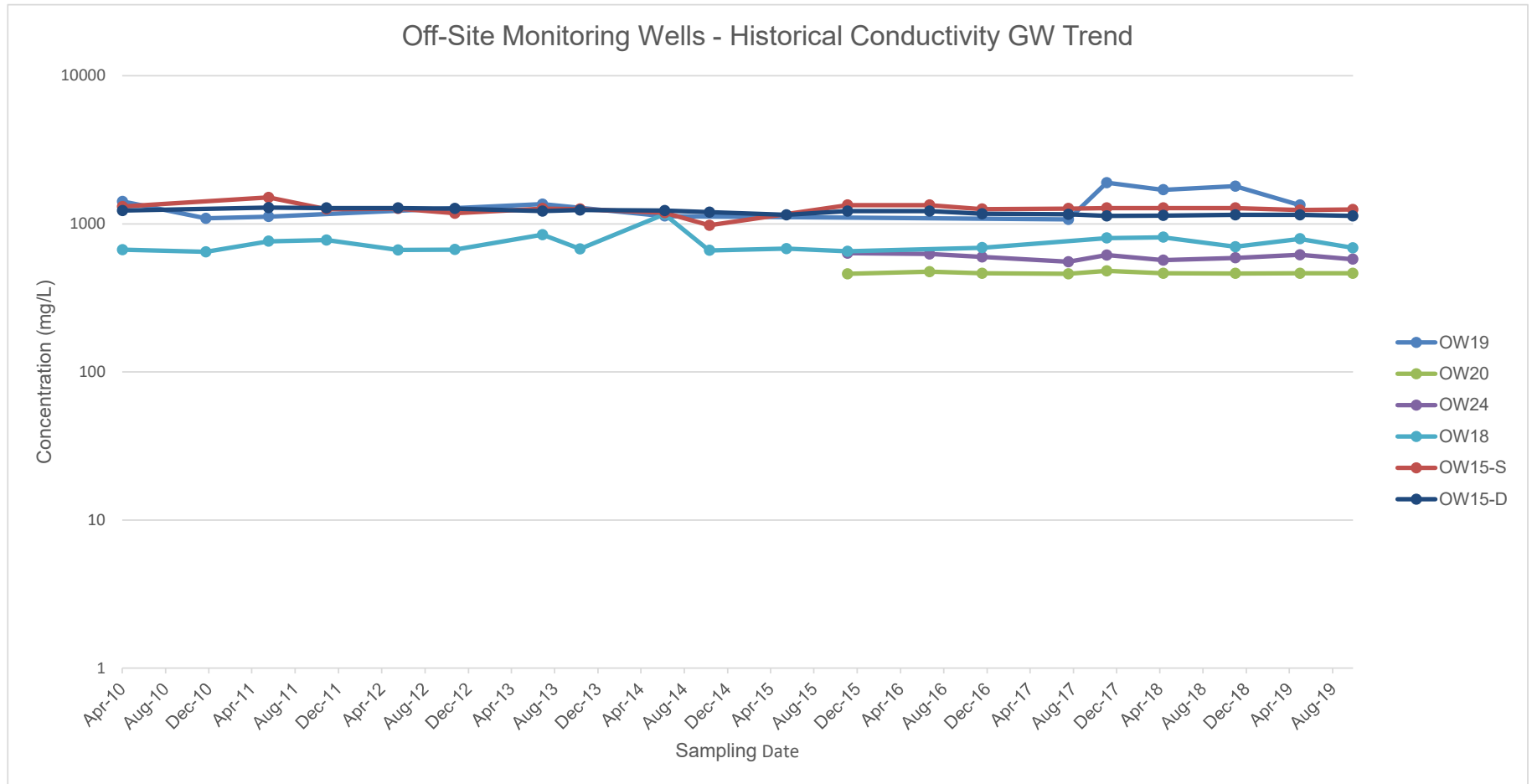
Surface Water Sampling Location	Date Sampled	Sample ID	Cadmium	Calcium	Chromium	Cobalt	Copper	Iron	Lead	Magnesium	Manganese	Nickel	Potassium	Silver	Sodium	Strontium	Vanadium	Zinc	Temperature (field)	pH (field)	DO (field)	Ammonia, un-ionized (field)
			mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	mg/L	°C	pH Units	mg/L
			RL 0.000015	0.02	0.001	0.0001	0.0001	0.005	0.00002	0.02	0.001	0.01	0.1	0.0001	0.2	0.001	0.005	0.005				
			PWQO 0.0005 ^(a)	(note d)	0.0009	0.0005 ^(a)	0.3	0.005 ^(b)			0.025			0.0001			0.006	0.002			(note g)	0.01
			Table A: Aquatic Protection Value	0.00021	0.064	0.0069	1	0.002										0.089				0.1
			Table B: Canadian Water Quality Guideline	0.00017														0.03				
SW1	02/Aug/01		<0.0001	61.5	<0.005	0.0003	0.001	0.8	0.0016	24.1	0.379	<0.001	1.1	<0.0001	4.1	0.178	0.0015	0.067				
SW1	02/Nov/01		<0.0001	54.8	<0.005	nd	0.0007	0.27	<0.0005	19.3	0.086	<0.001	1.9	<0.0001	4.5	0.163	0.0006	<0.005				
