

TOWNSHIP OF LEEDS AND THE THOUSAND ISLANDS

**Briar Hill Waste Disposal Site
2022 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)	NAD 83 UTM Zone 18 T Northing: 4933135.1 Easting: 407020.1
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)	2021
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	☒ Annual ☐ Other		
The site is: (Operation Status)	☒ Open ☐ Inactive ☐ Closed		
Does your Site have a Total Approved Capacity?	☒ Yes ☐ No		
If yes, please specify Total Approved Capacity	85,600	Units	Cubic Metres
Does your Site have a Maximum Approved Fill Rate?	☐ Yes ☒ No		
If yes, please specify Maximum Approved Fill Rate	NA	Units	
Total Waste Received within Monitoring Period (Year)	1300	Units	Cubic Metres
Total Waste Received within Monitoring Period (Year) <i>Methodology</i>	Difference between volumes from annual surveys.		
Estimated Remaining Capacity	51700	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 2022		
Non-Hazardous Approved Waste Types	☒ Domestic ☐ Industrial, Commercial & Institutional (IC&I) ☐ Source Separated Organics (Green Bin) ☐ Tires	☐ Contaminated Soil ☒ Wood Waste ☒ Blue Box Material ☐ Processed Organics ☒ Leaf and Yard Waste	☐ Food Processing/Preparation Operations Waste ☐ Hauled Sewage Other:
Subject Waste Approved Waste Classes: Hazardous & Liquid Industrial <i>(separate waste classes by comma)</i>			
Year Site Opened <i>(enter the Calendar Year <u>only</u>)</i>		Current ECA Issue Date	August 20, 2015
Is your Site required to submit Financial Assurance?	☐ Yes ☒ No		
Describe how your Landfill is designed.	☒ Natural Attenuation only ☐ Fully engineered Facility ☐ Partially engineered Facility		
Does your Site have an approved Contaminant Attenuation Zone?	☒ Yes ☐ 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
If yes, provide details:	Type Here
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:

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:	☒ Yes ☐ No	See report for details.
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):	☐ Yes ☒ No ☐ Not Applicable	If no, list exceptions below or attach information.

Groundwater Sampling Location	Description/Explanation for change (change in name or location, additions, deletions)	Date
OW19	Unable to sample due to dry conditions during spring sampling event. See report for details.	Spring 2022
L11, OW19, OW22	Unable to sample due to dry conditions during fall sampling event. See report for details.	Fall 2022
122 Turk Rock Road	Unable to sample during regularly scheduled spring event due to lack of access provided by the owner. See report for details.	Spring 2022

3) a) Is landfill gas being monitored or controlled at the site?		☒ Yes ☐ 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?		☐ Yes ☒ 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.		☐ Yes ☒ No ☐ 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	
see comments above			
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):	☒ Yes ☐ No	See report for details.	

Sampling and Monitoring Program Results/WDS Conditions and Assessment:

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.	☐ Yes ☒ No	Development of additional CAZ for the Site is ongoing.	
6) The site meets compliance and assessment criteria.	☐ Yes ☒ No	See previous comment and report for details.	
7) The site continues to perform as anticipated. There have been no unusual trends/ changes in measured leachate and groundwater levels or concentrations.	☒ Yes ☐ No	If no, list exceptions and explain reason for increase/change (Type Here):	
1) Is one or more of the following risk reduction practices in place at the site: (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 (b) There is a predictive monitoring program in-place (modeled indicator concentrations projected over time for key locations); or (c) The site meets the following two conditions (typically achieved after 15 years or longer of site operation): <i>i.</i>The site has developed stable leachate mound(s) and stable leachate plume geometry/concentrations; and <i>ii.</i>Seasonal and annual water levels and water quality fluctuations are well understood.	☐ Yes ☒ No	Note which practice(s):	☐ (a) ☐ (b) ☒ (c) As discussed in report.
9) Have trigger values for contingency plans or site remedial actions been exceeded (where they exist):	☐ Yes ☐ No ☒ Not Applicable	See report for discussion.	

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:

Recommendations:

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

☐ No changes to the monitoring program are recommended ☒ The following change(s) to the monitoring program is/are recommended:	see report for recommendations 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.
☒ No Changes to site design and operation are recommended ☐ The following change(s) to the site design and operation is/are recommended:	

Name:	John Pyke		
Seal:	Add Image		
Signature:		Date:	March 30, 2022
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:		Date:	Select Date
Signature:		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 tributary of Morton 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:

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:	☒ Yes ☐ No	See report for discussion.
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):	☒ Yes ☐ No ☐ 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

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.	☐ Yes ☒ No ☐ Not Applicable	
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:	☐ Yes ☐ No ☒ Not Applicable	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
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):	☒ Yes ☐ No	See report for discussion.

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)?	☒ Yes ☐ No	If yes, specify (Type Here): See report for discussion. Background conditions show several exceedances of criteria. See report for details.

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.	☒ Yes ☐ No	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) See report for details.
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)):	☐ Yes ☐ No ☒ Not Known ☐ Not Applicable	If yes, provide details and whether remedial measures are necessary (Type Here): See report for discussion.
9) Have trigger values for contingency plans or site remedial actions been exceeded (where they exist):	☐ Yes ☐ No ☒ Not Applicable	If yes, list value(s) that are/have been exceeded and follow-up action taken (Type Here): See report for discussion.

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:

Recommendations:

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

☒ No Changes to the monitoring program are recommended ☐ The following change(s) to the monitoring program is/are recommended:	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.
☒ No changes to the site design and operation are recommended ☐ The following change(s) to the site design and operation is/are recommended:	Type Here

CEP Signature		
Relevant Discipline	Geoscientist with relevant experience and training.	
Date:	March 31, 2023	
CEP Contact Information:	John Pyke, P.Geol.	
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 TLTI staff to provide historic data upon which the current data interpretation and conceptual understanding of the Site are partially based. Malroz accepts no responsibility for the integrity of the data provided by TLTI or for missing data. Any third-party use or reliance of this report, or decisions made based on this report, are the responsibilities of the third party. 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 (Ministry) 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,

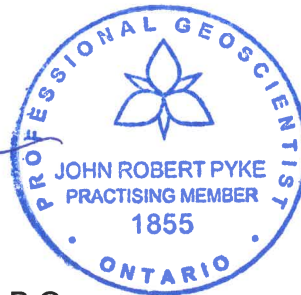
MALROZ ENGINEERING INC.



per: Jessie Payeur, B.A.Sc.
Engineer in Training



and: John Pyke, P.Geo.
Project Manager



and: Paula R. Klink, P. Eng.
Senior Environmental Engineer



Malroz Engineering Inc.

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1 Introduction

The Briar Hill waste disposal site (the Site) operates under Amended Environmental Compliance Approval (ECA) No. A442103 issued by the Ministry of the Environment and Climate Change (now the Ministry of Environment, Conservation and Parks, or Ministry), dated August 20, 2015 (see Appendix C).

The Site is located at 114 Turk Rock Road on part of Lot 18, Concession 11 in the Township of Leeds and the Thousand Islands (TLTI), Ontario (Figure 1 and Figure 2, Appendix A). In accordance with the ECA, a monitoring, development and operations report (AMR) is to be completed annually and submitted to the District Manager by March 31 of the following calendar year.

Malroz was retained by the 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 the methodology, results and interpretation related to the monitoring and sampling program conducted at the Site in 2022. This report was prepared on behalf of the TLTI, using data collected by Malroz and other 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

David Holliday, Director of Operations
1233 Prince Street, P.O. Box 280
Lansdowne, Ontario, K0E 1L0
613-659-2415 ext. 211
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 Background

The geology, hydrogeology, physiography, and hydrology of the Site are based on a review of collected data, including site observations and previous reports on investigations at the Site by Malroz, previous consultants, and TLTI staff.

2.1 Description of the Site

The Site is located on part of Lot 18, Concession 11, in the Township of Leeds and the Thousand Islands (former Township of Rear of Leads and Lansdowne). The Site is located approximately 3.5 km east of Highway 15 at the Village of Morton River and approximately 5.0 km west of Lyndhurst, Ontario. 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.

Geodetic coordinates for the Site entrance are as follows (2013 Site survey):

Zone:	NAD 83, 18T
Easting:	407020.1 m (+/- 0.5 m)
Northing:	4933135.1 m (+/- 0.5 m)

The site has an approved waste volume of 85,600 cubic meters (including cover); however, this volume does not include the waste deposited prior to May 2003 within the 1.5 hectare area of the old landfill. The Site is actively landfilling non-hazardous waste materials from within the boundaries of TLTI. The current Site property boundary and fill area is shown on Figure 2 (Appendix A).

2.2 Geological Setting

Geological mapping from the Ontario Geological Survey (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 J) suggest two distinct lithologies are present at the Site, with BW1 set in metasedimentary and BW2 in granitic bedrock (Figure 3, Appendix A). 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 Pit, 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 (Appendix J).

2.3 Hydrogeologic Setting

Groundwater elevation data collected during 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 Morton Creek tributary north of the Site (Figure 2, Appendix A).

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

Three residential wells within 500 m of the Site have been identified: two downgradient residential wells located at 122 Turk Rock Road, and 151 Fortune Line Road, and one upgradient residential well located at 151 Briar Hill Road.

2.4 Surface Water Features

An unnamed tributary to Morton Creek flows east to west and is located north of the Site. The tributary collects surface water run off from the field to the northeast via tile drainage. The stream flows through a culvert under Turk Rock Road (near SW1), and westward past OW17, OW15-S&D, and OW24. The Morton Creek tributary continues west under Fortune Line Road (at SW5) and eventually flows into Morton Creek. From the confluence of Morton Creek and the tributary, Morton Creek flows approximately 3 km and discharges into Whitefish Lake, which is part of the Rideau Waterway.

2.5 Environmental Compliance Requirements

Inspections must be carried out at least twice per year and deficiencies reported to the Ministry, in accordance with Schedule A of the ECA. Parameters analyzed were developed for the 2012, 2013, and 2014 AMR (Day, 2015). The Site must be compliant to Reasonable Use Guideline B-7 and Provincial Water Quality Objectives (PWQOs).

Based on a Ministry review by Alija Bos documented in a letter report in 2021, modifications were made to the initial plan:

- Volatile organic compound (VOC) analyses sampled once annually in the spring, with the sample locations to be reduced to only wells L10, OW15-S, OW15-D, OW19 and OW22.
- Wells L2, L10, and L11 are sampled once annually in the spring.
- Wells at 122 Turk Rock Road and 151 Fortune Line Road be sampled in both the spring and the fall sampling programs if the owners have no objections.
- Perfluoroalkyl and Polyfluoroalkyl Substances (PFAS) sampling was added to the sampling requirements at the leachate well OW22, downgradient wells OW23 and OW24R01, and the two downgradient domestic wells (122 Turk Rock Road and 151 Fortune Line Road).
- LIPs for the site are alkalinity, total dissolved solids (TDS), ammonia, boron, conductivity, chloride, dissolved organic carbon (DOC), and iron.

The updated monitoring plan is found in Appendix C.

2.6 Ministry Correspondence

Comments related to the 2021 AMR were not received from the Ministry at the time this report was prepared.

2.7 Complaints

The TLTI reportedly did not receive any complaints from residents in 2022.

3 Development and Operations

In accordance with the ECA, the Site is actively landfilling solid non-hazardous waste. The Site also accepts recycling materials, large electric appliances, and metals for bulking and subsequent transfer off-site. No liquid industrial or hazardous wastes are accepted.

The Site operates as a 2.4 hectare waste disposal area and transfer site within a total site area of 16 hectares. The corners of the landfilling area are marked and secured by fencing.

3.1 Waste Disposal Site Description

The Briar Hill Waste Disposal Site operates as an area fill site. On a bi-weekly basis, the waste is contoured, compacted, and covered. The Site has been approved to burn

clean wood waste (ECA 23(b)), following the Ministry's Guideline C-7 Burning at Landfill Sites; however, burning did not occur in 2022.

Waste was previously deposited at the Briar Hill landfill on the northeastern segment of the Site (Figure 2, Appendix A). Following the closure of the former landfill 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 Contaminant Attenuation Zone (CAZ). The registration of the new property as a CAZ is on-going.

Information regarding Site operations in 2022 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.

3.3 Service Area and Population

Briar Hill is one of three active waste disposal sites serving TLTI (along with the Lansdowne and Escott Landfills). According to the 2021 census, the population of the TLTI was 9,804 (StatCan, 2021).

3.4 Site Operation

No spills or emergencies, as described by condition 5 of the ECA, occurred at the Site in 2022.

The Site operates Mondays, Wednesdays, Thursdays, and Saturdays from 8:30 am to 4:30 pm when a Site Attendant who inspects incoming waste loads for compliance is on duty. No waste is received at the Site outside those hours of operation. The entrance and exit gates are locked during non-operating hours. Based on the daily attendant logs, waste loads were rejected on 13 occasions because it was waste generated outside of the Township.

Site inspections are carried out during each day of operation by the Site Attendant, and records of these inspections are included in Appendix F. Notable observations in 2022 include

- birds, and/or racoons on several occasions,
- wind blown litter (efforts to pick up windblown litter were noted), and
- trespassers on site after hours.

Litter around the Site is picked up daily by the Site Attendants.

No spills or emergencies, as described by condition 5 of the ECA, occurred at the Site in 2022.

The Site relies on natural attenuation, with no engineered systems for leachate collection or storm water management.

Landfill gas migrating from the Site is not collected by an engineered gas system. An elevated attendant's trailer was installed at the Site to ensure that gas does not accumulate within the enclosed space.

3.5 Phasing of Site Usage

Waste at the site is compacted using a wheeled compactor and covered with sand fill bi-weekly. Between bi-weekly compaction events, TLTl personnel apply cover material from an on-site stockpile so that cover is applied weekly. Cover material is brought in from off-site, placed on a compacted portion of the waste fill area and typically used within 48 hours.

The Site has two phases of waste filling: a former landfill area in the northeast part of the site, and active fill area in the centre of the site. Active filling is currently occurring on located on the northeastern edge of the active site as shown in Figure 2 (Appendix A).

3.6 Record Keeping

Field notes and Site logs are maintained at the Township offices, 1233 Prince Street, Lansdowne, Ontario. Daily site inspections are conducted by the TLTl staff on days when the landfill was open to the public. Inspection results are recorded on daily site log sheets which are included in Appendix F.

3.7 Waste Diversion

Recycling bins are maintained on site to divert material from the landfill. Removal and processing of the recycling materials was completed by Environmental 360 Solutions. The hours of operation for the recycling depot are the same hours as those for the landfill.

Tires are not accepted at the Briar Hill Site; however, users are directed to the Lansdowne WDS where the tires are recycled. Tires dumped at the gates of the Site are stockpiled and shipped to the Lansdowne WDS for recycling.

3.8 Remaining Site Capacity

Based on a survey completed December 21, 2022, the remaining capacity is approximately 51,700 m³, including cover Figure 6 (Appendix A). The survey identified

a total of approximately 1300 m³ of waste deposited in 2022. The estimated remaining capacity of the site is approximately 35 years using an average rate of fill of approximately 1,500 m³ per year (based on data from 2017-2022).

4 Site Surveillance, Monitoring, and Sample Program Scope

The surveillance, monitoring, and sample programs are conducted in accordance with the monitoring plan pursuant to Section 8 of the site's ECA (Appendix C).

4.1 Site Surveillance

Site inspections are conducted during sampling events. These inspections include a check of operational compliance with the ECA including signage, Site Attendants, hazardous or liquid wastes, vermin, vectors, litter, dust, brush and clean wood burning, and interim cover. In addition, observations of general site conditions including drainage, surface water, condition of landfill cap, seeps, and onsite structures are noted.

4.2 Well Inspection

Well inspections are undertaken during all sampling events. These inspections include a visual inspection of accessible portions of the well piezometer, monument casing, cap, lock, and well seal. Wells were assigned one of the following conditions:

Poor – well integrity is compromised and the well requires repair

Fair – exhibits some minor deficiencies, however well integrity is not compromised.

Good – the well is in good condition with no obvious signs of damage.

Wells that require attention are reported to the Project Manager for repairs.

4.3 Groundwater Monitoring Program

Prior to sampling, each well is monitored for depth to water, depth to well bottom, and combustible gas vapours. During purging of groundwater, visual and olfactory observations are noted and recorded.

Groundwater sampling was conducted using dedicated Waterra tubing equipped with a foot-valve. Prior to sampling, three to five well volumes of groundwater were purged from each well or, wells were pumped dry three times. At the completion of purging, water quality was monitored using a Horiba multi-parameter instrument for temperature, pH, dissolved oxygen, oxidizing/reducing potential, conductivity, and turbidity. Samples intended for metals analyses were field-filtered using a disposable 0.45-micron inline

filter. Samples were collected into new laboratory prepared sample bottles and submitted to Caduceon Environmental Laboratories (Caduceon) for analyses.

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

As detailed in Schedule 8 of the ECA (Appendix C) and updated by the 2021 Ministry letter report (Bos, 2021), the groundwater monitoring plan consists of sixteen overburden monitoring wells (L2, L11, OW1, OW6R1, OW7R1, OW15-D, OW15-S, OW17, OW18, OW19, OW20, OW21, OW22, OW23, OW24R01, OW25) and four bedrock wells (BW1, BW2-D, BW2-S, and L10) tested for lab and field parameters.

Wells L2, L10, and L11 are sampled once annually in the spring. Volatile organic compound (VOC) analyses are tested once annually in the spring at wells L10, OW15-S, OW15-D, OW19 and OW22. Wells OW22, OW23, OW24R01, 122 Turk Rock Road, and 151 Fortune Line Road samples are tested for PFAS once annually.

Background levels are characterized by OW20 and BW2-S. Compliance is evaluated at OW24R1, OW23, OW1 and OW18.

This information is summarized in Appendix C.

4.4 Surface Water Monitoring Program

The surface water monitoring program includes collecting samples at three active surface water sampling stations located along the adjacent tributary to Morton Creek: SW1, SW4 and SW5 (Figure 2, Appendix A). Station SW1 is used as the background station. Surface water station locations (UTMs) and observations are summarized in Table 6 (Appendix B).

4.5 Compliance Criteria

Groundwater and surface water monitoring results are conducted on a semi-annual basis in the spring and fall, in accordance with the ECA. The current monitoring plan for the Site uses the Ontario Drinking Water Standards (ODWS) and the Ministry B-7 Reasonable Use Policy to evaluate groundwater conditions and compliance. Provincial Water Quality Objectives (PWQO) and the Table A: Assessment Criteria for Waste

Disposal Sites and Table B: Alternative Review Criteria (MOE 2010) are used as reference criteria to evaluate surface water conditions and compliance.

As of 2022, LIPs at this site are alkalinity, total dissolved solids (TDS), ammonia, boron, conductivity, chloride, dissolved organic carbon (DOC), and iron. Monitoring wells OW1 and OW18 are used to characterize leachate within the overburden and monitoring well 122 Turk Rock Road and 151 Fortune Line Road are used to characterize the leachate within the bedrock at the site.

4.6 Data Quality Evaluation

Water analyses are undertaken by Caduceon, a Canadian Association for Laboratory Accreditation (CALA) certified laboratory that uses industry recognized methods to conduct laboratory analyses.

Malroz completed field activities in accordance with standard operating protocols to ensure precise sample collection and reduce the risk of cross-contamination.

Information from both the laboratory and field is validated by Malroz before data analysis.

4.7 Deviations from the Monitoring Plan

Some locations were not able to be sampled in 2022 due to insufficient water or dry conditions:

- OW19 was dry in the spring.
- L11, OW19, and OW22 was dry in the fall.

Permission for site access was not granted for 122 Turk Rock Road in the spring, so the well was not sampled.

5 Site Inspection Results

Site inspections were undertaken by Malroz during the 2022 sampling events.

5.1 Site Inspection

Litter was noted at both the spring and fall sampling events. No seeps or ponded water were noted.

5.2 Well Inspection

Results of the well inspections are summarized in Table 1 (Appendix B). Copies of the site inspections completed by Malroz staff in 2022 are included in Appendix G. Site photographs of sampling locations are presented in Appendix D.

Monitoring wells at the Site were observed to comply with O. Reg. 903.

5.3 Methane

Methane concentrations in the monitored wells were below the instrument detection limits with the following exceptions:

- L11, OW6R1, OW7R1, OW15-S, OW17, OW18, OW25, BW1, BW2-S, and L10 reported <1% of the Lower Explosive Limit (LEL) in the spring.
- OW19 reported 6% of the Lower Explosive Limit (LEL) in the spring.

Results of the methane monitoring are summarized in Table 2 (Appendix B).

6 Groundwater Monitoring Program

Groundwater was tested in accordance with the monitoring plan (Appendix C). The Site has both overburden and bedrock wells.

6.1 Groundwater Flow

Groundwater elevation contours for both flow in overburden and bedrock were interpolated based on depth to water measurements and well elevations. Results are presented in Figures 4a, 4b, 5a, and 5b (Appendix A).

Shallow groundwater elevation monitoring indicates a predominantly northwesterly flow (Figure 4a-b, Appendix A), similar to previous analyses.

Bedrock groundwater elevation monitoring indicates northerly flow, with predominantly northern flow south of the waste fill sites (Figure 5a-b, Appendix A), similar to previous analyses.

6.2 Groundwater Quality

Results for the 2022 groundwater chemical analyses are presented in Table 4a, 4b and 5 (Appendix B). Laboratory certificates of analysis are provided in Appendix H.

6.2.1 Overburden

Overburden groundwater sample analysis results are found in Table 4a (Appendix B), with historical results in Appendix I.

LIPs are evaluated at compliance well OW1, leachate impacted well, OW22, downgradient well OW7R1, compliance well OW18, and compliance well OW24R1. They are compared to background well OW20:

- Alkalinity, TDS, and Conductivity concentrations appears to be similar to results from the past five years. Downgradient wells OW22 and OW7R1 are above the operational guideline. Compliance well OW1 and downgradient well OW22 are both below the OWDS, and show different historical trends and current concentrations. Compliance well OW18 shows alkalinity readings significantly lower than those at OW17R1, inferring that leachate is discharging into the Morton Creek tributary, protecting areas to the north. Compliance well OW24R1 in the CAZ lands to the west of the site appears stable and similar to background well OW20.
- DOC analyses from compliance well OW1 are similar to the background concentration from well OW20. Compliance well OW18 is significantly lower than OW17R1, inferring the Morton Creek tributary is acting as a barrier to the properties to the north. Concentrations are elevated in downgradient well OW22 when compared with compliance wells OW24R1, indicating that concentrations are attenuating downgradient of the landfill.
- Downgradient well OW7R1 has elevated ammonia concentrations; however, compliance wells OW18, OW1, and OW24R1 concentrations near background levels from OW20, indicating attenuation is occurring.
- Chloride concentrations in compliance well OW1 were above the OWDS aesthetic objective of 250 mg/L in the spring, but below the limit in the fall. This trend has been observed in the past. Downgradient well OW22 concentration is elevated, but below the OWDS aesthetic objective. Concentrations at downgradient well OW7R1 are significantly lower than OW1 and OW22, inferring attenuation is occurring. Compliance wells OW18 and OW24R1 approach background levels.
- Iron concentrations in downgradient well OW7R1 and compliance OW24R01 are above the OWDS aesthetic objective of 0.3 mg/L in both the spring and the fall sampling events. Compliance wells OW1 and OW18, and downgradient well OW22 have concentrations similar to background well OW20. As concentrations between the landfill area and wells OW7R1 and OW24R1 do not have elevated concentrations, the iron may have come from a natural source, such as granitic bedrock and soils.
- Boron concentrations in all wells are well below the OWDS objective of 5 mg/L.
- PFAS was analyzed from samples from downgradient well OW22, and compliance wells OW23 and OW24R1. The results are summarized in Table 8

(Appendix B). Downgradient well OW22 concentrations exceeded the detection limit. Two PFAS compounds, Perfluorohexanoic acid (PFHxA) and Perfluoropentanoic acid (PFPeA) exceeded the Health Canada PFAS Screening Values in the spring; however, the sum of all reported PFAS compound concentrations is below the MECP Drinking Water Screening Values for Perfluorinated Chemicals. Compliance wells OW23 and OW24R01 had no concentration results above the laboratory detection limit.

Elevated levels of non-LIP parameters conductivity, hardness, and total dissolved solids were noted in most wells, including the background well OW20. These parameters may be influenced by natural sources, such as bedrock.

Although iron concentrations at compliance well OW24R1 exceed the OWDS aesthetic objective, considering the lower concentrations at OW15S it appears that the iron may be non leachate related.

6.2.2 **Bedrock**

Bedrock groundwater sample analysis results are found in Table 4b (Appendix B), with historical results in Appendix I.

LIPs are evaluated at leachate impacted well L10, downgradient well BW1, and compliance wells 122 Turk Rock Road and 151 Fortune Line Rd. They are compared to background wells BW2-S (see Appendices B and I):

- Alkalinity concentrations from the leachate impacted well L10 are above the ODWS operational guideline of 500 mg/L. Compliance wells 122 Turk Rock Road and 151 Fortune Line Road are within the guidelines.
- TDS and conductivity follow similar trends. Analyses from the leachate impacted well L10 showed significantly higher readings than downstream well BW1. Background well OW20 has had consistent concentrations for the past 5 years. Background well BW2S remains over the aesthetic objective as it has in the past five years. Compliance well 122 Turk Rock Road was observed to have concentrations below the background well, while compliance well 151 Fortune Line Road is above the aesthetic objective, consistent with historical results and of note is in a different bedrock than the background well. Leachate well L10, compliance well 122 Turk Rock Road, and background well BW2S are all have concentrations above the aesthetic objective of 500 mg/L, as well as the spring sample from BW1. Considering the concentrations at background well BW2-S the data does indicate a natural contribution to TDS in groundwater.

- DOC concentrations are greater than the OWDS aesthetic objective of 5 mg/l in leachate impacted well L10, and in downgradient well BW1 in the spring. Compliance wells 122 Turk Rock Road and 151 Fortune Line Road as well as background well BW3S were below the OWDS.
- Downgradient well L10 has elevated ammonia concentrations, which decrease at downgradient well BW1, inferring attenuation. Compliance wells 122 Turk Rock Road and 151 Fortune Line Road are similar to background well BW2S.
- Chloride concentrations in compliance well 122 Turk Rock Road is below the ODWS of 250 mg/L, and is above the level of leachate well L10, downgradient well BW1, and background well BW2, indicating the chloride did not emanate from the landfill, may have come from a natural source, such as bedrock. Compliance well 151 Fortune Line Road is below background levels.
- Iron concentrations in leachate impacted well L10 is above the OWDS aesthetic objective of 0.3 mg/L in both the spring and the fall sampling events. Downgradient well BW1 has a much-decreased concentration. The concentrations at compliance wells 122 Turk Rock Road and 151 Fortune Line Road are similar to background well BW2S, and below the objective.
- Boron concentrations in all wells are significantly below the OWDS of 5 mg/L.
- PFAS was analyzed from samples from compliance wells 122 Turk Rock Road, and 151 Fortune Line Road. The results are summarized in Table 8 (Appendix B). Neither compliance well had concentrations results above the laboratory detection limit.

The non-LIP hardness had elevated levels most wells, including the background wells BW2-D and BW2-S.

No evidence of leachate impact in the compliance wells is noted.

6.2.3 Volatile Organic Compound Analyses

None of the groundwater wells analysed had concentrations above the laboratory detection limits. The results are summarized in Table 5 (Appendix B).

7 Surface Water Monitoring Program

The surface water monitoring program at the Site is characterized by three sampling stations: SW1, SW4, and SW5. Coordinates (UTM) for each of the surface water stations are presented in Table 6 (Appendix B). Results of the surface water analyses are presented in Table 7 (Appendix B).

7.1 Surface Water Flow

Surface water flows from east to west in a Morton Creek tributary north of the site in the Northern and Western CAZs (see Figure 2, Appendix A).

7.2 Surface Water Quality

Surface water sample analysis results are found in Table 7 (Appendix B).

LIPs were evaluated at stations SW4 and SW5, and compared to background station SW1 (see Appendix I):

- Alkalinity, TDS, DOC, and conductivity measurements at compliance stations SW4 and SW5 appear similar to background station SW1.
- Chloride concentrations at compliance stations SW4 and SW5 are similar to the background station SW1, and below the PWQOs.
- Ammonia concentrations in compliance stations SW4 and SW5 and background station SW1 are above the PWQO of 0.2 mg/L.
- Iron concentrations in compliance stations SW4 and SW5 are very similar to concentrations from background station SW1, and all three concentrations are near the PWQO of 0.3 mg/L.
- Boron concentrations in compliance stations SW4 and SW5 are similar to the background station SW1, and below the PWQO of 0.2 mg/L.

Non-LIP parameter of phosphorus, nitrite, copper and iron were above the PWQO, including the background surface water station SW4. In addition, station SW4 results were above the PWQO for phenols during the fall sampling event. Background station SW1 also had a slightly elevated phenol concentration, although below the PWQO.

Considering the background conditions, the impact from the landfill, if any, does not appear significant in our opinion, and the monitoring program remains appropriate.

8 Reasonable Use Policy/ Guideline B-7 Assessment and Action Plan

The reasonable use policy (RUP) provides a mechanism to calculate the reasonable use limits (RUL) for the Site using historical data from background well BW2S for overburden wells, OW20 for bedrock wells, and corresponding drinking water criteria per Ministry Guideline B-7.

RULs for the following parameters were exceeded at one or more of the wells during the spring and/or fall sampling events: dissolved organic carbon (DOC), hardness, total

dissolved solids (TDS), nitrate, aluminum, barium, boron, iron, manganese, sodium, and uranium.

- Overburden compliance well OW18 exceeded the RULs for hardness and barium.
- Overburden compliance well 24R1 exceeded the RULs for hardness, iron, and manganese.
- Bedrock compliance well 151 Fortune Line Road exceeded the RULs for hardness, TSS, chloride, and sodium.
- Bedrock compliance well 122 Turk Rock Road exceeded the RULs for hardness and nitrate.

One or more groundwater RUL exceedances for non-LIPs were reported for all overburden monitoring wells as well as all bedrock monitoring wells as presented in Table 4a and Table 4b respectively (Appendix B).

Iron, boron, and manganese could also be leachate related; however, hardness, aluminum, barium, iron, manganese, sodium, and uranium may be influenced by non-leachate factors such as background contributions from the bedrock and soils common to the area. For example, exceedances of the RUL for uranium may be derived from the bedrock considering the regional geology. Concentrations between 3 and 25 ug/L are reported in the Precambrian rock in the Gananoque area (Hamilton, 2015). Thus, the influence of leachate on metal concentrations cannot be definitively determined.

Although RULs suggest that the Site is non-compliant with Ministry Guideline B-7, analysis of chemistry infers attenuation is occurring, and analysis of the chemistry data shows no obvious paths from the leachate impacted areas to the areas, and some instance where the background levels are higher than the RULs (overburden background overburden well OW20 has a higher concentration than the RUL for hardness, and bedrock background well BW2-S has higher concentrations than the RULs for hardness, TDS, nitrate, sodium and uranium).

Further, the PFAS sampling program indicates that leachate is not spreading beyond the CAZ or into downgradient drinking water wells.

Leachate impacted groundwater seems to discharge into the Morton Creek tributary, protecting the domestic wells to the north of the CAZ. Chemistry suggests attenuation is occurring between the waste areas and the wells on the perimeter of the CAZ. Acquiring the proposed western CAZ shown in Figure 2 to mitigate non-compliance with Ministry

Guideline B-7 in downgradient well OW15 is recommended. TLTI reports the CAZ land procurement is ongoing.

9 Conclusions and Recommendations

The Briar Hill WDS is an active site currently accepting non-hazardous solid waste, operating in compliance with the ECA. Based on the approved capacity of the site and the volume of waste deposited to date, the landfill has an estimated lifespan of 35 years.

The shallow overburden groundwater tends to flow northwesterly from the landfill. Bedrock groundwater tends to flow northward. Attenuation of the leachate in the subsurface appears to be occurring.

Ministry Guideline B-7 has been applied to the Site. Results indicate that some compliance wells exceeded the RULs. An analysis of the groundwater chemistry so indicates that RUL exceedances may include contributions from the bedrock and soils common to the area. Further PFAS analyses did not show impact to the two drinking water wells sampled. Groundwater analyses results from the sampling do not indicate significant leachate impacts in the groundwater extend beyond the north creek.

Surface water stations do not show significant evidence of leachate impact.

The following recommendations are provided for the Escott WDS monitoring program:

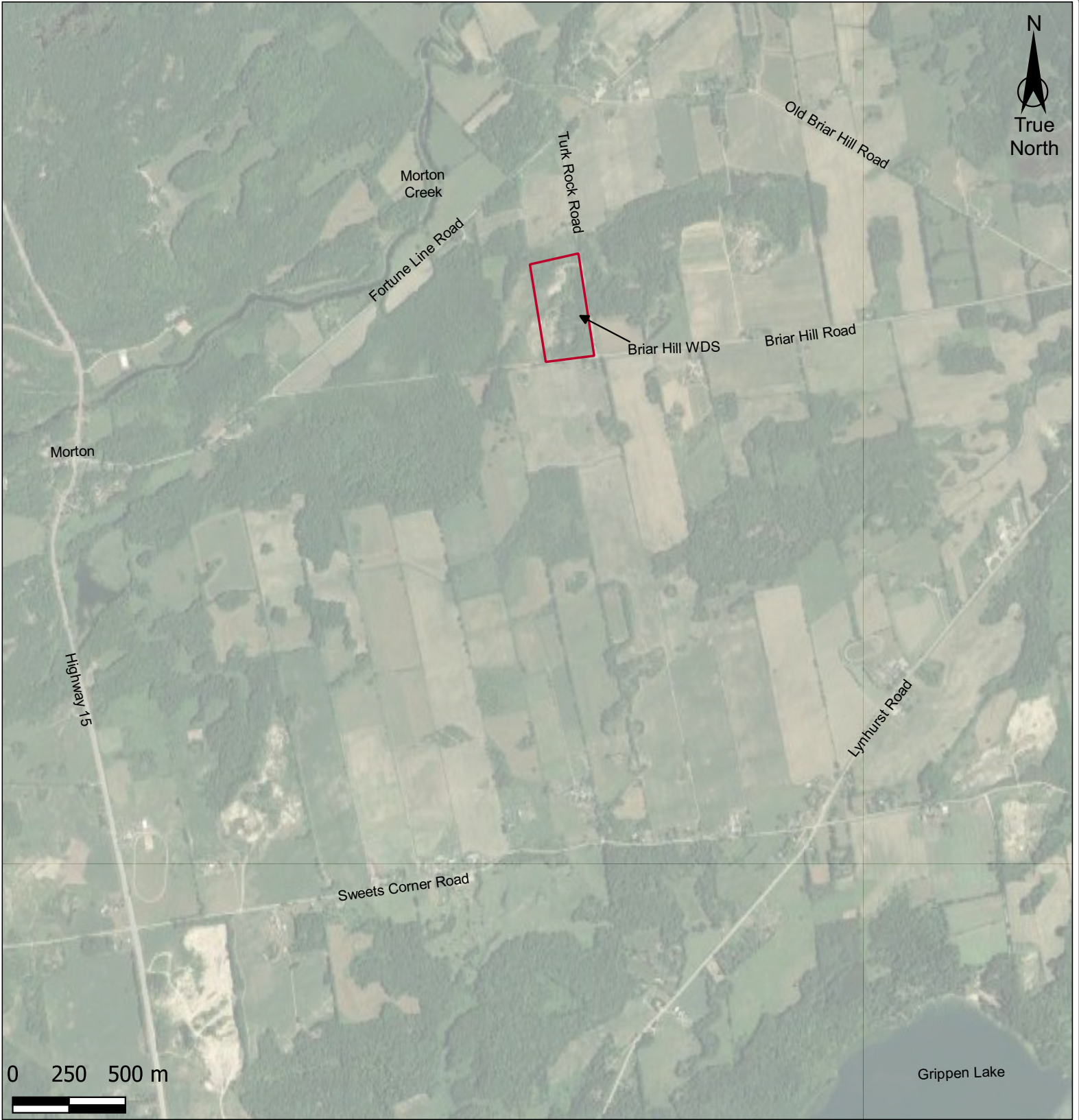
- Reclassify compliance well OW1 to a downgradient well due to its proximity to the landfill as well as the distance from the CAZ perimeters.
- Continue the program to purchase the Western CAZ.
- Evaluate the need for groundwater and surface water triggers and submit to the Ministry following the purchase of additional CAZ lands.
- Prepare a closure plan for the Site, including rescoping the monitoring plan and development of trigger mechanisms once the CAZ land registration is complete.

10 References

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- Day, Andrew (2012-2014). 2012-2014 Annual Groundwater and Surface Water Monitoring Report for Briar Hill WDS (ECA No. 442103), Township of Leeds and the Thousand Islands.
- 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.
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- Province of Ontario (2023) Ontario Drinking Water Standards (ODWS) from Ontario Regulation 169/03 of the Safe Drinking Water Act (2002). Last amendment: O. Reg. 373/15.
- Statistics Canada (2023) Leeds and the Thousand Islands Census Profile. 2021 Census of Population. Statistics Canada Catalogue no. 98-316-X2021001. Ottawa. Released February 8, 2023.
<https://www12.statcan.gc.ca/census-recensement/2021/dp-pd/prof/index.cfm?Lang=E> (accessed March 15, 2023).