SW1	03/Jul/01		nd	58.1	nd	0.0001	0.0006	0.09	nd	20.7	0.095	nd	0.9	nd	4.6	-	-	nd				
SW1	03/Aug/01		nd	60.8	nd	0.0002	0.0015	0.49	nd	24	0.251	nd	1.3	nd	5.3	-	-	0.006				
SW1	03/Oct/01		nd	70.7	nd	0.0003	0.002	0.61	nd	22.5	0.076	nd	1.9	nd	5.6	-	-	0.007				
SW1	04/May/01		nd	40.1	nd	0.0003	0.0028	0.78	nd	13.8	0.039	nd	1.2	nd	3.4	0.137	0.0047	0.006				
SW1	04/May/01		nd	41.6	nd	0.0003	0.003	0.76	0.0006	14	0.047	0.001	1.2	nd	3.5	0.14	0.0048	0.014				
SW1	04/Aug/01		nd	60.6	nd	nd	0.0007	0.26	nd	22.9	0.079	nd	1.7	nd	5.4	0.238	0.0008	0.005				
SW1	04/Nov/01		nd	55.4	nd	0.0004	0.0017	0.84	nd	19.7	0.09	nd	1.8	nd	4.8	0.213	0.0027	nd				
SW1	07/May/01		<0.0001	55.6	nd	0.0002	0.0013	0.52	nd	19.9	0.048	nd	1.7	nd	4.8	0.212	0.0022	nd				
SW1	07/Oct/01		<0.0001	62.3	<0.005	<0.0005	0.0013	0.535	<0.0001	21.5	0.107	<0.01	1.3	<0.005	4.7	-	-	<0.005				
SW1	07/Oct/01		<0.0001	56.2	<0.002	<0.005	<0.002	0.223	<0.0001	23.8	0.05	<0.01	1.4	<0.0001	5.1	-	-	<0.005				
SW1	08/Jun/01		<0.0001	54.1	<0.001	<0.0005	<0.002	0.581	<0.0001	19.2	0.104	<0.01	0.9	<0.0001	4.6	-	-	0.018				
SW1	08/Sep/01		<0.0001	61.1	<0.002	<0.0005	<0.002	0.315	<0.0001	22.4	0.068	<0.01	1.8	<0.0001	5.1	-	-	<0.005				
SW1	08/Nov/01		<0.0001	58.3	<0.002	<0.005	<0.002	0.409	<0.0001	20.1	0.039	<0.01	1.1	<0.0001	4.3	-	-	<0.005				
SW1	08/Nov/01		<0.0001	59.5	<0.002	<0.005	<0.002	0.37	<0.0001	20.6	0.04	<0.01	1.2	<0.0001	4.4	-	-	<0.005				
SW1	09/Apr/09		0.0002	44.1	0.003	0.0047	<0.002	0.761	<0.0001	16.1	0.061	<0.01	1.4	0.0005	4.4	0.157	-	<0.005				
SW1	09/Jun/01		<0.0001	63.2	0.006	<0.0005	<0.002	0.906	0.0001	24.2	0.096	<0.01	1.2	<0.0001	5	0.254	-	0.009				
SW1	10/Nov/16		<0.0001	59.4	<0.002	<0.0005	0.0012	0.283	<0.0001	21.5	0.06	<0.01	1.8	<0.0001	4.8	0.207	-	<0.005				
SW1	10/Jun/01		<0.0001	58.9	<0.002	<0.005	<0.002	0.325	0.0002	20.6	0.035	<0.01	0.8	-	-	-	-	<0.005				
SW1	10/Aug/17		<0.0001	69.9	<0.001	<0.0005	<0.002	0.422	0.0003	24.7	0.072	<0.01	2	<0.0001	5.7	0.275	-	<0.005				