Appendix A

Figures



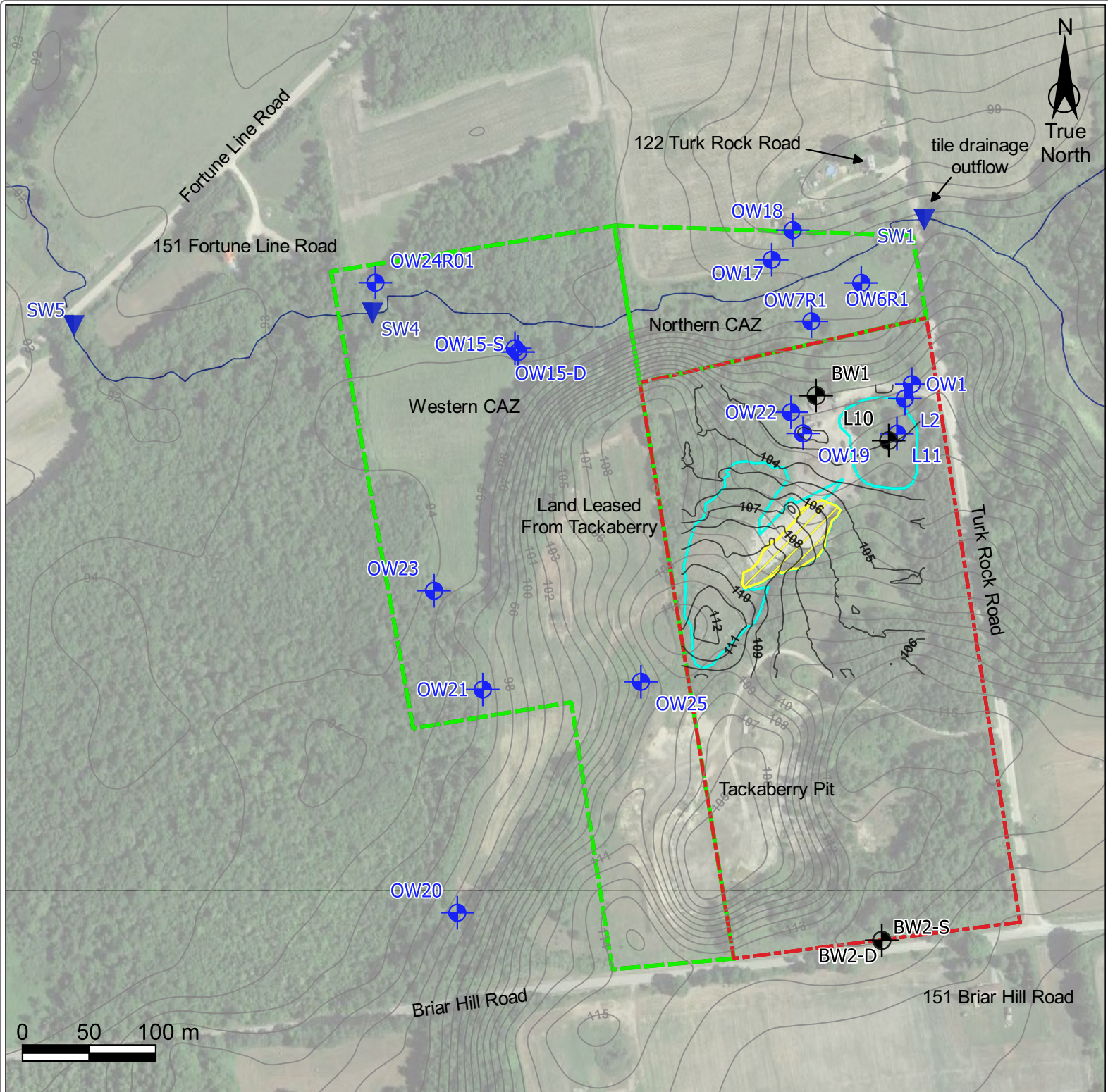
Legend
[red rectangle] approximate site boundary

R1	2022-03-23	issued in final	CM	PK
Rev	Date	Description	By	Chkd

Site Location Plan

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Data Sources: Figure based on Malroz field observations and Google Earth imagery; topographic contours based on Digital Raster Aquisition Project Eastern Ontario, MNRF, 2014; stream based on Ontario Hydro Network, MNRF, 2020.



Legend

- approximate Site property boundary
- CAZ
- approximate landfill area
- approximate topographic contours (MNRF, 2014)
- current landfill area
- + approximate overburden monitoring well location
- + approximate bedrock monitoring well location
- ▼ surface water monitoring location
- stream
- topographic contours

R1	2022-03-23	issued in final	CM	PK
Rev	Date	Description	By	Chkd

Site Plan

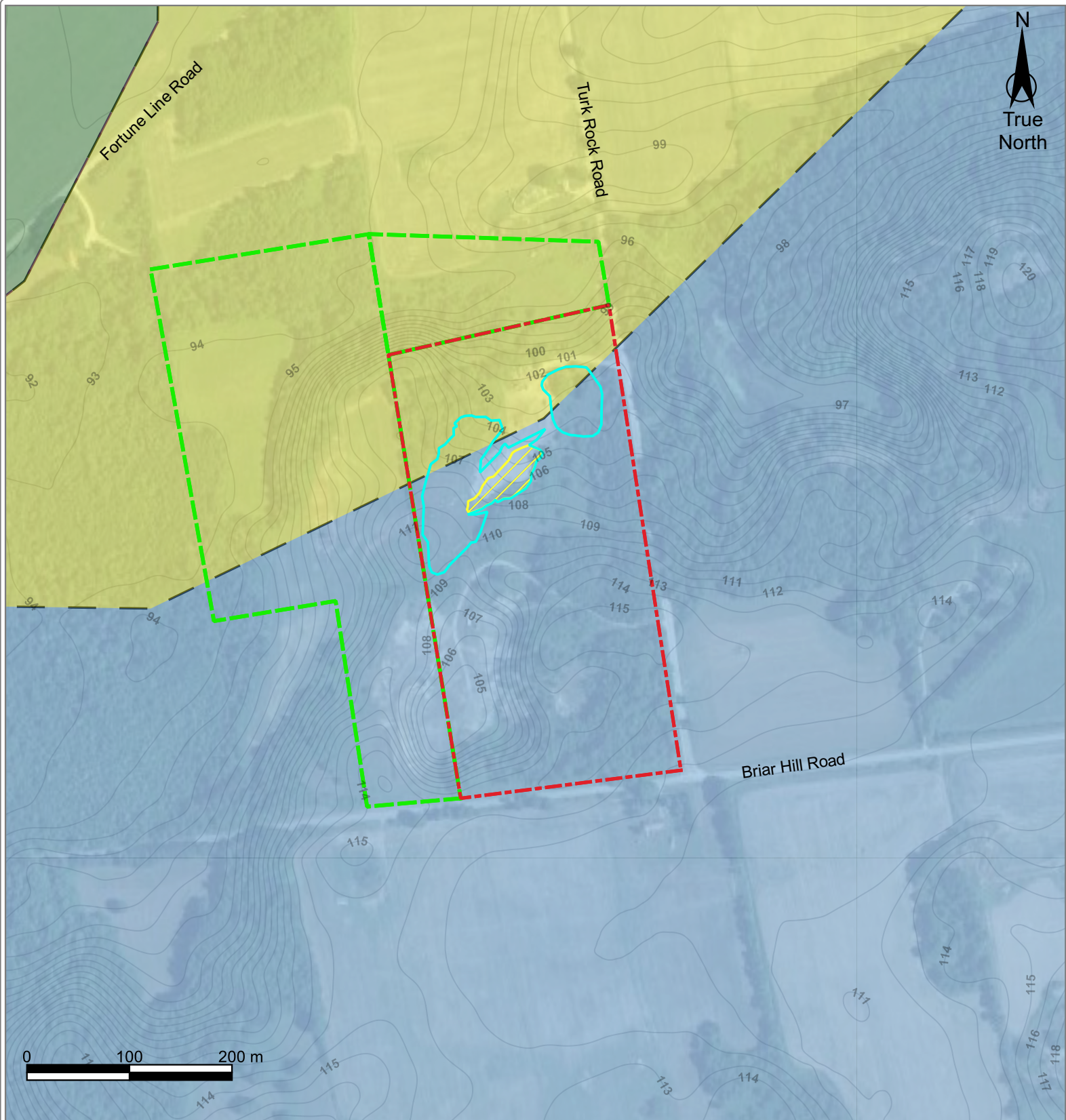
2022 Monitoring, Development, and Operations Report
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File: 1036-121.00

Figure
2



Data Sources: Figure based on Malroz field observations and Google Earth imagery; topographic contours based on Digital Raster Acquisition Project Eastern Ontario, MNRF, 2014; stream based on Ontario Hydro Network, MNRE, 2020.



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- approximate 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.

R1	2022/03/23	issued in final	CM	PK
Rev	Date	Description	By	Chkd

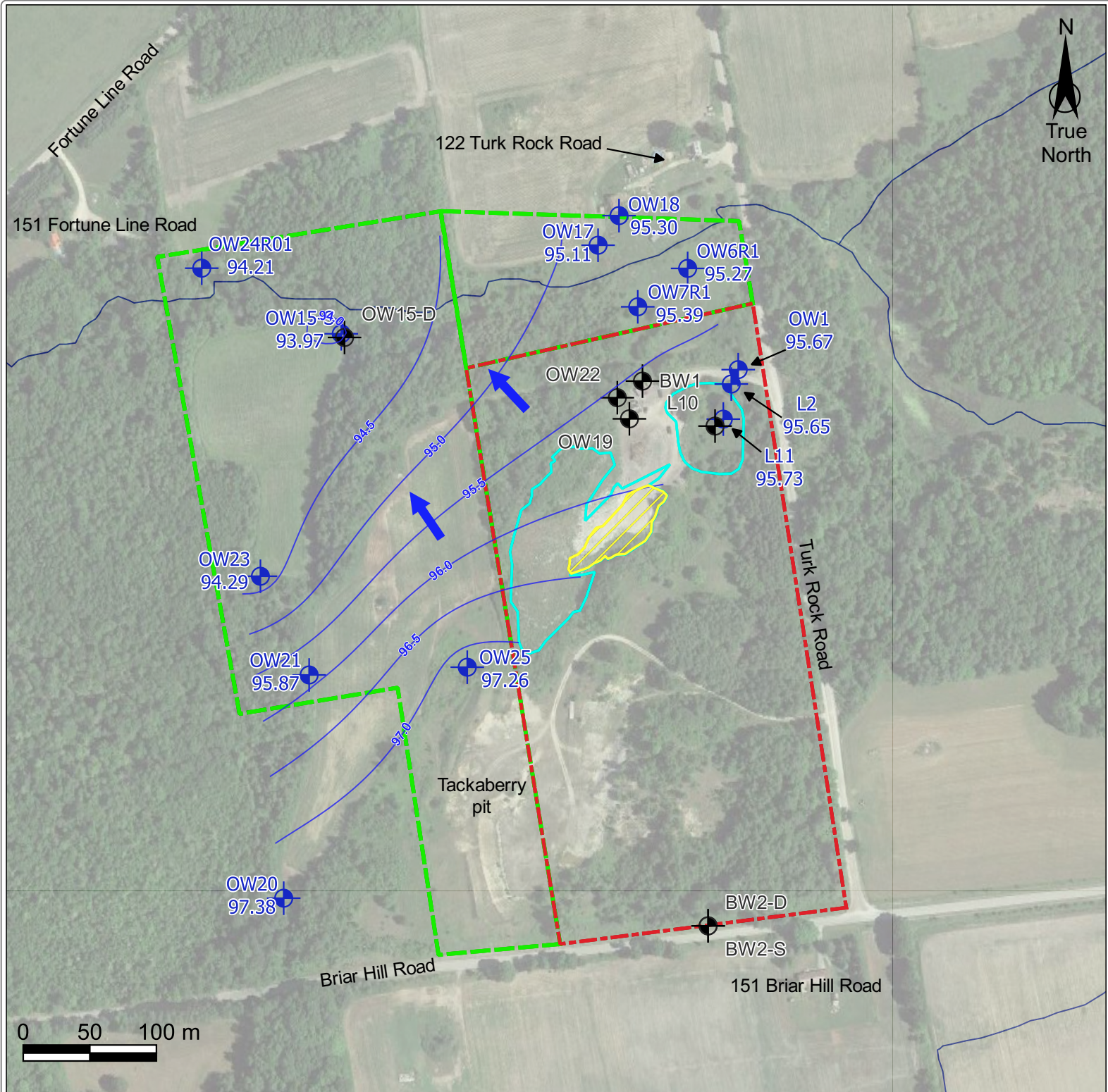
Bedrock Geology

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File: 1036-121.00

Figure
3





Legend

- approximate existing property boundary
- CAZ
- approximate former landfill area
- current landfill area
- bedrock monitoring well location
- overburden monitoring well location
- stream
- inferred GW contour (0.5 m)

R1	2022-03-23	issued in final	CM	PK
Rev	Date	Description	By	Chkd

Shallow Groundwater Contours (May 2022)

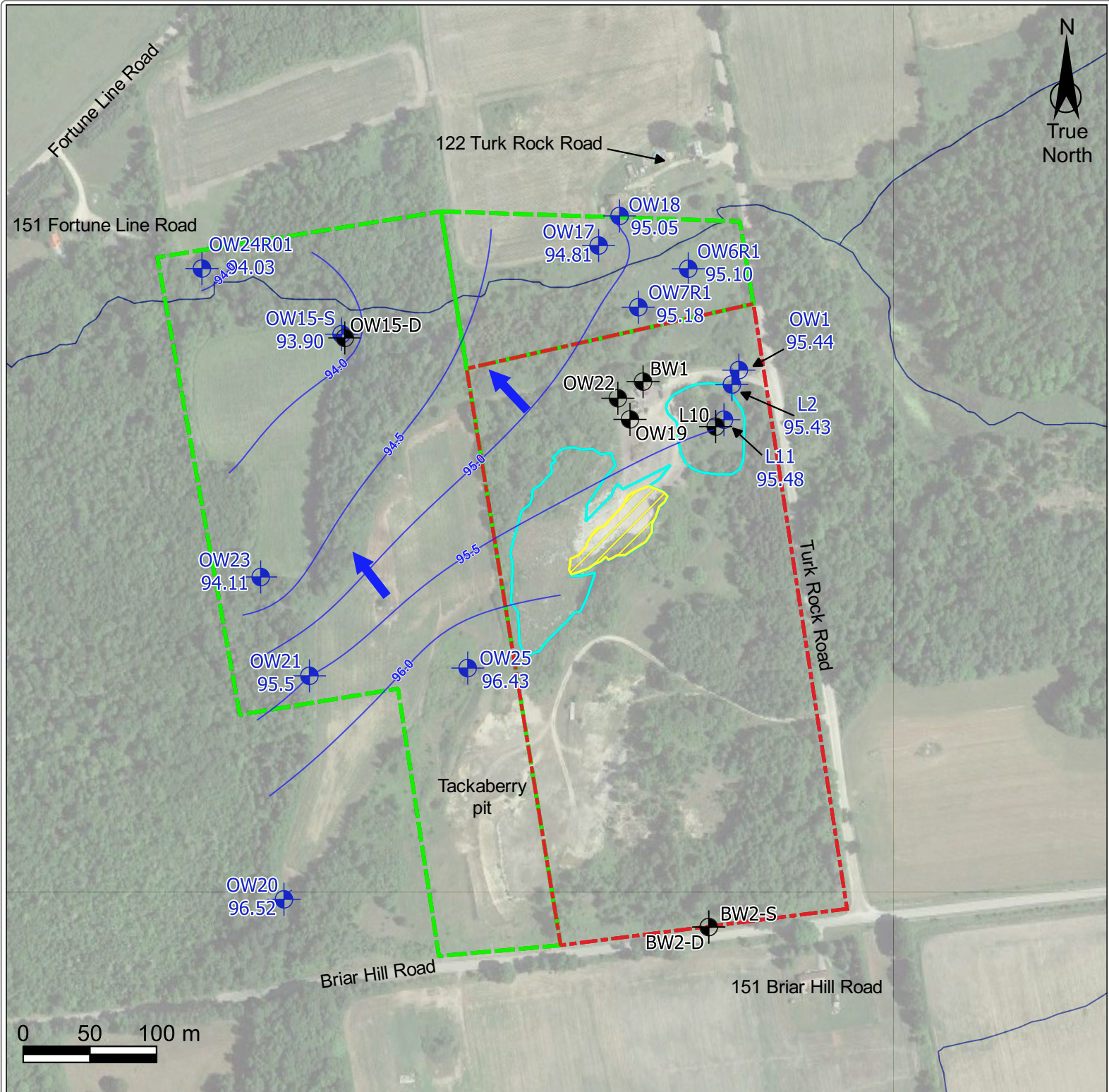
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Township of Leeds and the Thousand Islands

File: 1036-121.00

Figure
4a



Data Sources: Figure based on Malroz field observations and Google Earth imagery; Groundwater contours interpolated using natural neighbour method in GIS.



Legend

- approximate existing property boundary
- CAZ
- approximate former landfill area
- current landfill area
- bedrock monitoring well location
- overburden monitoring well location
- stream
- inferred GW contour (0.5 m)

R1	2022-03-23	issued in final	CM	PK
Rev	Date	Description	By	Chkd

Shallow Groundwater Contours (Nov 2022)

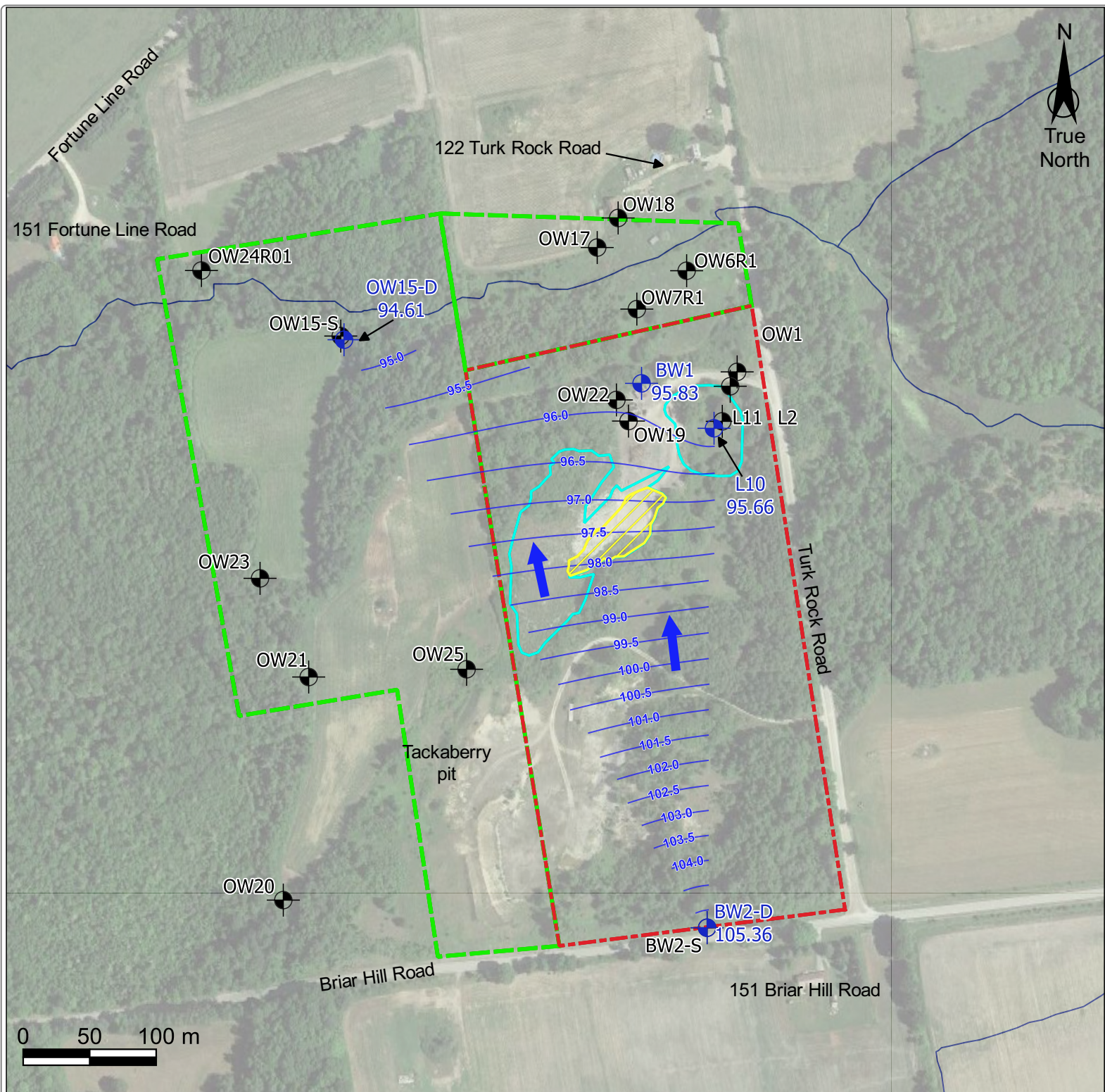
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Township of Leeds and the Thousand Islands

File: 1036-121.00

**Figure
4b**



Data Sources: Figure based on Malroz field observations and Google Earth imagery; Groundwater contours interpolated using natural neighbour method in GIS.



Legend

- approximate existing property boundary
- CAZ
- approximate former landfill area
- current landfill area
- overburden monitoring well location
- bedrock monitoring well location
- stream
- inferred GW contour (0.5 m)

R1	2022-03-23	issued in final	CM	PK
Rev	Date	Description	By	Chkd

Deep Groundwater Contours (May 2022)

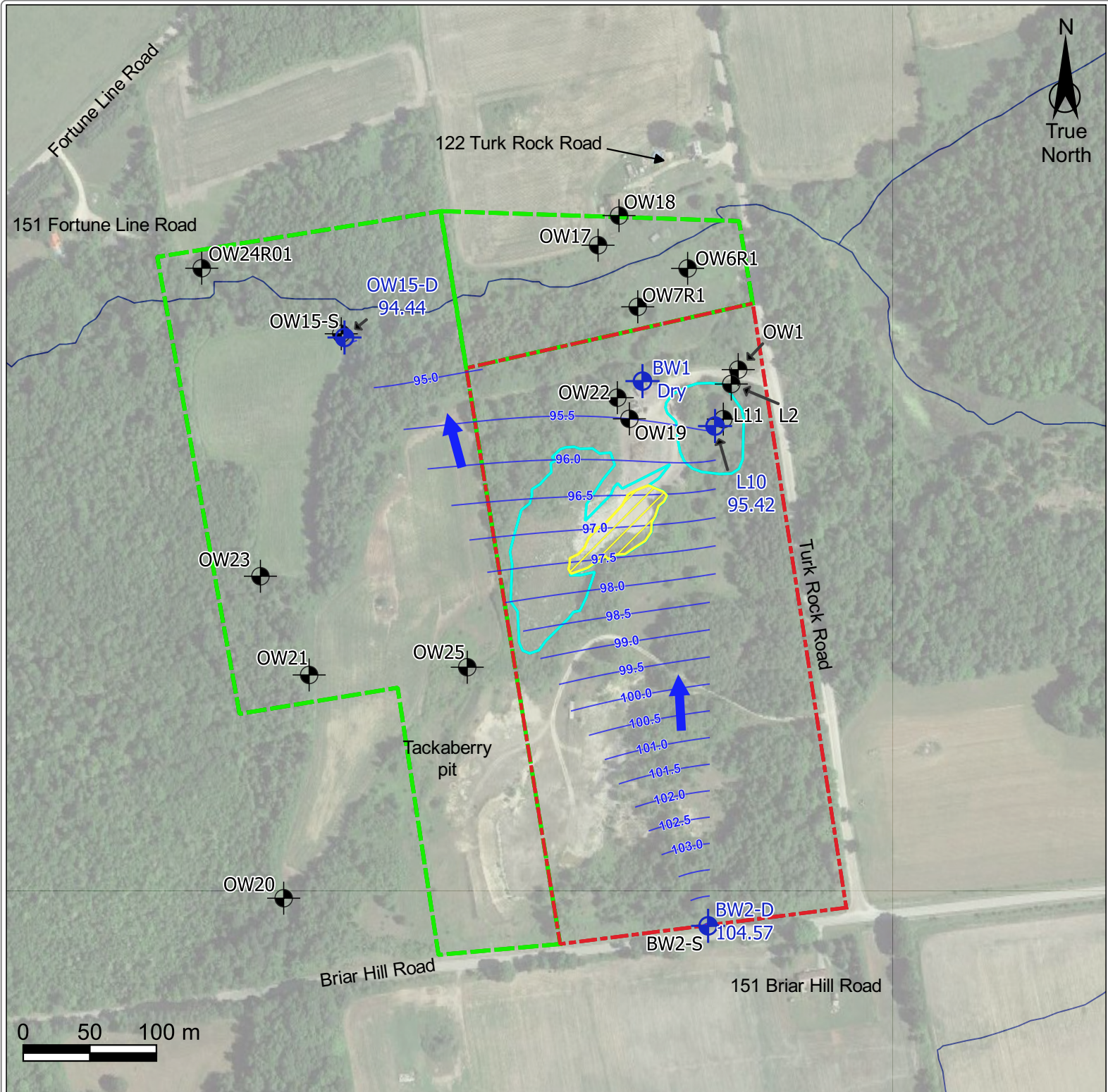
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Township of Leeds and the Thousand Islands

File: 1036-121.00

Figure
5a



Data Sources: Figure based on Malroz field observations and Google Earth imagery; Groundwater contours interpolated using natural neighbour method in GIS.



Legend

- approximate existing property boundary
- CAZ
- approximate former landfill area
- current landfill area
- overburden monitoring well location
- bedrock monitoring well location
- stream
- inferred GW contour (0.5 m)

R1	2022-03-23	issued in final	CM	PK
Rev	Date	Description	By	Chkd

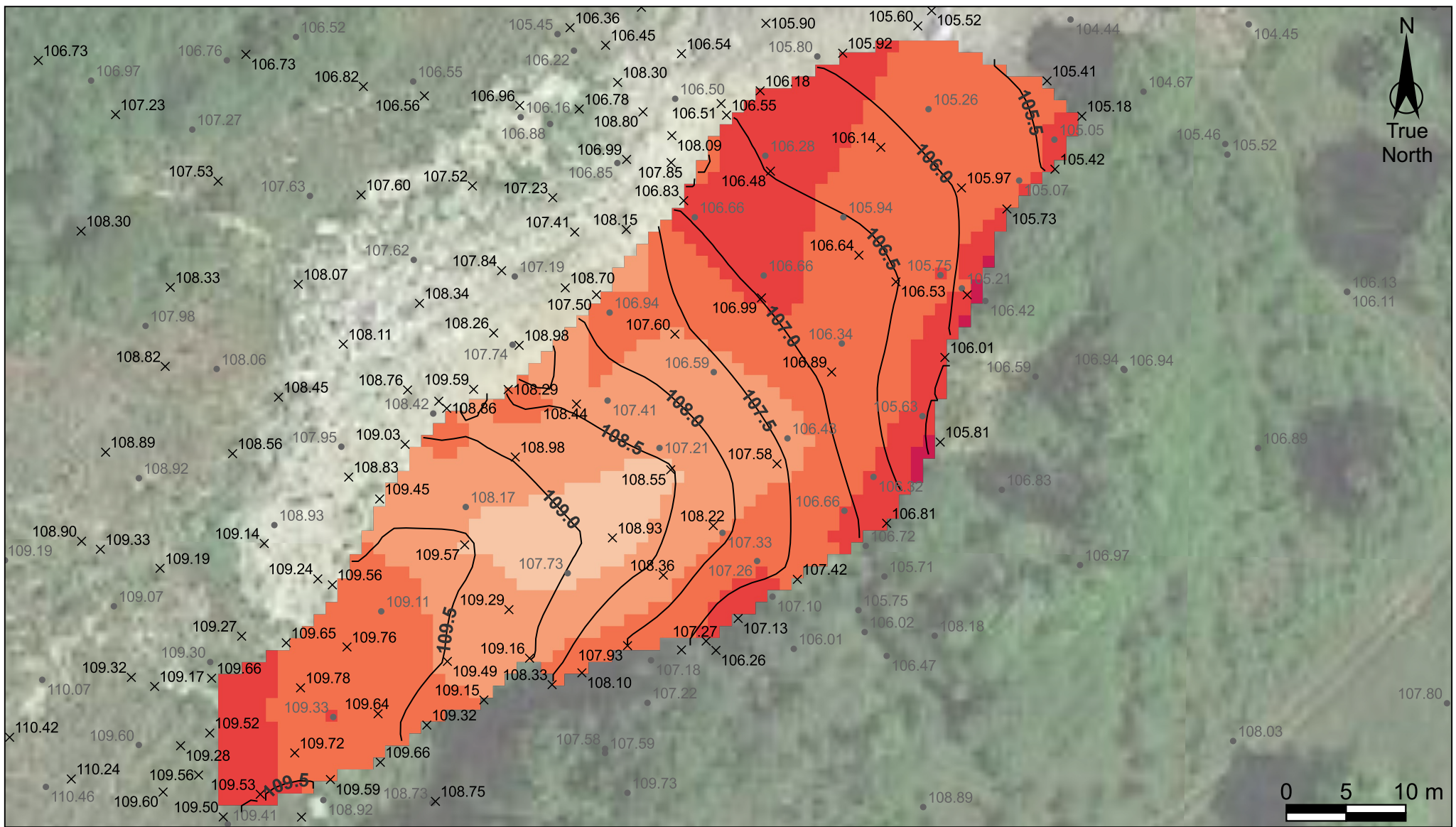
Deep Groundwater Contours (Nov 2022)

2022 Monitoring, Development, and Operations Report
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File: 1036-121.00

**Figure
5b**





Legend

- waste contour line and elevations (2022)
- × capacity survey point and elevation (2022)
- capacity survey point and elevation (2021)

Current Waste Mound Compared to 2021 Waste Mound

- 0.4 to 0.0 m below 2021 contour
- 0.0 to 0.4 m above 2021 contour
- 0.4 to 0.8 m above 2021 contour
- 0.8 to 1.2 m above 2021 contour
- 1.2 to 1.6 m above 2021 contour
- greater than 1.6 m above 2021 contour

R1	2023-03-22	issued in final	JMP	CM
Rev	Date	Description	By	Chkd

Remaining Landfill Capacity (2022)

2022 Monitoring, Development, and Operations Report
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Township of Leeds and the Thousand Islands

File: 1036-121.00

Figure
6

Data Sources: Figure based on Malroz field observations and Google Earth imagery, and survey conducted by Malroz on December 21, 2022.

Appendix B

Tables

Table 1
Well Inspection Results

Well ID	Well Type/ Protective Casing	Well Construction	Well Integrity			Well Observations
			Locked	Capped	Condition ^[1]	
OW1	white 50 mm PVC pipe	50 mm schedule 40 PVC	Y	J-Plug	good	
OW6R1	steel monument	50 mm schedule 40 PVC	Y	J-Plug	good	
OW7R1	steel monument	50 mm schedule 40 PVC	Y	J-Plug	good	
OW15-S	steel monument	50 mm schedule 40 PVC	Y	J-Plug	good	
OW15-D	steel monument	50 mm schedule 40 PVC	Y	J-Plug	good	
OW17	steel monument	50 mm schedule 40 PVC	Y	J-Plug	good	
OW18	steel monument	50 mm schedule 40 PVC	Y	J-Plug	good	
OW19	white 50 mm PVC pipe	50 mm schedule 40 PVC	Y	J-Plug	good	
OW20	steel monument	50 mm schedule 40 PVC	Y	J-Plug	good	
OW21	steel monument	50 mm schedule 40 PVC	Y	J-Plug	good	
OW22	steel monument	50 mm schedule 40 PVC	Y	J-Plug	good	
OW23	steel monument	50 mm schedule 40 PVC	Y	J-Plug	good	
OW24R01	steel monument	50 mm schedule 40 PVC	Y	J-Plug	good	
OW25	steel monument	50 mm schedule 40 PVC	Y	J-Plug	good	
BW1	steel monument	50 mm schedule 40 PVC	Y	Slip cap	good	
BW2-S	flush mount	50 mm schedule 40 PVC	N	J-Plug	good	nested with BW2-D
BW2-D		32 mm schedule 40 PVC	N	J-Plug	good	nested with BW2-S
L2	black 50mm PVC pipe	50 mm schedule 40 PVC	Y	J-Plug	good	
L10	black 50mm PVC pipe	50 mm schedule 40 PVC	Y	J-Plug	good	
L11	black 50mm PVC pipe	50 mm schedule 40 PVC	Y	J-Plug	good	

Notes: well inspection completed on May 2-3, 2022 and November 11, 2022

^[1] well conditions classified as:
 good (no maintenance required),
 fair (optional maintenance required),
 poor (requires maintenance or abandonment)

Data Input: SG
 Data Checked: TB

Table 2
Methane Concentrations

Location	2022-May	2022-Nov
	Methane Concentrations (% LEL)	Methane Concentrations (% LEL)
Overburden Groundwater Monitors		
L2	nr[a]	nr[a]
L11	<1[a]	nr[a]
OW1	nr[a]	nr[a]
OW6R1	<1[a]	nr[a]
OW7R1	<1[a]	nr[a]
OW15-D	nr	nr[a]
OW15-S	<1[a]	nr[a]
OW17	<1[a]	nr[a]
OW18	<1[a]	nr[a]
OW19	6	nr
OW20	nr[a]	nr[a]
OW21	nr[a]	nr[a]
OW22	nr[a]	nr[a]
OW23	nr[a]	nr[a]
OW24R01	nr[a]	nr[a]
OW25	<1[a]	nr[a]
Bedrock Groundwater Monitors		
BW1	<1[a]	nr[a]
BW2-D[*]	nr[a]	nr[a]
BW2-S[*]	<1[a]	nr[a]
L10	<1[a]	nr

Data Input: SG

Data Checked: TB

Notes:

% LEL denotes percent of the lower explosive limit

nr denotes no response to full gas response

- denotes not measured

[a] methane elimination was not taken therefore this value refers to full gas response

methane concentrations measured using an RKI Eagle II combustible gas indicator, equipped with a methane elimination switch. Methane concentrations calculated as the difference between full gas response and methane elimination.

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 2-3, 2022								
Overburden Monitoring Wells								
L2	7.59	103.24	102.23	95.65	nr ^[a]	rusty	none	trace
L11	8.77	104.50	103.38	95.73	<1 ^[a]	cloudy	none	trace
OW1	7.12	102.79	101.85	95.67	nr ^[a]	rusty	none	some
OW6R1	0.90	96.17	95.59	95.27	<1 ^[a]	red	none	some
OW7R1	1.39	96.78	96.05	95.39	<1 ^[a]	rusty	none	some
OW15-D	0.09	94.70	-	94.61	nr	grey	none	some
OW15-S	0.66	94.63	94.04	93.97	<1 ^[a]	grey	none	some
OW17	0.81	95.96	94.87	95.15	<1 ^[a]	brown	none	abundant
OW18	1.83	97.17	96.18	95.34	<1 ^[a]	grey	none	abundant
OW19	dry	103.40	102.30	-	6	insufficient water to sample		
OW20	3.44	100.82	99.96	97.38	nr ^[a]	brown	none	some
OW21	1.33	97.20	96.48	95.87	nr ^[a]	brown	none	some
OW22	4.69	102.99	102.18	98.30	nr ^[a]	brown	none	some
OW23	0.76	95.05	94.04	94.29	nr ^[a]	rusty	none	some
OW24R01	0.49	94.70	93.74	94.21	nr ^[a]	clear	none	some
OW25	9.74	107.00	106.30	97.26	<1 ^[a]	red cloudy	none	some
Bedrock Monitoring Wells								
BW1	7.00	102.83	101.87	95.83	<1 ^[a]	clear	sulphur	none
BW2-D ^[†]	8.77	114.13	-	105.36	nr ^[a]	clear	none	none
BW2-S ^[†]	7.24	114.13	-	106.89	<1 ^[a]	cloudy	none	some
L10	8.54	104.20	103.41	95.66	<1 ^[a]	clear	none	none
November 21-22, 2022								
Overburden Monitoring Wells								
L2	7.81	103.24	102.23	95.43	nr ^[a]	cloudy grey	musty	some
L11	9.02	104.50	103.38	95.48	nr ^[a]	insufficient water to sample		
OW1	7.35	102.79	101.85	95.44	nr ^[a]	cloudy grey	none	some
OW6R1	1.07	96.17	95.59	95.10	nr ^[a]	brown	none	some
OW7R1	1.60	96.78	96.05	95.18	nr ^[a]	orange	none	trace
OW15-D	0.26	94.70	-	94.44	nr ^[a]	grey	sulphur	trace
OW15-S	0.73	94.63	94.04	93.90	nr ^[a]	grey	none	abundant
OW17	1.15	95.96	94.87	94.81	nr ^[a]	brown	none	trace
OW18	2.12	97.17	96.18	95.05	nr ^[a]	grey	none	abundant
OW19	3.98	103.40	102.30	99.42	nr	insufficient water to sample		
OW20	4.30	100.82	99.96	96.52	nr ^[a]	grey	none	some
OW21	1.70	97.20	96.48	95.50	nr ^[a]	brown	none	trace
OW22	5.02	102.99	102.18	97.97	nr ^[a]	insufficient water to sample		
OW23	0.94	95.05	94.04	94.11	nr ^[a]	clear	none	none
OW24R01	0.67	94.70	93.74	94.03	nr ^[a]	clear	none	none
OW25	10.57	107.00	106.30	96.43	nr ^[a]	brown	none	none
Bedrock Monitoring Wells								
BW1	0.00	102.83	101.87	102.83	nr ^[a]	clear	sulphur	none
BW2-D ^[†]	9.56	114.13	-	104.57	nr ^[a]	clear	none	trace
BW2-S ^[†]	7.73	114.13	-	106.40	nr ^[a]	cloudy grey	none	trace
L10	8.78	104.20	103.41	95.42	nr	clear	musty	trace

Notes:

%LEL denotes percent of lower explosive limit
 DTW denotes depth to water
 masl denotes meters above mean sea level
 mbTOP denotes meters below top of piezometer
 nr denotes no response from full gas response
 - denotes not measured/not available/not applicable
^[†] 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 result, methane elimination was not taken

Data Input: CM

Data Check: AS

Table 4a
Overburden Groundwater Analytical Results

Groundwater Sampling Location					L11		L2		OW1 (compliance)		OW15S		OW15D		OW17		OW18 (compliance)		OW19	
PARAMETERS	Sample ID				22-W020	-	22-W019	22-W036	22-W018	22-W037	22-W004	22-W030	22-W003	22-W029	22-W016	22-W041	22-W015	22-W040	-	-
	Date				03-May-2022		03-May-2022	22-Nov-2022	03-May-2022	22-Nov-2022	02-May-2022	21-Nov-2022	02-May-2022	21-Nov-2022	02-May-2022	22-Nov-2022	02-May-2022	22-Nov-2022	03-May-2022	22-Nov-2022
	Units	RL (2022)	ODWS	RULs (2022)		22-Nov-2022 Not sampled dry													Not sampled dry	Not sampled dry
Alkalinity	mg/L	5	30-500 ^{CS}	380	507		418	448	294	365	568	562	533	537	317	335	365	318		
N - Ammonia	mg/L	0.01			<		<	0.38	<	<	0.05	0.04	1.13	1.1	0.01	0.01	0.02	0.02		
BOD	mg/L	3			<		<	6	<	<	<	<	<	<	<	<	<	<		
COD	mg/L	5			7		16	19	<	16	54	165	27	60	6	34	196	112		
DOC	mg/L	0.2	5 ^{AD}	4.1	3.4		2.3	2.0	1.1	<	3.6	2.5	3.8	2.7	2.2	0.4	3.8	1.5		
Conductivity	µmho/cm				1090		959	983	1550	1330	1230	1280	1190	1250	896	1000	1190	783		
Hardness	mg/L	1	80-100 ^{CS}	198	573		484	528	503	513	642	638	590	601	375	439	428	388		
pH	pH Units	-	6.5 - 8.5 ^{CS}		7.27		7.36	7.90	7.48	7.85	7.63	7.74	7.49	7.61	7.84	7.91	7.87	7.91		
Phenols	mg/L	0.001			<		<	<	<	<	<	<	<	<	<	<	<	<		
Phosphorus (total)	mg/L	0.01			0.03		0.26	0.16	0.08	0.05	12.4	19.2	5.02	2.42	1.16	0.74	25.2	7.59		
Total Dissolved Solids	mg/L	3	500 ^{AD}	593	582		510	524	848	720	664	690	640	673	362	535	411	364		
Total Suspended Solids	mg/L	3			14		3430	860	34	91	88000	56800	15400	2780	4200	2690	93000	56400		
Total Kjeldahl - N	mg/L	0.1			0.3		0.4	0.9	0.1	0.1	1.1	0.6	2.1	1.3	0.2	0.2	1.8	0.3		
Chloride	mg/L	0.5	250 ^{AD}	166	15.0		38.9	53.3	293	207	71.0	71.9	71.8	69.6	20.3	114	17.5	13.7		
N - Nitrate	mg/L	0.05	10 ^{CS}	7.23	4.36		1.87	1.34	0.52	1.15	<	0.11	<	<	<	0.66	6.07	0.07		
N - Nitrite	mg/L	0.05	1 ^{CS}	0.29	<		<	<	<	<	<	<	<	<	<	<	<	<		
Sulphate	mg/L	1	500 ^{AD}	327	28		17	13	13	15	44	48	46	45	45	28	34	54		
Mercury	mg/L	0.00002	0.001 ^{CS}	0.0003	<		<	<	<	<	<	<	<	<	<	<	<	<		
Aluminum	mg/L	0.01	0.1 ^{CS}	0.08	0.05		0.04	0.04	0.04	0.04	0.07	0.04	0.08	0.05	0.06	0.04	0.06	0.02		
Arsenic	mg/L	0.0001	0.01 ^{CS}	0.0029	<		<	0.0002	<	<	0.0017	0.0011	0.0010	0.0008	<	0.0001	0.0002	0.0002		
Barium	mg/L	0.001	1 ^{CS}	0.267	0.599		0.653	0.860	0.662	0.700	0.389	0.374	0.471	0.484	0.335	0.468	0.324	0.297		
Boron	mg/L	0.005	5 ^{CS}	1.27	0.079		0.023	0.028	0.021	0.023	0.250	0.278	0.267	0.286	0.044	0.098	0.031	0.019		
Cadmium	mg/L	0.000015	0.005 ^{CS}	0.001	0.000055		<	< 0.000010	<	< 0.000012	<	< 0.000012	<	< 0.000012	<	0.000011	<	< 0.000010		
Calcium	mg/L	0.02			169		134	146	135	138	141	141	151	154	93.2	108	102	90.8		
Chromium	mg/L	0.001	0.05 ^{CS}	0.013	<		<	<	<	<	<	<	<	<	<	<	<	<		
Cobalt	mg/L	0.0001			0.0021		<	0.0005	<	0.0002	0.0001	0.0003	0.0005	0.0008	0.0002	0.0005	0.0002	0.0005		
Copper	mg/L	0.0001	1 ^{AD}	0.5010	0.0023		0.0016	0.0005	0.0009	0.0008	0.0001	0.0004	0.0002	0.0004	0.0010	0.0009	0.0036	0.0004		
Iron	mg/L	0.005	0.3 ^{AD}	0.199	<		<	0.104	<	<	2.26	2.31	2.08	2.11	0.012	0.010	<	<		
Lead	mg/L	0.00002	0.01 ^{CS}	0.0026	0.00007		0.00008	0.00002	0.00005	< 0.00004	0.00005	0.00004	0.00007	0.00005	0.00002	<	0.00011	<		
Magnesium	mg/L	0.02			36.8		36.3	39.4	40.1	40.6	70.4	69.6	51.8	52.8	34.5	41.4	42.1	39.3		
Manganese	mg/L	0.001	0.05 ^{AD}	0.037	<		<	0.011	<	<	0.044	0.044	0.217	0.253	0.106	0.117	0.006	0.018		
Potassium	mg/L	0.1			6.2		1.4	1.7	3.2	3.1	3.4	3.8	9.3	9.3	2.1	2.8	8.6	2.5		
Silver	mg/L	0.0001			<		<	<	<	<	<	<	<	<	<	<	<	<		
Sodium	mg/L	0.2	200 ^{AD} [a]	165	10.4		16.0	17.4	99.4	93.4	43.1	44.1	46.4	48.9	12.0	44.3	8.6	8.8		
Strontium	mg/L	0.001			0.319		0.182	0.182	0.198	0.204	0.833	0.837	0.574	0.573	0.346	0.395	0.202	0.165		
Uranium	mg/L	0.00005	0.02 ^{CS}	0.0133	0.00076		0.00032	0.00033	0.00065	0.00066	0.00006	<	0.00276	0.00265	0.00051	0.00063	0.00235	0.00255		
Vanadium	mg/L	0.0001			0.0002		0.0002	0.0003	<	<	0.0002	<	<	<	0.0002	0.0003	0.0007	0.0003		
Zinc	mg/L	0.005	5 ^{AD}	2.504	<		<	<	<	<	<	<	<	<	<	<	<	<		
Temperature (field)	°C	-	15 ^{AD}		10.64		9.66	5.99	9.60	7.82	7.58	8.77	9.93	7.89	7.70	8.72	7.02	8.93		
pH (field)	pH Units	-	6.5-8.5 ^{CS}		7.09		7.16	7.81	7.25	8.34	7.04	8.18	7.10	7.71	7.56	8.30	7.45	8.39		
DO (field)	mg/L	-			5.87		4.89	0.00	8.57	3.82	4.91	1.10	5.18	0.00	6.25	0.60	2.46	0.00		
Conductivity (field)	mS/cm	-			0.865		0.872	1.02	1.34	1.29	1.11	1.11	1.13	1.170	0.863	0.942	0.713	0.679		
Un-ionized Ammonia (field) ^[1]	mg/L	0.001			<		<	0.003	<	<	<	<	0.003	0.009	<	<	<	<		

(table cont.)