SW1	10/Nov/11		<0.0001	59.8	<0.002	<0.0005	0.0027	0.598	0.0003	21.4	0.05	<0.01	1.4	<0.0001	4.8	0.219	-	<0.005				
SW1	10/Nov/11		<0.0001	60	<0.002	<0.0005	0.0012	0.865	0.00028	21	0.08	<0.01	0.9	<0.0002	4.8	0.22	-	<0.005				
SW1	11/Jun/01		0.00004	66.9	<0.002	0.0003	<0.002	0.669	0.00056	23.3	0.091	<0.01	1.7	<0.0002	5.3	0.227	-	<0.005				
SW1	11/Jun/01		0.00007	65.8	0.003	0.0004	<0.002	1.04	0.00097	22.9	0.112	<0.01	1.7	<0.0002	5.2	0.253	-	<0.005				
SW1	11/Aug/19		<0.00002	68.1	0.0003	<0.0001	<0.002	0.273	0.00002	26.3	0.071	<0.01	1.8	<0.0002	5.7	0.243	-	<0.005				
SW1	11/Nov/22		<0.00002	60	0.0028	<0.0001	<0.002	0.157	0.0002	21.8	0.03	<0.01	1.4	<0.0002	4.3	0.205	-	<0.005				
SW1	12/May/24		0.00002	53.8	0.014	<0.0001	0.0012	0.865	0.00028	21	0.08	<0.01	0.9	<0.0002	4.8	0.243	-	<0.005				
SW1	12/May/24		<0.00002	46.8	<0.002	-	0.0014	0.493	0.00005	18.3	0.062	<0.01	0.7	<0.00002	4.2	-	-	<0.005				