Table 4a (continued)
Overburden Groundwater Analytical Results

Groundwater Sampling Location					OW20 (background)		OW21		OW22		OW23		OW24R01 (compliance)		OW25		OW6R1		OW7R1	
PARAMETERS	Sample ID				22-W010	22-W032	22-W009	22-W027	22-W012	-	22-W008	22-W025	22-W001	22-W031	22-W011	22-W028	22-W014	22-W038	22-W013	22-W039
	Date				02-May-2022	21-Nov-2022	02-May-2022	21-Nov-2022	02-May-2022		02-May-2022	21-Nov-2022	02-May-2022	21-Nov-2022	02-May-2022	21-Nov-2022	02-May-2022	22-Nov-2022	02-May-2022	22-Nov-2022
	Units	RL (2022)	ODWS	RULs (2022)						22-Nov-2022 Not sampled dry										
Alkalinity	mg/L	5	30-500 ^{OG}	380	247	244	213	218	723		212	216	257	253	247	190	481	455	301	581
N - Ammonia	mg/L	0.01			0.01	<	<	<	0.13		0.05	0.04	0.03	0.02	<	<	0.01	<	1.81	1.58
BOD	mg/L	3			<	<	<	<	<		<	<	<	<	<	<	<	<	<	<
COD	mg/L	5			<	42	<	26	21		<	<	<	<	<	<	<	20	<	26
DOC	mg/L	0.2	5 ^{AO}	4.1	1.5	1.2	1.3	1.4	4.3		2.1	2.8	3.2	3.0	1.5	2.1	1.6	0.5	3.1	4.1
Conductivity	µmho/cm	-			466	481	443	464	2010		470	495	542	559	444	385	1250	1220	856	1450
Hardness	mg/L	1	80-100 ^{OG}	198	268	256	252	250	802		256	257	300	295	257	196	532	508	345	623
pH	pH Units	-	6.5 - 8.5 ^{OG}		8.01	7.97	7.99	7.98	7.31		7.98	8.00	7.96	7.92	7.94	7.83	7.61	7.79	7.58	7.66
Phenols	mg/L	0.001			<	<	<	<	<		<	<	<	<	<	<	<	<	<	<
Phosphorus (total)	mg/L	0.01			2.55	1.53	2.71	0.50	0.07		0.09	0.04	0.03	0.05	0.65	0.32	8.45	0.68	0.16	0.10
Total Dissolved Solids	mg/L	3	500 ^{AO}	593	241	249	229	240	1110		243	256	281	290	229	183	677	656	452	789
Total Suspended Solids	mg/L	3			5100	3090	5280	808	8		5	6	16	40	1740	548	62200	1070	220	214
Total Kjeldahl - N	mg/L	0.1			0.2	0.5	1.2	<	1.4		0.1	0.2	0.2	<	0.1	<	2.2	0.2	2.1	2.2
Chloride	mg/L	0.5	250 ^{AO}	166	1.3	0.9	5.8	5.7	210		5.6	5.5	5.4	5.3	0.8	<	129	118	63.3	104
N - Nitrate	mg/L	0.05	10 ^{CS}	7.23	<	0.17	3.26	2.45	12.9		<	0.11	<	0.16	0.24	0.50	1.24	1.46	0.08	0.07
N - Nitrite	mg/L	0.05	1 ^{CS}	0.29	<	<	<	<	<		<	<	<	<	<	<	<	<	<	<
Sulphate	mg/L	1	500 ^{AO}	327	18	19	14	16	63		41	42	42	43	4	3	20	19	68	68
Mercury	mg/L	0.00002	0.001 ^{CS}	0.0003	<	<	<	<	<		<	<	<	<	<	<	<	<	<	<
Aluminum	mg/L	0.01	0.1 ^{OG}	0.08	0.06	0.01	0.22	0.02	0.10		0.04	0.02	0.05	0.02	0.04	<	0.08	0.04	0.05	0.05
Arsenic	mg/L	0.0001	0.01 ^{CS}	0.0029	0.0003	0.0002	0.0002	0.0001	0.0003		0.0005	0.0006	<	<	<	<	<	<	0.0002	0.0002
Barium	mg/L	0.001	1 ^{CS}	0.267	0.164	0.164	0.281	0.301	0.256		0.128	0.132	0.258	0.259	0.478	0.384	0.942	0.930	0.296	0.586
Boron	mg/L	0.005	5 ^{CS}	1.27	0.006	0.007	0.019	0.024	0.271		0.065	0.070	0.046	0.049	0.010	0.010	0.093	0.090	0.168	0.361
Cadmium	mg/L	0.000015	0.005 ^{CS}	0.001	<	< 0.000010	<	< 0.000010	< 0.000029		<	< 0.000010	<	< 0.000010	<	< 0.000010	<	< 0.000012	0.000039	0.00008
Calcium	mg/L	0.02			59.1	56.9	61.8	61.8	248		57.0	57.6	76.7	75.0	66.3	50.1	149	144	100	182
Chromium	mg/L	0.001	0.05 ^{CS}	0.013	0.001	<	0.001	<	<		<	<	<	<	<	<	<	<	<	<
Cobalt	mg/L	0.0001			0.0002	0.0004	0.0004	0.0004	<		<	<	<	0.0001	<	<	0.0003	0.0004	0.0052	0.0126
Copper	mg/L	0.0001	1 ^{AO}	0.5010	0.0005	0.0002	0.0012	0.0002	0.0095		0.0025	<	0.0001	0.0002	0.0004	0.0003	0.0012	0.0013	0.0018	0.0026
Iron	mg/L	0.005	0.3 ^{AO}	0.199	0.105	0.007	0.299	<	0.009		0.137	0.088	0.913	0.539	<	<	<	<	0.514	1.27
Lead	mg/L	0.0002	0.01 ^{AO}	0.0026	0.00006	<	0.00030	<	0.00021		0.00007	<	<	<	<	<	0.00005	< 0.00004	<	< 0.00004
Magnesium	mg/L	0.02			29.3	27.8	23.8	23.3	44.2		27.7	27.6	26.4	26.0	22.3	17.3	38.8	36.2	23.2	41.1
Manganese	mg/L	0.001	0.05 ^{AO}	0.037	0.020	0.027	0.019	<	0.257		0.014	0.015	0.042	0.044	<	<	0.006	0.002	0.382	0.733
Potassium	mg/L	0.1			1.6	1.7	1.2	1.4	33.0		1.8	2.1	1.4	1.5	1.1	1.1	3.0	3.0	14.0	20.5
Silver	mg/L	0.0001			<	<	<	<	<		<	<	<	<	<	<	<	<	<	<
Sodium	mg/L	0.2	200 ^{AO} [a]	165	4.9	4.9	3.6	4.0	158		6.8	6.9	7.7	8.0	1.5	1.3	81.9	76.6	50.0	84.3
Strontium	mg/L	0.001			0.140	0.138	0.120	0.124	0.582		0.462	0.454	0.562	0.562	0.080	0.061	0.351	0.320	0.321	0.564
Uranium	mg/L	0.00005	0.02 ^{CS}	0.0133	0.00147	0.00110	0.00065	0.00067	0.00101		0.00057	0.00051	<	<	0.00030	0.00019	0.00056	0.00050	0.00045	0.00086
Vanadium	mg/L	0.0001			0.0003	0.0001	0.0011	0.0006	< 0.0004		<	<	<	<	0.0001	<	0.0003	0.0003	<	<
Zinc	mg/L	0.005	5 ^{AO}	2.504	<	<	<	<	0.005		<	<	<	<	<	<	<	<	<	<
Temperature (field)	°C	-	15 ^{AO}		8.84	7.80	8.78	9.96	12.36		10.42	8.85	10.65	7.54	10.24	8.21	6.95	7.61	8.79	8.64
pH (field)	pH Units	-	6.5-8.5 ^{OG}		7.61	5.92	7.66	8.86	6.94		7.93	7.60	6.93	7.54	7.97	8.14	6.88	7.58	7.07	7.70
DO (field)	mg/L	-			11.77	4.32	7.45	8.45	0.00		0.00	0.00	0.00	0.00	8.81	6.68	3.41	0.00	1.40	0.00
Conductivity (field)	µS/cm	-			0.433	0.468	0.416	0.552	1.66		0.363	0.581	0.428	0.693	0.423	0.348	1.19	1.19	0.777	1.38
Un-ionized Ammonia (field) ^[1]	mg/L	0.001			<	<	<	<	<		<	<	<	<	<	<	<	<	0.004	0.013

Notes: "OW###" and "L##" denote groundwater monitoring well ID
"RL" denotes reporting limit
"<#" denotes elevated reporting limit
"<" denotes results below reporting limit
"->" denotes not analyzed
groundwater samples analyzed for metals were field filtered using 0.45 micron filters
AO aesthetic objective OG operational objective CS chemical 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

Shading indicates parameters exceeding guideline criteria
concentration exceeds the Ontario Drinking Water Standards
concentration exceeds the Reasonable Use Limits

Data Input: SG
Data Check: JMP

Table 4b
Bedrock Groundwater Analytical Results

Groundwater Sampling Location					BW1		BW2-D		BW2-S		L10		122 Turk Rock Rd. (compliance)		151 Fortune Line Rd. (compliance)	
PARAMETERS	Sample ID				22-W017	22-W044	22-W024	22-W042	22-W022	22-W043	22-W021	22-W035	-	22-W046	22-W023	22-W034
	Date				03-May-2022	22-Nov-2022	03-May-2022	22-Nov-2022	03-May-2022	22-Nov-2022	03-May-2022	22-Nov-2022		22-Nov-2022	03-May-2022	21-Nov-2022
	Units	RL (2022)	ODWS	RULs (2022)									permission not given			
Alkalinity	mg/L	5	30-500 ^{OG}	366	413	293	198	244	250	274	727	794		259	218	217
N - Ammonia	mg/L	0.01			1.30	0.95	<	<	0.09	0.01	12.1	12.8		<	<	<
BOD	mg/L	3			<	<	<	<	<	<	<	<		<	<	<
COD	mg/L	5			<	9	<	<	25	49	60	59		<	7	7
DOC	mg/L	0.2	5 ^{AO}	3.3	5.3	3.4	1.3	0.6	2.0	1.5	9.1	8.5		2.5	1.2	1.5
Conductivity	µmho/cm	1			1030	735	522	652	950	962	1810	1870		584	1250	1170
Hardness	mg/L	1	80-100 ^{OG}	175	459	324	245	316	281	296	727	767		312	1	6
pH	pH Units	-	6.5 - 8.5 ^{OG}		7.67	7.92	7.43	7.95	7.44	7.97	7.29	7.70		7.95	8.09	7.74
Phenols	mg/L	0.001			<	<	<	<	<	<	<	<		<	<	<
Phosphorus (total)	mg/L	0.01			0.01	0.01	0.02	0.03	0.36	0.21	0.07	0.04		0.02	0.01	0.03
Total Dissolved Solids	mg/L	3	500 ^{AO}	373	552	383	270	339	505	512	995	1030		303	673	632
Total Suspended Solids	mg/L	3			<	<	<	4	110	164	15	26		3	<	15
Total Kjeldahl - N	mg/L	0.1			1.6	1.3	<	0.2	0.5	0.5	14.5	16.1		0.2	0.1	<
Chloride	mg/L	0.5	250 ^{AO}	126	46.7	40.9	29.5	45.7	88.4	92.1	107	112		10.5	156	135
N - Nitrate	mg/L	0.05	10 ^{CS}	2.55	<	0.45	0.38	5.11	5.39	3.86	0.10	0.11		3.23	<	0.17
N - Nitrite	mg/L	0.05	1 ^{CS}	0.29	<	<	<	<	<	<	<	<		<	<	<
Sulphate	mg/L	1	500 ^{AO}	261	54	42	16	18	78	84	73	86		32	165	146
Mercury	mg/L	0.00002	0.001 ^{CS}	0.0003	<	<	<	<	<	<	<	<		<	<	<
Aluminum	mg/L	0.01	0.1 ^{OG}	0.07	0.04	0.02	0.02	0.02	0.06	0.02	0.06	0.06		0.02	<	<
Arsenic	mg/L	0.0001	0.01 ^{CS}	0.0029	0.0001	0.0001	0.0001	0.0001	0.0005	0.0005	0.0002	0.0002		0.0001	<	<
Barium	mg/L	0.001	1 ^{CS}	0.382	0.174	0.124	0.137	0.174	0.028	0.032	0.119	0.130		0.078	<	0.001
Boron	mg/L	0.005	5 ^{CS}	1.26	0.826	0.799	0.008	0.008	0.018	0.016	1.19	1.28		0.010	0.402	0.439
Cadmium	mg/L	0.000015	0.005 ^{CS}	0.001	<	< 0.000010	<	< 0.000010	0.000059	0.000058	<	< 0.000012		0.000051	<	< 0.000012
Calcium	mg/L	0.02			122	86.9	62.6	78.2	72.4	77.6	193	207		79.5	0.41	1.62
Chromium	mg/L	0.001	0.05 ^{CS}	0.013	<	<	<	<	<	<	0.001	<		<	<	<
Cobalt	mg/L	0.0001			0.0002	0.0002	<	0.0002	0.0001	0.0002	0.0006	0.0008		0.0002	<	0.0001
Copper	mg/L	0.0001	1 ^{AO}	0.5003	0.0013	0.0003	0.0002	0.0003	0.0014	0.0008	0.0001	0.0008		0.0216	0.0004	0.0112
Iron	mg/L	0.005	0.3 ^{AO}	0.184	1.21	0.731	0.006	0.017	0.030	<	8.20	8.13		<	0.026	0.018
Lead	mg/L	0.00002	0.01 ^{CS}	0.0026	0.00009	<	<	<	0.00010	<	< 0.00004	< 0.00004		0.00018	0.00006	0.00007
Magnesium	mg/L	0.02			37.8	25.9	21.4	29.4	24.3	24.8	59.2	60.8		27.6	0.06	0.57
Manganese	mg/L	0.001	0.05 ^{AO}	0.034	0.176	0.124	0.003	0.007	<	<	0.059	0.061		0.008	<	0.003
Potassium	mg/L	0.1			5.2	4.8	1.6	1.6	3.1	3.4	34.7	37.4		1.3	0.3	0.4
Silver	mg/L	0.0001			<	<	<	<	<	<	<	<		<	<	<
Sodium	mg/L	0.2	200 ^{AO} [a]	102	42.6	36.3	9.7	15.9	96.4	103	101	106		6.6	304	268
Strontium	mg/L	0.001			3.33	2.40	0.137	0.176	0.208	0.220	0.829	0.864		0.120	0.012	0.041
Uranium	mg/L	0.00005	0.02 ^{CS}	0.0059	0.00132	0.00096	0.00082	0.00142	0.00849	0.00815	0.00047	0.00048		0.00081	0.00007	0.00007
Vanadium	mg/L	0.0001			<	<	0.0005	0.0007	0.0004	0.0004	0.0009	0.0008		0.0003	<	<
Zinc	mg/L	0.005	5 ^{AO}	2.503	<	<	<	0.007	<	0.005	<	<		0.149	<	0.010
Temperature (field)	°C	-	15 ^{AO}		10.09	8.40	10.86	7.70	12.50	7.66	9.96	6.54		14.33	11.99	8.52
pH (field)	pH Units	-	6.5-8.5 ^{OG}		7.16	8.00	7.98	8.39	7.98	8.41	6.73	7.51		8.19	8.22	8.89
DO (field)	mg/L	-			0.00	0.00	2.51	0.00	10.36	2.45	2.78	0.00		1.47	2.84	4.76
Conductivity (field)	mS/cm	-			0.971	0.733	0.476	0.65	0.712	0.936	1.68	1.87		0.569	1.19	1.16
Un-ionized Ammonia (field) ^[1]	mg/L	0.01			0.004	0.015	<	<	0.002	<	0.012	0.058		<	<	<

Notes:

"OW####" and "L###" denote groundwater monitoring well ID

"RL" denotes reporting limit

"<#" denotes elevated reporting limit

"<" denotes results below reporting limit

"-" denotes not analyzed

groundwater samples analyzed for metals were field filtered using 0.45 micron filters

AO aesthetic objective OG operational objective CS chemical 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

Shading indicates parameters exceeding guideline criteria

concentration exceeds the Ontario Drinking Water Standards

concentration exceeds the Reasonable Use Limits

Table 5
Groundwater VOC Analyses

Monitoring Location				Overburden Wells																					
				L11		L2		OW1		OW1S		OW15D		OW17		OW18*		OW19		OW20		OW21		OW22	
Parameter	Sample ID			22-W020	-	22-W019	22-W036	22-W018	22-W037	22-W004	22-W030	22-W003	22-W029	22-W016	22-W041	22-W015	22-W040	-	-	22-W010	22-W032	22-W009	22-W027	22-W012	-
	Units	RL (2022)	ODWS	03-May-2022	22-Nov-2022 Not sampled dry	03-May-2022	22-Nov-2022	03-May-2022	22-Nov-2022	02-May-2022	21-Nov-2022	02-May-2022	21-Nov-2022	02-May-2022	22-Nov-2022	02-May-2022	22-Nov-2022	03-May-2022 Not sampled dry	22-Nov-2022 Not sampled dry	02-May-2022	21-Nov-2022	02-May-2022	21-Nov-2022	02-May-2022	22-Nov-2022 Not sampled dry
Acetone	µg/L	30	1 ^{CS}	<		<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<		
Benzene	µg/L	0.5		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Bromobenzene	µg/L	0.4		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Bromodichloromethane	µg/L	2		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Bromoform	µg/L	5		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Bromomethane	µg/L	0.5		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Carbon tetrachloride	µg/L	0.2	2 ^{CS}	<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Chloroethane	µg/L	3		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Chlorobenzene	µg/L	0.5	80 ^{CS}	<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Chloroform	µg/L	1		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Chloromethane	µg/L	2		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
2-Chlorotoluene	µg/L	0.2		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
4-Chlorotoluene	µg/L	0.2		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
1,2-Dibromo-3-Chloropropane	µg/L	0.6		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Dibromochloromethane	µg/L	2		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Dibromomethane	µg/L	0.1		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Dichlorodifluoromethane	µg/L	2		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
1,2-Dibromoethane	µg/L	0.2		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
1,2-Dichlorobenzene	µg/L	0.5	200 ^{CS}	<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
1,3-Dichlorobenzene	µg/L	0.5		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
1,4-Dichlorobenzene	µg/L	0.5	5 ^{CS}	<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
1,1-Dichloroethane	µg/L	0.5		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
1,2-Dichloroethane	µg/L	0.5	5 ^{CS}	<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
1,1-Dichloroethylene	µg/L	0.5	14 ^{CS}	<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
cis-1,2-Dichloroethylene	µg/L	0.5		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
trans-1,2-Dichloroethylene	µg/L	0.5		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
1,2-Dichloropropane	µg/L	0.5		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
1,3-Dichloropropane	µg/L	0.2		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
2,2-Dichloropropane	µg/L	0.2		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
cis-1,3-Dichloropropylene	µg/L	0.5		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
1,3-Dichloropropylene,trans	µg/L	0.5		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
1,3-Dichloropropene, cis+trans	µg/L	0.5		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
1,1-Dichloropropene	µg/L	0.2		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Ethylbenzene	µg/L	0.5	140 ^{CS}	<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Hexachlorobutadiene	µg/L	0.6		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
n-Hexane	µg/L	5		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Methyl Ethyl Ketone	µg/L	20		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Isopropylbenzene	µg/L	0.2		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
4-Isopropyltoluene	µg/L	0.2		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Methyl Butyl Ketone	µg/L	5		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Methyl Isobutyl Ketone	µg/L	20		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Methyl-t-butyl Ether	µg/L	2		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Methylene Chloride	µg/L	5		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Naphthalene	µg/L	0.4		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
n-Butylbenzene	µg/L	0.4		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
n-Propylbenzene	µg/L	0.1		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
sec-Butylbenzene	µg/L	0.1		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Styrene	µg/L	0.5		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
tert-Butylbenzene	µg/L	0.1		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
1,1,1,2-Tetrachloroethane	µg/L	0.5		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
1,1,2,2-Tetrachloroethane	µg/L	0.5		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Tetrachloroethylene	µg/L	0.5	10 ^{CS}	<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
Toluene	µg/L	0.5	60 ^{CS}	<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
1,2,3-Trichlorobenzene	µg/L	0.5		<		<	<	<	<	<	<	<	<	<	<	<	<			<	<	<	<	<	
1,2,4-Trichlorobenzene	µg/L	0.5		<																					

(table cont'd)

Table 5
Groundwater VOC Analyses

Monitoring Location				Overburden Wells								Bedrock Wells													
				OW23		OW24R01		OW25		OW6R1		OW7R1		BW1		BW2-D		BW2-S		L10		122 Turk Rock Rd.		151 Fortune Line Rd.	
Parameter	Sample ID			22-W008	22-W025	22-W001	22-W031	22-W011	22-W028	22-W014	22-W038	22-W013	22-W039	22-W017	22-W044	22-W024	22-W042	22-W022	22-W043	22-W021	22-W035	-	22-W046	22-W023	22-W034
	Units	RL (2022)	ODWS	02-May-2022	21-Nov-2022	02-May-2022	21-Nov-2022	02-May-2022	21-Nov-2022	02-May-2022	21-Nov-2022	02-May-2022	21-Nov-2022	03-May-2022	22-Nov-2022	03-May-2022	22-Nov-2022	03-May-2022	22-Nov-2022	03-May-2022	22-Nov-2022	22-Nov-2022 Not sampled no response	22-Nov-2022	03-May-2022	21-Nov-2022
Acetone	µg/L	30	1 CS	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Benzene	µg/L	0.5		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Bromobenzene	µg/L	0.4		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Bromodichloromethane	µg/L	2	2 CS	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Bromoform	µg/L	5		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Bromomethane	µg/L	0.5		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Carbon tetrachloride	µg/L	0.2	80 CS	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Chloroethane	µg/L	3		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Chlorobenzene	µg/L	0.5		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Chloroform	µg/L	1	200 CS	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Chloromethane	µg/L	2		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
2-Chlorotoluene	µg/L	0.2		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
4-Chlorotoluene	µg/L	0.2	5 CS	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
1,2-Dibromo-3-Chloropropane	µg/L	0.6		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Dibromochloromethane	µg/L	2		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Dibromomethane	µg/L	0.1	5 CS	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Dichlorodifluoromethane	µg/L	2		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
1,2-Dibromoethane	µg/L	0.2		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
1,2-Dichlorobenzene	µg/L	0.5	14 CS	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
1,3-Dichlorobenzene	µg/L	0.5		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
1,4-Dichlorobenzene	µg/L	0.5		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
1,1-Dichloroethane	µg/L	0.5	140 CS	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	1.0	0.7	<	<	<	
1,2-Dichloroethane	µg/L	0.5		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
1,1-Dichloroethylene	µg/L	0.5		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
cis-1,2-Dichloroethylene	µg/L	0.5	60 CS	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
trans-1,2-Dichloroethylene	µg/L	0.5		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
1,2-Dichloropropane	µg/L	0.5		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
1,3-Dichloropropane	µg/L	0.2	1 CS	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
2,2-Dichloropropane	µg/L	0.2		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
cis-1,3-Dichloropropylene	µg/L	0.5		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
1,3-Dichloropropylene,trans	µg/L	0.5	90	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
1,3-Dichloropropene, cis+trans	µg/L	0.5		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
1,1-Dichloropropene	µg/L	0.2		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Ethylbenzene	µg/L	0.5	10 CS	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Hexachlorobutadiene	µg/L	0.6		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
n-Hexane	µg/L	5		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Methyl Ethyl Ketone	µg/L	20	60 CS	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Isopropylbenzene	µg/L	0.2		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	0.3	<	<	<	
4-Isopropyltoluene	µg/L	0.2		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Methyl Butyl Ketone	µg/L	5	5 CS	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Methyl Isobutyl Ketone	µg/L	20		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Methyl-t-butyl Ether	µg/L	2		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Methylene Chloride	µg/L	5	1 CS	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Naphthalene	µg/L	0.4		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
n-Butylbenzene	µg/L	0.4		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
n-Propylbenzene	µg/L	0.1	1 CS	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
sec-Butylbenzene	µg/L	0.1		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Styrene	µg/L	0.5		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
tert-Butylbenzene	µg/L	0.1	10 CS	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
1,1,1,2-Tetrachloroethane	µg/L	0.5		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
1,1,2,2-Tetrachloroethane	µg/L	0.5		<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Tetrachloroethylene	µg/L	0.5	60 CS	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	<	
Toluene	µg/L	0.5		<	<	<</																			

Table 6
Surface Water Station Descriptions

Station	Coordinates (NAD 1983, UTM Zone 18N)				Flow Conditions		Notes
	22-May-02		22-Nov-22				
	Northing (m)	Easting (m)	Northing (m)	Easting (m)	22-May-02	22-Nov-22	
SW1	4933275	467036	4933271	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	4933211	406633	4933205	406631	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	4933197	406403	493320	406401	lentic	lotic	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: spring surface water station locations surveyed using a Garmin handheld GPS

Data Input: SG
 Data Check: TB

Table 7
Surface Water Analytical Results

Groundwater Sampling Location						SW1		SW4		SW5	
PARAMETERS	Sample ID					22-W007	22-W045	22-W005	22-W033	22-W006	22-W047
	Date					02-May-2022	22-Nov-2022	02-May-2022	22-Nov-2022	02-May-2022	22-Nov-2022
	Units	RL (2022)	Provincial Water Quality Objectives (mg/L)	Table A: Assessment Criteria for Waste Disposal Sites (mg/L)	Table B: Alternative Review Criteria (mg/L)						
Alkalinity	mg/L	5	(note a)			214	234	221	257	220	258
N - Ammonia	mg/L	0.01				0.03	0.05	0.10	0.17	0.07	0.13
Ammonia, unionized (lab)	mg/L	0.01	0.02	0.1		<	<	<	<	<	0.01
BOD	mg/L	3				<	<	<	<	<	<
COD	mg/L	5				12	8	<	12	20	13
DOC	mg/L	0.2				7.8	5.5	9.3	6.1	7.1	7.1
Conductivity	µmho/cm	1				448	514	463	575	460	564
Hardness	mg/L	1				225	299	239	324	213	316
pH	pH Units		6.5-8.5	6.0-9.0		9.08	8.04	8.15	8.09	8.14	8.12
Phenols	mg/L	0.001	0.001	0.04 ^a	0.004 ^a	0.001	<	<	0.002	<	<
Phosphorus (total)	mg/L	0.01	0.02			0.04	0.03	0.03	0.03	0.03	0.02
Phosphorus, total dissolved	mg/L	0.002				0.014	<	0.201	<	0.016	<
Total Dissolved Solids	mg/L	3				231	266	239	298	238	257
Total Suspended Solids	mg/L	3				5	<	5	<	<	<
Total Kjeldahl - N	mg/L	0.1				0.5	0.6	0.6	0.6	0.6	0.6
Chloride	mg/L	0.5		180	128	7.7	7.9	9.7	12.2	9.7	11.9
N - Nitrate	mg/L	0.05				2.9	<	1.68	<	1.53	<
N - Nitrite	mg/L	0.05			0.06	<	2.74	<	2.65	<	2.28
Sulfate	mg/L	0.00002	0.0002	100		16	27	18	31	17	29
Mercury	mg/L	0.01				<	<	<	<	<	<
Aluminum	mg/L	0.01	0.075 ^b			0.04	0.03	0.04	0.02	0.03	0.02
Arsenic	mg/L	0.0001	0.005	0.15		0.0002	0.0002	0.0002	0.0002	0.0003	0.0002
Barium	mg/L	0.001	0.005	2.3		0.108	0.145	0.122	0.155	0.112	0.142
Boron	mg/L	0.005	0.2	3.55	1.5	0.015	0.011	0.022	0.028	0.020	0.022
Cadmium	mg/L	0.000015	0.0005 ^c	0.00021	0.000017	<	<	0.000016	<	<	<
Calcium	mg/L	0.02				56.5	76.7	60.3	78.4	54.0	71.6
Chromium	mg/L	0.001	(note d)	0.064		<	<	<	<	<	<
Cobalt	mg/L	0.0001	0.0009			0.0002	0.0002	0.0003	0.0004	0.0003	0.0003
Copper	mg/L	0.0001	0.005 ^d	0.0069		0.0016	0.0008	0.0011	0.0007	0.0012	0.0008
Iron	mg/L	0.005	0.3	1		0.347	0.274	0.276	0.334	0.259	0.290
Lead	mg/L	0.00002	0.005 ^e	0.002		0.00011	0.00009	0.00007	0.00007	0.00011	0.00009
Magnesium	mg/L	0.02				20.3	27.5	21.4	27.4	18.0	24.5
Manganese	mg/L	0.001				0.048	0.023	0.058	0.067	0.050	0.056
Nickel	mg/L	0.01	0.025			<	<	<	<	<	<
Potassium	mg/L	0.1				1.3	1.6	1.7	2.0	1.5	1.8
Silver	mg/L	0.0001	0.0001			<	<	<	<	<	<
Sodium	mg/L	0.2				5.6	6.6	7.0	9.0	6.2	8.3
Strontium	mg/L	0.001				0.228	0.304	0.245	0.308	0.221	0.285
Vanadium	mg/L	0.0001	0.006			0.0017	0.0016	0.0015	0.0012	0.0016	0.0012
Zinc	mg/L	0.005	0.02	0.089	0.03	0.013	<	0.015	<	0.014	<
Temperature (field)	°C	-				11.51	2.12	11.21	2.17	11.64	2.85
pH (field)	pH Units	-				7.65	8.74	7.51	8.73	7.80	8.93
DO (field)	mg/L	-	(note g)			12.49	6.11	11.00	7.04	17.76	3.57
Conductivity (field)	µS/cm	-				0.424	0.507	0.447	0.565	0.446	0.547
Un-ionized Ammonia (field) ^[1]	mg/L	0.01	0.02	0.1		<	0.003	<	0.01	<	0.01

Shading indicates parameters exceeding guideline criteria
 denotes concentration exceeds the 1994 PWQO (as updated in 1999)
 denotes concentration exceeds Table A: Assessment Criteria for Waste Disposal Sites (Source Aquatic Protection Values), from the Monitoring and Reporting for Waste Disposal Sites Groundwater and Surface Water Technical Guidance Document (2010)
 denotes concentration exceeds Table B: Alternative Review Criteria (Source Canadian Water Quality Guideline), from the Monitoring and Reporting for Waste Disposal Sites Groundwater and Surface Water Technical Guidance Document (2010)

Data Input: SG
 Data Check: JMP

Notes:
 "SW ###" denotes surface water station ID
 "RL" denotes reporting limit
 "a" denotes elevated reporting limit
 "c" denotes results below reporting limit
 "d" denotes not analyzed
 [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)

Table 8
 Groundwater PFAS Analytical Results

Monitoring Location					OW22		OW23			OW24R1			122 Turk Rock Rd.		151 Fortune Line Rd.	
Parameter	Sample ID				22-W012	-	22-W008	22-W025	22-W026 Duplicate of 22-W025	22-W001	22-W002 Duplicate of 22-W001	22-W031	-	22-W046	22-W023	22-W034
	Date				2022-May-02		2022-May-02	2022-Nov-22	2022-Nov-22	2022-May-02	2022-May-02	2022-Nov-22		2022-Nov-22	2022-May-03	2022-Nov-22
	Units	RL (2022)	Health Canada PFAS Screening Values	MECP Drinking Water Screening Values for Perfluorinated Chemicals		22-Nov-2022 Not sampled dry							03-May-2022 Not sampled no response			
eicosaffluoro-3-oxaundecane-1-sulfonic acid, 11-chloro- [11Cl-PF3OUdS]	µg/L	0.020			-		-	<	<	-	-	<		<	-	<
N-Et PFO sulfonamide (EtFOSA)	µg/L	0.025			-		-	<	<	-	-	<		<	-	<
N-Et PFO sulfonamidoacetic acid(EtFOSAA)	µg/L	0.010			-		-	<	<	-	-	<		<	-	<
N-Et PFO sulfonamidoethanol (EtFOSE)	µg/L	0.030			-		-	<	<	-	-	<		<	-	<
10:2 Fluorotelomer sulfonic acid(10:2 F)	µg/L	0.010			-		-	<	<	-	-	<		<	-	<
4:2 Fluorotelomer sulfonic acid(4:2 FTS)	µg/L	0.010			-		-	<	<	-	-	<		<	-	<
6:2 Fluorotelomer sulfonic acid(6:2 FTS)	µg/L	0.010	0.2		-		-	<	<	-	-	<		<	-	<
8:2 Fluorotelomer sulfonic acid(8:2 FTS)	µg/L	0.010	0.2		-		-	<	<	-	-	<		<	-	<
hexadecafluoro-3-oxanonane-1-sulfonic acid, 9-chloro- [9Cl-PF3ONS]	µg/L	0.020			-		-	<	<	-	-	<		<	-	<
hexafluoropropylene oxide dimer acid [HFPO-DA] (GenX)	µg/L	0.20			-		-	<	<	-	-	<		<	-	<
N-Me PFO sulfonamide (MeFOSA)	µg/L	0.025			-		-	<	<	-	-	<		<	-	<
N-Me PFO sulfonamidoacetic acid(MeFOSAA)	µg/L	0.010			-		-	<	<	-	-	<		<	-	<
N-Me PFO sulfonamidoethanol (MeFOSE)	µg/L	0.030			-		-	<	<	-	-	<		<	-	<
Perfluorobutane sulfonic acid (PFBS)	µg/L	0.010	15		0.028		<	<	<	<	<	<		<	<	<
Perfluorobutanoic acid (PFBA)	µg/L	0.10	30		<		<	<	<	<	<	<		<	<	<
Perfluorodecane sulfonic acid (PFDS)	µg/L	0.010			<		<	<	<	<	<	<		<	<	<
Perfluorodecanoic acid (PFDA)	µg/L	0.010			<		<	<	<	<	<	<		<	<	<
Perfluorododecanoic acid (PFDoDA)	µg/L	0.010			<		<	<	<	<	<	<		<	<	<
Perfluoroheptane sulfonic acid (PFHpS)	µg/L	0.010			<		<	<	<	<	<	<		<	<	<
Perfluoroheptanoic acid (PFHpA)	µg/L	0.010	0.2		0.048		<	<	<	<	<	<		<	<	<
Perfluorohexane sulfonic acid (PFHxS)	µg/L	0.010	0.6		0.036		<	<	<	<	<	<		<	<	<
Perfluorohexanoic acid (PFHxA)	µg/L	0.010	0.2		0.224		<	<	<	<	<	<		<	<	<
perfluorononanesulfonic acid [PFNS]	µg/L	0.010			-		-	<	<	-	-	<		<	-	<
Perfluorononanoic acid (PFNA)	µg/L	0.010	0.02		<		<	<	<	<	<	<		<	<	<
perfluorononanoic acid, 4,8-dioxo-3H- [ADONA]	µg/L	0.010			-		-	<	<	-	-	<		<	-	<
Perfluorooctane sulfonamide (PFOSA)	µg/L	0.010			-		-	<	<	-	-	<		<	-	<
Perfluorooctane sulfonic acid (PFOS)	µg/L	0.010	0.6		0.02		<	<	<	<	<	<		<	<	<
Perfluorooctanoic acid (PFOA)	µg/L	0.010	0.2		0.1		<	<	<	<	<	<		<	<	<
Perfluoropentane sulfonic acid (PFPeS)	µg/L	0.010			-		<	<	<	<	<	<		<	<	<
Perfluoropentanoic acid (PFPeA)	µg/L	0.010	0.2		0.212		<	<	<	<	<	<		<	<	<
Perfluorotetradecanoic acid (PFTeDA)	µg/L	0.025			-		-	<	<	-	-	<		<	-	<
Perfluorotridecanoic acid (PFTrDA)	µg/L	0.0250			-		-	<	<	-	-	<		<	-	<
Perfluoroundecanoic acid (PFUnDA)	µg/L	0.010			<		<	<	<	<	<	<		<	<	<
PFOA & PFOS [1]	-	-	1		0.267		<	<	<	<	<	<		<	<	<
Sum of all reported PFAS compound concentrations	µg/L	0.005		0.7	0.668		<	<	<	<	<	<		<	<	<