SW1	12/Aug/07		<0.00002	66.4	<0.002	<0.001	0.0004	0.318	0.00003	26.3	0.056	<0.01	1.7	<0.00002	6	0.254	-	<0.005				
SW1	12/Aug/07		<0.00002	0.75	<0.002	<0.0001	<0.0001	0.053	<0.00002	0.06	0.008	<0.01	<0.1	<0.00002	<0.2	<0.001	-	<0.005				
SW1	12/Oct/31		<0.00002	70.6	0.019	<0.0001	0.0003	0.331	<0.00002	25.1	0.092	<0.01	2.1	<0.00002	5.6	0.253	-	<0.005				
SW1	12/Oct/31		<0.00002	70.3	0.06	<0.0001	0.0003	0.63	<0.00002	25.1	0.126	0.03	2.1	<0.00002	5.0	0.252	-	<0.005				
SW1	13/Jul/12		<0.00002	<0.002	0.024	<0.0001	<0.0001	<0.005	<0.00002	<0.001	0.001	<0.01	<0.1	<0.00002	<0.2	<0.001	-	<0.005				
SW1	13/Jul/12		<0.0001	<0.001	<0.001	<0.001	0.41	<0.001	<0.001	<0.001	<0.001	<0.01	<0.1	<0.00002	<0.2	<0.001	-	<0.005				
SW1	13/Oct/28		<0.00004	59.7	0.00062	<0.00050	0.0011	0.303	<0.00050	20.3	0.0315	<0.0010	1.2	<0.00010	4.88	-	-	0.0071				
SW1	14/Jun/12		<0.00004	37	0.00139	<0.00050	0.0025	0.741	<0.00050	11.8	0.0346	0.0017	1.9	<0.00010	3.02	-	-	0.0051				
SW1	14/Oct/23		0.00011	58.7	0.00356	0.00109	0.0034	2.79	0.00172	21.8	0.214	0.0023	2.4	<0.00010	5.25	-	-	0.0151				
SW1	15/May/28		<0.0001	62.6	<0.001	<0.0005	<0.0005	0.788	0.0004	22.1	0.107	<0.001	1.84	<0.0001	5.47	0.245	-	0.0039				
SW1	15/Dec/03		<0.0001	71.8	<0.001	<0.0005	0.0012	0.616	0.0004	25.4	0.063	<0.001	1.15	0.0002	6.13	0.295	-	0.0026				
SW1	16/Jun/04		<0.0001	60.4	<0.001	<0.0005	0.001	<0.1	0.0002	18.8	0.011	<0.001	1.19	<0.0001	4.47	0.23	-	0.0007				
SW1	16/Dec/01		<0.0001	43.9	0.006	0.0016	0.0054	3.16	0.002	20.8	0.011	<0.001	2.7	<0.0001	3.14	0.185	-	0.0044				
SW1	17/Jul/17		<0.0001	59.8	<0.001	<0.0005	<0.0005	0.225	<0.0001	20.2	0.043	0.002	1.09	<0.0001	4.99	0.232	-	0.0037				
SW1	17/Nov/17		<0.0001	49.2	<0.001	<0.0005	<0.0005	0.318	<0.0001	18.5	0.051	<0.001	0.996	<0.0001	4.54	0.218	-	0.0019				
SW1	18/Apr/24		<0.014	53.4	<0.001	-	0.0018	0.268	0.00015	19.1	0.03	<0.00001	1.1	<0.00002	6	0.214	-	<0.00005				