Notes: "OWH##" denote groundwater monitoring well ID
 "RL" denotes reporting limit
 "-" denotes not analyzed
 "<#" denotes elevated reporting limit
 "<" denotes results below reporting limit
 "FB" denotes field blank

Shading indicates parameters exceeding guideline criteria
 denotes concentration exceeds the Health Canada PFAS Screening Values
 denotes concentration exceeds MECP Drinking Water Screening Values for Perfluorinated Chemicals

Data Input: SG
 Data Check: JMP

Appendix C

ECA and Monitoring Plan

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, Brier 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

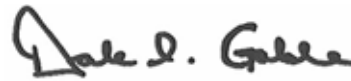
AND

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

Original Monitoring Plan

Briar Hill WDS

ECA # A442103

Township of Leeds and the Thousand Islands

Parameters	Groundwater			Surface Water	
	Spring		Fall	Spring and Fall	
Lab	Alkalinity	Total phosphorus	Alkalinity	Alkalinity	Potassium
	Ammonia	Potassium	Aluminum	Ammonia	Suspended Solids
	Aluminum	Sodium	Ammonia	un-ionized ammonia	sodium
	Arsenic	Suspended Solids	Barium	aluminum	silver
	Barium	Total Dissolved Solids	Boron	Arsenic	Total Dissolved Solids
	Boron	Sulphate	Calcium	Barium	Sulphate
	Cadmium	Zinc	Chloride	Boron	Zinc
	Calcium	Benzene	Conductivity	Cadmium	Biochemical Oxygen Demand
	Chloride	1,4 Dichlorobenzene	Iron	Chloride	Chemical Oxygen Demand
	Chromium	Dichloromethane	Magnesium	Chromium	Dissolved Organic Carbon
	Conductivity	Toluene	Nitrate	Cobalt	Hardness
	Copper	Vinyl Chloride	pH	Conductivity	Phenol
	Iron	Biochemical Oxygen Demand	Potassium	Copper	
	Lead	Chemical Oxygen Demand	Sodium	Iron	
	Magnesium	Dissolved Organic Carbon	Suspended Solids	Lead	
	Manganese	Phenol	Total Dissolved Solids	Mercury	
	Mercury	Hardness	Sulphate	nickel	
	Nitrate		Biochemical Oxygen Demand	Nitrate	
	Nitrite		Chemical Oxygen Demand	Nitrite	
	Total Kjeldahl Nitrogen		Dissolved Organic Carbon	pH	
	pH		Total Kjeldahl Nitrogen	Total phosphorus	
Field	Temperature		Temperature	Temperature	
	pH		pH	pH	
	Conductivity		Conductivity	Conductivity	
				Dissolved Oxygen	
				Flow	

Ref: Landfill Standards - A guideline on the regulatory and approval requirements for new or expanding landfilling sites - Schedule 5

Current Monitoring Plan

File: 1036-121.00

Briar Hill WDS - A442103

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, OW24R01, OW25, Wells at 122 Turk Rock Road and 151 Fortune Line Road

Pump required for BW1 and BW2d, OW24R01, and OW23

Total 22

Lab criteria: ODWS and Health Canada PFAS Screening Values

Surface Water: SW1, SW4 & SW5

Total 3

Lab criteria: PWQO

Parameters	Groundwater - Spring and Fall		Surface Water - Spring and Fall	
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
	Groundwater VOCs - Spring		Aluminum, dissolved	
	Acetone	Ethylbenzene	Mercury, dissolved	
	Benzene	Hexachlorobutadiene		
	Bromobenzene	Hexane	Groundwater PFAS (122 Turk Rock Road and 151 Fortune Line Road, OW22, OW23, and OW24R01) - Annually	
	Bromodichloromethane	Isopropylbenzene	eicosafuoro-3-oxaundecane-1-sulfonic acid, 11-chloro- [11Cl-PF3OUdS]	
	Bromoform	4-Isopropyltoluene	ethyl perfluorooctanesulfonamide, n- [NEtFOSA]	
	Bromomethane	Methyl Butyl Ketone	ethyl perfluorooctanesulfonamidoacetic acid, n- [NEtFOSAA]	
	Carbon Tetrachloride	Methyl Ethyl Ketone	ethyl perfluorooctanesulfonamidoethanol, n- [NEtFOSE]	
	Chloroethane	Methyl Isobutyl Ketone	fluorotelomer sulfonic acid, 10:2 [10:2 FTS]	
	Chloroform	Methyl tert-butyl ether	fluorotelomer sulfonic acid, 4:2 [4:2 FTS]	
	Chloromethane	Chlorobenzene	fluorotelomer sulfonic acid, 6:2 [6:2 FTS]	
	2-Chlorotoluene	Naphthalene	fluorotelomer sulfonic acid, 8:2 [8:2 FTS]	
	4-Chlorotoluene	n-Butylbenzene	hexadecafluoro-3-oxanonane-1-sulfonic acid, 9-chloro- [9Cl-PF3ONS]	
	1,2-Dibromo-3-Chloropropane	n-Propylbenzene	hexafluoropropylene oxide dimer acid [HFPO-DA] (GenX)	
	Dibromochloromethane	sec-Butylbenzene	methyl perfluorooctanesulfonamide, n- [NMeFOSA]	
	1,2-Dibromoethane	Styrene	methyl perfluorooctanesulfonamidoacetic acid, n- [NMeFOSAA]	
	Dibromomethane	tert-Butylbenzene	methyl perfluorooctanesulfonamidoethanol, n- [NMeFOSE]	
	1,2-Dichlorobenzene	1,1,1,2-Tetrachloroethane	perfluorobutanesulfonic acid [PFBS]	
	1,3-Dichlorobenzene	1,1,2,2-Tetrachloroethane	perfluorobutanoic acid [PFBA]	
	1,4-Dichlorobenzene	Tetrachloroethylene	perfluorodecanesulfonic acid [PFDS]	
	Dichlorodifluoromethane	Toluene	perfluorodecanoic acid [PFDA]	
	1,1-Dichloroethane	1,2,3-Trichlorobenzene	perfluorododecanoic acid [PFDoA]	
	1,2-Dichloroethane	1,2,4-Trichlorobenzene	perfluoroheptanesulfonic acid [PFHpS]	
	1,1-Dichloroethylene	1,1,1-Trichloroethane	perfluoroheptanoic acid [PFHpA]	
	cis-1,2-Dichloroethylene	1,1,2-Trichloroethane	perfluorohexanesulfonic acid [PFHxS]	
	trans-1,2-Dichloroethylene	Trichloroethylene	perfluorohexanoic acid [PFHxA]	
	Methylene Chloride	Trichlorofluoromethane	perfluorononanesulfonic acid [PFNS]	
	1,2-Dichloropropane	1,2,3-Trichloropropane	perfluorononanoic acid [PFNA]	
	1,3-Dichloropropane	1,2,4-Trimethylbenzene	perfluorononanoic acid, 4,8-dioxa-3H- [ADONA]	
	2,2-Dichloropropane	1,3,5-Trimethylbenzene	perfluorooctanesulfonamide [PFOSA]	
	cis-1,3-Dichloropropene	Vinyl Chloride	perfluorooctanesulfonic acid [PFOS]	
	trans-1,3-Dichloropropene	m/p-Xylene	perfluorooctanoic acid [PFOA]	
	1,3-Dichloropropene, total	o-Xylene	perfluoropentanesulfonic acid [PFPeS]	
	1,1-Dichloropropene	Xylenes, total	perfluoropentanoic acid [PFPeA]	
			perfluorotetradecanoic acid [PFTeDA]	
			perfluorotridecanoic acid [PFTrDA]	
			perfluoroundecanoic acid [PFUnA]	
Parameters	Groundwater		Surface Water	
Field	pH	N-NH3 unionized (Calc)	pH	N-NH3 unionized (Calc)
	Temperature		Temperature	
	Dissolved Oxygen		Dissolved Oxygen	
	Conductivity		Conductivity	

Data Input: JMP

Data Check: SG

Appendix D

Photos



1. Litter along north fence.
May-2022



2. View of the sign at front gate.
May-2022



3. SW5
May-2022



4. L10 (Left) and L11 (Right)
May-2022



5. BW1
May-2022



6. SW4
May-2022



7. OW23
November-2022



8. OW18
November-2022



9. SW5
November-2022



10. OW6R1
November-2022



11. Entrance facing west.
November-2022



12. SW1
November-2022

Appendix E

Correspondence

**Ministry of the
Environment,
Conservation and Parks**
Eastern Region
1259 Gardiners Road, Unit 3
Kingston ON K7P 3J6
Phone: 613.549.4000
or 1.800.267.0974

**Ministère de l'Environnement,
de la Protection de la nature
et des Parcs**
Région de l'Est
1259, rue Gardiners, unité 3
Kingston (Ontario) K7P 3J6
Tél: 613 549-4000
ou 1 800 267-0974



MEMORANDUM

May 13, 2021

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

FROM: Alija Bos
Hydrogeologist
Water Resources Unit
Technical Support Section
Eastern Region

RE: 2020 Monitoring, Development and Operations Report
Briar Hill (Lyndhurst) Waste Disposal Site
Lot 8, Concession 1 Township of Leeds and the Thousand Islands

As requested, I have reviewed the following document entitled:

- “Briar Hill Waste Disposal Site 2020 Monitoring, Development and Operations Report” Environmental Compliance Approval No. A442103 prepared by Malroz on March 25, 2021 for the Township of Leeds and the Thousand Islands.

Based upon the information provided in the documents above, I submit the following comments pertaining to groundwater monitoring for your consideration. I have provided main conclusions and recommendations in the “Summary” section of this memorandum.

Summary

- A leachate plume was noted in the waste area and downgradient in the underlying overburden wells.
- Township of Leeds and the Thousand Islands (TLTI) reportedly received a complaint about the burning of wood and brush at the Site from area residents on November 9, 2020. Following receiving this complaint, TLTI has stopped burning wood and brush at the site and are reviewing their processes to alleviate residents’ concerns.
- Groundwater monitoring was completed at the Site and one adjacent residential well.
- The groundwater chemistry of the residential well leachate indicator parameters (LIPs) were similar to background. Elevated DOC in the 122 Turk Rock Road residential well is not expected to be related to landfill activities.

- The bedrock groundwater chemistry at OW24 does show elevated concentrations of Manganese and Iron. Further assessment of the residential well located at 151 Fortune Line Road should be conducted.
- Based on the 2020 analyses, the existing and proposed Contaminant Attenuation Zone (CAZ) areas conforms to MECP Guideline B-7.
- The consultant indicated that LIPs in surface water are generally similar to background conditions, suggesting that leachate is not significantly impacting the surface water downstream of the Site. I believe that the potential for surface water impacts from groundwater exists at this site. The groundwater has the potential to discharge to surface water downgradient of the site. The ministry's surface water reviewer should be consulted.

The consultant has proposed the following amendments to the ECA and monitoring program:

- Based on the data collected it is Malroz's recommendation that the VOC monitoring at the WDS be reduced to annual spring sampling and the sample location list be reduced to include only wells where VOCs have historically been detected (L10, OW15-S, OW15-D, OW19, and OW22). I support this request.
- It was previously recommended by the MECP technical reviewer to amend the monitoring program and to reduce the sampling frequency at wells L2, L10, and L11 to annually. Given the stable groundwater chemistry in this former landfill area I support this request and propose sampling in the spring for these locations.
- The consultant proposes adding the residential well at 122 Turk Rock Road to future spring and fall groundwater sampling programs. I support this proposed amendment if the homeowner has no objections to this
- I request that sampling of a leachate well, two downgradient wells, and the two residential wells (151 Fortune Line Road and 122 Turk Rock Road) be conducted once a year for per and polyfluoroalkyl substances (PFAS).
- A reduced LIPs list for this site was provided by Malroz and consisted of ammonia, boron, conductivity, chloride, dissolved organic carbon (DOC), and iron.
- I would recommend keeping Alkalinity, and TDS in the assessment as well. This list should also be approved by the surface water reviewer as it is expected that some groundwater discharges to surface water at this site.
- Based on the current site CAZ lands the site does not conform to Reasonable Use Guideline B-7. A written plan outlining the purchase of additional property is expected to follow at a later date. I have not reviewed this plan, however I have reviewed the proposed western CAZ mapping (Figure 2a) and find it to be suitable.

Site Description

The Site is accessed from Turk Rock Road off Briar Hill Road. The Environmental Compliance Approval # A442103 permits a 2.4 hectare waste disposal area and transfer site. The site operates as a naturally attenuating site.

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. Following the closure of the former landfill 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. It was noted in an email from Albert Paschkowiak on May 13th 2020 that a separate written plan outlining the purchase of additional property will follow at a later date. I have not reviewed this plan.

Malroz undertook inspections of the Site on April 29 and October 14, 2020. 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. There is a remaining capacity of 54,356 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, the estimated remaining capacity of the site is approximately 32 years.

Environmental Compliance Approval

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.

Burning of waste is permitted in condition 2(6) of the ECA and historically been carried out at the Site, however TLTI stopped the burning of waste at the Site in November 2020 after receiving complaints from area residents.

Geology

Malroz 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.

Water well records show that the overburden consists of clay and sand, and ranges from approximately 3 to 11 metres thick.

Hydrogeology

Based on Malroz 2020 monitoring and survey data, the overburden groundwater from the Site appears to discharge to the unnamed stream north of the Site. Groundwater

elevations in the deeper bedrock wells suggest that the deep groundwater flow at the site is also towards the north. It is also noted that flowing artesian conditions are periodically observed at deeper groundwater well OW15-D. The influence of the various geologic units on the bedrock hydrogeology has not been fully assessed. The site topography slopes to the north west.

Groundwater – Surface Water Interaction

2020 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. An unnamed tributary to Morton Creek flows east to west and is located north of the Site.

Surface water concerns were assessed under separate cover by a surface water reviewer. I believe that the potential for surface water impacts from groundwater exists at this site. The groundwater has the potential to discharge to surface water downgradient of the site. The consultant notes that surface water samples do not show adverse leachate impacts.

Groundwater Monitoring Results

Groundwater sampling was conducted in spring and fall by Malroz. The 2020 groundwater monitoring and sampling program consisted of sampling 16 overburden monitoring wells and four bedrock monitoring wells. Malroz also collected a groundwater sample from the residential well at 122 Turk Rock Road during the October sampling event. As requested Malroz completed hydraulic conductivity testing during the October sampling event at monitoring wells BW1, OW15-S, and OW22 using a bail tests. The hydraulic conductivity for the bedrock well BW1 was found to be 9.5×10^{-8} m/s which is within the expected range for this lithology. Overburden well OW15-S had a hydraulic conductivity of 5.5×10^{-8} m/s and OW22 was found to have 8.5×10^{-8} m/s. The hydraulic conductivity at monitoring well OW22 was lower than expected, but may be affected by the compaction of the overburden material.

Background Water Quality

Malroz determined that well OW20, located in an agricultural field and up-gradient from the waste mound is the most suitable to assess background groundwater quality. Background well OW20 exceeded the Ontario Drinking Water Standard (OWDS) for DOC during the spring and hardness during spring and fall sampling events. The background overburden groundwater exhibited elevated concentrations of DOC, TSS, and total phosphorus, which may be related to agricultural activities. It should be noted that OW21 was previously used to assess background groundwater quality at the site. Upon reviewing the trend analysis for OW20 the well has shown a fairly significant increase in DOC in the past 4 years. OW18 showed a similar trend. Both wells are thought to be impacted by agriculture.

Leachate Quality

Monitoring wells OW22 and OW19 were identified as leachate wells. Parameters exceeding the 75th percentile of background by 50% or more in both OW22 and OW19 are inferred to be representative of leachate and are listed below.

- Alkalinity
- Ammonia
- DOC
- Conductivity
- Hardness
- TDS
- TKN
- Chloride
- Aluminum
- Boron
- Calcium
- Iron
- Manganese
- Potassium
- Sodium
- Strontium

A reduced leachate indicating parameter (LIPs) list for this site was provided by Malroz and consisted of ammonia, boron, conductivity, chloride, dissolved organic carbon (DOC), and iron.

I would recommend keeping Alkalinity, and TDS in the assessment as well. Given the discharge of groundwater to surface water at this site, the surface water reviewer may have parameters they would like to have analyzed in groundwater as well.

Downgradient Water Quality - Overburden

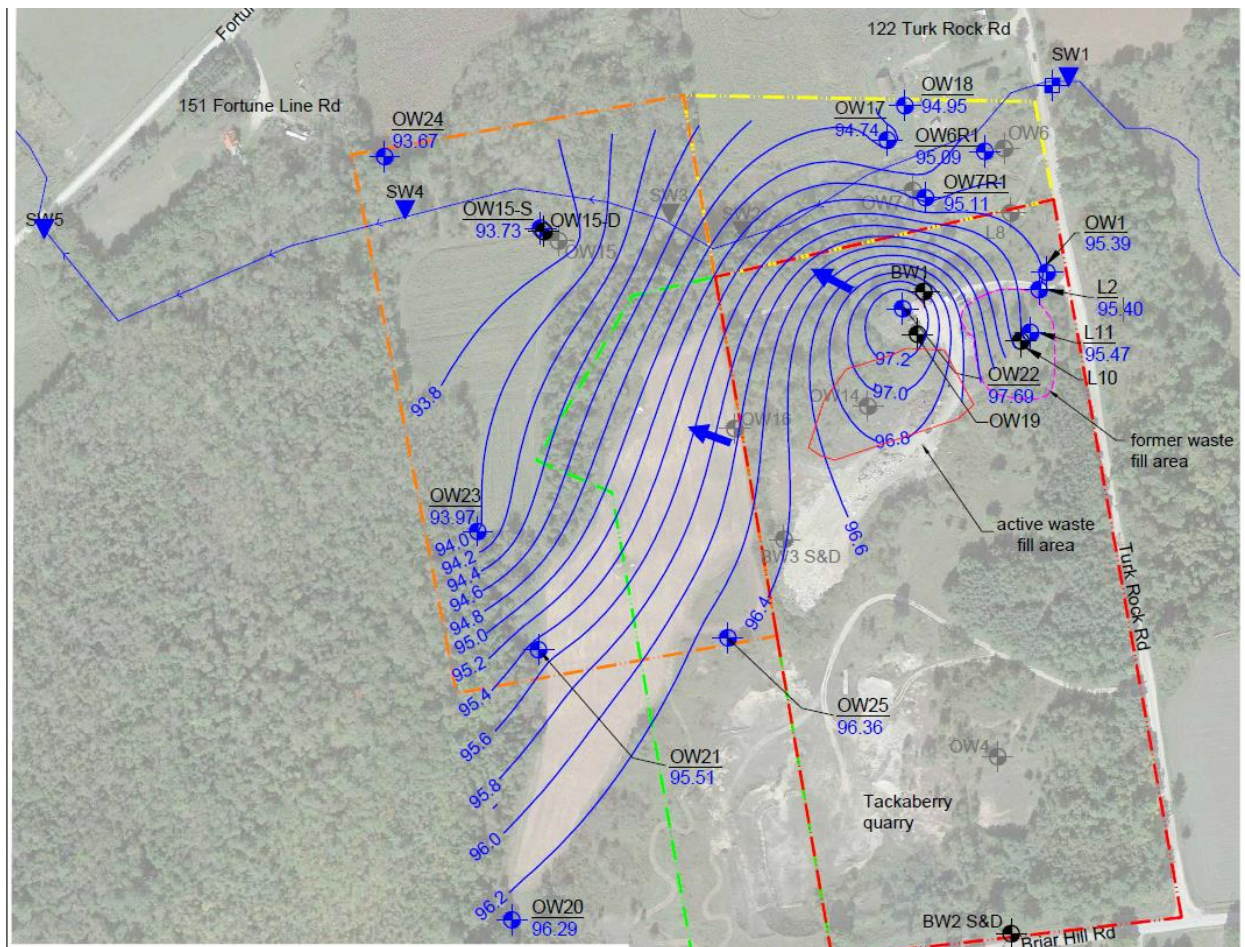
A number of exceedances of the ODWS were reported in 2020. Malroz notes with the exception of nitrate (a health-based parameter), the exceedances represent aesthetic objectives or operational guidelines and are not indicative of a threat to human health. As the groundwater likely discharges to surface water at this site, off-site impacts to overburden groundwater quality are not expected.

<u>Parameter</u>	<u>Spring</u>	<u>Fall</u>
Alkalinity	OW15-S, OW19, OW22	OW15-S, OW7R1
Aluminum	OW22	none
Chloride	OW1	none
DOC	L11, OW19, OW22	L2, OW7R1
Hardness	All wells sampled	All wells sampled
Iron	OW15-S, OW15-D, OW19, OW24	OW7R1, OW15-S, OW15-D, OW24
Manganese	OW7R1, OW15-D, OW17, OW19, OW22, OW24	OW7R1, OW17, OW15-D, OW24
Nitrate	OW21	none
TDS	OW1, OW6R1, OW15-S, OW15-D, OW19, OW22,	OW1, OW6R1, OW7R1, OW15-S, OW15-D, OW17,

Trend graphs of LIPs in the former landfill area suggest that this area is relatively stable and reduced monitoring is recommended by the consultant in this portion of the site. These recommendations are described in the conclusions.

Results from OW6R1 and OW7R1, located north and downgradient of the waste area, indicate that concentrations of LIPs are elevated compared to background. Monitoring wells OW6R1 and OW7R1 are located adjacent to the road and the elevated chloride and conductivity concentrations may be the result of road salting operations. The consultant also found that leachate appears to be present in these wells.

It was noted that Boron, DOC and Iron at monitoring wells OW6R1 and OW7R1 are lower than the leachate wells OW19 and OW22 which are closer in proximity to the waste, which suggests to attenuation or dilution is occurring in the marsh area downgradient and to the north of the waste as shown in the Malroz figure below.



L2, OW1 and L11 are located cross-gradient adjacent to the former landfill area. These monitors have elevated LIPs when compared to the background well OW20. These wells are in close proximity to the road as well and the consultant infers that road salting is impacting the groundwater at these locations.

Monitoring wells OW17 and OW18, located to the north of the unnamed tributary to Morton Creek, exhibited slightly elevated concentrations of LIPs (boron, conductivity, and chloride) when compared to the background. However, other LIPs such as iron and

ammonia at OW17 and OW18 were consistent with background concentrations. It was also noted that based on the conceptual site model and groundwater elevations that the flow direction on that side of the creek would be south towards to creek. The consultant hypothesizes that the elevated LIP concentrations are related to road salting impacts. Upon reviewing the chemistry the chloride concentrations in OW17 and OW18 do appear to be elevated in the fall sampling event, however other road salt parameters do not appear to be significantly elevated, as such, a portion of impacted groundwater may flow beneath the creek.

Leachate is migrating to the north and to the west from the Site within the overburden, and likely discharging to surface water features. There is the potential that leachate impacted groundwater is being discharged to the adjacent creek. The Regional Surface Water Reviewer should be consulted regarding this.

Downgradient Water Quality – Bedrock

The consultant indicates that BW2-S/D is located up-gradient of the Site and may represent background bedrock groundwater conditions. BW2-S exhibited elevated levels of chromium, hardness, TDS, and nitrate when compared to the ODWS.

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

<u>Parameter</u>	<u>Spring</u>	<u>Fall</u>
Alkalinity	L10	L10
Chromium	BW2-S	None
DOC	BW1, L10	OW15-D, L10, 122 Turk Rock Road
Hardness	All wells sampled	All wells sampled
Iron	BW1, L10	BW1, L10
Manganese	BW1, L10	BW1, L10
Nitrate	BW2-S	None
TDS	BW1, BW2-S, L10	BW2-S, L10

The consultant notes that with the exception of Chromium and Nitrate, that the exceedances represent aesthetic objectives or operation guidelines and are not a threat to human health.

I note that the groundwater chemistry at OW24 does show elevated concentrations of Manganese and Iron. Well OW15-D also shows values above the ODWS for Manganese and Iron. Given these elevated concentrations, further assessment of the residential well located at 151 Fortune Line Road should be conducted. This residential well has not been sampled since 2013. At that time it showed elevated concentrations of Manganese and Iron as well.

Volatile Organic Compound Analyses

Detectable concentrations of 1,1-dichloroethane (1,1-DCE), 1-4-dichlorobenzene, and/or cis-1,2-dichloroethylene were reported in samples collected from OW19 and L10 during one or more sampling events in 2020.

Conformance with Guideline B-7

Guideline B-7 applies to operating waste disposal sites and those closed after 1986. Guideline B-7 applies to the Briar Hill Waste Disposal Site. Guideline B-7 indicates that the quality cannot be degraded by an amount in excess of 50% of the difference between background and the Ontario Drinking Water Standards for non-health related parameters and in excess of 25% of the difference between background and the Ontario Drinking Water Standards for health-related parameters. Overburden well OW20 was used to calculate RULs applied to compliance wells OW1, OW18, and OW24. Bedrock well BW2-S was used to calculate bedrock RULs, which were applied to the residential well at 122 Turk Rock.

Exceedances of overburden RULs for chloride and iron at monitoring wells OW1, OW18, and OW24 are likely leachate related.

Based on the available data the site conforms to Reasonable Use Guideline B-7 provided that the proposed CAZ land is incorporated into the site / ECA. Given that groundwater is expected to discharge to the unnamed creek and based on the absence of groundwater receptors between the site boundary and the discharge point; the site meets the intent of Guideline B-7. Leachate impacted groundwater does not appear to be migrating beyond the unnamed creek, and elevated concentrations in those wells beyond the creek appear to be related to road salting or agricultural activities. The conceptual model suggests that groundwater discharges to the surface water. Exceedances of RULs at wells north of the Site indicates the potential for leachate impacts to the unnamed stream. The consultant indicates 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 surface water reviewer should be consulted regarding this.

Based on the 2020 analyses, the existing and proposed CAZ areas conforms to MECP Guideline B-7, based on the inclusion of proposed CAZ lands to the north and west of the Site.

Conclusions and Recommendations

The landfill has an estimated life span of 32 years. Malroz has proposed the preparation of a closure plan for the Site. This is acceptable.

Monitoring should continue twice per year, in conformance with the ECA.

Based on the data collected it is Malroz's recommendation that the VOC monitoring at the WDS be reduced to annual spring sampling and the sample location list be reduced

to include only wells where VOCs have historically been detected (L10, OW15-S, OW15-D, OW19, and OW22). I support this request.

It was previously recommended by the MECP technical reviewer to amend the monitoring program and to reduce the sampling frequency at wells L2, L10, and L11 to annually. Given the stable groundwater chemistry in this former landfill area I support this request and propose sampling in the spring for these locations.

The consultant proposes adding the residential well at 122 Turk Rock Road to future spring and fall groundwater sampling programs. I support this proposed amendment if the homeowner has no objections to this and also would like to request adding the sampling of the well at 151 Fortune Line Road.

In order to better assess the potential impacts to the residential wells I would also like to request Per- and polyfluoroalkyl substances (PFAS) sampling. These samples are to be collected in a leachate well, 2 downgradient wells and the two downgradient domestic wells (122 Turk Rock Road and 151 Fortune Line Road).

The consultant proposes the Township 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. I support this request and have reviewed the proposed site plan amendment. The written plan for these changes as requested by Nathalie Matthews on April 29th 2020 has not been reviewed.



Alija Bos

P.Geo., Hydrogeologist

ec: Roberto Sacilotto, Kingston District Supervisor
Dana Cruikshank, Surface Water Specialist
Nathalie Matthews, Sr. Environmental Officer
V. Castro, Water Resources Unit Supervisor
J. Mahoney, Technical Support Section Manager

c: GW File 01 02 LG LT Briar Hill WDS
AB / ECHO# 1-20615285

Appendix F

Site Log and Waybills



☐ Lansdowne
☒ Lyndhurst
☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Jan 3 / 22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: Dec 13 / 22 mixed / paper / OCC

DATES BINS WERE PICKED UP: Dec 3 / 22 mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity volun

TOTAL COUNT OF HOUSEHOLD USERS: 51

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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☒ Lyndhurst
☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Jan 5/22 TIME: 8:10 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:00	ELVidge	Garbage	FULL	Y
10:55	"	Recycling	"	Y

TOTAL COUNT OF HOUSEHOLD USERS: 84

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE

Print Staff Name:

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

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☒ Lyndhurst

☐ Escott

WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Jan 6/22 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

Entrance way and around bins

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:10	Mattice	Garbage Recycling	FULL	1

TOTAL COUNT OF HOUSEHOLD USERS: 51

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

IF NO: Waste Sent To:

LITTER CONTROL: Yes / No

DETAILS: Cleaned up windblown 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) and topic:

SIGNATURE: [Signature] Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: Reviewer: File Number:



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DATE: Jan 8 / 22 TIME: 8:15 STAFF: John Soffard

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:

RECYCLING:

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: Jan / 9 / 22

TYPE

paper / mixed / occ

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:05	STANDERT	garbage Recycling	FULL	+

TOTAL COUNT OF HOUSEHOLD USERS: 128

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Soffard Print Staff Name: John Soffard

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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☐ Escott

WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Jan 10/22 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:

RECYCLING:

DATE BINS WERE ORDERED: Jan 10/22 TYPE paper / occ / mixed

DATES BINS WERE PICKED UP: 1 / 1

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 64

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

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford
OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Jan 12 / 22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: Jan 11 / 22 mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:05	EL vidga	Garbage	Full	Y
10:50	"	Recycling	"	Y

TOTAL COUNT OF HOUSEHOLD USERS: 66

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Jan 13/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:10	Mattice	garbage recycling	FULL	<u>X</u>

TOTAL COUNT OF HOUSEHOLD USERS: 51

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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☐	Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Jan / 15 / 22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Jan / 14 / 22

paper / occ

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Traffic slow today extreme cold

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 102

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Jan 17/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: Jan 17/22 mixed

DATES BINS WERE PICKED UP: 1 / 1

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Traffic slow due to BLizzard

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 2

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Jan 19/22 TIME: 8:10 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: Jan/19/22

mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Traffic slow due to snow and freezing rain

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:20	ELVidga	Garbage	FULL	✓
11:35	"	Recycling	FULL	✓

TOTAL COUNT OF HOUSEHOLD USERS: 38

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Jan 20/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: Jan/20/22 mixed/paper/occ

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Traffic slow due to very cold

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: _____

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE _____ **Print Staff Name:** _____

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

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☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: JAN 23 / 2022 TIME: 8:30 AM STAFF: RICK TAYLOR / Clarence BIRT

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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: _____

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) and topic: _____

SIGNATURE Rick Taylor Print Staff Name: Rick Taylore

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne
☒ Lyndhurst
☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Jan 24/22 TIME: 8:10 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Jan 12/22

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Traffic slow due to extreme cold

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: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne
☒ Lyndhurst
☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Jan 26/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: Jan 15/22

occ / mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Traffic slow very cold

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:00	ELVidge	Garbage	FULL	Y
10:45	"	Recycling	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 47

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____

☐ Lansdowne
☒ Lyndhurst
☐ Escott

WASTE DISPOSAL SITE

DAILY INSPECTION FORM

DATE: Jan 27/22 TIME: 8:20 STAFF: John Stallord

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:15	matTice	garbage 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: _____

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) and topic: _____

SIGNATURE [Signature] **Print Staff Name:** John Starnes

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne
☒ Lyndhurst
☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Jan 29/22 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:

RECYCLING: TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:		
TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



Township of
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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Jan 31 / 22 TIME: 8:15 STAFF: John Staddon

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: Jan/31/22 mixed / paper / OCC

DATES BINS WERE PICKED UP: 1 / 1

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 42

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Staddon

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Feb 2/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: Feb 1/22

mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:05	Elvidge	Garbage	BULL	Y
10:40	Elvidge	Recycling	"	Y

TOTAL COUNT OF HOUSEHOLD USERS: 64

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Feb 3 / 22 TIME: 8:20 STAFF: John Safford

DEFICIENCIES OBSERVED:		Description / Location
Ponded Water:	Yes / No	
Windblown Litter:	Yes / No	<u>Entrance way</u>
Leachate Springs:	Yes / No	
Animals:	Yes / No	
Other:	Yes / No	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING: _____ TYPE _____

DATE BINS WERE ORDERED: 1 / 1 _____

DATES BINS WERE PICKED UP: Feb 13 / 22 paper

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Traffic slow snow and icy roads

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: _____

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) and topic: _____

SIGNATURE John Safford Print Staff Name: John Safford

OFFICE USE: _____

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: FEB 5, 22 TIME: 8:30 STAFF: RICK TAYLOR / JOHN STAFFORD

DEFICIENCIES OBSERVED:		Description / Location
Ponded Water:	Yes / No	
Windblown Litter:	<u>Yes</u> / No	<u>along fence</u>
Leachate Springs:	Yes / No	
Animals:	Yes / No	
Other:	Yes / No	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:	TYPE
DATE BINS WERE ORDERED: <u>02 / /</u>	
DATES BINS WERE PICKED UP: <u>02/04/22</u> <u>FEB</u>	<u>OCC</u>

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10:35</u>	<u>STANDEN</u>	<u>GARBAGE/Recycle</u>	<u>1/2 Full</u>	<u>yes</u>

TOTAL COUNT OF HOUSEHOLD USERS: 108

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE _____ Print Staff Name: _____

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Feb 7/22 TIME: 8:10 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: Feb 7/22 mixed

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 63

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Feb 9 / 22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: Feb 8 / 22 mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 57

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / ~~No~~

DETAILS: Snow To deep

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

DETAILS: _____

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

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If Yes, complaint file number(s) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Feb 10/22 TIME: 8:15 STAFF: John Stabber

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: Feb 10/22 mixed

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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: _____

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) and topic: _____

SIGNATURE John Stabber Print Staff Name: John Stabber

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



Township of
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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Feb 12/22 TIME: 8:15 STAFF: John Stoford

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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

TYPE

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 112

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stoford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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☐ Escott

DATE: Feb 14/22 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:

RECYCLING: TYPE

DATE BINS WERE ORDERED: Feb 14/22 Steel / Paper / OCC

DATES BINS WERE PICKED UP: Feb 14/22 mixed

REJECTED LOADS:		
TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 39

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



Township of
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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Feb 16/22 TIME: 8:20 STAFF: John Stelfox

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: Feb 16/22

mixed

DATES BINS WERE PICKED UP: Feb 15/22

paper / OCC

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 53

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stelfox

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: February 17/2022 TIME: 8:15 AM STAFF: ALLAN McRAE

DEFICIENCIES OBSERVED:

Ponded Water: Yes / No

Windblown Litter: Yes / No

Leachate Springs: Yes / No

Animals: Yes / No

Other: Yes / No

Description / Location

along Road & Road Bins

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

very muddy / Rain all day
Picked up 9 bags of trash around site

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:45 AM	Mattiee	Garbage/Recycle	Truck/1000	✓

TOTAL COUNT OF HOUSEHOLD USERS: 39

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

IF NO: Waste Sent To: _____

LITTER CONTROL:

Yes / No

DETAILS: along Road & Bins

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: Sand & Tyler was in.

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED:

Yes / No

If Yes, complaint file number(s) and topic: _____

SIGNATURE

Allan McRae

Print Staff Name:

Allan McRAE

OFFICE USE:

Date Reviewed: _____

Reviewer: _____

File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Feb 19/22 TIME: 8:38 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~~

Don't know had 30 cm snow

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: ~~Feb 16/22~~

DATES BINS WERE PICKED UP: Feb 18/22

Steel

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:00	STander	Garbage Recycling	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 67

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE *John Stafford* Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐	Lansdowne
☒	Lyndhurst
☐	Escott

DATE: Feb 23/22 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:

RECYCLING:	TYPE
DATE BINS WERE ORDERED: <u> / / </u>	_____
DATES BINS WERE PICKED UP: <u> / / </u>	_____

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:45	ELVidge	Garbage Recycling	FULL	Y
10:20	"	"	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 68

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE: _____



Township of
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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Feb 24/22 TIME: 8:25 STAFF: John Safford

DEFICIENCIES OBSERVED:

Ponded Water:

Yes / No

☒ Yes ☒ No

Windblown Litter:

Yes / No

☒ Yes ☒ No

Leachate Springs:

Yes / No

☒ Yes ☒ No

Animals:

Yes / No

☒ Yes ☒ No

Other:

Yes / No

☒ Yes ☒ No

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

TYPE

DATE BINS WERE ORDERED:

/ /

DATES BINS WERE PICKED UP:

/ /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:15	MATTICE	Garbage Recycling	FULL	☒

TOTAL COUNT OF HOUSEHOLD USERS: 56

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

☒ Yes ☒ No

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No

☒ Yes ☒ No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

☒ Yes ☒ No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

☒ Yes ☒ No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

☒ Yes ☒ No

If Yes, complaint file number(s) and topic: _____

SIGNATURE John Safford Print Staff Name: John Safford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



Township of
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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Feb 26/22 TIME: 8:15 STAFF: John Stallard

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stallard
OFFICE USE: _____

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Feb 28/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: Feb 12/22

mixed / paper / OCC

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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: _____

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) and topic: _____

SIGNATURE

John Stafford

Print Staff Name:

John Stafford

OFFICE USE:

Date Reviewed:

Reviewer:

File Number:



☐ Lansdowne
☒ Lyndhurst
☐ Escott

DATE: MAR 2/22 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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

TYPE

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:00	EL vidge	Garbage	FULL	Y
10:50	"	Recycling	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 45

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford

OFFICE USE:

Date Reviewed: _____

Print Staff Name: John Stafford

File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: MAR 3 / 22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: MAR 3 / 22 mixed

DATES BINS WERE PICKED UP: MAR 3 / 22 mixed / paper / occ

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:20	Mattice	Garbage	Full	<u>Y</u>
2:30	"	Recycling	1/4	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 53

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: MAR 5 TIME: 8:15 STAFF: John Stubbart

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:05	Standen	Garbage Recycling	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 132

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE

Print Staff Name:

OFFICE USE:

Date Reviewed:

Reviewer:

File Number:



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: MAR 7 / 22 TIME: 8:10 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:

RECYCLING: TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: MAR 7 / 22 mixed

REJECTED LOADS:		
TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
8:45	ELVidge	garbage Recycling	Full	✓

TOTAL COUNT OF HOUSEHOLD USERS: 42

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE: _____

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: MAR 9/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:00	EL Vidge	Garbage	FULL	Y
10:55	"	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: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: MAR 10 / 22 TIME: 8:10 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:25	Mattice	Garbage Recycling	Full	7

TOTAL COUNT OF HOUSEHOLD USERS: 57

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

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) and topic:

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: Reviewer: File Number:



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: MAR 12/22 TIME: 8:00 STAFF: John Stofel

DEFICIENCIES OBSERVED:		Description / Location
Ponded Water:	Yes / No <u>X</u>	
Windblown Litter:	Yes / No <u>X</u>	
Leachate Springs:	Yes / No <u>X</u>	
Animals:	Yes / No <u>X</u>	
Other:	Yes / No <u>X</u>	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:	TYPE
DATE BINS WERE ORDERED: <u> / / </u>	
DATES BINS WERE PICKED UP: <u> / / </u>	

REJECTED LOADS:		
TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:45	EL ridge	Garbage Recycling	FULL	<u>X</u>

TOTAL COUNT OF HOUSEHOLD USERS: 92

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No X

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No X

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No X

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No X

If Yes, complaint file number(s) and topic: _____

SIGNATURE John Stofel Print Staff Name: John Stofel

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: MAR 14 / 22 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:

RECYCLING:

DATE BINS WERE ORDERED:

MAR 14 / 22

TYPE

mixed / occ / paper

DATES BINS WERE PICKED UP:

/ /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 40

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE

OFFICE USE:

Print Staff Name:

John Stafford

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: MAR 16/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:55	EL vidga	Garbage	Full	Y
10:30	"	recycling	3/4	Y

TOTAL COUNT OF HOUSEHOLD USERS: 54

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: MAR 17/22 TIME: 8:15 STAFF: John Stoltz

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: MAR 17/22

occ / mixed / paper

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:30	ELridge	Garbage	2 Bags	<u>Y</u>
10:40	matrice	Garbage Recycling	FULL	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 53

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stoltz Print Staff Name: John Stoltz

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Mar 19/22 TIME: 8:20 STAFF: John Stoford

DEFICIENCIES OBSERVED:		Description / Location
Ponded Water:	Yes / <u>No</u>	
Windblown Litter:	Yes / <u>No</u>	
Leachate Springs:	Yes / <u>No</u>	
Animals:	Yes / <u>No</u>	
Other:	Yes / <u>No</u>	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:	TYPE
DATE BINS WERE ORDERED: <u> / / </u>	
DATES BINS WERE PICKED UP: <u> / / </u>	

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:30	Standard	Garbage	Full	Y
12:00	"	Recycling	4 Bags	Y

TOTAL COUNT OF HOUSEHOLD USERS: 125

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stoford

OFFICE USE:



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: MAR 21/22 TIME: 8:20 STAFF: John Sparrow

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

Snow melting away / litter everywhere

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: MAR 21/22 mixed

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 59

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

IF NO: Waste Sent To: _____

LITTER CONTROL: ~~Yes~~ / No

DETAILS: Cleaned around bins Today

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

DETAILS: _____

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

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If Yes, complaint file number(s) and topic: _____

SIGNATURE [Signature] Print Staff Name: _____

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: MAR 23/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: MAR 24/22 mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:05	Elvidge	garbage	FULL	Y
10:50	"	recycling	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 52

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: JOHN STAFFORD

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____

☐ Lansdowne
☒ Lyndhurst
☐ Escott

WASTE DISPOSAL SITE

DAILY INSPECTION FORM

DATE: MPX 24/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:15	Mattice	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: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John S. Perotti

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐	Lansdowne
☒	Lyndhurst
☐	Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: MAR 26 / 22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 119

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

IF NO: Waste Sent To:

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) and topic:

SIGNATURE John Stafford Print Staff Name: John Stafford

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

☐ Lansdowne

☒ Lyndhurst

☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: MAR 28 / 22 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:

Yes / No

☒ Yes ☐ No

Windblown Litter:

Yes / No

☒ Yes ☐ No

Leachate Springs:

Yes / No

☒ Yes ☐ No

Animals:

Yes / No

☒ Yes ☐ No

Other:

Yes / No

☒ Yes ☐ No

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

DATE BINS WERE ORDERED:

MAR 28 / 22

TYPE

Mixed / paper / OCC

DATES BINS WERE PICKED UP:

/ /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 40

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes ☒ No ☐

DETAILS: Along fence line

APPLICATION OF DUST SUPPRESSANT: Yes ☒ No ☐

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes ☒ No ☐

DETAILS: _____

COMPLAINTS RECEIVED: Yes ☒ No ☐

If Yes, complaint file number(s) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐	Lansdowne
☒	Lyndhurst
☐	Escott

DATE: MAR 30/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: MAR 30/22 Steel / mixed

DATES BINS WERE PICKED UP: MAR 30/22 mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:15	ELVidge	Garbage	FULL	Y
11:00	"	Recycling	"	Y

TOTAL COUNT OF HOUSEHOLD USERS: 63

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne
☒ Lyndhurst
☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: MAR 31/22 TIME: 8:20 STAFF: John Stollard

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: MAR 31/22

paper / OCC

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
12:25	mattice	Garbage Recycling	FULL	Y

TOTAL COUNT OF HOUSEHOLD USERS: 38

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stollard Print Staff Name: John Stollard

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne
☒ Lyndhurst
☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: APR 2/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: APR 1 / 22

mixed / steel

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>11:45</u>	<u>Stander</u>	<u>Garbage Recycling</u>	<u>Full</u>	<u>✓</u>

TOTAL COUNT OF HOUSEHOLD USERS: 154

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne
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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: APR 4 / 22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: APR 4 / 22

DATES BINS WERE PICKED UP: / /

mixed / paper / occ

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 47

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

IF NO: Waste Sent To: _____

LITTER CONTROL: ~~Yes~~ / No

DETAILS: Around 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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: APR 6/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: APR 6/22

mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:10	ELVidge	Garbage	FULL	<u>X</u>
10:55	"	Recycling	1/2	<u>X</u>

TOTAL COUNT OF HOUSEHOLD USERS: 72

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No

DETAILS: cleaned around 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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne
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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: APR 7/22 TIME: 8:15 STAFF: John Stothard

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: APR 7/22

paper

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Heavy rain today

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10:50</u>	<u>mattice</u>	<u>garbage</u>	<u>Recycling FULL</u>	<u>Y</u>
<u>1:10</u>	<u>"</u>	<u>"</u>	<u>1/2</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 31

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stothard Print Staff Name: John Stothard

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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☒ Lyndhurst
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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: APR 9 / 22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: APR 18 / 22 OLL

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 141

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No

DETAILS: Cleaned around 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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐	Lansdowne
☒	Lyndhurst
☐	Escott

DATE: APR 11/22 TIME: 0820 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:

RECYCLING:

DATE BINS WERE ORDERED: APR 11/22

DATES BINS WERE PICKED UP: 1 / 1

TYPE

paper / mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 73

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature]

Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: APR 13/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: APR/13/22

Steel

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>9:35</u>	<u>ELVidge</u>	<u>Garbage Recycling</u>	<u>FULL</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 59

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford

Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐	Lansdowne
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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: APR 14/22 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:	Description / Location
Ponded Water: Yes / <u>No</u>	
Windblown Litter: <u>Yes</u> / No	
Leachate Springs: Yes / <u>No</u>	
Animals: Yes / <u>No</u>	
Other: Yes / <u>No</u>	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:	TYPE
DATE BINS WERE ORDERED: <u>APR 14/22</u>	<u>occ / mixed</u>
DATES BINS WERE PICKED UP: <u>/ /</u>	

REJECTED LOADS:		
TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:05	maffice	garbage Recycling	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: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

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

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☐ Lyndhurst

☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: April 16/22 TIME: 8:20 STAFF: Rick Taylor

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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

TYPE

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:30	STANTON	GARBAGE/Recycle	1/2 T Full	yes

TOTAL COUNT OF HOUSEHOLD USERS: 165

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No

DETAILS: Around Bins & Shed

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If Yes, complaint file number(s) and topic: _____

SIGNATURE Rick Taylor Print Staff Name: Rick Taylor

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: APR 20/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: APR 18/22

Steel / APR 19 / mixed / OCC

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:05	MAFFICE	garbage	Full	Y
9:45	ELVidge	garbage	Full	Y
10:30	"	"	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: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne
☒ Lyndhurst
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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: APR 21/22 TIME: 8:20 STAFF: John Stafford
Rick 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:30	Mattice	Garbage Recycling	FULL	✓

TOTAL COUNT OF HOUSEHOLD USERS: 49

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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☒ Lyndhurst
☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: APR 23/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 131

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne
☒ Lyndhurst
☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: APR 25/22 TIME: 8:10 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: APR 15/22 Steel / mixed / oac / paper / mixed

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: APR 27/22 TIME: 8:45 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1 _____

DATES BINS WERE PICKED UP: APR 6/22 mixed / APR 27 mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:00	ELvidga	garbage	FULL	X
11:15	"	Recycling	"	Y

TOTAL COUNT OF HOUSEHOLD USERS: 66

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stalder Print Staff Name: John Stalder

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne

☒ Lyndhurst

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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: ~~APR 28/22~~ APR 28/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: APR 28/22

Steel

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:30	Matticee	Garbage Recycling	Full	✓

TOTAL COUNT OF HOUSEHOLD USERS: 55

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

IF NO: Waste Sent To:

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) and topic:

SIGNATURE: [Signature] Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: Reviewer: File Number:



☐	Lansdowne
☒	Lyndhurst
☐	Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: APR 30/22 TIME: 8:10 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
2:00	Sanders	Garbage Recycling	Full	✓

TOTAL COUNT OF HOUSEHOLD USERS: 156

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE: _____

Date Reviewed: _____ Reviewer: _____ File Number: _____



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DATE: May 2/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1/1

DATES BINS WERE PICKED UP: May 2/22

mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 58

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

IF NO: Waste Sent To: _____

LITTER CONTROL: ~~Yes~~ / No

DETAILS: Cleaned up around 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) and topic: _____

SIGNATURE John Stafford

Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: May 4 / 22 TIME: 8:15 STAFF: John Stalford

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: May 13 / 22

mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:50	ELVidge	Garbage	Full	Y
10:20	"	Recycling	3/4	Y

TOTAL COUNT OF HOUSEHOLD USERS: 37

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stalford Print Staff Name: John Stalford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: MAY 5/22 TIME: 8:20 STAFF: John Stabrook

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:30	mattico	Garbage Recycling FULL		Y

TOTAL COUNT OF HOUSEHOLD USERS: 68

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stabrook Print Staff Name: John Stabrook

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____

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WASTE DISPOSAL SITE

DAILY INSPECTION FORM

DATE: MAY 7/22 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 Rick Taylor

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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: _____

LITTER CONTROL: Yes ☒ No ☐

DETAILS: Cleaned along entry way

APPLICATION OF DUST SUPPRESSANT: Yes / No ☒

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS:

COMPLAINTS RECEIVED: Yes / No

If Yes, complaint file number(s) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: May 9/2022 TIME: 8:15 AM STAFF: ALLAN McRAE

DEFICIENCIES OBSERVED:

Ponded Water: Yes / No

Windblown Litter: Yes / No

Leachate Springs: Yes / No

Animals: Yes / No

Other: Yes / No

Description / Location

along Roadside / Bins

Birds / and Black fly's

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: 05/09/2022 Plastic, Cardboard, Paper

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>8:30 AM</u>	<u>Fishermans HWY</u>	<u>Large Load / Tire</u>	<u>Trailer</u>	<u>✓</u>

TOTAL COUNT OF HOUSEHOLD USERS: 118

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

IF NO: Waste Sent To: _____

LITTER CONTROL:

Yes / No

DETAILS: around Bins and along main Road Ln.

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED:

Yes / No

If Yes, complaint file number(s) and topic: _____

SIGNATURE Allan McRae

Print Staff Name: ALLAN McRAE

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: May 11, 22 TIME: 8:20 STAFF: Rick Taylor

DEFICIENCIES OBSERVED:

Ponded Water: Yes / ~~No~~

Windblown Litter: ~~Yes~~ / No

Leachate Springs: Yes / ~~No~~

Animals: Yes / ~~No~~

Other: Yes / ~~No~~

Description / Location

Around Bins, Gate

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Ordered steel Bins & Plastic for Fri.

RECYCLING:

DATE BINS WERE ORDERED: May 11/22 TYPE Picked up

DATES BINS WERE PICKED UP: / / Manco Organic Bins 1:00

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
<u>10:00</u>	<u>HATTON</u>	

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10:00</u>	<u>MATTICE</u>	<u>GARBAGE</u>	<u>Full</u>	<u>Y</u>
<u>12:00</u>	<u>"</u>	<u>GARBAGE/Recycle</u>	<u>Full</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 77

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

IF NO: Waste Sent To: _____

LITTER CONTROL: ~~Yes~~ / No

DETAILS: Around Bins & Shed

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

DETAILS: _____

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

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If Yes, complaint file number(s) and topic: _____

SIGNATURE Rick Taylor Print Staff Name: RICK TAYLOR

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____

2200010

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WASTE DISPOSAL SITE

DAILY INSPECTION FORM

DATE: MAY 12, 22 TIME: 8:15 STAFF: RIK TAYLOR

DEFICIENCIES OBSERVED:Ponded Water: Yes / No

Windblown Litter: Yes/ No

Leachate Springs: Yes (No)

Animals: Yes / No

Other: **Yes / No.**

Description / Location

Around Bin's

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECOMMENDED ACTIONS / ACTIONS TAKEN:
Howard Campbell here cleaned Portable toilet @ 11:15.

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
12:00	MATICE	Garbage/Recycle	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 69

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: KICK TAYLOR

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: MAY 14, 22 TIME: 8:15 STAFF: RICK TAYLOR

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:

Plate# AT 98170 Mr. Thomas Rd was upset because
I looked in the box of his truck. made him show I.D.
when he started being difficult called James Tuck
@ 2:13pm. To give him heads up.

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: MAY/13/22 Steel / Plastic.

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10:30</u>	<u>Stanton</u>	<u>Garbage / Recycle</u>	<u>Full</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 195

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No

DETAILS: Around Bins & Shelter Plu.

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If Yes, complaint file number(s) and topic: _____

SIGNATURE [Signature] Print Staff Name: RICK TAYLOR

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: MAY 16, 22 TIME: 8:15 STAFF: RICK TAYLOR

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:

Thunder storm came through. Someone
Brought a window A/C in after hrs.

RECYCLING:

DATE BINS WERE ORDERED: MAY/16/2022 TYPE Cardboard / Plastic.

DATES BINS WERE PICKED UP: MAY/18/2022 Plastic.

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 95

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No

DETAILS: P/U around Bins, Around Shed.

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: MOTHER Nature Rain.

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If Yes, complaint file number(s) and topic: _____

SIGNATURE Rick Taylor Print Staff Name: RICK TAYLOR

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: May 18, 22 TIME: 8:10 STAFF: Rick Taylor

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:

RECYCLING:

DATE BINS WERE ORDERED: May 18/22 TYPE Paper / Cardboard Show up on
DATES BINS WERE PICKED UP: / / Fri.

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:00	HEATH CARL	Garbage/Recy	Full	Y S.B.
11:30	CARL		Full	Y Lynd-

TOTAL COUNT OF HOUSEHOLD USERS: 98

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No

DETAILS: Picked up Driveway & around 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) and topic: _____

SIGNATURE Rick Taylor Print Staff Name: RICK TAYLOR

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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DATE: MAY 19, 22 TIME: 8:20 STAFF: RICK TAYLOR

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:
Rain most of the day.

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

TYPE

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:30	MATTICE	Garage/Recycle	Full	y

TOTAL COUNT OF HOUSEHOLD USERS: 45

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

LITTER CONTROL: Yes / No
DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No
DETAILS: MOTHERS ROTUNE

DAILY INSPECTION FORM COMPLETED: Yes / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / No
If Yes, complaint file number(s) and topic: _____

SIGNATURE [Signature] Print Staff Name: RICK TAYLOR
OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: May 21 TIME: 8:47 STAFF: Clarence Birt

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 165

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

IF NO: Waste Sent To: _____

LITTER CONTROL:

Yes / No

DETAILS: Picked up trash From laneway

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED:

Yes / No

If Yes, complaint file number(s) and topic: _____

SIGNATURE Clarence Birt Print Staff Name: Clarence Birt

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: May 25/22 TIME: 8:15 STAFF: Rick Taylor

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:

Emptied compost @ 3:30.

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: MAY/25/22 Plastic @ 1:30

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
<u>10:30</u>	<u>CARL</u>	
<u>12:00</u>	<u>CARL</u>	
<u>4:30</u>	<u>CARL</u>	

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10:30</u>	<u>CARL</u>	<u>Garbage/Rec</u>	<u>Full</u>	<u>Y</u>
<u>12:00</u>	<u>CARL</u>	<u>Garbage/Rec</u>	<u>Full</u>	<u>Y</u>
<u>1:30</u>	<u>CARL</u>	<u>" "</u>	<u>Full</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 125

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No

DETAILS: Around 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) and topic: _____

SIGNATURE Rick Taylor Print Staff Name: Rick Taylor

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



Township of 1233 Pr
Leeds and the Lansdo
Thousand Islands

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

☐ Lansdowne
☒ Lyndhurst
☐ Escott

WASTE DISPOSAL SITE

DAILY INSPECTION FORM

DATE: MAR 26/22 TIME: 8:20

STAFF: RICK 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
8:45	CARL	Garbage / Recycle	1/2	Y
9:25	MATTICE	Garbage / Recycle	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 787

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

IF NO: Waste Sent To: _____

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) and topic:

SIGNATURE

Print Staff Name:

OFFICE USE:

Date Reviewed:

Reviewer:

File Number:



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☒ Lyndhurst
☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: May 28 TIME: 8:07 STAFF: Clarence Birt

DEFICIENCIES OBSERVED:

		Description / Location
Ponded Water:	☒ Yes / ☐ No	<u>Water By yard waste</u>
Windblown Litter:	☒ Yes / ☐ No	<u></u>
Leachate Springs:	Yes / ☒ No	<u></u>
Animals:	Yes / ☒ No	<u></u>
Other:	☒ Yes / ☐ No	<u>Trash bags Thrown over gate</u>

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Neep Brush cutters Trees Growing around Shack

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Someone has Dumped Trash over gate. Black
Bags ?

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10:30</u>	<u>Standing</u>	<u>Waste/Recycle</u>	<u>1/2 + load</u>	<u>yes</u>

TOTAL COUNT OF HOUSEHOLD USERS: 145

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

IF NO: Waste Sent To:

LITTER CONTROL: ☒ Yes / ☐ No

DETAILS: cleaned around Shack

APPLICATION OF DUST SUPPRESSANT: Yes / ☒ No

DETAILS:

DAILY INSPECTION FORM COMPLETED: ☒ Yes / ☐ No

DETAILS:

COMPLAINTS RECEIVED: Yes / ☒ No

If Yes, complaint file number(s) and topic:

SIGNATURE Clarence Birt Print Staff Name: Clarence Birt

OFFICE USE:

Date Reviewed: Reviewer: File Number:



DATE: May 30/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: May 30/22 occ/mixed/paper/mixed
DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
<u>10:10</u>	<u>Unknown</u>	<u>Not from this Township</u>
<u>11:50</u>	<u>"</u>	<u>"</u>
<u>12:20</u>	<u>"</u>	<u>"</u>

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 74

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

IF NO: Waste Sent To: _____

LITTER CONTROL: ~~Yes~~ / No

DETAILS: Cleaned around bins and entry way

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

DETAILS: _____

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

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If Yes, complaint file number(s) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne
☒ Lyndhurst
☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: June 1 / 22 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

		Description / Location
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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: June 1 / 22 mixed / paper / OCC

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:30	ELyidge	Garbage	Full	Y
11:10	"	Recycling	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 45

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: June 2/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: June 2/22

DATES BINS WERE PICKED UP: June 2/22

mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>11:30</u>	<u>MATTICE</u>	<u>Garbage Recycling</u>	<u>FULL</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 54

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: June 4/22 TIME: 8:05 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
12:00	Stander	Garbage Recycling	1/2	✓

TOTAL COUNT OF HOUSEHOLD USERS: 142

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford
OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: June 6/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: June 6/22

DATES BINS WERE PICKED UP: / /

paper / mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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: _____

LITTER CONTROL: ~~Yes~~ / No

DETAILS: Along entry way and around 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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: June 8/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: June 8/22

mixed

DATES BINS WERE PICKED UP: June 7/22

mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
<u>11:35</u>	<u>Unknown</u>	<u>Not from This Township</u>

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10:30</u>	<u>ELX idgo</u>	<u>Garbage</u>	<u>FULL</u>	<u>Y</u>
<u>11:20</u>	<u>"</u>	<u>Recycling</u>	<u>3/4</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 67

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stafford

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

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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: June 9/22 TIME: 8:10 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:55	Mattice	Garbage Recycling	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 52

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

IF NO: Waste Sent To: _____

LITTER CONTROL: ~~Yes~~ / No

DETAILS: Along entry way

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

DETAILS: _____

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

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If Yes, complaint file number(s) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: June 4 / 22 TIME: 8:00 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: June 10 / 11

mixed / paper / occ

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: June 13/22 TIME: 8:10 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: June 13/22

paper / mixed / occ / steel

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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:

LITTER CONTROL: ~~Yes~~ / No

DETAILS: Along entrance Around 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) and topic:

SIGNATURE [Signature] Print Staff Name: John Stafford

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

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- ☐ Escott

WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: June 15/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:10	ELvidge	Garbage	Full	Y
11:50	"	Recycling	3/4	Y

TOTAL COUNT OF HOUSEHOLD USERS: 10

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: June 16/22 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:		Description / Location
Ponded Water:	Yes / No <u>X</u>	
Windblown Litter:	Yes / No <u>X</u>	
Leachate Springs:	Yes / No <u>X</u>	
Animals:	Yes / No <u>X</u>	
Other:	Yes / No <u>X</u>	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING: TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: June 16/22 mixed / steel / paper

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
4:20	matfrec	Garbage Recycling	FULL	<u>X</u>

TOTAL COUNT OF HOUSEHOLD USERS: 57

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No X

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No X

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: X Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No X

If Yes, complaint file number(s) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE: _____

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: June 18 / 22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: Jan / 17 / 22 BCC

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
10:15	Unknown	Not From TLTI
12:10	Unknown	Not From "
2:30	Unknown	Not From "

2:55 Unknown Not From "

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 128

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: 8-10 June 2022 TIME: 8:10 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: June 20/22

paper / occ / mixed

DATES BINS WERE PICKED UP: 1 / 1

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: June 22 / 22 TIME: 8:10 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:

RECYCLING: TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: June 22 / 22 mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:40	ELVidge	Garbage	FULL	Y
11:15	ELVidge	Recycling	3/4	Y

TOTAL COUNT OF HOUSEHOLD USERS: 78

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No X

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No X

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No X

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No X

If Yes, complaint file number(s) and topic: _____

SIGNATURE [Signature] **Print Staff Name:** John Stafford

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

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☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: June 23, 22 TIME: 8:10 STAFF: Rick Taylor

DEFICIENCIES OBSERVED:

Ponded Water: Yes / No

Windblown Litter: Yes / No

Leachate Springs: Yes / No

Animals: Yes / No

Other: Yes / No

Description / Location

Roadway around Bins

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:30	Mattice	Garbage/Recycle	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 69

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No

DETAILS: Picked up around 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) and topic: _____

SIGNATURE Rick Taylor Print Staff Name: Rick Taylor

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



Township of
**Leeds and the
Thousand Islands**

1233 Prince Street, P.O. Box 280
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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: June 15/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: Jun 14/22

paper / occ

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>11:15</u>	<u>Stander</u>	<u>garbage Recycling</u>	<u>Full</u>	<u>✓</u>

TOTAL COUNT OF HOUSEHOLD USERS: 128

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE

Print Staff Name:

OFFICE USE:

Date Reviewed:

Reviewer:

File Number:



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: June 27/22 TIME: 8:10 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:

RECYCLING: TYPE

DATE BINS WERE ORDERED: June 27/22 mixed/paper/oc/mixed

DATES BINS WERE PICKED UP: 1/1

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 68

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: June 29/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: June 28/22

mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:00	ELVidger	Garbage	Full	Y
12:10	"	Recycling	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 72

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: JUNE 30 TIME: 8:30 STAFF: Clarence Birt

DEFICIENCIES OBSERVED:		Description / Location
Ponded Water:	Yes / <u>No</u>	
Windblown Litter:	<u>Yes</u> / No	
Leachate Springs:	Yes / <u>No</u>	
Animals:	<u>Yes</u> / No	<u>Deer / Rabbits</u>
Other:	Yes / <u>No</u>	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING: TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: 06/30/2022 plastic & corrugated

REJECTED LOADS:		
TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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: _____

LITTER CONTROL: Yes / No

DETAILS: Cleaned along laneway

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If Yes, complaint file number(s) and topic: _____

SIGNATURE Clarence Birt Print Staff Name: Clarence Birt

OFFICE USE:



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☐	Escott

DATE: July 2/22 TIME: 8:10 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~~

LYNDHURST

RECOMMENDED ACTIONS / ACTIONS TAKEN:

July - Dec
2022

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 132

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: John Stafford TIME: 8:20 STAFF: John Stafford
July 4/22

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: July 4/22

mixed / occ / paper / steel

DATES BINS WERE PICKED UP: July 4/22

mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 76

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: July 6/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: July 6/22 mixed

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:50	ELVidge	Garbage	FULL	✓
10:45	"	Recycling	3/4	✓

TOTAL COUNT OF HOUSEHOLD USERS: 65

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: July 7/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1/1

DATES BINS WERE PICKED UP: July 7/22

Steel

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10:50</u>	<u>Mattice</u>	<u>Garbage Recycling</u>	<u>FULL</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 81

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: July 9/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1/1

DATES BINS WERE PICKED UP: July 8/22

mixed / paper / OCC

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 160

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: July 4/22 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:

RECYCLING: TYPE

DATE BINS WERE ORDERED: July 11/22 empty oil containers / mixed / paper

DATES BINS WERE PICKED UP: 1 / 1 and occ

TIME	HAULER NAME	REASON FOR REJECTION
<u>2:05</u>	<u>Unknown</u>	<u>Not from TLTI</u>

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>2:05</u>	<u>Unknown</u>			

TOTAL COUNT OF HOUSEHOLD USERS: 87

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

IF NO: Waste Sent To: _____

LITTER CONTROL: ~~Yes~~ / No

DETAILS: Around 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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: July 13/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: July 13/22

mixed

DATES BINS WERE PICKED UP: 1 / 1

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:30	ELVidge	Garbage	FULL	Y
11:05	"	Recycling	FULL	Y
2:05	"	Recycling	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 62

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: July 14/22 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:

RECYCLING: TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: July 14/22 Empty oil containers

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:55	Mattice	garbage Recycling	FULL	Y

TOTAL COUNT OF HOUSEHOLD USERS: 79

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE: _____

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: July 16/22 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:		Description / Location
Ponded Water:	Yes / <u>No</u>	
Windblown Litter:	Yes / <u>No</u>	
Leachate Springs:	Yes / <u>No</u>	
Animals:	Yes / <u>No</u>	
Other:	Yes / <u>No</u>	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING: TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: July 16/22 mixed / paper / occ

REJECTED LOADS:		
TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 140

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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DATE: July 18/22 TIME: 8:15 STAFF: RICK TAYLOR

DEFICIENCIES OBSERVED:

		Description / Location
Ponded Water:	Yes / <u>No</u>	
Windblown Litter:	<u>Yes</u> / No	
Leachate Springs:	Yes / <u>No</u>	
Animals:	Yes / <u>No</u>	
Other:	Yes / No	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Rain all day

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 57

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

IF NO: Waste Sent To: _____

LITTER CONTROL:

Yes / No

DETAILS: Pick up around 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) and topic: _____

SIGNATURE [Signature] Print Staff Name: RICK TAYLOR

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____

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WASTE DISPOSAL SITE

DAILY INSPECTION FORM

DATE: July 20/22 TIME: 8:25 STAFF: Rick Taylor

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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

TYPE

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:00	Aldridge	Gorbals/Recycle	Trailer	Y
10:30	"	" "	"	Y
12:00	"	" "	"	Y
-				

TOTAL COUNT OF HOUSEHOLD USERS: 167.

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

IF NO: Waste Sent To: _____

LITTER CONTROL: ☒ Yes / ☐ No

DETAILS: Around Shed & Buns

APPLICATION OF DUST SUPPRESSANT: Yes ☐ No ☒

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes ☒ No ☐

If Yes, complaint file number(s) and topic: _____

SIGNATURE [Signature] Print Staff Name: RICK TAYLOR

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

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☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: July 21/22 TIME: 8:15 AM STAFF: Rick Taylor

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:

WARM & MUGGY, Thunder Storm around 2

Microsoy here & Pushed Back, Tractor brought 4 Loads

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: July 20/22 Steel Bins Picked up

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:00	MATTICE	Garbage/Recycle	Full	<u>Y</u>
10:30	Morenz	Garbage/Recycle	ARESTY TAG	<u>Y</u> 128 Seabrooke Rd.

TOTAL COUNT OF HOUSEHOLD USERS: 109

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

IF NO: Waste Sent To:

LITTER CONTROL: Yes / No

DETAILS: Pick up around shop & some laneway

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS:

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS:

COMPLAINTS RECEIVED: Yes / No

If Yes, complaint file number(s) and topic:

SIGNATURE [Signature] Print Staff Name: Rick Taylor

OFFICE USE:

Date Reviewed: Reviewer: File Number:



☐	Lansdowne
☒	Lyndhurst
☐	Escott

DATE: July 23, 2022 TIME: 8:15 STAFF: RICK TAYLOR

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / <u>No</u>	
Windblown Litter:	<u>Yes</u> / No	
Leachate Springs:	Yes / <u>No</u>	
Animals:	Yes / <u>No</u>	
Other:	Yes / No	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Hot & Humid all day.

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:00	STANDEN	Gerbage/Rocycle	TRAILER	FE Y
3:15	TED HARRIS	Amnesty tag	Small TRAILER	Y

TOTAL COUNT OF HOUSEHOLD USERS: 233

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

LITTER CONTROL: Yes / No
DETAILS: Around Bins, up driveway some

APPLICATION OF DUST SUPPRESSANT: Yes / No
DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No
DETAILS: _____

COMPLAINTS RECEIVED: Yes / No
If Yes, complaint file number(s) and topic: _____

SIGNATURE Rick Taylor Print Staff Name: RICK TAYLOR

OFFICE USE: _____

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐	Lansdowne
☒	Lyndhurst
☐	Escott

DATE: July 25, 22 TIME: 8:15 STAFF: RICK TAYLOR

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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: _____

LITTER CONTROL:

Yes / No

DETAILS: Pick up around 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) and topic: _____

SIGNATURE [Signature] Print Staff Name: RICK TAYLOR

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne
☐ Lyndhurst
☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: July 27, 22 TIME: 8:10 STAFF: RICK TAYLOR

DEFICIENCIES OBSERVED:

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

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Was here late helping new clients to the township. A gentleman came
unto the waste site trespassing I asked him to leave with his
dog. He told me to make him, I called 911 Det James & Nick know
TOOK pic of car that was here. 3 Guys on 4 wheelers were in
TYPE were as well.

RECYCLING:

DATE BINS WERE ORDERED: July 26 / 2022
DATES BINS WERE PICKED UP: July 27 / 2022 Plastic / Paper

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>3:24:5</u>	<u>Eldridge</u>	<u>Garbage / Recycle</u>	<u>Full</u>	<u>Y</u>
<u>11:45</u>	<u>" "</u>	<u>" "</u>	<u>" "</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 118

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

LITTER CONTROL: Yes / No

DETAILS: Bins. Pick up steel someone went through 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) and topic: _____

SIGNATURE Rick Taylor Print Staff Name: Rick Taylor

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne

☒ Lyndhurst

☐ Escott

DATE: July 28, 22 TIME: 8:15 STAFF: RICK TAYLOR

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:
Thunder storm came through

RECYCLING:
DATE BINS WERE ORDERED: July/28/22 TYPE Cardboard / Plastic Come on Tues.
DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10:00</u>	<u>Maffice</u>	<u>Garbage/Recycle</u>	<u>Full</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 92

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

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) and topic: _____

SIGNATURE Rick Taylor Print Staff Name: RICK TAYLOR
OFFICE USE: i
Date Reviewed: _____ Reviewer: _____ File Number: _____

☐ Lansdowne
☒ Lyndhurst
☐ Escott

WASTE DISPOSAL SITE

DAILY INSPECTION FORM

DATE: July 30, 22 TIME: 8:10 STAFF: Rick Taylor

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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

TYPE

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 201

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

IF NO: Waste Sent To:_____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: Rick LAM/WR

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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☐ Escott

WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Aug 3 / 22 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:

RECYCLING:

DATE BINS WERE ORDERED:

Aug 13 / 22

TYPE

steel / mixed / paper

DATES BINS WERE PICKED UP:

11 / 11 / 11

occ / mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 154

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Aug 4 / 22 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:

Yes / No

☐ Yes ☒ No

Windblown Litter:

Yes / No

☒ Yes ☐ No

Leachate Springs:

Yes / No

☒ Yes ☐ No

Animals:

Yes / No

☒ Yes ☐ No

Other:

Yes / No

☒ Yes ☐ No

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

DATE BINS WERE ORDERED: Aug 4 / 22

DATES BINS WERE PICKED UP: Aug 4 / 22

TYPE

occ / mixed

paper

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>11:00</u>	<u>matrice</u>	<u>Garbage Recycling</u>	<u>FULL</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: _____

LITTER CONTROL: Yes / ☒ No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: ☒ Yes / No

DETAILS: calcium was applied to entrance and yard

DAILY INSPECTION FORM COMPLETED: ☒ Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ☒ No

If Yes, complaint file number(s) and topic: _____

SIGNATURE John Stafford Print Staff Name: _____

OFFICE USE: _____

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WASTE DISPOSAL SITE

DAILY INSPECTION FORM

DATE: AUG 6, 22 TIME: 8:20 STAFF: RICK TAYLOR

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Hot & Humid today.

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:30	STANBEN	Garbage/Recycle	1/2 load	Y

TOTAL COUNT OF HOUSEHOLD USERS: 201

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

IF NO: Waste Sent To: _____

LITTER CONTROL:

Yes / No

DETAILS: Almond 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) and topic: _____

SIGNATURE: [Signature] Print Staff Name: Rich Wayne

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne
☒ Lyndhurst
☐ Escott

DATE: Aug 8/22 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:

RECYCLING: TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Aug 10/22 mixed/occ

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 81

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

IF NO: Waste Sent To: _____

LITTER CONTROL: ~~Yes~~ / No

DETAILS: Around bins and entrance way

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

DETAILS: _____

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

DETAILS: _____

COMPLAINTS RECEIVED: Yes / ~~No~~

If Yes, complaint file number(s) and topic: _____

SIGNATURE John Stafford Print Staff Name: _____

OFFICE USE:



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Aug 10/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: Aug 10/22 mixed / paper
DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
<u>10:30</u>	<u>Unknown</u>	<u>Not from TLTI</u>
<u>3:00</u>	<u>"</u>	<u>"</u>

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10:30</u>	<u>ELVigde</u>	<u>Garbage</u>	<u>Full</u>	<u>Y</u>
<u>11:10</u>	<u>"</u>	<u>Recycling</u>	<u>"</u>	<u>"</u>

TOTAL COUNT OF HOUSEHOLD USERS: 85

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford
OFFICE USE: _____

Date Reviewed: _____ Reviewer: _____ File Number: _____



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- ☐ Escott

WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Aug 11/22 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:

RECYCLING: TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Aug 11/22 mixed paper

REJECTED LOADS:		
TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:20	Martice	Garbage Recycling	FULL	Y

TOTAL COUNT OF HOUSEHOLD USERS: 64

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Aug 13/22 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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

TYPE

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 152

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Aug 15/22 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:

RECYCLING:

DATE BINS WERE ORDERED: Aug 15/22

DATES BINS WERE PICKED UP: / /

TYPE

ocv / mixed / steel / paper

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 76

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Aug 17/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Aug 16/22

mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:45	ELridge	Garbage	Full	Y
11:35	"	recycling	"	Y

TOTAL COUNT OF HOUSEHOLD USERS: 79

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Aug 18/22 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:

RECYCLING: TYPE

DATE BINS WERE ORDERED: Aug 18/22 mixed

DATES BINS WERE PICKED UP: Aug 18/22 Steel / OCC

REJECTED LOADS:		
TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Grass cutting crew weeded

COMMERCIAL HAULER OR LARGE LOADS				
Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>11:00</u>	<u>Mattice</u>	<u>Garbage</u> <u>Recycling</u>	<u>Full</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 80

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No

DETAILS: Along entry way

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If Yes, complaint file number(s) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Aug 20/22 TIME: 8:15 STAFF: RICK TAYLOR

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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

TYPE

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
12:15	STANDON	Garbage/Rec	TRAILER FULL	Y

TOTAL COUNT OF HOUSEHOLD USERS: 222

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No

DETAILS: Around Bins, lone way.