SW1	18/Nov/13		0.00002	67.9	<0.001	0.0002	0.0002	0.355	<0.0001	22.8	0.032	<0.0001	1.4	<0.0001	4.7	0.247	-	0.013				
SW1	19/May/14	19-W013	0.00029	36.3	0.002	0.0004	0.0025	0.639	0.00038	12.6	0.018	<0.01	0.9	<0.0001	3.8	0.142	-	<0.005				
SW1	19/Oct/09	19-W035	0.00025	57.1	<0.001	0.0003	0.0008	0.782	0.00035	21	0.108	<0.01	1.8	<0.0001	5.7	0.243	-	<0.005				
SW2	02/Aug/01		<0.0001	110	<0.005	0.0039	0.0025	0.66	0.0009													

Appendix L
Historical Groundwater and Surface Water Trends



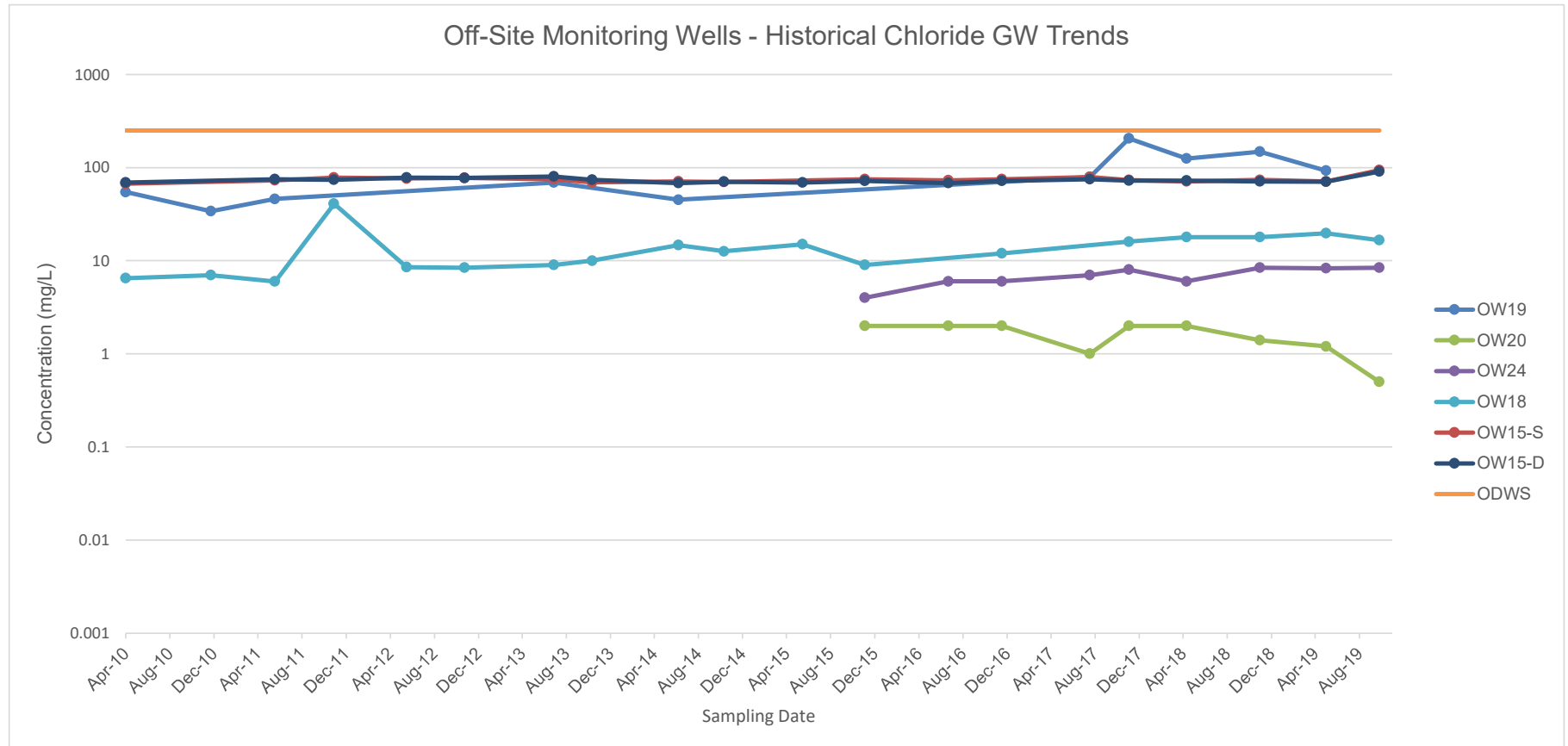
Notes:

- all data prior to and including 2016 was provided by the Township of Leeds and Thousand Islands.
- gaps between points denotes missing data
- when result was less than MDL, MDL value was plotted
- trend graphs provided as an interpretive tool only. Refer to the summary tables for results.



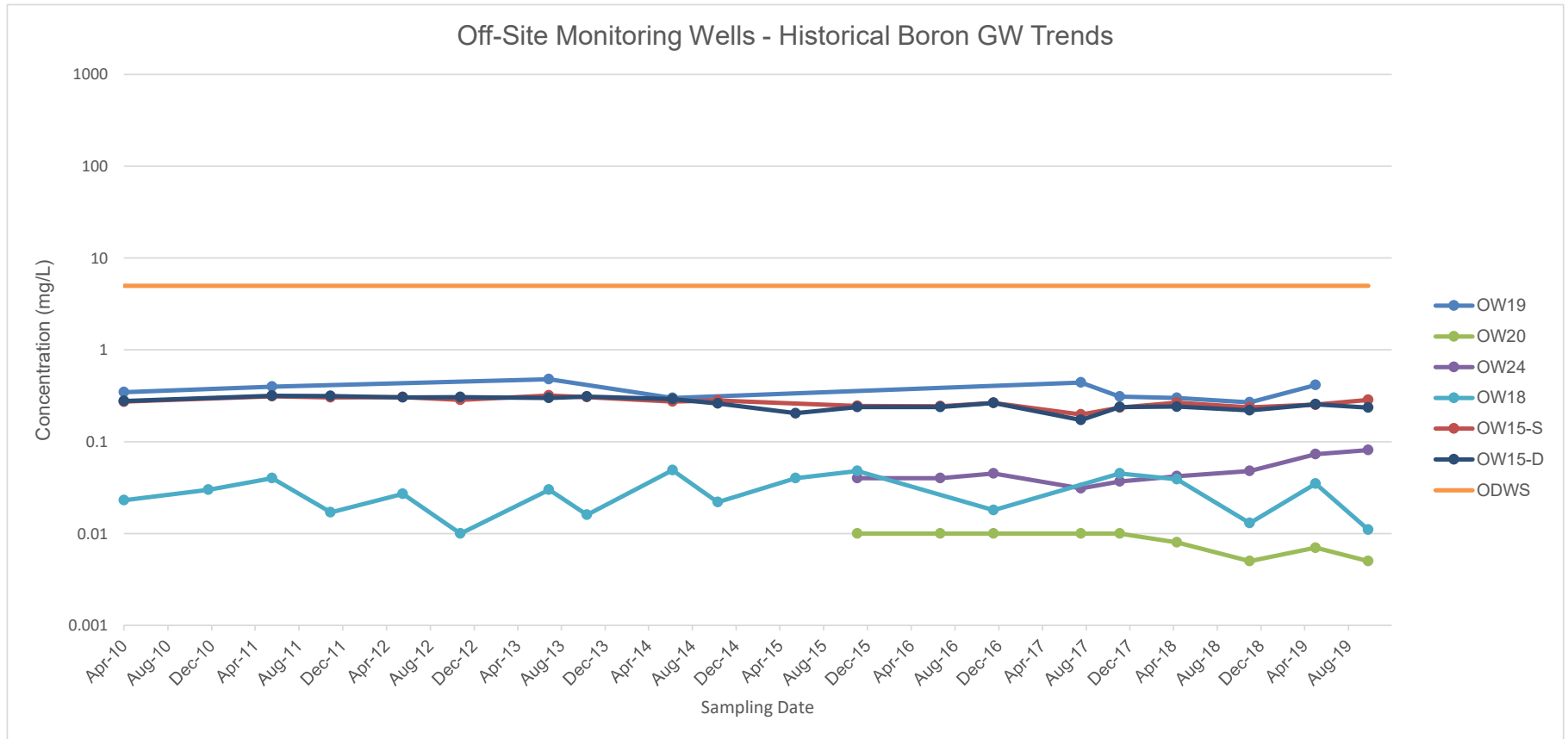
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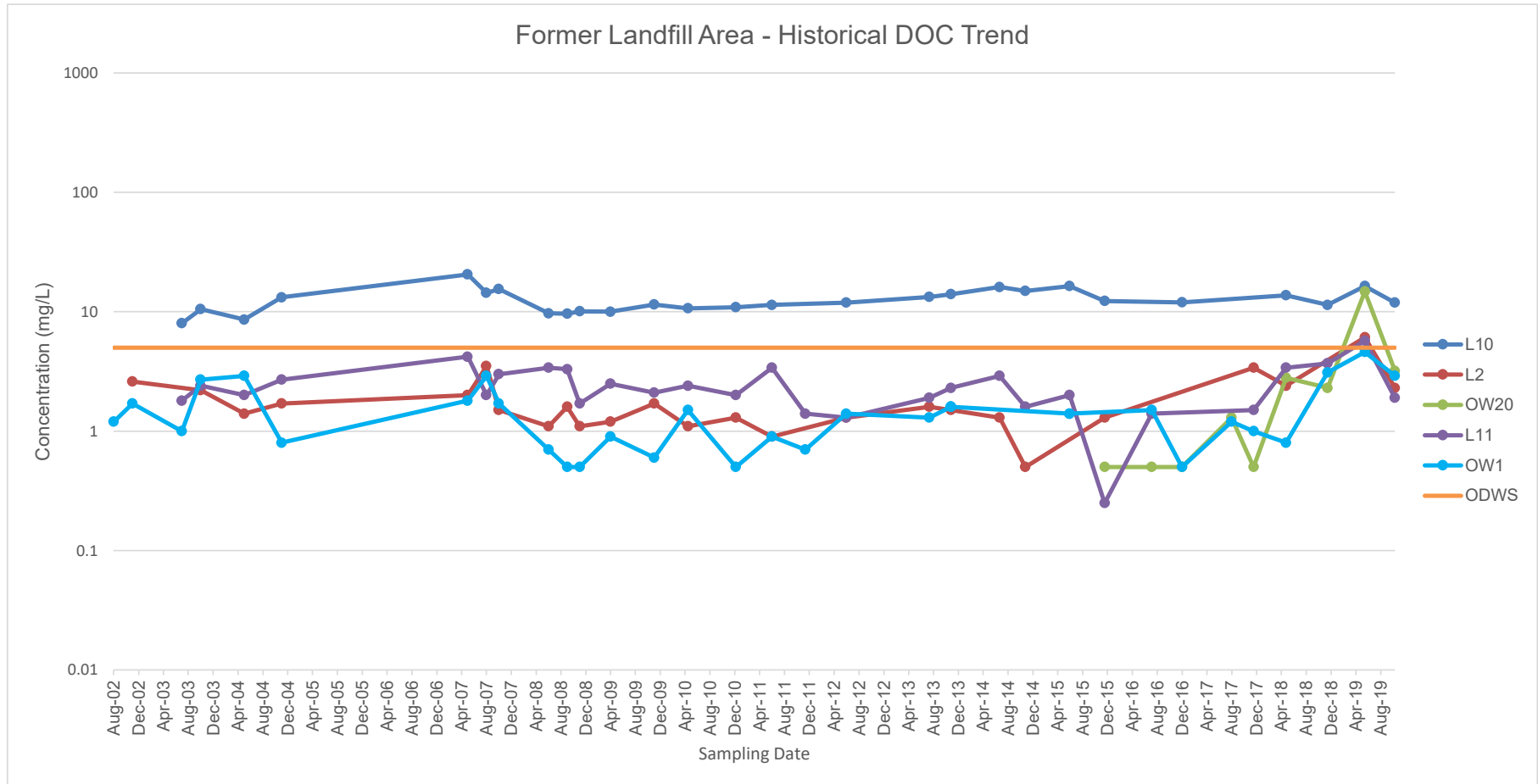