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If Yes, complaint file number(s) and topic: _____

SIGNATURE Rick Taylor Print Staff Name: RICK TAYLOR

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Aug 22/22 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water: Yes / No

Windblown Litter: X / No

Leachate Springs: Yes / No

Animals: Yes / No

Other: Yes / No

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

DATE BINS WERE ORDERED: Aug 22/22

DATES BINS WERE PICKED UP: Aug 19/22

TYPE

mixed / paper / occ
paper

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 69

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

IF NO: Waste Sent To: _____

LITTER CONTROL: X / No

DETAILS: Along entry way and around gate

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: X / No

DETAILS: _____

COMPLAINTS RECEIVED: X / No

If Yes, complaint file number(s) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____

1 thousand Islands

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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Aug 24/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Aug 23/22 mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:45	<u>Elvridge</u>	<u>garbage</u>	<u>full</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 72

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

IF NO: Waste Sent To:

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) and topic:

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: Reviewer: File Number:

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WASTE DISPOSAL SITE

DAILY INSPECTION FORM

DATE: Aug 25/22 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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Aug 15/22

TYPE

00

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:00	Mattice	Garbage Rec		

TOTAL COUNT OF HOUSEHOLD USERS: 15

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Sutton

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Aug 27/22 TIME: 8:10 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: Aug 26/22 paper

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____

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DATE: Aug 29 / 22 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:

RECYCLING:

DATE BINS WERE ORDERED: Aug/29/22

DATES BINS WERE PICKED UP: / /

TYPE
paper / mixed / occ

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 71

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Aug 31/22 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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Aug 30/22

TYPE

mixed

TIME	HAULER NAME	REASON FOR REJECTION
<u>10:30</u>	<u>Unknown</u>	<u>Not from TLTI</u>

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10:15</u>	<u>ELodge</u>	<u>Garbage Rec</u>	<u>FULL</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 85

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE: _____

Date Reviewed: _____ Reviewer: _____ File Number: _____



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DATE: Sep 1 / 22 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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Sep 1 / 22 occ / mixed

TYPE

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:10	Mattice	garbage rec	full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 80

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

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford
OFFICE USE: _____

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Sep 3/22 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:

RECYCLING:

DATE BINS WERE ORDERED: / / TYPE _____

DATES BINS WERE PICKED UP: Sep 2/22 paper

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
2:00	STANDEN	Garbage Rec	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 175

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE: _____

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: SEPT 2 TIME: 736 STAFF: Burt BLANCHARD

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 91

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE _____ Print Staff Name: _____

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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DATE: SEPT 8, 22 TIME: 8:15 STAFF: Rick / Clarence

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No

Windblown Litter: Yes / No

Leachate Springs: Yes / No

Animals: Yes / No

Other: Yes / No

Pick up around Bins & Lane way

Bee & wasps Bad

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>11:00</u>	<u>Notice</u>	<u>Garbage/Recycle</u>	<u>Full</u>	<u>+</u>

TOTAL COUNT OF HOUSEHOLD USERS: 84

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

IF NO: Waste Sent To: _____

LITTER CONTROL:

Yes / No

DETAILS: Pick up down lane way & Around 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) and topic: _____

SIGNATURE [Signature] Print Staff Name: Rick Taylor & Clarence Birt

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Sept 10 TIME: 8:20 STAFF: Clarence

DEFICIENCIES OBSERVED:

Ponded Water: Yes / No

Windblown Litter: Yes / No

Leachate Springs: Yes / No

Animals: Yes / No

Other: Yes / No

Description / Location

Trash around Bins
Cats
Stairs For cardboard Bin are weak

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:28	Fernand Belanger	Waste	Full	yes

TOTAL COUNT OF HOUSEHOLD USERS: 208

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

IF NO: Waste Sent To:

LITTER CONTROL: Yes / No

DETAILS: Cleaned around 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) and topic:

SIGNATURE Clarence Birt Print Staff Name: Clarence Birt

OFFICE USE:

Date Reviewed: Reviewer: File Number:

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WASTE DISPOSAL SITE

DAILY INSPECTION FORM

DATE: Sep 12/22 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:

RECYCLING:

DATE BINS WERE ORDERED: Sep 12/22 TYPE: mixed/paper/occ

DATES BINS WERE PICKED UP: 1/1

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 66

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: SEPT 14, 22 TIME: 8:15 STAFF: RICK TAYLOR

DEFICIENCIES OBSERVED:

Ponded Water: Yes / No

Windblown Litter: Yes / No

Leachate Springs: Yes / No

Animals: Yes / No

Other: Yes / No

Description / Location

Grand Bins, laneway.

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:00	Eldridge	Garbage/Recycle	Full	Y
10:15	"	"	"	Y

TOTAL COUNT OF HOUSEHOLD USERS: 74

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No

DETAILS: Pick up around bins & laneway

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If Yes, complaint file number(s) and topic: _____

SIGNATURE Rick Taylor Print Staff Name: RICK TAYLOR

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: SEPT 15, 22 TIME: 8:15 STAFF: RICK TAYLOR

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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

TYPE

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:00	Mattice	Gus bags/Rec	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 75

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No

DETAILS: Pick up around Bins & Shed.

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If Yes, complaint file number(s) and topic: _____

SIGNATURE Rick Taylor Print Staff Name: RICK TAYLOR

OFFICE USE:



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: SEPT 17/22 TIME: 8:20 STAFF: Rick Taylor

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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

TYPE

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 156

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No

DETAILS: Pick up around 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) and topic: _____

SIGNATURE [Signature] Print Staff Name: Rick Taylor

OFFICE USE:



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Sep 19/22 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No X

Windblown Litter: Yes / No X

Leachate Springs: Yes / No X

Animals: Yes / No X

Other: Yes / No X

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: Sep 19/22 mixed / paper

DATES BINS WERE PICKED UP: 1 / 1

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 64

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No X

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No X

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No X

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No X

If Yes, complaint file number(s) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Sep 24/22 TIME: 8:10 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: Sep 20/22

mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:50	ELVidge	garbage	Full	<u>Y</u>
10:35	"	"	1/2	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 90

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Sept 22/22 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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

TYPE

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:30	Mattice	Garbage Rec	Full	☒

TOTAL COUNT OF HOUSEHOLD USERS: 60

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE: _____

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne

☒ Lyndhurst

☐ Escott

DATE: Sept 24 TIME: 8:51 STAFF: Clarence Birt

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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

TYPE

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
1:30	Tolly Foerstner	Trash / Recycle	Full load	yes

TOTAL COUNT OF HOUSEHOLD USERS: 164

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No

DETAILS: Picked up around 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) and topic: _____

SIGNATURE Clarence Birt Print Staff Name: Clarence Birt

OFFICE USE:



☐ Lansdowne
☒ Lyndhurst
☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Sep 26/22 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:

RECYCLING:

DATE BINS WERE ORDERED: Sep 1 26/22 TYPE mixed / paper / occ / mixed

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 60

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐	Lansdowne
☒	Lyndhurst
☐	Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Sep 28/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: Sep/28/22 Steel

DATES BINS WERE PICKED UP: Sep/27/22 mixed / occ

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 61

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne
☒ Lyndhurst
☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Sept 29 / 22 TIME: 8:10 STAFF: RICK TAYLOR

DEFICIENCIES OBSERVED:

	Yes / No	Description / Location
Ponded Water:	Yes / <u>No</u>	
Windblown Litter:	<u>Yes</u> / No	
Leachate Springs:	Yes / <u>No</u>	
Animals:	Yes / <u>No</u>	
Other:	Yes / No	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:30	MATTICE	Gravel / Rock	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 608

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

IF NO: Waste Sent To: _____

LITTER CONTROL:

Yes / No

DETAILS: Pick up around bins & shed.

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED:

Yes / No

If Yes, complaint file number(s) and topic: _____

SIGNATURE [Signature] Print Staff Name: RICK TAYLOR

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Oct 1 / 22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: Sep 13 / 22

mixed / steel

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:45	Stanley	garbage rec	3/4	Y

TOTAL COUNT OF HOUSEHOLD USERS: 141

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Oct 3/22 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:

RECYCLING:

	TYPE
DATE BINS WERE ORDERED: <u>Oct 13/22</u>	<u>mixed / occ</u>
DATES BINS WERE PICKED UP: <u>Oct 13/22</u>	<u>paper</u>

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford
OFFICE USE: _____

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Oct 5 / 22 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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

TYPE

REJECTED LOADS:		
TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:50	EL vidge	Garbage	Full	Y
10:40	"	Rec	"	Y

TOTAL COUNT OF HOUSEHOLD USERS: 78

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford

OFFICE USE:

Print Staff Name: John Stafford



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Oct 6/22 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:

RECYCLING: TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Oct 6/22 mixed

REJECTED LOADS:		
TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:00	Mattice	garbage Rec	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 72

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: OCT 8 / 22 TIME: 8:25 STAFF: John Stoford

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED:

1 / 1

DATES BINS WERE PICKED UP:

OCT 11 / 22

000

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 165

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stoford Print Staff Name: John Stoford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: OCT 12/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: OCT 12/22 mixed / paper

DATES BINS WERE PICKED UP: 1 / 1

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:00	Elridge	Garbage Rec	Full	Y
11:10	"	"	3/4	Y

TOTAL COUNT OF HOUSEHOLD USERS: 94

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____

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WASTE DISPOSAL SITE

DAILY INSPECTION FORM

DATE: Oct 13/22 TIME: 8:16 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water: Yes / No

Windblown Litter: Yes / No

Leachate Springs: Yes / No

Animals: Yes / No

Other: Yes / No

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Heavy rain and wind today

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
10:55	Unknown	Not from TLTI

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:00	MATTICE	Garbage Dec	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: _____

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) and topic: _____

SIGNATURE [Signature] **Print Staff Name:** John S. Tabor

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Oct 15/22 TIME: 8:10 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Description / Location

Ponded Water: Yes / No

Windblown Litter: X Yes / No

Leachate Springs: Yes / No

Animals: Yes / No

Other: Yes / No

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: Oct 14/22

paper / mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 183

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

LITTER CONTROL: Yes / No
DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No
DETAILS: _____

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

COMPLAINTS RECEIVED: Yes / No
If Yes, complaint file number(s) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford
OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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☐ Escott

DATE: Oct 12/22 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:		Description / Location
Ponded Water:	Yes / <u>No</u>	
Windblown Litter:	<u>Yes</u> / No	
Leachate Springs:	Yes / <u>No</u>	
Animals:	Yes / <u>No</u>	
Other:	Yes / <u>No</u>	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING: TYPE

DATE BINS WERE ORDERED: Oct 11/22 mixed/occ/steel/mixed

DATES BINS WERE PICKED UP: 1/1

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
<u>11:55</u>	<u>Unknown</u>	<u>NOT from TTI</u>

OTHER COMMENTS / OBSERVATIONS

Rain all Day

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: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Oct 19/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: Oct 19/22

DATES BINS WERE PICKED UP: Oct 19/22

mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:20	ELVIT	Garbage Rec	Full	Y
11:00	"	"	3/4	Y

TOTAL COUNT OF HOUSEHOLD USERS: 58

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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☐ Escott

DATE: Oct 20/22 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:		Description / Location
Ponded Water:	Yes / <u>No</u>	
Windblown Litter:	<u>Yes</u> / No	
Leachate Springs:	Yes / <u>No</u>	
Animals:	Yes / <u>No</u>	
Other:	Yes / <u>No</u>	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING: TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Oct 20/22 OCG/Steel

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>11:05</u>	<u>MATTICE</u>	<u>Garbage Rec</u>	<u>Full</u>	<u>✓</u>

TOTAL COUNT OF HOUSEHOLD USERS: 61

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Oct 22 / 22 TIME: 8:10 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: Oct 21 / 22

mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Oct 24/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Oct 12/22

paper

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 67

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

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

☐ Lansdowne

☒ Lyndhurst

☐ Escott

WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Oct 26/22 TIME: 8:10 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:

RECYCLING: TYPE

DATE BINS WERE ORDERED: Oct 26/22 mixed

DATES BINS WERE PICKED UP: / /

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:05	ELNidge	Garbage Rec	FULL	Y
11:00	"		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: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____

DATE: Oct 27/22 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:

RECYCLING: TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Oct 27/22 mixed

REJECTED LOADS:		
TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:55	Mattice	Garbage Rec	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: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE: _____

DATE: Oct 29 / 22 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:

RECYCLING:	TYPE
DATE BINS WERE ORDERED: <u> / / </u>	
DATES BINS WERE PICKED UP: <u> / / </u>	

REJECTED LOADS:	TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 158

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____

☐ Lansdowne

☒ Lyndhurst

☐ Escott

DATE: OCT 31 / 22 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:

RECYCLING:

DATE BINS WERE ORDERED: OCT 31 / 22 TYPE mixed / occ / paper

DATES BINS WERE PICKED UP: 1 / 1

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 58

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stafford

OFFICE USE:



Township of
**Leeds and the
Thousand Islands**

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

- ☐ Lansdowne
- ☒ Lyndhurst
- ☐ Escott

WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Nov 12/22 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:		Description / Location
Ponded Water:	Yes / <u>No</u>	
Windblown Litter:	<u>Yes</u> / No	
Leachate Springs:	Yes / <u>No</u>	
Animals:	Yes / <u>No</u>	
Other:	Yes / <u>No</u>	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING: TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: Nov 11/22 mixed / occ

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:45	ELVidge	Garbage Rec	Full	<u>Y</u>
10:20	"	"	1/2	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 81

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne
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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Nov 3, 22 TIME: 8:15 STAFF: Rick Taylor

DEFICIENCIES OBSERVED:		Description / Location
Ponded Water:	Yes / <u>No</u>	
Windblown Litter:	<u>Yes</u> / No	
Leachate Springs:	Yes / <u>No</u>	
Animals:	Yes / <u>No</u>	
Other:	Yes / No	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:	TYPE
DATE BINS WERE ORDERED: <u> </u> / <u> </u> / <u> </u>	
DATES BINS WERE PICKED UP: <u> </u> / <u> </u> / <u> </u>	

REJECTED LOADS:		
TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:45	MATTICE	Garbage/Recycle	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 68

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No

DETAILS: Pick up around 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) and topic: _____

SIGNATURE Rick Taylor Print Staff Name: Rick Taylor

OFFICE USE:



☐ Lansdowne
☒ Lyndhurst
☐ Escott

DATE: Nov 5/22 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:

RECYCLING:

DATE BINS WERE ORDERED:

/

/

DATES BINS WERE PICKED UP:

/

/

TYPE

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne
☒ Lyndhurst
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DATE: Nov 7/22 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:

RECYCLING:

DATE BINS WERE ORDERED: Nov 7/22

DATES BINS WERE PICKED UP: / /

TYPE

mixed / steel

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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: _____

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) and topic: _____

SIGNATURE  Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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☐ Escott

**WASTE
DAILY INSPEC.**

DATE: Nov 9/22 TIME: 8:20 STAFF: John Stoltow

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: Nov 9/22 mixed/occ/paper

DATES BINS WERE PICKED UP: Nov 8/22 Steel/mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:00	FLVigde	Garbage	Full	Y
9:30	"	Rec	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: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stoltow

OFFICE USE: _____

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne

☒ Lyndhurst

☐ Escott

DATE: Nov 10 TIME: 08:30 STAFF: AL BUNT

DEFICIENCIES OBSERVED:

Ponded Water:

Yes / No

Windblown Litter:

Yes / No

Leachate Springs:

Yes / No

Animals:

Yes / No

BIRDS, RACOONS

Other:

Yes / No

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

TYPE

REJECTED LOADS:		
TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
12:45		Wood Stairs & Lumber	1/2 T + 1/2 SL	✓
15:10		Shed material	1/2 T	✓

TOTAL COUNT OF HOUSEHOLD USERS: 60

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

IF NO: Waste Sent To: _____

LITTER CONTROL:

Yes / No

DETAILS: 3 TIRES OUTSIDE GATE

APPLICATION OF DUST SUPPRESSANT:

Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED:

Yes / No

DETAILS: _____

COMPLAINTS RECEIVED:

Yes / No

If Yes, complaint file number(s) and topic: _____

SIGNATURE

Alan Bunt

Print Staff Name: ALAN BUNT

OFFICE USE:

Date Reviewed: _____

Reviewer: _____

File Number: _____



☐	Lansdowne
☒	Lyndhurst
☐	Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Nov 12/22 TIME: 8:15 STAFF: John Stafford

DEFICIENCIES OBSERVED:		Description / Location
Ponded Water:	Yes / <u>No</u>	
Windblown Litter:	Yes / <u>No</u>	
Leachate Springs:	Yes / <u>No</u>	
Animals:	Yes / <u>No</u>	
Other:	Yes / <u>No</u>	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:	TYPE
DATE BINS WERE ORDERED: <u>1 / 1</u>	
DATES BINS WERE PICKED UP: <u>Nov 14 / 22</u>	<u>mixed</u>

REJECTED LOADS:		
TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 142

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE: _____

Date Reviewed: _____ Reviewer: _____ File Number: _____



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☐ Escott

**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Nov/14/22 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:

Yes / No

☒ Yes ☒ No

Windblown Litter:

Yes / No

☒ Yes ☒ No

Leachate Springs:

Yes / No

☒ Yes ☒ No

Animals:

Yes / No

☒ Yes ☒ No

Other:

Yes / No

☒ Yes ☒ No

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

DATE BINS WERE ORDERED:

Nov/14/22

DATES BINS WERE PICKED UP:

/ /

TYPE

mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 65

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE _____ Print Staff Name: _____

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____

DATE: Nov / 16 / 22 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:		Description / Location
Ponded Water:	Yes / No	<u>Everything's covered with snow</u>
Windblown Litter:	Yes / No	
Leachate Springs:	Yes / No	
Animals:	Yes / No	
Other:	Yes / No	

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING: TYPE

DATE BINS WERE ORDERED: / / _____

DATES BINS WERE PICKED UP: / / _____

REJECTED LOADS:		
TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Snowed most of the day

COMMERCIAL HAULER OR LARGE LOADS				
Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:15	<u>Elvidge</u>	<u>Garbage Rec</u>	<u>Full</u>	<u>Y</u>
10:00	<u>"</u>	<u>"</u>	<u>1/2</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 42

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford

Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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DATE: Nov 17/22 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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Nov 17/22 mixed

TYPE

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10:35</u>	<u>Mattice</u>	<u>garbage</u> <u>Rec</u>	<u>full</u>	<u>Y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 45

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Nov 19/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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:

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) and topic:

SIGNATURE John Stafford Print Staff Name: John Stafford
OFFICE USE:

Date Reviewed: Reviewer: File Number:



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Nov/24/22 TIME: 8:20 STAFF: John Stefford

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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: Nov/24/22 mixed/paper/oc

DATES BINS WERE PICKED UP: / / _____

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION
<u>1:35</u>	<u>Unknown</u>	<u>Not from TLTI</u>

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 56

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

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) and topic: _____

SIGNATURE John Stefford Print Staff Name: John Stefford
OFFICE USE: _____

Date Reviewed: _____ Reviewer: _____ File Number: _____

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☒ Lyndhurst
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WASTE DISPOSAL SITE

DAILY INSPECTION FORM

DATE: Nov 23/22 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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

TYPE

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:15	EL ridge	Garbage Rocks	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: _____

LITTER CONTROL: ~~Yes~~ / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No ☒ Yes

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If Yes, complaint file number(s) and topic: _____

SIGNATURE _____ **Print Staff Name:** _____

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne

☒ Lyndhurst

☐ Escott

DATE: Nov 24/22 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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Nov 14/22 mixed

TYPE

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:30	Mattice	Garbage Rec	1566	Y

TOTAL COUNT OF HOUSEHOLD USERS: 69

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE: _____



☐ Lansdowne

☒ Lyndhurst

☐ Escott

DATE: Nov 26/22 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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

TYPE

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 132

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: JOHN STAFFORD

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne

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☐ Escott

WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Nov 28/22 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:

RECYCLING:	TYPE
DATE BINS WERE ORDERED: <u> / / </u>	
DATES BINS WERE PICKED UP: <u> / / </u>	

REJECTED LOADS:		
TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 54

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE: _____

Date Reviewed: _____ Reviewer: _____ File Number: _____



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DATE: Nov 30/22 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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Nov 29/22

TYPE

mixed / Steel

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Heavy rain and wind all day

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
<u>10:10</u>	<u>ELVidge</u>	<u>Garbage</u>	<u>FULL</u>	<u>y</u>
<u>11:00</u>	<u>"</u>	<u>"</u>	<u>1/2</u>	<u>y</u>

TOTAL COUNT OF HOUSEHOLD USERS: 25

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

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

☐ Lansdowne
☐ Lyndhurst
☐ Escott

WASTE DISPOSAL SITE

DAILY INSPECTION FORM

DATE: DEC 1/2022 TIME: 09:00 STAFF: AL BUNT / STEVE ALLEN

DEFICIENCIES OBSERVED:**Description / Location**

Ponded Water: Yes / No

Windblown Litter: Yes / No

Leachate Springs: Yes / No

Animals: Yes / No

Other: Yes / ~~No~~

BIRDS, RACCOONS

RECOMMENDED ACTIONS / ACTIONS TAKEN:

Entrance cleaned of debris and area around corrugated cardboard raked

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 53

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No

DETAILS: SEE ABOVE

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes ☐ No ☒

If Yes, complaint file number(s) and topic: _____

SIGNATURE [Signature] Print Staff Name: ALAN BUNT

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne
☒ Lyndhurst
☐ Escott

DATE: Dec 3/22 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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

TYPE

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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:

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) and topic:

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: Reviewer: File Number:



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Dec 5/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: Dec 15/22

mixed / occ / paper

DATES BINS WERE PICKED UP: 1 / 1

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 69

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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DATE: Dec/7/22 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:

RECYCLING: TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Dec/7/22 mixed / occ

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:45	ELvidga	Garbage Rec	Full	Y
10:20	"	"	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 44

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Dec 8/22 TIME: 8:20 STAFF: John Stafford

DEFICIENCIES OBSERVED:

Ponded Water:

Yes / No

☒ Yes ☐ No

Windblown Litter:

Yes / No

☒ Yes ☐ No

Leachate Springs:

Yes / No

☒ Yes ☐ No

Animals:

Yes / No

☒ Yes ☐ No

Other:

Yes / No

☒ Yes ☐ No

Description / Location

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

DATE BINS WERE ORDERED:

1 / 1

TYPE

DATES BINS WERE PICKED UP:

Dec 8/22

paper

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
11:00	Mattice	garbage Rec	FULL	✓

TOTAL COUNT OF HOUSEHOLD USERS: _____

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

IF NO: Waste Sent To: _____

LITTER CONTROL: ☒ Yes ☐ No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: ☒ Yes ☐ No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: ☒ Yes ☐ No

DETAILS: _____

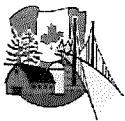
COMPLAINTS RECEIVED: ☒ Yes ☐ No

If Yes, complaint file number(s) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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DATE: Dec 10/22 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:

RECYCLING:

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

TYPE

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 121

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Dec 12/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: Dec 12/22

DATES BINS WERE PICKED UP: 1 / 1

mixed / paper

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

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: No

IF NO: Waste Sent To: _____

LITTER CONTROL: No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: No

DETAILS: _____

COMPLAINTS RECEIVED: No

If Yes, complaint file number(s) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____

DATE: Dec 14/22 TIME: 8:20 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:

RECYCLING: TYPE

DATE BINS WERE ORDERED: Dec 14/22 occ

DATES BINS WERE PICKED UP: Dec 13/22 mixed

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:30	EL vidge	Garbage Rec	Full	✓
9:55	"	"	1/2	✓

TOTAL COUNT OF HOUSEHOLD USERS: 56

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Dec/15/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: Dec/15/22 OK

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
10:00	matTice	garbage Rec	Full	Y

TOTAL COUNT OF HOUSEHOLD USERS: 64

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

IF NO: Waste Sent To: _____

LITTER CONTROL: Yes / No

DETAILS: _____

APPLICATION OF DUST SUPPRESSANT: Yes / No

DETAILS: _____

DAILY INSPECTION FORM COMPLETED: X Yes / No

DETAILS: _____

COMPLAINTS RECEIVED: Yes / No

If Yes, complaint file number(s) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Dec 17/22 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

Everything covered in snow

RECOMMENDED ACTIONS / ACTIONS TAKEN:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: 1 / 1

DATES BINS WERE PICKED UP: Dec 16/22

paper

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 91

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



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**WASTE DISPOSAL SITE
DAILY INSPECTION FORM**

DATE: Dec 19/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: Dec 19/22

mixed / occ / paper

DATES BINS WERE PICKED UP: 1 / 1

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 46

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne

☒ Lyndhurst

☐ Escott

WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Dec 21/22 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:

RECYCLING: TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Dec 20/22 mixed

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:35	ELridge	Garbage	FULL	Y
10:05	"	"	1/2	Y

TOTAL COUNT OF HOUSEHOLD USERS: 65

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne
☒ Lyndhurst
☐ Escott

WASTE DISPOSAL SITE
DAILY INSPECTION FORM

DATE: Dec 22/22 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:

RECYCLING: TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 74

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne

☒ Lyndhurst

☐ Escott

DATE: Dec 28/22 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:

RECYCLING:

DATE BINS WERE ORDERED: Dec 28/22

TYPE

mixed

DATES BINS WERE PICKED UP: / /

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)
9:20	ELMidge	Garbage Rec	Full	✓
10:20	"	"	1/4	✓

TOTAL COUNT OF HOUSEHOLD USERS: 74

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____

DATE: Dec 29/22 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:

RECYCLING:

TYPE

DATE BINS WERE ORDERED: / /

DATES BINS WERE PICKED UP: Dec/29/22

REJECTED LOADS:

TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

COMMERCIAL HAULER OR LARGE LOADS

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

TOTAL COUNT OF HOUSEHOLD USERS: 99

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE [Signature] Print Staff Name: John Stoddard

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____



☐ Lansdowne

☒ Lyndhurst

☐ Escott

DATE: Dec 31/22 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:

RECYCLING:	TYPE
DATE BINS WERE ORDERED: <u> / / </u>	
DATES BINS WERE PICKED UP: <u> / / </u>	

REJECTED LOADS:		
TIME	HAULER NAME	REASON FOR REJECTION

OTHER COMMENTS / OBSERVATIONS

Closed at 12:05

COMMERCIAL HAULER OR LARGE LOADS				
Time	Hauler	Material	Quantity (estimate volume & weight)	Visual Check (Yes/No)

TOTAL COUNT OF HOUSEHOLD USERS: 68

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

IF NO: Waste Sent To: _____

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) and topic: _____

SIGNATURE John Stafford Print Staff Name: John Stafford

OFFICE USE:

Date Reviewed: _____ Reviewer: _____ File Number: _____

Appendix G

Malroz Site Inspection

Brill Hill Site Inspection

Date: May 2/15

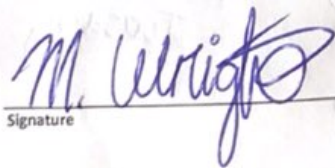
Inspected by: Marking Whight
Weather Conditions: Cloudy (14°C)

Time: 12:15

Inspection Item	Condition	Notes
Signage is displayed per section 2 (2), (3), and (4) of the ECA.	Good	
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?	Yes	lots of litter along roadway. attendant report people dumping after lunch.
Is litter present at the site? Has a schedule been set for removal if present.	Yes lots.	attendant reports new people have been hired and will hopefully be doing cleanup.
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).	Ponded water near curb/2c	
Are surfacewater features obstructed?	NO	
Are there seeps present?	NO	
What is the location of the active fill area?	Same as 2021 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	
Were buildings on site monitored for methane gas, as per 8(1) of the ECA?	yes	Attendant Shed Vapour Monitoring: Hex: NR ME: PID: NR

General Comments



Signature

Briar Hill Site Inspection

Date: 2022/11/24

Inspected by: RV

Weather Conditions: 50°

Time: 15:00

Inspection Item	condition	notes
Signage is displayed per section 2 (2), (3), and (4) of the ECA.		
Was a site attendant present?		
Were any hazardous or liquid wastes observed being disposed of at the site?		
Are recycling materials being placed in the appropriate bins?		
Were vermin, vectors, dust or litter present?		
Is litter present at the site? Has a schedule been set for removal if present.		Litter along fence at southern property line.
Are brush and clean wood segregated from other wastes?.		
Are wastes burned at the site?		
Is interim cover being applied to the site?		For 2-3 weeks by various contractors. TLIF put RFP out for new contractor.
Is the property locked outside of posted hours?		
Drainage conditions (e.g. ponded water).		None
Are surfacewater features obstructed?		
Are there seeps present?		
What is the location of the active fill area?		Similar to last year, will be mapped during survey

Appendix H

Laboratory Certificates of Analysis

C.O.C.: G101075

REPORT No. B22-12534 (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: 02-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 11-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W001	22-W003	22-W004	22-W008
			Sample I.D.		B22-12534-1	B22-12534-2	B22-12534-3	B22-12534-4
			Date Collected		02-May-22	02-May-22	02-May-22	02-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	04-May-22/O	257	533	568	212
pH @25°C	pH Units		SM 4500H	04-May-22/O	7.96	7.49	7.63	7.98
Conductivity @25°C	µmho/cm	1	SM 2510B	04-May-22/O	542	1190	1230	470
Chloride	mg/L	0.5	SM4110C	04-May-22/O	5.4	71.8	71.0	5.6
Nitrite (N)	mg/L	0.05	SM4110C	04-May-22/O	< 0.05	< 0.05	< 0.05	< 0.05
Nitrate (N)	mg/L	0.05	SM4110C	04-May-22/O	< 0.05	< 0.05	< 0.05	< 0.05
Sulphate	mg/L	1	SM4110C	04-May-22/O	42	46	44	41
BOD(5 day)	mg/L	3	SM 5210B	04-May-22/K	< 3	< 3	< 3	< 3
Total Suspended Solids	mg/L	3	SM2540D	05-May-22/K	16	15400	88000	5
Phosphorus-Total	mg/L	0.01	E3516.2	04-May-22/K	0.03	5.02	12.4	0.09
Total Kjeldahl Nitrogen	mg/L	0.1	E3516.2	04-May-22/K	0.2	2.1	1.1	0.1
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	05-May-22/K	0.03	1.13	0.05	0.05
Total Dissolved Solids	mg/L	3	SM 2540D	05-May-22/O	281	640	664	243
Dissolved Organic Carbon	mg/L	0.2	EPA 415.2	04-May-22/O	3.2	3.8	3.6	2.1
Phenolics	mg/L	0.001	MOEE 3179	05-May-22/K	< 0.001	< 0.001	< 0.001	< 0.001
COD	mg/L	5	SM5220C	05-May-22/K	< 5	27	54	< 5
Hardness (as CaCO3)	mg/L	1	SM 3120	05-May-22/O	300	590	642	256
Aluminum	mg/L	0.01	SM 3120	05-May-22/O	0.05	0.08	0.07	0.04
Arsenic	mg/L	0.0001	EPA 200.8	09-May-22/O	< 0.0001	0.0010	0.0017	0.0005
Barium	mg/L	0.001	SM 3120	05-May-22/O	0.258	0.471	0.389	0.128
Boron	mg/L	0.005	SM 3120	05-May-22/O	0.046	0.267	0.250	0.065
Cadmium	mg/L	0.000015	EPA 200.8	09-May-22/O	< 0.000015	< 0.000015	< 0.000015	< 0.000015
Calcium	mg/L	0.02	SM 3120	05-May-22/O	76.7	151	141	57.0
Chromium	mg/L	0.001	EPA 200.8	09-May-22/O	< 0.001	< 0.001	< 0.001	< 0.001
Cobalt	mg/L	0.0001	EPA 200.8	09-May-22/O	< 0.0001	0.0005	0.0001	< 0.0001
Copper	mg/L	0.0001	EPA 200.8	09-May-22/O	0.0001	0.0002	0.0001	0.0025
Iron	mg/L	0.005	SM 3120	05-May-22/O	0.913	2.08	2.26	0.137

M. Dubien

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.: G101075

REPORT No. B22-12534 (i)

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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: 02-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 11-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W001	22-W003	22-W004	22-W008
			Sample I.D.		B22-12534-1	B22-12534-2	B22-12534-3	B22-12534-4
			Date Collected		02-May-22	02-May-22	02-May-22	02-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Lead	mg/L	0.00002	EPA 200.8	09-May-22/O	< 0.00002	0.00007	0.00005	0.00007
Magnesium	mg/L	0.02	SM 3120	05-May-22/O	26.4	51.8	70.4	27.7
Manganese	mg/L	0.001	SM 3120	05-May-22/O	0.042	0.217	0.044	0.014
Mercury	mg/L	0.00002	SM 3112 B	09-May-22/O	< 0.00002	< 0.00002	< 0.00002	< 0.00002
Potassium	mg/L	0.1	SM 3120	05-May-22/O	1.4	9.3	3.4	1.8
Silver	mg/L	0.0001	EPA 200.8	09-May-22/O	< 0.0001	< 0.0001	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	05-May-22/O	7.7	46.4	43.1	6.8
Strontium	mg/L	0.001	SM 3120	05-May-22/O	0.562	0.574	0.833	0.462
Uranium	mg/L	0.00005	EPA 200.8	10-May-22/O	< 0.00005	0.00276	0.00006	0.00057
Vanadium	mg/L	0.0001	EPA 200.8	09-May-22/O	< 0.0001	< 0.0001	0.0002	< 0.0001
Zinc	mg/L	0.005	SM 3120	05-May-22/O	< 0.005	< 0.005	< 0.005	< 0.005

M. Dubien

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Lab Manager

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Attention: Mallory Wright

Caduceon Environmental Laboratories

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Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 02-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 11-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W009	22-W010	22-W011	22-W012
			Sample I.D.		B22-12534-5	B22-12534-6	B22-12534-7	B22-12534-8
			Date Collected		02-May-22	02-May-22	02-May-22	02-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	04-May-22/O	213	247	247	723
pH @25°C	pH Units		SM 4500H	04-May-22/O	7.99	8.01	7.94	7.31
Conductivity @25°C	µmho/cm	1	SM 2510B	04-May-22/O	443	466	444	2010
Chloride	mg/L	0.5	SM4110C	04-May-22/O	5.8	1.3	0.8	210
Nitrite (N)	mg/L	0.05	SM4110C	04-May-22/O	< 0.05	< 0.05	< 0.05	< 0.05
Nitrate (N)	mg/L	0.05	SM4110C	04-May-22/O	3.26	< 0.05	0.24	12.9
Sulphate	mg/L	1	SM4110C	04-May-22/O	14	18	4	63
BOD(5 day)	mg/L	3	SM 5210B	04-May-22/K	< 3	< 3	< 3	< 3
Total Suspended Solids	mg/L	3	SM2540D	05-May-22/K	5280	5100	1740	6
Phosphorus-Total	mg/L	0.01	E3516.2	04-May-22/K	2.71	2.55	0.65	0.07
Total Kjeldahl Nitrogen	mg/L	0.1	E3516.2	04-May-22/K	1.2	0.2	0.1	1.4
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	05-May-22/K	< 0.01	0.01	< 0.01	0.13
Total Dissolved Solids	mg/L	3	SM 2540D	05-May-22/O	229	241	229	1110
Dissolved Organic Carbon	mg/L	0.2	EPA 415.2	04-May-22/O	1.3	1.5	1.5	4.3
Phenolics	mg/L	0.001	MOEE 3179	05-May-22/K	< 0.001	< 0.001	< 0.001	< 0.001
COD	mg/L	5	SM5220C	05-May-22/K	< 5	< 5	< 5	21
Hardness (as CaCO3)	mg/L	1	SM 3120	05-May-22/O	252	268	257	802
Aluminum	mg/L	0.01	SM 3120	05-May-22/O	0.22	0.06	0.04	0.10
Arsenic	mg/L	0.0001	EPA 200.8	09-May-22/O	0.0002	0.0003	< 0.0001	0.0003
Barium	mg/L	0.001	SM 3120	05-May-22/O	0.281	0.164	0.478	0.256
Boron	mg/L	0.005	SM 3120	05-May-22/O	0.019	0.006	0.010	0.271
Cadmium	mg/L	0.000015	EPA 200.8	09-May-22/O	< 0.000015	< 0.000015	< 0.000015	< 0.000029
Calcium	mg/L	0.02	SM 3120	05-May-22/O	61.8	59.1	66.3	248
Chromium	mg/L	0.001	EPA 200.8	09-May-22/O	0.001	0.001	< 0.001	< 0.001
Cobalt	mg/L	0.0001	EPA 200.8	09-May-22/O	0.0004	0.0002	< 0.0001	0.0008
Copper	mg/L	0.0001	EPA 200.8	09-May-22/O	0.0012	0.0005	0.0004	0.0095
Iron	mg/L	0.005	SM 3120	05-May-22/O	0.299	0.105	< 0.005	0.009

M. Dubien

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Michelle Dubien
Lab Manager

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Caduceon Environmental Laboratories

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Fax: 613-544-2770

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JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 11-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W009	22-W010	22-W011	22-W012
			Sample I.D.		B22-12534-5	B22-12534-6	B22-12534-7	B22-12534-8
			Date Collected		02-May-22	02-May-22	02-May-22	02-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Lead	mg/L	0.00002	EPA 200.8	09-May-22/O	0.00030	0.00006	< 0.00002	0.00021
Magnesium	mg/L	0.02	SM 3120	05-May-22/O	23.8	29.3	22.3	44.2
Manganese	mg/L	0.001	SM 3120	05-May-22/O	0.019	0.020	< 0.001	0.257
Mercury	mg/L	0.00002	SM 3112 B	09-May-22/O	< 0.00002	< 0.00002	< 0.00002	< 0.00002
Potassium	mg/L	0.1	SM 3120	05-May-22/O	1.2	1.6	1.1	33.0
Silver	mg/L	0.0001	EPA 200.8	09-May-22/O	< 0.0001	< 0.0001	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	05-May-22/O	3.6	4.9	1.5	158
Strontium	mg/L	0.001	SM 3120	05-May-22/O	0.120	0.140	0.080	0.592
Uranium	mg/L	0.00005	EPA 200.8	10-May-22/O	0.00065	0.00147	0.00030	0.00101
Vanadium	mg/L	0.0001	EPA 200.8	09-May-22/O	0.0011	0.0003	0.0001	< 0.0004
Zinc	mg/L	0.005	SM 3120	05-May-22/O	< 0.005	< 0.005	< 0.005	0.005

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P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W013	22-W014	22-W015	22-W016
			Sample I.D.		B22-12534-9	B22-12534-10	B22-12534-11	B22-12534-12
			Date Collected		02-May-22	02-May-22	02-May-22	02-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	04-May-22/O	301	481	365	317
pH @25°C	pH Units		SM 4500H	04-May-22/O	7.58	7.61	7.87	7.84
Conductivity @25°C	µmho/cm	1	SM 2510B	04-May-22/O	856	1250	783	696
Chloride	mg/L	0.5	SM4110C	04-May-22/O	63.3	129	17.5	20.3
Nitrite (N)	mg/L	0.05	SM4110C	04-May-22/O	< 0.05	< 0.05	< 0.05	< 0.05
Nitrate (N)	mg/L	0.05	SM4110C	04-May-22/O	0.08	1.24	6.07	< 0.05
Sulphate	mg/L	1	SM4110C	04-May-22/O	68	20	34	45
BOD(5 day)	mg/L	3	SM 5210B	04-May-22/K	< 3	< 3	< 3	< 3
Total Suspended Solids	mg/L	3	SM2540D	05-May-22/K	220	62200	93000	4200
Phosphorus-Total	mg/L	0.01	E3516.2	04-May-22/K	0.16	8.45	25.2	1.16
Total Kjeldahl Nitrogen	mg/L	0.1	E3516.2	04-May-22/K	2.1	2.2	1.8	0.2
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	05-May-22/K	1.81	0.01	0.02	0.01
Total Dissolved Solids	mg/L	3	SM 2540D	05-May-22/O	452	677	411	362
Dissolved Organic Carbon	mg/L	0.2	EPA 415.2	04-May-22/O	3.1	1.6	3.8	2.2
Phenolics	mg/L	0.001	MOEE 3179	05-May-22/K	< 0.001	< 0.001	< 0.001	< 0.001
COD	mg/L	5	SM5220C	05-May-22/K	< 5	112	196	6
Hardness (as CaCO3)	mg/L	1	SM 3120	05-May-22/O	345	532	428	375
Aluminum	mg/L	0.01	SM 3120	05-May-22/O	0.05	0.08	0.06	0.06
Arsenic	mg/L	0.0001	EPA 200.8	09-May-22/O	0.0002	< 0.0001	0.0002	< 0.0001
Barium	mg/L	0.001	SM 3120	05-May-22/O	0.296	0.942	0.324	0.335
Boron	mg/L	0.005	SM 3120	05-May-22/O	0.168	0.093	0.031	0.044
Cadmium	mg/L	0.000015	EPA 200.8	09-May-22/O	0.000039	< 0.000015	< 0.000015	< 0.000015
Calcium	mg/L	0.02	SM 3120	05-May-22/O	100	149	102	93.2
Chromium	mg/L	0.001	EPA 200.8	09-May-22/O	< 0.001	< 0.001	< 0.001	< 0.001
Cobalt	mg/L	0.0001	EPA 200.8	09-May-22/O	0.0052	0.0003	0.0002	0.0002
Copper	mg/L	0.0001	EPA 200.8	09-May-22/O	0.0018	0.0012	0.0036	0.0010

M. Dubien

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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Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 02-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 11-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W013	22-W014	22-W015	22-W016
			Sample I.D.		B22-12534-9	B22-12534-10	B22-12534-11	B22-12534-12
			Date Collected		02-May-22	02-May-22	02-May-22	02-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Iron	mg/L	0.005	SM 3120	05-May-22/O	0.514	< 0.005	< 0.005	0.012
Lead	mg/L	0.00002	EPA 200.8	09-May-22/O	< 0.00002	0.00005	0.00011	0.00002
Magnesium	mg/L	0.02	SM 3120	05-May-22/O	23.2	38.8	42.1	34.5
Manganese	mg/L	0.001	SM 3120	05-May-22/O	0.382	0.006	0.006	0.106
Mercury	mg/L	0.00002	SM 3112 B	09-May-22/O	< 0.00002	< 0.00002	< 0.00002	< 0.00002
Potassium	mg/L	0.1	SM 3120	05-May-22/O	14.0	3.0	8.6	2.1
Silver	mg/L	0.0001	EPA 200.8	09-May-22/O	< 0.0001	< 0.0001	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	05-May-22/O	50.0	81.9	8.6	12.0
Strontium	mg/L	0.001	SM 3120	05-May-22/O	0.321	0.351	0.202	0.346
Uranium	mg/L	0.00005	EPA 200.8	10-May-22/O	0.00045	0.00056	0.00235	0.00051
Vanadium	mg/L	0.0001	EPA 200.8	09-May-22/O	< 0.0001	0.0003	0.0007	0.0002
Zinc	mg/L	0.005	SM 3120	05-May-22/O	< 0.005	< 0.005	< 0.005	< 0.005

M. Dubien

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.: G101075

REPORT No. B22-12534 (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
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P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W001	22-W003	22-W004	22-W008
			Sample I.D.		B22-12534-1	B22-12534-2	B22-12534-3	B22-12534-4
			Date Collected		02-May-22	02-May-22	02-May-22	02-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Acetone	µg/L	30	EPA 8260	04-May-22/R	< 30	< 30	< 30	< 30
Benzene	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Bromobenzene	µg/L	0.4	EPA 8260	04-May-22/R	< 0.4	< 0.4	< 0.4	< 0.4
Bromodichloromethane	µg/L	2	EPA 8260	04-May-22/R	< 2	< 2	< 2	< 2
Bromoform	µg/L	5	EPA 8260	04-May-22/R	< 5	< 5	< 5	< 5
Bromomethane	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Carbon Tetrachloride	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Chloroethane	µg/L	3	EPA 8260	04-May-22/R	< 3	< 3	< 3	< 3
Chloroform	µg/L	1	EPA 8260	04-May-22/R	< 1	< 1	< 1	< 1
Chloromethane	µg/L	2	EPA 8260	04-May-22/R	< 2	< 2	< 2	< 2
Chlorotoluene,2-	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Chlorotoluene,4-	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	04-May-22/R	< 0.6	< 0.6	< 0.6	< 0.6
Dibromochloromethane	µg/L	2	EPA 8260	04-May-22/R	< 2	< 2	< 2	< 2
Dibromoethane,1,2-(Ethylene Dibromide)	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Dibromomethane	µg/L	0.1	EPA 8260	04-May-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Dichlorobenzene,1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,3-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,4-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichlorodifluoromethane	µg/L	2	EPA 8260	04-May-22/R	< 2	< 2	< 2	< 2
Dichloroethane,1,1-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethane,1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethylene,1,1-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5

M. Dubien

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Michelle Dubien
Lab Manager

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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: 02-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 11-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W001	22-W003	22-W004	22-W008
			Sample I.D.		B22-12534-1	B22-12534-2	B22-12534-3	B22-12534-4
			Date Collected		02-May-22	02-May-22	02-May-22	02-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	04-May-22/R	< 5	< 5	< 5	< 5
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Ethylbenzene	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Hexachlorobutadiene	µg/L	0.6	EPA 8260	04-May-22/R	< 0.6	< 0.6	< 0.6	< 0.6
Hexane	µg/L	5	EPA 8260	04-May-22/R	< 5	< 5	< 5	< 5
Isopropylbenzene	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Methyl Butyl Ketone	µg/L	5	EPA 8260	04-May-22/R	< 5	< 5	< 5	< 5
Methyl Ethyl Ketone	µg/L	20	EPA 8260	04-May-22/R	< 20	< 20	< 20	< 20
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	04-May-22/R	< 20	< 20	< 20	< 20
Methyl-t-butyl Ether	µg/L	2	EPA 8260	04-May-22/R	< 2	< 2	< 2	< 2
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Naphthalene	µg/L	0.4	EPA 8260	04-May-22/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Butylbenzene	µg/L	0.4	EPA 8260	04-May-22/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Propylbenzene	µg/L	0.1	EPA 8260	04-May-22/R	< 0.1	< 0.1	< 0.1	< 0.1
sec-Butylbenzene	µg/L	0.1	EPA 8260	04-May-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Styrene	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
tert-Butylbenzene	µg/L	0.1	EPA 8260	04-May-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5

M. Dubien

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Michelle Dubien
Lab Manager

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DATE RECEIVED: 02-May-22

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P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W001	22-W003	22-W004	22-W008
			Sample I.D.		B22-12534-1	B22-12534-2	B22-12534-3	B22-12534-4
			Date Collected		02-May-22	02-May-22	02-May-22	02-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Tetrachloroethane,1,1,2,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,3-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,4-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,1-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	04-May-22/R	< 5	< 5	< 5	< 5
Trichloropropane,1,2,3-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trimethylbenzene,1,2,4-	µg/L	1	EPA 8260	04-May-22/R	< 1	< 1	< 1	< 1
Trimethylbenzene,1,3,5-	µg/L	0.1	EPA 8260	04-May-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	04-May-22/R	< 1.0	< 1.0	< 1.0	< 1.0
Xylene, m,p,o-	µg/L	1.1	EPA 8260	04-May-22/R	< 1.1	< 1.1	< 1.1	< 1.1
Xylene, o-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5

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SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W009	22-W010	22-W011	22-W012
			Sample I.D.	B22-12534-5	B22-12534-6	B22-12534-7	B22-12534-8
			Date Collected	02-May-22	02-May-22	02-May-22	02-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Acetone	µg/L	30	EPA 8260	04-May-22/R	< 30	< 30	< 30
Benzene	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Bromobenzene	µg/L	0.4	EPA 8260	04-May-22/R	< 0.4	< 0.4	< 0.4
Bromodichloromethane	µg/L	2	EPA 8260	04-May-22/R	< 2	< 2	< 2
Bromoform	µg/L	5	EPA 8260	04-May-22/R	< 5	< 5	< 5
Bromomethane	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Carbon Tetrachloride	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2
Chloroethane	µg/L	3	EPA 8260	04-May-22/R	< 3	< 3	< 3
Chloroform	µg/L	1	EPA 8260	04-May-22/R	< 1	< 1	< 1
Chloromethane	µg/L	2	EPA 8260	04-May-22/R	< 2	< 2	< 2
Chlorotoluene,2-	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2
Chlorotoluene,4-	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	04-May-22/R	< 0.6	< 0.6	< 0.6
Dibromochloromethane	µg/L	2	EPA 8260	04-May-22/R	< 2	< 2	< 2
Dibromoethane,1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2
Dibromomethane	µg/L	0.1	EPA 8260	04-May-22/R	< 0.1	< 0.1	< 0.1
Dichlorobenzene,1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,3-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,4-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Dichlorodifluoromethane	µg/L	2	EPA 8260	04-May-22/R	< 2	< 2	< 2
Dichloroethane,1,1-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Dichloroethane,1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Dichloroethylene,1,1-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5

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			Sample I.D.		B22-12534-5	B22-12534-6	B22-12534-7	B22-12534-8
			Date Collected		02-May-22	02-May-22	02-May-22	02-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	04-May-22/R	< 5	< 5	< 5	< 5
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Ethylbenzene	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Hexachlorobutadiene	µg/L	0.6	EPA 8260	04-May-22/R	< 0.6	< 0.6	< 0.6	< 0.6
Hexane	µg/L	5	EPA 8260	04-May-22/R	< 5	< 5	< 5	< 5
Isopropylbenzene	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Methyl Butyl Ketone	µg/L	5	EPA 8260	04-May-22/R	< 5	< 5	< 5	< 5
Methyl Ethyl Ketone	µg/L	20	EPA 8260	04-May-22/R	< 20	< 20	< 20	< 20
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	04-May-22/R	< 20	< 20	< 20	< 20
Methyl-t-butyl Ether	µg/L	2	EPA 8260	04-May-22/R	< 2	< 2	< 2	< 2
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Naphthalene	µg/L	0.4	EPA 8260	04-May-22/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Butylbenzene	µg/L	0.4	EPA 8260	04-May-22/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Propylbenzene	µg/L	0.1	EPA 8260	04-May-22/R	< 0.1	< 0.1	< 0.1	< 0.1
sec-Butylbenzene	µg/L	0.1	EPA 8260	04-May-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Styrene	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
tert-Butylbenzene	µg/L	0.1	EPA 8260	04-May-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5

M. Dubien

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.: G101075

REPORT No. B22-12534 (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: 02-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 11-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W009	22-W010	22-W011	22-W012
			Sample I.D.		B22-12534-5	B22-12534-6	B22-12534-7	B22-12534-8
			Date Collected		02-May-22	02-May-22	02-May-22	02-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Tetrachloroethane,1,1,2,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,3-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,4-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,1-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	04-May-22/R	< 5	< 5	< 5	< 5
Trichloropropane,1,2,3-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trimethylbenzene,1,2,4-	µg/L	1	EPA 8260	04-May-22/R	< 1	< 1	< 1	< 1
Trimethylbenzene,1,3,5-	µg/L	0.1	EPA 8260	04-May-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	04-May-22/R	< 1.0	< 1.0	< 1.0	< 1.0
Xylene, m,p,o-	µg/L	1.1	EPA 8260	04-May-22/R	< 1.1	< 1.1	< 1.1	< 1.1
Xylene, o-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5

M. Dubien

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Lab Manager

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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: 02-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 11-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W013	22-W014	22-W015	22-W016
			Sample I.D.	B22-12534-9	B22-12534-10	B22-12534-11	B22-12534-12
			Date Collected	02-May-22	02-May-22	02-May-22	02-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Acetone	µg/L	30	EPA 8260	04-May-22/R	< 30	< 30	< 30
Benzene	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Bromobenzene	µg/L	0.4	EPA 8260	04-May-22/R	< 0.4	< 0.4	< 0.4
Bromodichloromethane	µg/L	2	EPA 8260	04-May-22/R	< 2	< 2	< 2
Bromoform	µg/L	5	EPA 8260	04-May-22/R	< 5	< 5	< 5
Bromomethane	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Carbon Tetrachloride	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2
Chloroethane	µg/L	3	EPA 8260	04-May-22/R	< 3	< 3	< 3
Chloroform	µg/L	1	EPA 8260	04-May-22/R	< 1	< 1	< 1
Chloromethane	µg/L	2	EPA 8260	04-May-22/R	< 2	< 2	< 2
Chlorotoluene, 2-	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2
Chlorotoluene, 4-	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	04-May-22/R	< 0.6	< 0.6	< 0.6
Dibromochloromethane	µg/L	2	EPA 8260	04-May-22/R	< 2	< 2	< 2
Dibromoethane, 1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2
Dibromomethane	µg/L	0.1	EPA 8260	04-May-22/R	< 0.1	< 0.1	< 0.1
Dichlorobenzene, 1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Dichlorobenzene, 1,3-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Dichlorobenzene, 1,4-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Dichlorodifluoromethane	µg/L	2	EPA 8260	04-May-22/R	< 2	< 2	< 2
Dichloroethane, 1,1-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Dichloroethane, 1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Dichloroethylene, 1,1-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5



R.L. = Reporting Limit

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Michelle Dubien
Lab Manager

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C.O.C.: G101075

REPORT No. B22-12534 (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: 02-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 11-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W013	22-W014	22-W015	22-W016
			Sample I.D.	B22-12534-9	B22-12534-10	B22-12534-11	B22-12534-12
			Date Collected	02-May-22	02-May-22	02-May-22	02-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	04-May-22/R	< 5	< 5	< 5
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2
Ethylbenzene	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Hexachlorobutadiene	µg/L	0.6	EPA 8260	04-May-22/R	< 0.6	< 0.6	< 0.6
Hexane	µg/L	5	EPA 8260	04-May-22/R	< 5	< 5	< 5
Isopropylbenzene	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2
Methyl Butyl Ketone	µg/L	5	EPA 8260	04-May-22/R	< 5	< 5	< 5
Methyl Ethyl Ketone	µg/L	20	EPA 8260	04-May-22/R	< 20	< 20	< 20
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	04-May-22/R	< 20	< 20	< 20
Methyl-t-butyl Ether	µg/L	2	EPA 8260	04-May-22/R	< 2	< 2	< 2
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Naphthalene	µg/L	0.4	EPA 8260	04-May-22/R	< 0.4	< 0.4	< 0.4
n-Butylbenzene	µg/L	0.4	EPA 8260	04-May-22/R	< 0.4	< 0.4	< 0.4
n-Propylbenzene	µg/L	0.1	EPA 8260	04-May-22/R	< 0.1	< 0.1	< 0.1
sec-Butylbenzene	µg/L	0.1	EPA 8260	04-May-22/R	< 0.1	< 0.1	< 0.1
Styrene	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
tert-Butylbenzene	µg/L	0.1	EPA 8260	04-May-22/R	< 0.1	< 0.1	< 0.1

M. Dubien

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Michelle Dubien
Lab Manager

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REPORT No. B22-12534 (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: 02-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 11-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W013	22-W014	22-W015	22-W016
			Sample I.D.	B22-12534-9	B22-12534-10	B22-12534-11	B22-12534-12
			Date Collected	02-May-22	02-May-22	02-May-22	02-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Tetrachloroethane,1,1,2,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,3-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,4-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,1-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,2-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	04-May-22/R	< 5	< 5	< 5
Trichloropropane,1,2,3-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5
Trimethylbenzene,1,2,4-	µg/L	1	EPA 8260	04-May-22/R	< 1	< 1	< 1
Trimethylbenzene,1,3,5-	µg/L	0.1	EPA 8260	04-May-22/R	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	04-May-22/R	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	04-May-22/R	< 1.0	< 1.0	< 1.0
Xylene, m,p,o-	µg/L	1.1	EPA 8260	04-May-22/R	< 1.1	< 1.1	< 1.1
Xylene, o-	µg/L	0.5	EPA 8260	04-May-22/R	< 0.5	< 0.5	< 0.5

M. Dubien

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Michelle Dubien
Lab Manager

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GENERAL SAMPLE SUBMISSION FORM



SAMPLES SUBMITTED TO:

Kingston ☒
Ottawa ☒
Richmond Hill ☐
Barrie ☐
London ☐
Windsor ☐

TESTING REQUIREMENTS

O'Reg 153/04 ☐
O'Reg 406/19 ☐
RPI ☐
Coarse ☐
MISA ☐
Other: ☐
Table (1 - 9) ☐
Table (1 - 9.1) ☐
ICC ☐
Medium/Fine ☐
PWQO ☐
Record of Site ☐
SPLP Table (1 - 9.1) ☐
Agricultural ☐
O'Reg 558 TCLP ☐
Landfill Monitoring ☒

REPORT NUMBER (Lab Use)

B22-12534

Are any samples to be submitted intended for Human Consumption under any Drinking Water Regulations?

☐ Yes ☐ No

(If yes, submit all Drinking Water Samples on a Drinking Water Chain of Custody)

Organization: Malvoz	Address: 356 Wellington Street, Kingston	Invoicing Address (if different):	ANALYSES REQUESTED Suspected Highly Contaminated	TURNAROUND SERVICE REQUESTED (see back page) *Must be arranged in advance ☐ Platinum* 200% Surcharge ☐ Gold* 100% Surcharge ☐ Silver 50% Surcharge ☐ Bronze 25% Surcharge ☒ Standard 5-7 days Specific Date:
Contact: Mallory Wright				
Tel: 613 498-5201				
Email: mwright@malvoz.com info@malvoz.com	Quote #: L21-ILTI-Malvoz	Project Name/ID: 1036-Bruar Hill		
Additional Info (email, cell, etc):	P.O. #:	Additional Info:		

* Sample Matrix Legend: WW=Waste Water, SW=Surface Water, GW=Groundwater, LS=Liquid Sludge, SS=Solid Sludge, S=Soil, Sed=Sediment, PC=Paint Chips, F=Filter, Oil=Oil

Lab No.	Sample Source and/or Sample Identification	S.P.L.	Sample Matrix *	Date Collected (yy-mm-dd)	Time Collected	Indicate Test For Each Sample By Using A Check Mark In The Box Provided										X	Field pH	Field Temp.	# Bottles/ Sample	Field Filtered Y/N
1	22-W001		GW	22-05-02	10:00	X											6.93	10.65	9	Y
2	22-W003				09:40	X											7.10	9.93		
3	22-W004				09:50	X											7.04	7.58		
4	22-W008				12:29	X											7.93	10.42		
5	22-W009				11:40	X											7.66	8.78		
6	22-W010				11:55	X											7.61	8.84		
7	22-W011				12:20	X											7.47	10.24		
8	22-W012				13:39	X											6.94	12.36		
9	22-W013				13:50	X											7.07	8.79		
10	22-W014				14:15	Y											6.88	6.95		
11	22-W015				15:00	Y											7.45	7.02		
12	22-W016				15:10	X											7.56	7.70		

SAMPLE SUBMISSION INFORMATION		SHIPPING INFORMATION		REPORTING / INVOICING		SAMPLE RECEIVING INFORMATION (LABORATORY USE ONLY)			
Sampled by:	Submitted by:	Courier (Client account) ☐	Invoice ☐	Report by Fax ☐	Received By (print): B.	Signature:			
Print: Mallory Wright		Courier (Caduceus account) ☐		Report by Email ☒	Date Received (yy-mm-dd): 22-05-02	Time Received: 16:10			
Sign: M. Lee	same	Drop Off ☒	# of Pieces	Invoice by Email ☒	Laboratory Prepared Bottles: ☒ Yes ☐ No				
Date (yy-mm-dd)/Time: 22-05-02 6:05	Date (yy-mm-dd)/Time:	Caduceus (Pick-up) ☐		Invoice by Mail ☐	Sample Temperature °C: 9.2	Labeled by:			

Comments: send Hg, Metach, IC, Alk, ph, cand to Ottawa
send VOC's to R. Hill

Page **1**
G **101075**

QUOTATION FOR ANALYTICAL SERVICES

Quote # :	L21_TLTI_Malroz
Organization:	Malroz
Contact:	Mallory Wright
Telephone:	613-548-3446 ex 30
Facsimile:	
Email:	mwright@malroz.com
Project #:	Briar Hill -1036
Address:	308 Wellington Street Kingston ON
Additional Info:	Please Make Note of Special Reporting Limits- In BOLD text under each parameter section
Additional Info:	Ground Water ODWS/Surface Water PWQO- Replaces L18_TLTI_Malroz
Date:	1-Jan-21
Valid Until: 31-Dec-21	

Item #	Quantity	Analysis Request	Matrix	Unit Cost, \$	Amount, \$
Ground Water					
1	25	GENERAL CHEMISTRY - Alkalinity, Ammonia, BOD, COD, DOC, Conductivity, Hardness, pH, Phenols, TP/TKN, TDS, TSS, Chloride, N02/N03, Sulphate Reporting Instructions (mg/L, with exception of conductivity (µmho/cm) and pH)	Ground Water	98.00	2450.00
1A	25	Metals - Aluminum, Arsenic, Barium, Boron, Cadmium, Calcium, Chromium, Cobalt, Copper, Iron, Lead, Magnesium, Manganese, Mercury, Potassium, Silver, Sodium, Strontium, Uranium, Vanadium, Zinc (mg/L)	Ground water	*	*
2	25	Full VOC List (ug/L) Please see attachment	Ground Water	52.00	1300.00
Surface Water					
3	3	GENERAL CHEMISTRY - Alkalinity, N-Ammonia, Ammonia (UI) BOD, COD, DOC, Conductivity, Hardness, pH, Phenols, TP/TKN, TDS, TSS, Chloride, N02/N03, Sulphate, Total Dissolved Phosphorous - Reporting Instructions (mg/L, with exception of conductivity (µmho/cm) and pH)	Surface water	105.00	315.00
3A	3	METALS - Dissolved Aluminum, Arsenic, Barium, Boron, Cadmium, Calcium, Chromium, Cobalt, Copper, Iron, Lead, Magnesium, Manganese, Dissolved Mercury, Nickel, Potassium, Silver, Sodium, Strontium, Vanadium, Zinc (mg/L)	Surface water	*	*
				Subtotal	4,065.00
				HST	528.45
				Total Cost	4,593.45

Prices do not include shipping unless otherwise stated.

Environmental Surcharge of \$1.50 per sample set - WAIVED

Caduceon Environmental Laboratories

Ottawa

Kingston

Richmond Hill

London

Windsor

L18 TLT Malroz Briar Hill

VOCs	(ug/L)	Acetone, Benzene, Bromobenzene, Bromodichloromethane, 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, 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, total, 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, Naphthalene, n-Butylbenzene, n-Propylbenzene, 1,1,1-Trichloroethane, , 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, 1,1,2-Trichloroethane, Trichloroethylene, Trichlorofluoromethane, 1,2,3-Trichloropropane, 1,2,4-Trimethylbenzene, 1,3,5-Trimethylbenzene, Vinyl chloride, m+p-Xylenes, o-Xylene, Xylenes (Total)
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QUOTATION FOR ANALYTICAL SERVICES

Quote # :	L21_TLTI_Malroz
Organization:	Malroz
Contact:	Mallory Wright
Telephone:	613-548-3446 ex 30
Facsimile:	
Email:	mwright@malroz.com
Project #:	Briar Hill -1036
Address:	308 Wellington Street Kingston ON
Additional Info:	Please Make Note of Special Reporting Limits- In BOLD text under each parameter section
Additional Info:	Ground Water ODWS/Surface Water PWQO- Replaces L18_TLTI_Malroz
Date:	1-Jan-21
Valid Until: 31-Dec-21	

Item #	Quantity	Analysis Request	Matrix	Unit Cost, \$	Amount, \$
Ground Water					
1	25	GENERAL CHEMISTRY - Alkalinity, Ammonia, BOD, COD, DOC, Conductivity, Hardness, pH, Phenols, TP/TKN, TDS, TSS, Chloride, NO2/NO3, Sulphate Reporting Instructions (mg/L, with exception of conductivity (µmho/cm) and pH)	Ground Water	98.00	2450.00
1A	25	Metals - Aluminum, Arsenic, Barium, Boron, Cadmium, Calcium, Chromium, Cobalt, Copper, Iron, Lead, Magnesium, Manganese, Mercury, Potassium, Silver, Sodium, Strontium, Uranium, Vanadium, Zinc (mg/L)	Ground water	*	*
2	25	Full VOC List (ug/L) Please see attachment	Ground Water	52.00	1300.00
Surface Water					
3	3	GENERAL CHEMISTRY - Alkalinity, N-Ammonia, Ammonia (UI) BOD, COD, DOC, Conductivity, Hardness, pH, Phenols, TP/TKN, TDS, TSS, Chloride, NO2/NO3, Sulphate; Total Dissolved Phosphorous - Reporting Instructions (mg/L, with exception of conductivity (µmho/cm) and pH)	Surface water	105.00	315.00
3A	3	METALS - Dissolved Aluminum, Arsenic, Barium, Boron, Cadmium, Calcium, Chromium, Cobalt, Copper, Iron, Lead, Magnesium, Manganese, Dissolved Mercury, Nickel, Potassium, Silver, Sodium, Strontium, Vanadium, Zinc (mg/L)	Surface water	*	*

Prices do not include shipping unless otherwise stated.

Environmental Surcharge of \$1.50 per sample set - WAIVED

Subtotal	4,065.00
HST	528.45
Total Cost	4,593.45

Caduceon Environmental Laboratories

Ottawa

Kingston

Richmond Hill

London

Windsor

C.O.C.: G108753

REPORT No. B22-12542

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: 02-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 10-May-22

P.O. NUMBER:

SAMPLE MATRIX: Surface Water

WATERWORKS NO.

			Client I.D.	22-W005	22-W006	22-W007	
			Sample I.D.	B22-12542-1	B22-12542-2	B22-12542-3	
			Date Collected	02-May-22	02-May-22	02-May-22	
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Alkalinity(CaCO ₃) to pH4.5	mg/L	5	SM 2320B	04-May-22/O	221	220	214
pH @25°C	pH Units		SM 4500H	04-May-22/O	8.15	8.14	8.08
Conductivity @25°C	µmho/cm	1	SM 2510B	04-May-22/O	463	460	448
Chloride	mg/L	0.5	SM4110C	04-May-22/O	9.7	9.7	7.7
Nitrite (N)	mg/L	0.05	SM4110C	04-May-22/O	< 0.05	< 0.05	< 0.05
Nitrate (N)	mg/L	0.05	SM4110C	04-May-22/O	1.68	1.53	1.73
Sulphate	mg/L	1	SM4110C	04-May-22/O	18	17	16
BOD(5 day)	mg/L	3	SM 5210B	04-May-22/K	< 3	< 3	< 3
Total Suspended Solids	mg/L	3	SM2540D	05-May-22/K	< 3	8	5
o-Phosphate (P)	mg/L	0.002	PE4500-S	04-May-22/K	0.201	0.016	0.014
Phosphorus-Total	mg/L	0.01	E3516.2	03-May-22/K	0.03	0.03	0.04
Total Kjeldahl Nitrogen	mg/L	0.1	E3516.2	03-May-22/K	0.6	0.6	0.5
Ammonia (N)-Total	mg/L	0.01	SM4500-NH ₃ -H	04-May-22/K	0.10	0.07	0.03
Ammonia (N)-unionized	mg/L	0.01	CALC	04-May-22/K	< 0.01	< 0.01	< 0.01
Total Dissolved Solids	mg/L	3	SM 2540D	05-May-22/O	239	238	231
Dissolved Organic Carbon	mg/L	0.2	EPA 415.2	04-May-22/O	9.3	7.1	7.8
Phenolics	mg/L	0.001	MOEE 3179	05-May-22/K	< 0.001	< 0.001	< 0.001
COD	mg/L	5	SM5220C	05-May-22/K	< 5	20	12
Hardness (as CaCO ₃)	mg/L	1	SM 3120	06-May-22/O	239	213	225
Aluminum	mg/L	0.01	SM 3120	04-May-22/O	0.04	0.03	0.04
Arsenic	mg/L	0.0001	EPA 200.8	06-May-22/O	0.0002	0.0003	0.0002
Barium	mg/L	0.001	SM 3120	06-May-22/O	0.122	0.112	0.108
Boron	mg/L	0.005	SM 3120	06-May-22/O	0.022	0.020	0.015
Cadmium	mg/L	0.000015	EPA 200.8	06-May-22/O	0.000016	< 0.000015	< 0.000015
Calcium	mg/L	0.02	SM 3120	06-May-22/O	60.3	54.0	56.5
Chromium	mg/L	0.001	EPA 200.8	06-May-22/O	< 0.001	< 0.001	< 0.001
Cobalt	mg/L	0.0001	EPA 200.8	06-May-22/O	0.0003	0.0003	0.0002

M. Dubien

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.: G108753

REPORT No. B22-12542

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: 02-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 10-May-22

P.O. NUMBER:

SAMPLE MATRIX: Surface Water

WATERWORKS NO.

			Client I.D.	22-W005	22-W006	22-W007	
			Sample I.D.	B22-12542-1	B22-12542-2	B22-12542-3	
			Date Collected	02-May-22	02-May-22	02-May-22	
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Copper	mg/L	0.0001	EPA 200.8	06-May-22/O	0.0011	0.0012	0.0016
Iron	mg/L	0.005	SM 3120	06-May-22/O	0.276	0.259	0.347
Lead	mg/L	0.00002	EPA 200.8	06-May-22/O	0.00007	0.00011	0.00011
Magnesium	mg/L	0.02	SM 3120	06-May-22/O	21.4	19.0	20.3
Manganese	mg/L	0.001	SM 3120	06-May-22/O	0.058	0.050	0.048
Mercury	mg/L	0.00002	SM 3112 B	09-May-22/O	< 0.00002	< 0.00002	< 0.00002
Nickel	mg/L	0.01	SM 3120	06-May-22/O	< 0.01	< 0.01	< 0.01
Potassium	mg/L	0.1	SM 3120	06-May-22/O	1.7	1.5	1.3
Silver	mg/L	0.0001	EPA 200.8	06-May-22/O	< 0.0001	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	06-May-22/O	7.0	6.2	5.6
Strontium	mg/L	0.001	SM 3120	06-May-22/O	0.245	0.221	0.228
Vanadium	mg/L	0.0001	EPA 200.8	06-May-22/O	0.0015	0.0016	0.0017
Zinc	mg/L	0.005	SM 3120	06-May-22/O	0.015	0.014	0.013

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Michelle Dubien
Lab Manager

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C.O.C.: G101461

REPORT No. B22-12690 (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: 03-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 12-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W017	22-W018	22-W019	22-W020
			Sample I.D.		B22-12690-1	B22-12690-2	B22-12690-3	B22-12690-4
			Date Collected		03-May-22	03-May-22	03-May-22	03-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	05-May-22/O	413	294	418	507
pH @25°C	pH Units		SM 4500H	05-May-22/O	7.67	7.48	7.36	7.27
Conductivity @25°C	µmho/cm	1	SM 2510B	05-May-22/O	1030	1550	959	1090
Chloride	mg/L	0.5	SM4110C	05-May-22/O	46.7	293	38.9	15.0
Nitrite (N)	mg/L	0.05	SM4110C	04-May-22/O	< 0.05	< 0.05	< 0.05	< 0.05
Nitrate (N)	mg/L	0.05	SM4110C	04-May-22/O	< 0.05	0.52	1.87	4.36
Sulphate	mg/L	1	SM4110C	04-May-22/O	54	13	17	28
BOD(5 day)	mg/L	3	SM 5210B	04-May-22/K	< 3	< 3	< 3	< 3
Total Suspended Solids	mg/L	3	SM2540D	05-May-22/K	< 3	34	3430	14
Phosphorus-Total	mg/L	0.01	E3516.2	04-May-22/K	0.01	0.08	0.26	0.03
Total Kjeldahl Nitrogen	mg/L	0.1	E3516.2	04-May-22/K	1.6	0.1	0.4	0.3
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	05-May-22/K	1.30	< 0.01	< 0.01	< 0.01
Total Dissolved Solids	mg/L	3	SM 2540D	06-May-22/O	552	848	510	582
Dissolved Organic Carbon	mg/L	0.2	EPA 415.2	04-May-22/O	5.3	1.1	2.3	3.4
Phenolics	mg/L	0.001	MOEE 3179	05-May-22/K	< 0.001	< 0.001	< 0.001	< 0.001
COD	mg/L	5	SM5220C	05-May-22/K	< 5	< 5	16	7
Hardness (as CaCO3)	mg/L	1	SM 3120	04-May-22/O	459	503	484	573
Aluminum	mg/L	0.01	SM 3120	04-May-22/O	0.04	0.04	0.04	0.05
Arsenic	mg/L	0.0001	EPA 200.8	10-May-22/O	0.0001	< 0.0001	< 0.0001	< 0.0001
Barium	mg/L	0.001	SM 3120	04-May-22/O	0.174	0.662	0.653	0.599
Boron	mg/L	0.005	SM 3120	04-May-22/O	0.826	0.021	0.023	0.079
Cadmium	mg/L	0.000015	EPA 200.8	10-May-22/O	< 0.000015	< 0.000015	< 0.000015	0.000055
Calcium	mg/L	0.02	SM 3120	04-May-22/O	122	135	134	169
Chromium	mg/L	0.001	EPA 200.8	10-May-22/O	< 0.001	< 0.001	< 0.001	< 0.001
Cobalt	mg/L	0.0001	EPA 200.8	10-May-22/O	0.0002	< 0.0001	< 0.0001	0.0021
Copper	mg/L	0.0001	EPA 200.8	10-May-22/O	0.0013	0.0009	0.0016	0.0023
Iron	mg/L	0.005	SM 3120	04-May-22/O	1.21	< 0.005	< 0.005	< 0.005

M. Dubien

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.: G101461

REPORT No. B22-12690 (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: 03-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 12-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W017	22-W018	22-W019	22-W020
			Sample I.D.		B22-12690-1	B22-12690-2	B22-12690-3	B22-12690-4
			Date Collected		03-May-22	03-May-22	03-May-22	03-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Lead	mg/L	0.00002	EPA 200.8	10-May-22/O	0.00009	0.00005	0.00008	0.00007
Magnesium	mg/L	0.02	SM 3120	04-May-22/O	37.8	40.1	36.3	36.8
Manganese	mg/L	0.001	SM 3120	04-May-22/O	0.176	< 0.001	< 0.001	< 0.001
Mercury	mg/L	0.00002	SM 3112 B	10-May-22/O	< 0.00002	< 0.00002	< 0.00002	< 0.00002
Potassium	mg/L	0.1	SM 3120	04-May-22/O	5.2	3.2	1.4	6.2
Silver	mg/L	0.0001	EPA 200.8	10-May-22/O	< 0.0001	< 0.0001	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	04-May-22/O	42.6	99.4	16.0	10.4
Strontium	mg/L	0.001	SM 3120	04-May-22/O	3.33	0.198	0.182	0.319
Uranium	mg/L	0.00005	EPA 200.8	10-May-22/O	0.00132	0.00065	0.00032	0.00076
Vanadium	mg/L	0.0001	EPA 200.8	10-May-22/O	< 0.0001	< 0.0001	0.0002	0.0002
Zinc	mg/L	0.005	SM 3120	04-May-22/O	< 0.005	< 0.005	< 0.005	< 0.005



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Lab Manager

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Fax: 613-544-2770

DATE RECEIVED: 03-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 12-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W021	22-W022	22-W024	
			Sample I.D.	B22-12690-5	B22-12690-6	B22-12690-7	
			Date Collected	03-May-22	03-May-22	03-May-22	
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Alkalinity(CaCO ₃) to pH4.5	mg/L	5	SM 2320B	05-May-22/O	727	250	198
pH @25°C	pH Units		SM 4500H	05-May-22/O	7.29	7.44	7.43
Conductivity @25°C	µmho/cm	1	SM 2510B	05-May-22/O	1810	950	522
Chloride	mg/L	0.5	SM4110C	05-May-22/O	107	88.4	29.5
Nitrite (N)	mg/L	0.05	SM4110C	04-May-22/O	< 0.05	< 0.05	< 0.05
Nitrate (N)	mg/L	0.05	SM4110C	04-May-22/O	0.10	5.39	0.38
Sulphate	mg/L	1	SM4110C	04-May-22/O	73	78	16
BOD(5 day)	mg/L	3	SM 5210B	04-May-22/K	< 3	< 3	< 3
Total Suspended Solids	mg/L	3	SM2540D	05-May-22/K	15	110	< 3
Phosphorus-Total	mg/L	0.01	E3516.2	04-May-22/K	0.07	0.36	0.02
Total Kjeldahl Nitrogen	mg/L	0.1	E3516.2	04-May-22/K	14.5	0.5	< 0.1
Ammonia (N)-Total	mg/L	0.01	SM4500-NH ₃ -H	05-May-22/K	12.1	0.09	< 0.01
Total Dissolved Solids	mg/L	3	SM 2540D	06-May-22/O	995	505	270
Dissolved Organic Carbon	mg/L	0.2	EPA 415.2	04-May-22/O	9.1	2.0	1.3
Phenolics	mg/L	0.001	MOEE 3179	05-May-22/K	< 0.001	< 0.001	< 0.001
COD	mg/L	5	SM5220C	05-May-22/K	60	25	< 5
Hardness (as CaCO ₃)	mg/L	1	SM 3120	04-May-22/O	727	281	245
Aluminum	mg/L	0.01	SM 3120	04-May-22/O	0.06	0.06	0.02
Arsenic	mg/L	0.0001	EPA 200.8	10-May-22/O	0.0002	0.0005	0.0001
Barium	mg/L	0.001	SM 3120	04-May-22/O	0.119	0.028	0.137
Boron	mg/L	0.005	SM 3120	04-May-22/O	1.19	0.018	0.008
Cadmium	mg/L	0.000015	EPA 200.8	10-May-22/O	< 0.000015	0.000059	< 0.000015
Calcium	mg/L	0.02	SM 3120	04-May-22/O	193	72.4	62.6
Chromium	mg/L	0.001	EPA 200.8	10-May-22/O	0.001	< 0.001	< 0.001
Cobalt	mg/L	0.0001	EPA 200.8	10-May-22/O	0.0006	0.0001	< 0.0001
Copper	mg/L	0.0001	EPA 200.8	10-May-22/O	0.0001	0.0014	0.0002
Iron	mg/L	0.005	SM 3120	04-May-22/O	8.20	0.030	0.006