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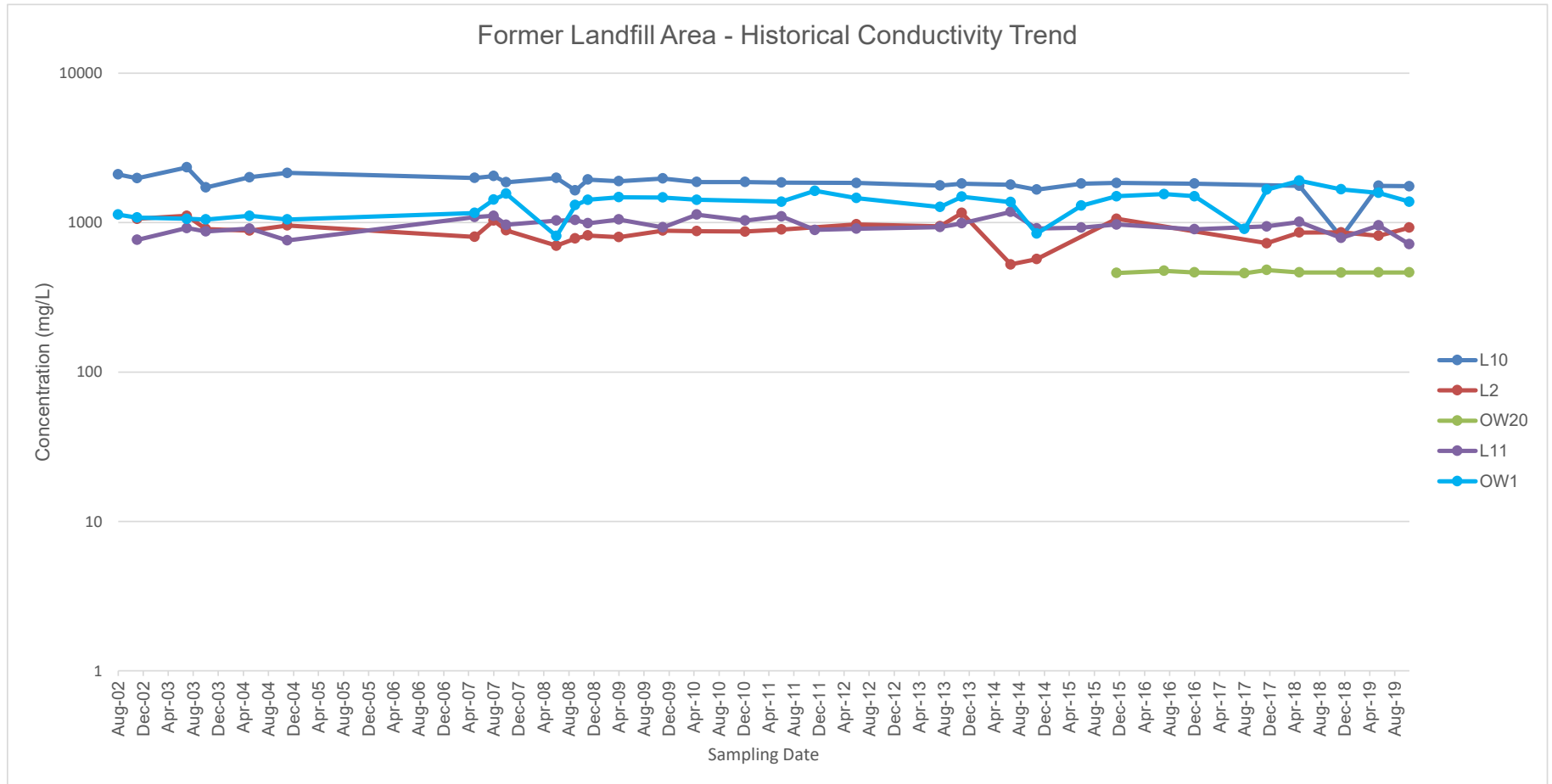
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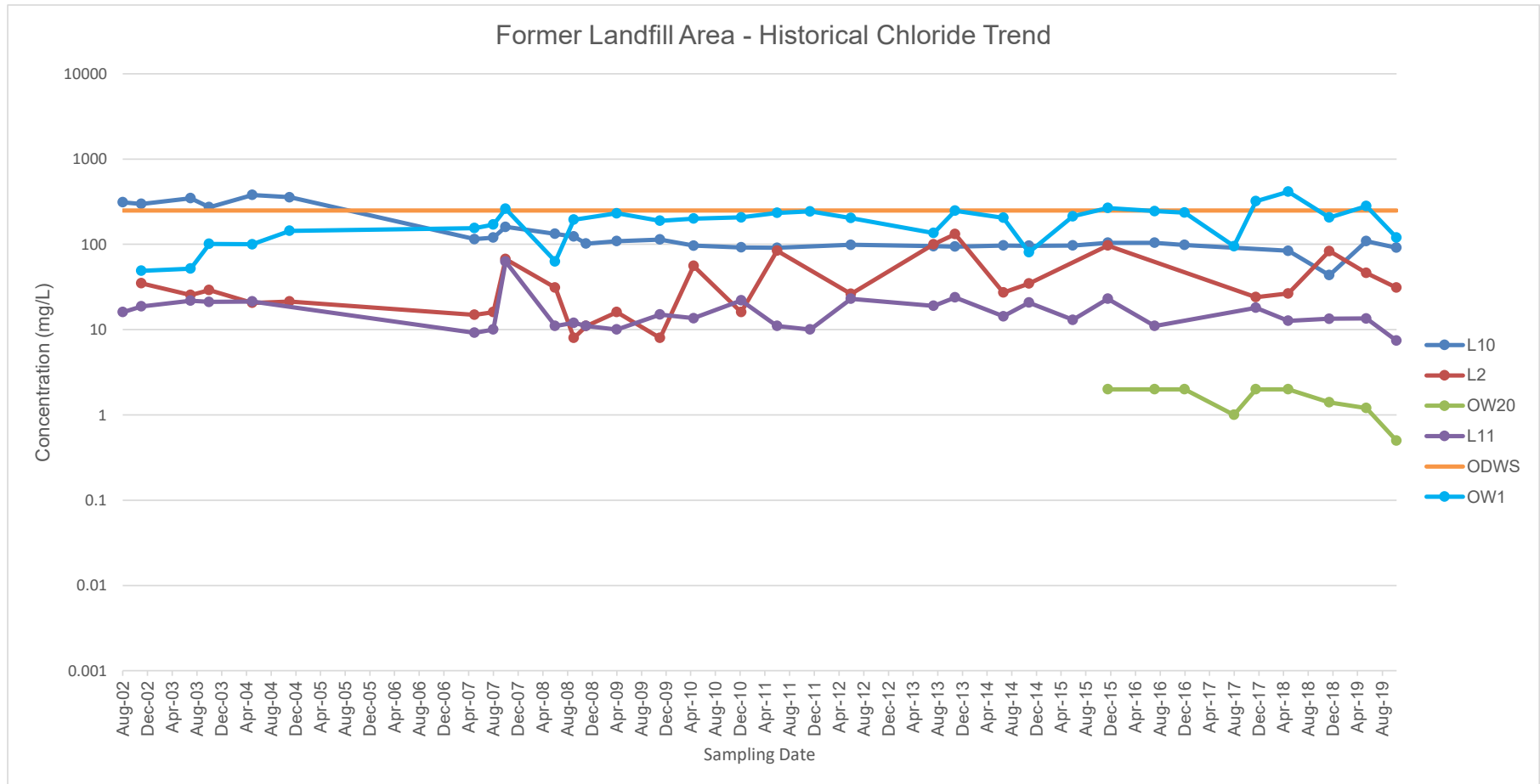
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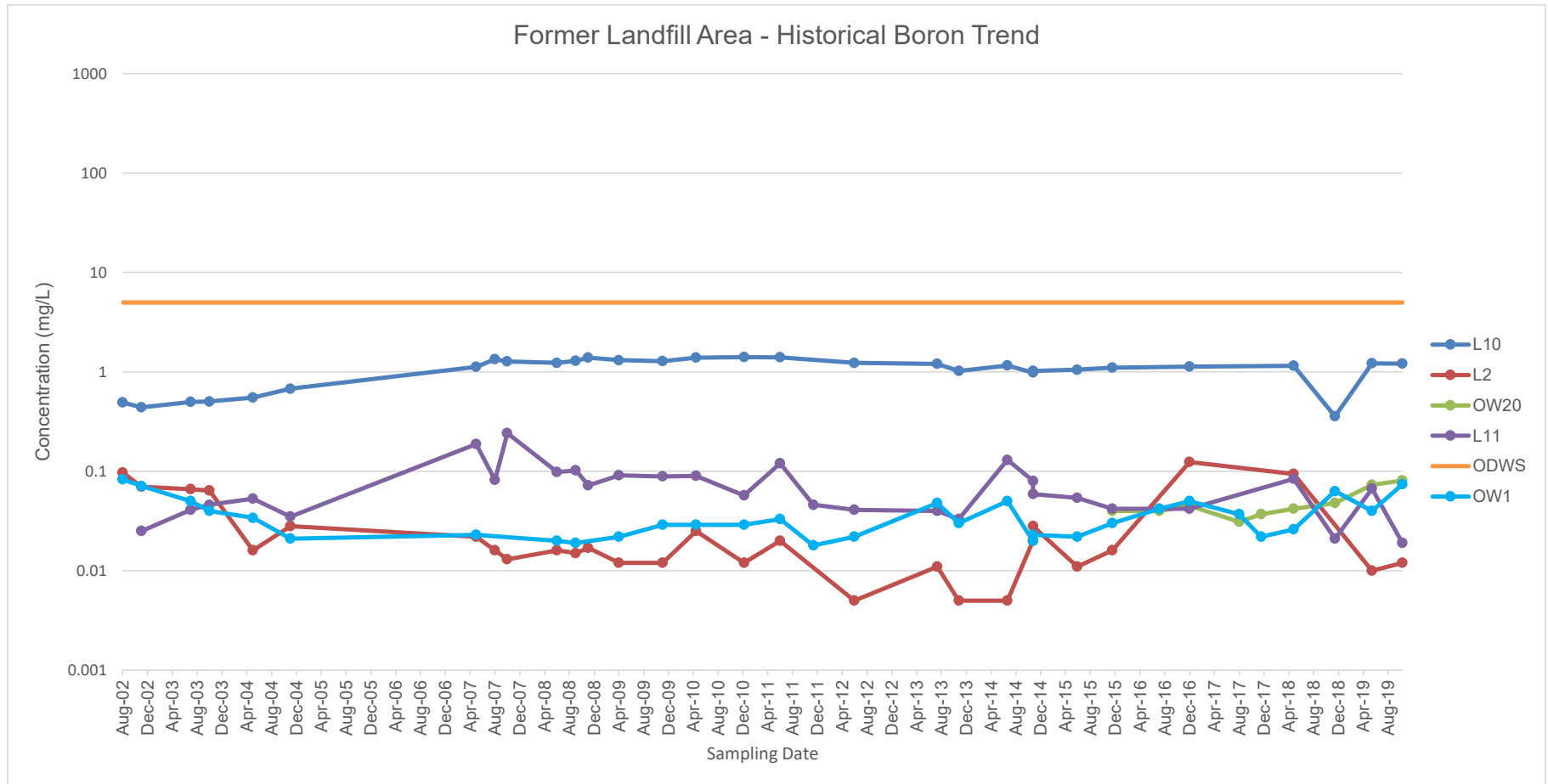
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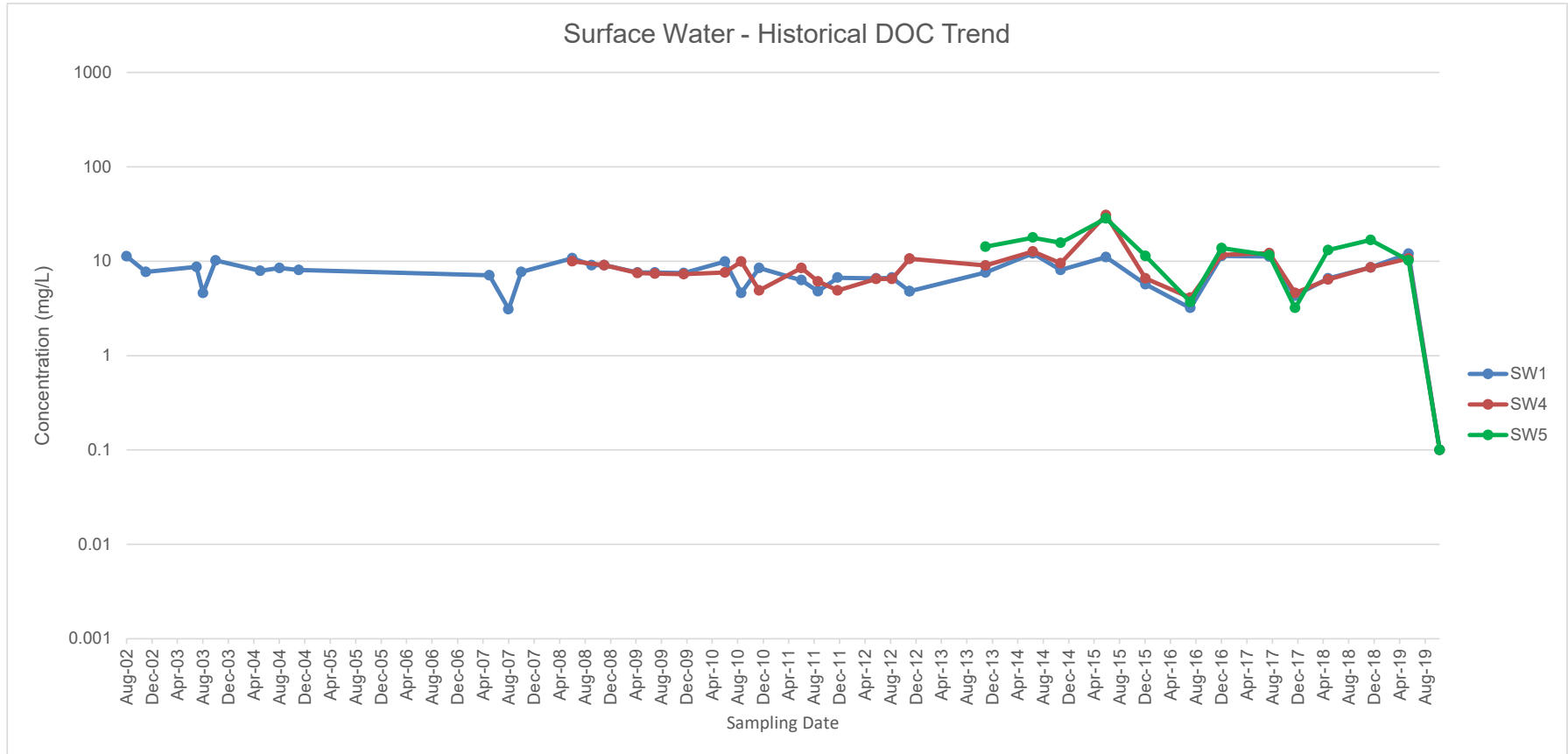
Notes:

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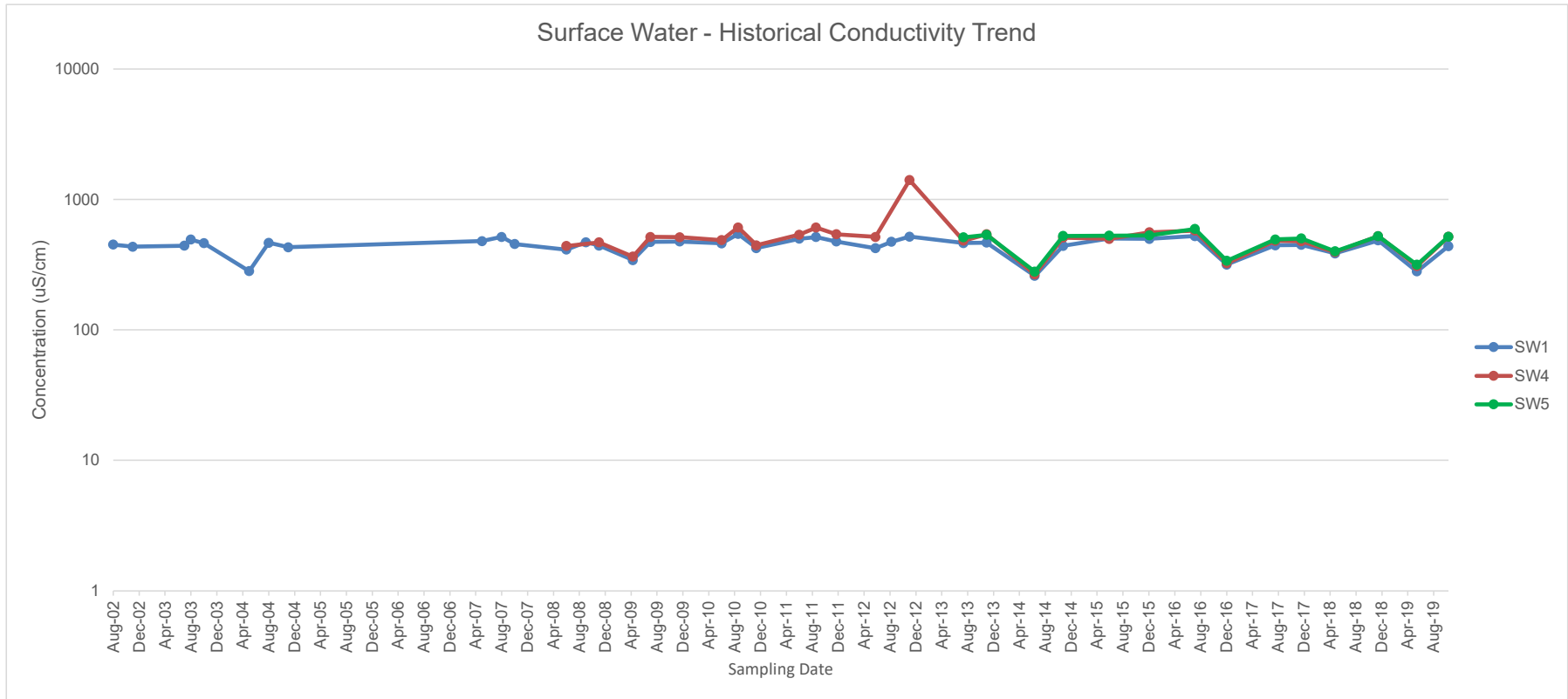
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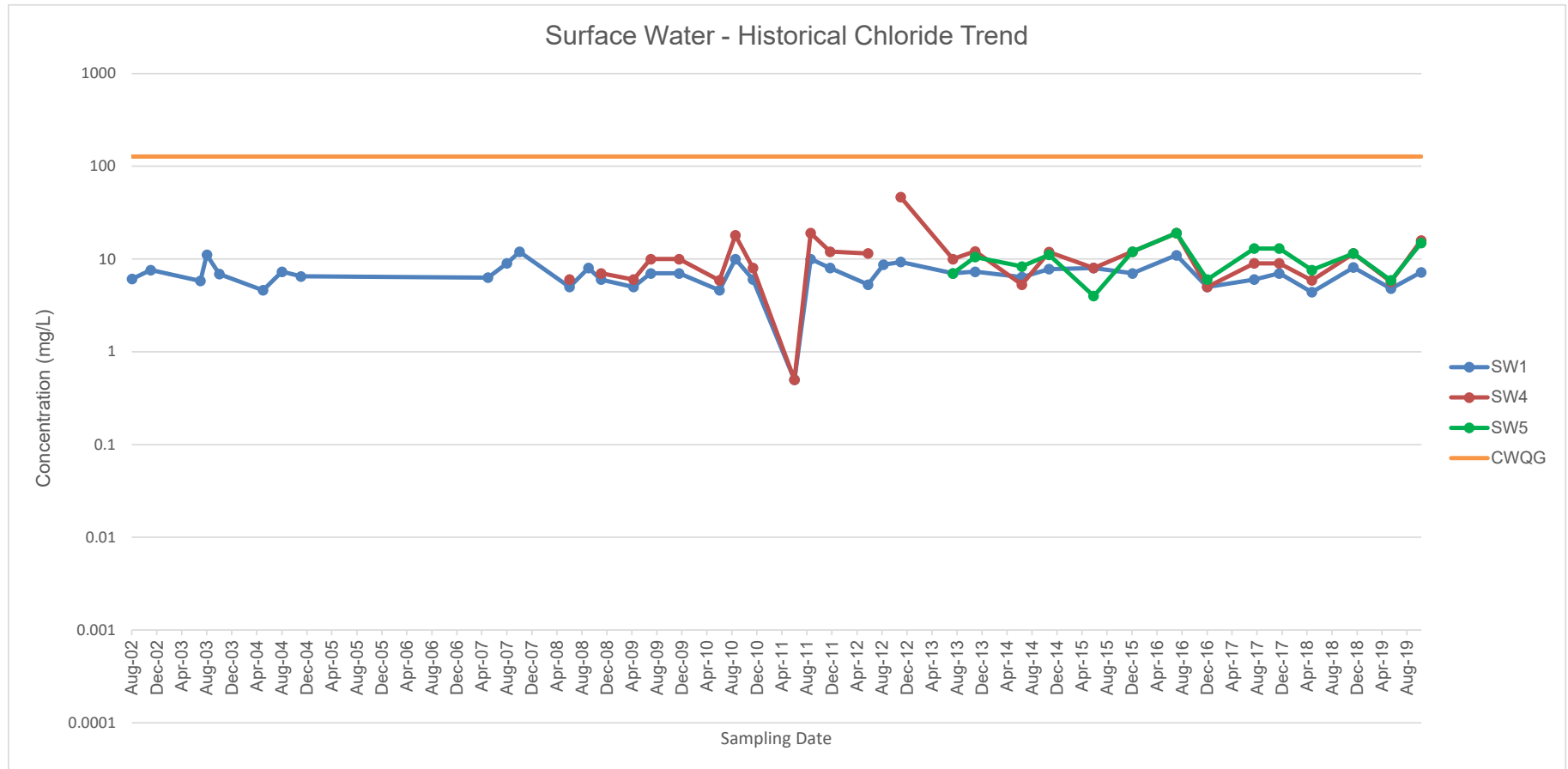
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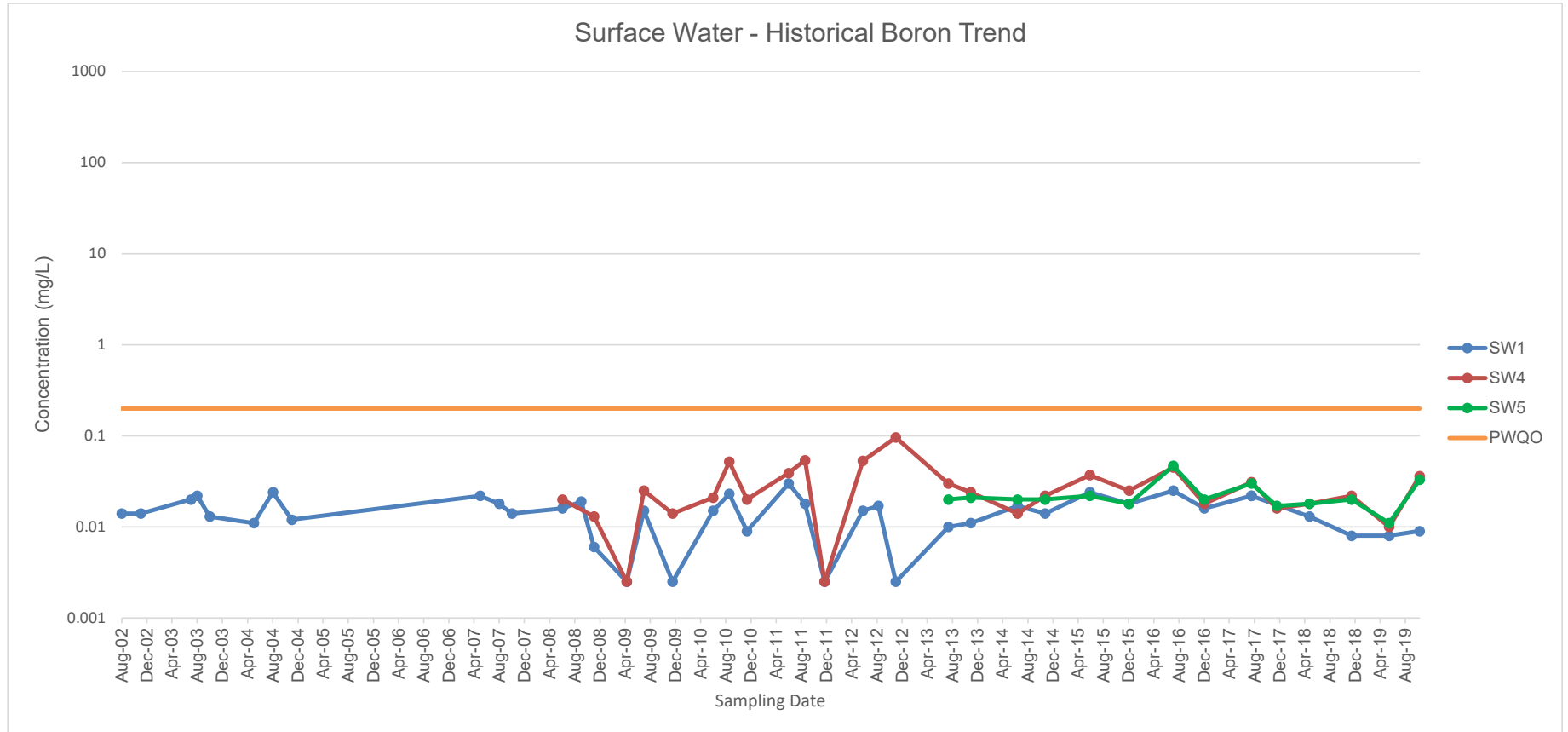
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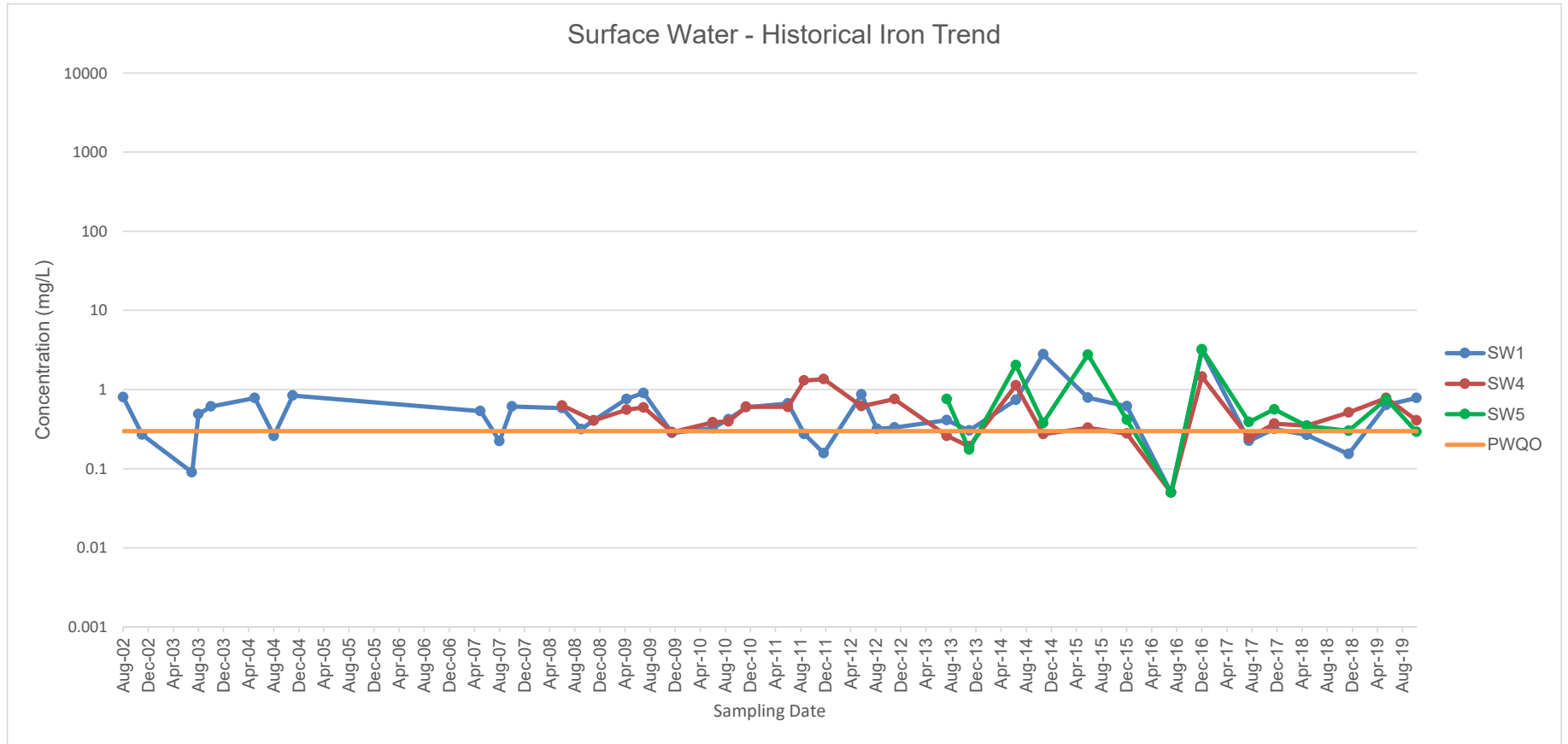
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- gaps between points denotes missing data
- when result was less than MDL, MDL value was plotted
- trend graphs provided as an interpretive tool only. Refer to the summary tables for results.