M. Dubien

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Michelle Dubien
Lab Manager

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REPORT No. B22-12690 (i)

Report To:

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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: 03-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 12-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W021	22-W022	22-W024	
			Sample I.D.	B22-12690-5	B22-12690-6	B22-12690-7	
			Date Collected	03-May-22	03-May-22	03-May-22	
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Lead	mg/L	0.00002	EPA 200.8	10-May-22/O	< 0.00004	0.00010	< 0.00002
Magnesium	mg/L	0.02	SM 3120	04-May-22/O	59.2	24.3	21.4
Manganese	mg/L	0.001	SM 3120	04-May-22/O	0.059	< 0.001	0.003
Mercury	mg/L	0.00002	SM 3112 B	10-May-22/O	< 0.00002	< 0.00002	< 0.00002
Potassium	mg/L	0.1	SM 3120	04-May-22/O	34.7	3.1	1.6
Silver	mg/L	0.0001	EPA 200.8	10-May-22/O	< 0.0001	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	04-May-22/O	101	96.4	9.7
Strontium	mg/L	0.001	SM 3120	04-May-22/O	0.829	0.208	0.137
Uranium	mg/L	0.00005	EPA 200.8	10-May-22/O	0.00047	0.00849	0.00082
Vanadium	mg/L	0.0001	EPA 200.8	10-May-22/O	0.0009	0.0004	0.0005
Zinc	mg/L	0.005	SM 3120	04-May-22/O	< 0.005	< 0.005	< 0.005

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Michelle Dubien
Lab Manager

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C.O.C.: G101461

REPORT No. B22-12690 (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: 03-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 12-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W017	22-W018	22-W019	22-W020
			Sample I.D.	B22-12690-1	B22-12690-2	B22-12690-3	B22-12690-4
			Date Collected	03-May-22	03-May-22	03-May-22	03-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Acetone	µg/L	30	EPA 8260	05-May-22/R	< 30	< 30	< 30
Benzene	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Bromobenzene	µg/L	0.4	EPA 8260	05-May-22/R	< 0.4	< 0.4	< 0.4
Bromodichloromethane	µg/L	2	EPA 8260	05-May-22/R	< 2	< 2	< 2
Bromoform	µg/L	5	EPA 8260	05-May-22/R	< 5	< 5	< 5
Bromomethane	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Carbon Tetrachloride	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2
Chloroethane	µg/L	3	EPA 8260	05-May-22/R	< 3	< 3	< 3
Chloroform	µg/L	1	EPA 8260	05-May-22/R	< 1	< 1	< 1
Chloromethane	µg/L	2	EPA 8260	05-May-22/R	< 2	< 2	< 2
Chlorotoluene,2-	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2
Chlorotoluene,4-	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	05-May-22/R	< 0.6	< 0.6	< 0.6
Dibromochloromethane	µg/L	2	EPA 8260	05-May-22/R	< 2	< 2	< 2
Dibromoethane,1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2
Dibromomethane	µg/L	0.1	EPA 8260	05-May-22/R	< 0.1	< 0.1	< 0.1
Dichlorobenzene,1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,3-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,4-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Dichlorodifluoromethane	µg/L	2	EPA 8260	05-May-22/R	< 2	< 2	< 2
Dichloroethane,1,1-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Dichloroethane,1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Dichloroethylene,1,1-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5

M. Dubien

R.L. = Reporting Limit

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Michelle Dubien
Lab Manager

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REPORT No. B22-12690 (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: 03-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 12-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W017	22-W018	22-W019	22-W020
			Sample I.D.		B22-12690-1	B22-12690-2	B22-12690-3	B22-12690-4
			Date Collected		03-May-22	03-May-22	03-May-22	03-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	05-May-22/R	< 5	< 5	< 5	< 5
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Ethylbenzene	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Hexachlorobutadiene	µg/L	0.6	EPA 8260	05-May-22/R	< 0.6	< 0.6	< 0.6	< 0.6
Hexane	µg/L	5	EPA 8260	05-May-22/R	< 5	< 5	< 5	< 5
Isopropylbenzene	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Methyl Butyl Ketone	µg/L	5	EPA 8260	05-May-22/R	< 5	< 5	< 5	< 5
Methyl Ethyl Ketone	µg/L	20	EPA 8260	05-May-22/R	< 20	< 20	< 20	< 20
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	05-May-22/R	< 20	< 20	< 20	< 20
Methyl-t-butyl Ether	µg/L	2	EPA 8260	05-May-22/R	< 2	< 2	< 2	< 2
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Naphthalene	µg/L	0.4	EPA 8260	05-May-22/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Butylbenzene	µg/L	0.4	EPA 8260	05-May-22/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Propylbenzene	µg/L	0.1	EPA 8260	05-May-22/R	< 0.1	< 0.1	< 0.1	< 0.1
sec-Butylbenzene	µg/L	0.1	EPA 8260	05-May-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Styrene	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
tert-Butylbenzene	µg/L	0.1	EPA 8260	05-May-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5

M. Dubien

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Lab Manager

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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: 03-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 12-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W017	22-W018	22-W019	22-W020
			Sample I.D.		B22-12690-1	B22-12690-2	B22-12690-3	B22-12690-4
			Date Collected		03-May-22	03-May-22	03-May-22	03-May-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Tetrachloroethane,1,1,2,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,3-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,4-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,1-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	05-May-22/R	< 5	< 5	< 5	< 5
Trichloropropane,1,2,3-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trimethylbenzene,1,2,4-	µg/L	1	EPA 8260	05-May-22/R	< 1	< 1	< 1	< 1
Trimethylbenzene,1,3,5-	µg/L	0.1	EPA 8260	05-May-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	05-May-22/R	< 1.0	< 1.0	< 1.0	< 1.0
Xylene, m,p,o-	µg/L	1.1	EPA 8260	05-May-22/R	< 1.1	< 1.1	< 1.1	< 1.1
Xylene, o-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5	< 0.5

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JOB/PROJECT NO.: 1036-Briar Hill

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P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W021	22-W022	22-W024	
			Sample I.D.	B22-12690-5	B22-12690-6	B22-12690-7	
			Date Collected	03-May-22	03-May-22	03-May-22	
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Acetone	µg/L	30	EPA 8260	05-May-22/R	< 30	< 30	< 30
Benzene	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Bromobenzene	µg/L	0.4	EPA 8260	05-May-22/R	< 0.4	< 0.4	< 0.4
Bromodichloromethane	µg/L	2	EPA 8260	05-May-22/R	< 2	< 2	< 2
Bromoform	µg/L	5	EPA 8260	05-May-22/R	< 5	< 5	< 5
Bromomethane	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Carbon Tetrachloride	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2
Chloroethane	µg/L	3	EPA 8260	05-May-22/R	< 3	< 3	< 3
Chloroform	µg/L	1	EPA 8260	05-May-22/R	< 1	< 1	< 1
Chloromethane	µg/L	2	EPA 8260	05-May-22/R	< 2	< 2	< 2
Chlorotoluene,2-	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2
Chlorotoluene,4-	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	05-May-22/R	< 0.6	< 0.6	< 0.6
Dibromochloromethane	µg/L	2	EPA 8260	05-May-22/R	< 2	< 2	< 2
Dibromoethane,1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2
Dibromomethane	µg/L	0.1	EPA 8260	05-May-22/R	< 0.1	< 0.1	< 0.1
Dichlorobenzene,1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,3-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,4-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Dichlorodifluoromethane	µg/L	2	EPA 8260	05-May-22/R	< 2	< 2	< 2
Dichloroethane,1,1-	µg/L	0.5	EPA 8260	05-May-22/R	1.0	< 0.5	< 0.5
Dichloroethane,1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	05-May-22/R	0.7	< 0.5	< 0.5
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Dichloroethylene,1,1-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5

M. Dubien

R.L. = Reporting Limit

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Michelle Dubien
Lab Manager

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Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 03-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 12-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W021	22-W022	22-W024	
			Sample I.D.	B22-12690-5	B22-12690-6	B22-12690-7	
			Date Collected	03-May-22	03-May-22	03-May-22	
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	05-May-22/R	< 5	< 5	< 5
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2
Ethylbenzene	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Hexachlorobutadiene	µg/L	0.6	EPA 8260	05-May-22/R	< 0.6	< 0.6	< 0.6
Hexane	µg/L	5	EPA 8260	05-May-22/R	< 5	< 5	< 5
Isopropylbenzene	µg/L	0.2	EPA 8260	05-May-22/R	0.3	< 0.2	< 0.2
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2
Methyl Butyl Ketone	µg/L	5	EPA 8260	05-May-22/R	< 5	< 5	< 5
Methyl Ethyl Ketone	µg/L	20	EPA 8260	05-May-22/R	< 20	< 20	< 20
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	05-May-22/R	< 20	< 20	< 20
Methyl-t-butyl Ether	µg/L	2	EPA 8260	05-May-22/R	< 2	< 2	< 2
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Naphthalene	µg/L	0.4	EPA 8260	05-May-22/R	< 0.4	< 0.4	< 0.4
n-Butylbenzene	µg/L	0.4	EPA 8260	05-May-22/R	< 0.4	< 0.4	< 0.4
n-Propylbenzene	µg/L	0.1	EPA 8260	05-May-22/R	< 0.1	< 0.1	< 0.1
sec-Butylbenzene	µg/L	0.1	EPA 8260	05-May-22/R	< 0.1	< 0.1	< 0.1
Styrene	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
tert-Butylbenzene	µg/L	0.1	EPA 8260	05-May-22/R	< 0.1	< 0.1	< 0.1
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5

M. Dubien

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Fax: 613-544-2770

DATE RECEIVED: 03-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 12-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W021	22-W022	22-W024	
			Sample I.D.	B22-12690-5	B22-12690-6	B22-12690-7	
			Date Collected	03-May-22	03-May-22	03-May-22	
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Tetrachloroethane,1,1,2,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,3-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,4-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,1-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	05-May-22/R	< 5	< 5	< 5
Trichloropropane,1,2,3-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5
Trimethylbenzene,1,2,4-	µg/L	1	EPA 8260	05-May-22/R	< 1	< 1	< 1
Trimethylbenzene,1,3,5-	µg/L	0.1	EPA 8260	05-May-22/R	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	05-May-22/R	< 1.0	< 1.0	< 1.0
Xylene, m,p,o-	µg/L	1.1	EPA 8260	05-May-22/R	< 1.1	< 1.1	< 1.1
Xylene, o-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5	< 0.5	< 0.5

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CADUCE
ENVIRONMENTAL LABORATORIES
Client committed. Quality assured. Proudly Canadian.

Kingston	☒
Ottawa	☐
Richmond Hill	☐
Barrie	☐
London	☐
Windsor	☐

	Table (1 - 9)		Record of Site
	Table (1 - 9.1)		SPLP Table (1 - 9.1)
	ICC		Agricultural
	Medium/Fine		O'Reg 558 TCLP
	PWQO		Landfill Monitoring

B22-12690

☐ Yes ☒ No (If yes, submit all Drinking Water Samples on a Drinking Water Chain of Custody)

Organization: Malvoz
Contact: Mallory Wright
Tel: 613 998-5221 Fax: _____
Email: mwright@malvoz.com
pyke@malvoz.com
Additional Info (email, cell, etc): _____

Address:	308 Wellington Street, Kingston ON	Invoicing Address (if different):	
Quote #:	121-TTI-Mahoez	Project Name/#:	1036-
P.O. #:		Additional Info:	

Invoicing Address (if different):

TURNAROUND SERVICE

REQUESTED (see back page)

*Must be arranged in advance

☐	Platinum*	200% Surcharge
☐	Gold*	100% Surcharge
☐	Silver	50% Surcharge
☐	Bronze	25% Surcharge
☒	Standard	5-7 days
☐	Specific Date:	

* Sample Matrix Legend: WW=Waste Water, SW=Surface Water, GW=Groundwater, LS=Liquid Sludge, SS=Solid Sludge, S=Soil, Sed=Sediment, PC=Paint Chips, F=Filter, Oil = Oil

Lab No.	Sample Source and/or Sample Identification	S.P.L.	Sample Matrix *	Date Collected (yy-mm-dd)	Time Collected	Indicate Test For Each Sample By Using A Check Mark In The Box Provided												X	Field		# Bottles/ Sample	Field Filtered Y/N
						pH	Temp.															
1	22-W017		GW	22-05-23	09:05	X											7.16	10.09	9	Y		
2	22-W018		↓	↓	09:20	X											7.25	9.60	↓	↓		
3	22-W019				09:45	X											7.16	9.66				
4	22-W020				10:10	X											7.09	10.64				
5	22-W021				10:10	X											6.73	9.98				
6	22-W022				11:15	X											7.98	12.50				
7	22-W023				11:45	X											7.98	10.86				

[illegible]

E7

SAMPLE RECEIVING INFORMATION (LABORATORY USE ONLY)

Sampled by:		Submitted by:
Print:	Malloy Wright	Same
Sign:	M. Wright	
	22-05-03 13:20	
Date (vv-mm-dd)/Time:		Date (vv-mm-dd)/Time:

Courier (Client account)	☐
Courier (Caduceon account)	☐
Drop Off	☒
Caduceon (Pick-up)	☐

Invoice	Report by Fax	☐
	Report by Email	☒
# of Pieces	Invoice by Email	☒
	Invoice by Mail	☐

Received By (print):		Signature:	
Date Received (yy-mm-dd):	22-5-3	Time Received:	13:28
Laboratory Prepared Bottles:	☒ Yes	☐ No	
Sample Temperature °C:	10.8	Labeled by:	KSW

Comments:

2 x Voc.

7 sets = gen chem, 250, nutri, metals, Hg, Doc, phenols,

Page	1	of	1
G	101461		

QUOTATION FOR ANALYTICAL SERVICES

Quote # :	L21_TLTI_Malroz
Organization:	Malroz
Contact:	Mallory Wright
Telephone:	613-548-3446 ex 30
Facsimile:	
Email:	mwright@malroz.com
Project #:	Briar Hill -1036
Address:	308 Wellington Street Kingston ON
Additional Info:	Please Make Note of Special Reporting Limits- In BOLD text under each parameter section
Additional Info:	Ground Water ODWS/Surface Water PWQO- Replaces L18_TLTI_Malroz
Date:	1-Jan-21 Valid Until: 31-Dec-21

Item #	Quantity	Analysis Request	Matrix	Unit Cost, \$	Amount, \$
Ground Water					
1	25	GENERAL CHEMISTRY - Alkalinity, Ammonia, BOD, COD, DOC, Conductivity, Hardness, pH, Phenols, TP/TKN, TDS, TSS, Chloride, NO2/NO3, Sulphate Reporting Instructions (mg/L, with exception of conductivity (µmho/cm) and pH)	Ground Water	98.00	2450.00
1A	25	Metals - Aluminum, Arsenic, Barium, Boron, Cadmium, Calcium, Chromium, Cobalt, Copper, Iron, Lead, Magnesium, Manganese, Mercury, Potassium, Silver, Sodium, Strontium, Uranium, Vanadium, Zinc (mg/L)	Ground water	*	*
2	25	Full VOC List (ug/L) Please see attachment	Ground Water	52.00	1300.00
Surface Water					
3	3	GENERAL CHEMISTRY - Alkalinity, N-Ammonia, Ammonia (UI) BOD, COD, DOC, Conductivity, Hardness, pH, Phenols, TP/TKN, TDS, TSS, Chloride, NO2/NO3, Sulphate, Total Dissolved Phosphorous - Reporting Instructions (mg/L, with exception of conductivity (µmho/cm) and pH)	Surface water	105.00	315.00
3A	3	METALS - Dissolved Aluminum, Arsenic, Barium, Boron, Cadmium, Calcium, Chromium, Cobalt, Copper, Iron, Lead, Magnesium, Manganese, Dissolved Mercury, Nickel, Potassium, Silver, Sodium, Strontium, Vanadium, Zinc (mg/L)	Surface water	*	*

Prices do not include shipping unless otherwise stated.

Environmental Surcharge of \$1.50 per sample set - WAIVED

Subtotal	4,065.00
HST	528.45
Total Cost	4,593.45

Caduceon Environmental Laboratories

Ottawa

Kingston

Richmond Hill

London

Windsor

L18 TLTl Malroz Briar Hill

VOCs	(ug/L)	Acetone, Benzene, Bromobenzene, Bromodichloromethane, 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, 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, total, 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, Naphthalene, n-Butylbenzene, n-Propylbenzene, 1,1,1-Trichloroethane, , 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, 1,1,2-Trichloroethane, Trichloroethylene, Trichlorofluoromethane, 1,2,3-Trichloropropane, 1,2,4-Trimethylbenzene, 1,3,5-Trimethylbenzene, Vinyl chloride, m+p-Xylenes, o-Xylene, Xylenes (Total)
-------------	---------------	---

C.O.C.: G101074

REPORT No. B22-12693 (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: 03-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 11-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W023			
			Sample I.D.	B22-12693-1			
			Date Collected	03-May-22			
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Alkalinity(CaCO ₃) to pH4.5	mg/L	5	SM 2320B	04-May-22/O	218		
pH @25°C	pH Units		SM 4500H	04-May-22/O	8.09		
Conductivity @25°C	µmho/cm	1	SM 2510B	04-May-22/O	1250		
Chloride	mg/L	0.5	SM4110C	04-May-22/O	156		
Nitrite (N)	mg/L	0.05	SM4110C	04-May-22/O	< 0.05		
Nitrate (N)	mg/L	0.05	SM4110C	04-May-22/O	< 0.05		
Sulphate	mg/L	1	SM4110C	04-May-22/O	165		
BOD(5 day)	mg/L	3	SM 5210B	04-May-22/K	< 3		
Total Suspended Solids	mg/L	3	SM2540D	05-May-22/K	< 3		
Phosphorus-Total	mg/L	0.01	E3516.2	04-May-22/K	0.01		
Total Kjeldahl Nitrogen	mg/L	0.1	E3516.2	04-May-22/K	0.1		
Ammonia (N)-Total	mg/L	0.01	SM4500-NH ₃ -H	05-May-22/K	< 0.01		
Total Dissolved Solids	mg/L	3	SM 2540D	05-May-22/O	673		
Dissolved Organic Carbon	mg/L	0.2	EPA 415.2	04-May-22/O	1.2		
Phenolics	mg/L	0.001	MOEE 3179	05-May-22/K	< 0.001		
COD	mg/L	5	SM5220C	09-May-22/K	7		
Hardness (as CaCO ₃)	mg/L	1	SM 3120	05-May-22/O	1		
Aluminum	mg/L	0.01	SM 3120	05-May-22/O	< 0.01		
Arsenic	mg/L	0.0001	EPA 200.8	09-May-22/O	< 0.0001		
Barium	mg/L	0.001	SM 3120	05-May-22/O	< 0.001		
Boron	mg/L	0.005	SM 3120	05-May-22/O	0.402		
Cadmium	mg/L	0.000015	EPA 200.8	09-May-22/O	< 0.000015		
Calcium	mg/L	0.02	SM 3120	05-May-22/O	0.41		
Chromium	mg/L	0.001	EPA 200.8	09-May-22/O	< 0.001		
Cobalt	mg/L	0.0001	EPA 200.8	09-May-22/O	< 0.0001		
Copper	mg/L	0.0001	EPA 200.8	09-May-22/O	0.0004		
Iron	mg/L	0.005	SM 3120	05-May-22/O	0.026		

M. Dubien

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.: G101074

REPORT No. B22-12693 (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: 03-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 11-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W023			
			Sample I.D.	B22-12693-1			
			Date Collected	03-May-22			
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Lead	mg/L	0.00002	EPA 200.8	09-May-22/O	0.00006		
Magnesium	mg/L	0.02	SM 3120	05-May-22/O	0.06		
Manganese	mg/L	0.001	SM 3120	05-May-22/O	< 0.001		
Mercury	mg/L	0.00002	SM 3112 B	09-May-22/O	< 0.00002		
Potassium	mg/L	0.1	SM 3120	05-May-22/O	0.3		
Silver	mg/L	0.0001	EPA 200.8	09-May-22/O	< 0.0001		
Sodium	mg/L	0.2	SM 3120	05-May-22/O	304		
Strontium	mg/L	0.001	SM 3120	05-May-22/O	0.012		
Uranium	mg/L	0.00005	EPA 200.8	10-May-22/O	0.00007		
Vanadium	mg/L	0.0001	EPA 200.8	09-May-22/O	< 0.0001		
Zinc	mg/L	0.005	SM 3120	05-May-22/O	< 0.005		



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Michelle Dubien
Lab Manager

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C.O.C.: G101074

REPORT No. B22-12693 (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: 03-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 11-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W023			
			Sample I.D.	B22-12693-1			
			Date Collected	03-May-22			
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Acetone	µg/L	30	EPA 8260	05-May-22/R	< 30		
Benzene	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Bromobenzene	µg/L	0.4	EPA 8260	05-May-22/R	< 0.4		
Bromodichloromethane	µg/L	2	EPA 8260	05-May-22/R	< 2		
Bromoform	µg/L	5	EPA 8260	05-May-22/R	< 5		
Bromomethane	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Carbon Tetrachloride	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2		
Chloroethane	µg/L	3	EPA 8260	05-May-22/R	< 3		
Chloroform	µg/L	1	EPA 8260	05-May-22/R	< 1		
Chloromethane	µg/L	2	EPA 8260	05-May-22/R	< 2		
Chlorotoluene,2-	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2		
Chlorotoluene,4-	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2		
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	05-May-22/R	< 0.6		
Dibromochloromethane	µg/L	2	EPA 8260	05-May-22/R	< 2		
Dibromoethane,1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2		
Dibromomethane	µg/L	0.1	EPA 8260	05-May-22/R	< 0.1		
Dichlorobenzene,1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Dichlorobenzene,1,3-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Dichlorobenzene,1,4-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Dichlorodifluoromethane	µg/L	2	EPA 8260	05-May-22/R	< 2		
Dichloroethane,1,1-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Dichloroethane,1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Dichloroethylene,1,1-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		

M. Dubien

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.: G101074

REPORT No. B22-12693 (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: 03-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 11-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W023			
			Sample I.D.	B22-12693-1			
			Date Collected	03-May-22			
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	05-May-22/R	< 5		
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2		
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2		
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2		
Ethylbenzene	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Hexachlorobutadiene	µg/L	0.6	EPA 8260	05-May-22/R	< 0.6		
Hexane	µg/L	5	EPA 8260	05-May-22/R	< 5		
Isopropylbenzene	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2		
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2		
Methyl Butyl Ketone	µg/L	5	EPA 8260	05-May-22/R	< 5		
Methyl Ethyl Ketone	µg/L	20	EPA 8260	05-May-22/R	< 20		
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	05-May-22/R	< 20		
Methyl-t-butyl Ether	µg/L	2	EPA 8260	05-May-22/R	< 2		
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Naphthalene	µg/L	0.4	EPA 8260	05-May-22/R	< 0.4		
n-Butylbenzene	µg/L	0.4	EPA 8260	05-May-22/R	< 0.4		
n-Propylbenzene	µg/L	0.1	EPA 8260	05-May-22/R	< 0.1		
sec-Butylbenzene	µg/L	0.1	EPA 8260	05-May-22/R	< 0.1		
Styrene	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
tert-Butylbenzene	µg/L	0.1	EPA 8260	05-May-22/R	< 0.1		
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		

M. Dubien

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Michelle Dubien
Lab Manager

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C.O.C.: G101074

REPORT No. B22-12693 (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: 03-May-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 11-May-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W023			
			Sample I.D.	B22-12693-1			
			Date Collected	03-May-22			
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Tetrachloroethane,1,1,2,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Tetrachloroethylene	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Toluene	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Trichlorobenzene,1,2,3-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Trichlorobenzene,1,2,4-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Trichloroethane,1,1,1-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Trichloroethane,1,1,2-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Trichloroethylene	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Trichlorofluoromethane	µg/L	5	EPA 8260	05-May-22/R	< 5		
Trichloropropane,1,2,3-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		
Trimethylbenzene,1,2,4-	µg/L	1	EPA 8260	05-May-22/R	< 1		
Trimethylbenzene,1,3,5-	µg/L	0.1	EPA 8260	05-May-22/R	< 0.1		
Vinyl Chloride	µg/L	0.2	EPA 8260	05-May-22/R	< 0.2		
Xylene, m,p-	µg/L	1.0	EPA 8260	05-May-22/R	< 1.0		
Xylene, m,p,o-	µg/L	1.1	EPA 8260	05-May-22/R	< 1.1		
Xylene, o-	µg/L	0.5	EPA 8260	05-May-22/R	< 0.5		

M. Dubien

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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CADUCE **N**
ENVIRONMENTAL LABORATORIES
Client committed. Quality assured. Proudly Canadian.

SAMPLES SUBMITTED TO:		TESTING REQUIREMENTS				REPORT NUMBER (Lab Use)	
Kingston	☒	☐	O'Reg 153/04	☐	Table (1 - 9)	☐	Record of Site
Ottawa	☐	☐	O'Reg 406/19	☐	Table (1 - 9.1)	☐	SPLP Table (1 - 9.1)
Richmond Hill	☐	☐	RPI	☐	ICC	☐	Agricultural
Barrie	☐	☐	Coarse	☐	Medium/Fine	☐	O'Reg 558 TCPL
London	☐	☐	MISA	☐	PWQO	☒	Landfill Monitoring
Windsor	☐	☐	Other:				

B22-12693

Are any samples to be submitted intended for Human Consumption under any Drinking Water Regulations?

☐ Yes ☒ No (If yes, submit all Drinking Water Samples on a Drinking Water Chain of Custody)

Organization: Matroz	Address: 3088 Wellington Street Kingston ON	Invoicing Address (if different):	ANALYSES REQUESTED												TURNAROUND SERVICE REQUESTED (see back page) *Must be arranged in advance		
Contact: Mallory Wright			As per Quote													Suspected Highly Contaminated	☐ Platinum* 200% Surcharge
Tel: 613 498-5221 Fax:																	☐ Gold* 100% Surcharge
Email: mwright@matroz.com pyke@matroz.com	Quote #: L21-TIT1-matroz	Project Name/#: 1636-Brian Hill															☐ Silver 50% Surcharge
Additional Info (email, cell, etc):	P.O. #:	Additional Info:															☒ Bronze 25% Surcharge
																	☒ Standard 5-7 days
																	☐ Specific Date: _____

* Sample Matrix Legend: WW=Waste Water, SW=Surface Water, GW=Groundwater, LS=Liquid Sludge, SS=Solid Sludge, S=Soil, Sed=Sediment, PC=Paint Chips, F=Filter, Oil = Oil

[illegible]

SAMPLE SUBMISSION INFORMATION		SHIPPING INFORMATION		REPORTING / INVOICING		SAMPLE RECEIVING INFORMATION (LABORATORY USE ONLY)						
Sampled by:		Submitted by:		Courier (Client account)	☐	Invoice	Report by Fax	☐	Received By (print):	Signature:		
Print:	Mallory Wright	Courier (Caduceon account)		☐			Report by Email	☒	Date Received (yy-mm-dd):	22-5-3	Time Received:	13:28
Sign:	m.wright	Drop Off		☒	# of Pieces		Invoice by Email	☒	Laboratory Prepared Bottles:	☒ Yes	☐ No	
Date (yy-mm-dd)/Time:		Date (yy-mm-dd)/Time:		Caduceon (Pick-up)	☐		Invoice by Mail	☐	Sample Temperature °C:	10.8	Labeled by:	

Comments:

gen chem, 250ml, metal, nutr, Hg, phenol, 2x VOC, 1 Doc

Page		of	
G	101074		

QUOTATION FOR ANALYTICAL SERVICES

Quote # :	L21_TLTI_Malroz
Organization:	Malroz
Contact:	Mallory Wright
Telephone:	613-548-3446 ex 30
Facsimile:	
Email:	mwright@malroz.com
Project #:	Briar Hill -1036
Address:	308 Wellington Street Kingston ON
Additional Info:	Please Make Note of Special Reporting Limits- In BOLD text under each parameter section
Additional Info:	Ground Water ODWS/Surface Water PWQO- Replaces L18_TLTI_Malroz
Date:	1-Jan-21
Valid Until: 31-Dec-21	

Item #	Quantity	Analysis Request	Matrix	Unit Cost, \$	Amount, \$
Ground Water					
1	25	GENERAL CHEMISTRY - Alkalinity, Ammonia, BOD, COD, DOC, Conductivity, Hardness, pH, Phenols, TP/TKN, TDS, TSS, Chloride, NO2/NO3, Sulphate Reporting Instructions (mg/L, with exception of conductivity (µmho/cm) and pH)	Ground Water	98.00	2450.00
1A	25	Metals - Aluminum, Arsenic, Barium, Boron, Cadmium, Calcium, Chromium, Cobalt, Copper, Iron, Lead, Magnesium, Manganese, Mercury, Potassium, Silver, Sodium, Strontium, Uranium, Vanadium, Zinc (mg/L)	Ground water	*	*
2	25	Full VOC List (ug/L) Please see attachment	Ground Water	52.00	1300.00
Surface Water					
3	3	GENERAL CHEMISTRY - Alkalinity, N-Ammonia, Ammonia (UI) BOD, COD, DOC, Conductivity, Hardness, pH, Phenols, TP/TKN, TDS, TSS, Chloride, NO2/NO3, Sulphate, Total Dissolved Phosphorous - Reporting Instructions (mg/L, with exception of conductivity (µmho/cm) and pH)	Surface water	105.00	315.00
3A	3	METALS - Dissolved Aluminum, Arsenic, Barium, Boron, Cadmium, Calcium, Chromium, Cobalt, Copper, Iron, Lead, Magnesium, Manganese, Dissolved Mercury, Nickel, Potassium, Silver, Sodium, Strontium, Vanadium, Zinc (mg/L)	Surface water	*	*
				Subtotal	4,065.00
				HST	528.45
				Total Cost	4,593.45

Prices do not include shipping unless otherwise stated.

Environmental Surcharge of \$1.50 per sample set - WAIVED

Caduceon Environmental Laboratories

Ottawa

Kingston

Richmond Hill

London

Windsor

L18 TLTI Malroz Briar Hill

VOCs	(ug/L)	Acetone, Benzene, Bromobenzene, Bromodichloromethane, 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, 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, total, 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, Naphthalene, n-Butylbenzene, n-Propylbenzene, 1,1,1-Trichloroethane, , 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, 1,1,2-Trichloroethane, Trichloroethylene, Trichlorofluoromethane, 1,2,3-Trichloropropane, 1,2,4-Trimethylbenzene, 1,3,5-Trimethylbenzene, Vinyl chloride, m+p-Xylenes, o-Xylene, Xylenes (Total)
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MALROZ ENGINEERING INC. (Kingston)
ATTN: Mallory Wright
308 Wellington Street, 2nd floor
Kingston ON K7K 7A8

Date Received: 04-MAY-22
Report Date: 09-MAY-22 13:03 (MT)
Version: FINAL

Client Phone: 613-548-3446

Certificate of Analysis

Lab Work Order #: L2703381
Project P.O. #: NOT SUBMITTED
Job Reference: 1036
C of C Numbers:
Legal Site Desc:

Costas Farassoglou
Account Manager

[This report shall not be reproduced except in full without the written authority of the Laboratory.]

ADDRESS: 190 Colonnade Road, Unit 7, Ottawa, ON K2E 7J5 Canada | Phone: +1 613 225 8279 | Fax: +1 613 225 2801
ALS CANADA LTD Part of the ALS Group An ALS Limited Company

ALS ENVIRONMENTAL ANALYTICAL REPORT

Sample Details/Parameters		Result	Qualifier*	D.L.	Units	Extracted	Analyzed	Batch
L2703381-1 22- W001 Sampled By: CLIENT on 02-MAY-22 @ 10:00 Matrix: WATER								
Perfluorinated Compounds								
Perfluorobutane sulfonic acid (PFBS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorohexane sulfonic acid (PFHxS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorooctane sulfonic acid (PFOS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoroheptane sulfonic acid (PFHpS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorodecane sulfonic acid (PFDS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorobutanoic acid (PFBA)		<0.10		0.10	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorodecanoic acid (PFDA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorododecanoic acid (PFDoDA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoroheptanoic acid (PFHpA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorohexanoic acid (PFHxA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorononanoic acid (PFNA)		0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorooctanoic acid (PFOA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoropentanoic acid (PFPeA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoroundecanoic acid (PFUnDA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Surrogate: C8-PFOS		99.0		50-150	%	05-MAY-22	05-MAY-22	R5774646
L2703381-2 22- W002 Sampled By: CLIENT on 02-MAY-22 @ 10:00 Matrix: WATER								
Perfluorinated Compounds								
Perfluorobutane sulfonic acid (PFBS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorohexane sulfonic acid (PFHxS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorooctane sulfonic acid (PFOS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoroheptane sulfonic acid (PFHpS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorodecane sulfonic acid (PFDS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorobutanoic acid (PFBA)		<0.10		0.10	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorodecanoic acid (PFDA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorododecanoic acid (PFDoDA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoroheptanoic acid (PFHpA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorohexanoic acid (PFHxA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorononanoic acid (PFNA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorooctanoic acid (PFOA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoropentanoic acid (PFPeA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoroundecanoic acid (PFUnDA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Surrogate: C8-PFOS		90.0		50-150	%	05-MAY-22	05-MAY-22	R5774646
L2703381-3 22- W008 Sampled By: CLIENT on 02-MAY-22 @ 12:29 Matrix: WATER								
Perfluorinated Compounds								
Perfluorobutane sulfonic acid (PFBS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorohexane sulfonic acid (PFHxS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorooctane sulfonic acid (PFOS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoroheptane sulfonic acid (PFHpS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646

* Refer to Referenced Information for Qualifiers (if any) and Methodology.

ALS ENVIRONMENTAL ANALYTICAL REPORT

Sample Details/Parameters		Result	Qualifier*	D.L.	Units	Extracted	Analyzed	Batch
L2703381-3 22- W008 Sampled By: CLIENT on 02-MAY-22 @ 12:29 Matrix: WATER								
Perfluorinated Compounds								
Perfluorodecane sulfonic acid (PFDS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorobutanoic acid (PFBA)		<0.10		0.10	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorodecanoic acid (PFDA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorododecanoic acid (PFDoDA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoroheptanoic acid (PFHpA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorohexanoic acid (PFHxA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorononanoic acid (PFNA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorooctanoic acid (PFOA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoropentanoic acid (PFPeA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoroundecanoic acid (PFUnDA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Surrogate: C8-PFOS		94.0		50-150	%	05-MAY-22	05-MAY-22	R5774646
L2703381-4 22- W012 Sampled By: CLIENT on 02-MAY-22 @ 13:39 Matrix: WATER								
Perfluorinated Compounds								
Perfluorobutane sulfonic acid (PFBS)		0.028		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorohexane sulfonic acid (PFHxS)		0.036		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorooctane sulfonic acid (PFOS)		0.020		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoroheptane sulfonic acid (PFHpS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorodecane sulfonic acid (PFDS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorobutanoic acid (PFBA)		<0.10		0.10	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorodecanoic acid (PFDA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorododecanoic acid (PFDoDA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoroheptanoic acid (PFHpA)		0.048		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorohexanoic acid (PFHxA)		0.224		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorononanoic acid (PFNA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorooctanoic acid (PFOA)		0.100		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoropentanoic acid (PFPeA)		0.212		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoroundecanoic acid (PFUnDA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Surrogate: C8-PFOS		92.0		50-150	%	05-MAY-22	05-MAY-22	R5774646
L2703381-5 22- W023 Sampled By: CLIENT on 03-MAY-22 @ 12:23 Matrix: WATER								
Perfluorinated Compounds								
Perfluorobutane sulfonic acid (PFBS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorohexane sulfonic acid (PFHxS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorooctane sulfonic acid (PFOS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoroheptane sulfonic acid (PFHpS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorodecane sulfonic acid (PFDS)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorobutanoic acid (PFBA)		<0.10		0.10	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorodecanoic acid (PFDA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorododecanoic acid (PFDoDA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646

* Refer to Referenced Information for Qualifiers (if any) and Methodology.

ALS ENVIRONMENTAL ANALYTICAL REPORT

Sample Details/Parameters		Result	Qualifier*	D.L.	Units	Extracted	Analyzed	Batch
L2703381-5	22- W023							
Sampled By:	CLIENT on 03-MAY-22 @ 12:23							
Matrix:	WATER							
Perfluorinated Compounds								
Perfluoroheptanoic acid (PFHpA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorohexanoic acid (PFHxA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorononanoic acid (PFNA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluorooctanoic acid (PFOA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoropentanoic acid (PFPeA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Perfluoroundecanoic acid (PFUnDA)		<0.010		0.010	ug/L	05-MAY-22	05-MAY-22	R5774646
Surrogate: C8-PFOS		94.0		50-150	%	05-MAY-22	05-MAY-22	R5774646

* Refer to Referenced Information for Qualifiers (if any) and Methodology.

QC Samples with Qualifiers & Comments:

QC Type Description	Parameter	Qualifier	Applies to Sample Number(s)
Duplicate	Perfluorooctanoic acid (PFOA)	DUP-H	L2703381-1, -2, -3, -4, -5
Matrix Spike	Perfluorohexane sulfonic acid (PFHxS	MS-B	L2703381-1, -2, -3, -4, -5
Matrix Spike	Perfluorohexanoic acid (PFHxA)	MS-B	L2703381-1, -2, -3, -4, -5
Matrix Spike	Perfluorooctane sulfonic acid (PFOS)	MS-B	L2703381-1, -2, -3, -4, -5
Matrix Spike	Perfluoropentanoic acid (PFPeA)	MS-B	L2703381-1, -2, -3, -4, -5

Sample Parameter Qualifier key listed:

Qualifier	Description
DUP-H	Duplicate results outside ALS DQO, due to sample heterogeneity.
MS-B	Matrix Spike recovery could not be accurately calculated due to high analyte background in sample.

Test Method References:

ALS Test Code	Matrix	Test Description	Method Reference**
PFAS-DI-EX-LCMS-WT	Water	PFC's by Direct Injection LC/MS-MS	MOECC E3533 and E3457
An aliquot of water is analyzed for PFCs by direct injection LC/MS/MS			

** ALS test methods may incorporate modifications from specified reference methods to improve performance.

The last two letters of the above test code(s) indicate the laboratory that performed analytical analysis for that test. Refer to the list below:

Laboratory Definition Code	Laboratory Location
WT	ALS ENVIRONMENTAL - WATERLOO, ONTARIO, CANADA

Chain of Custody Numbers:

GLOSSARY OF REPORT TERMS
Surrogates are compounds that are similar in behaviour to target analyte(s), but that do not normally occur in environmental samples. For applicable tests, surrogates are added to samples prior to analysis as a check on recovery. In reports that display the D.L. column, laboratory objectives for surrogates are listed there.
mg/kg - milligrams per kilogram based on dry weight of sample
mg/kg ww_wt - milligrams per kilogram based on wet weight of sample
mg/kg l_wt - milligrams per kilogram based on lipid weight of sample
mg/L - unit of concentration based on volume, parts per million.
< - Less than.
D.L. - The reporting limit.
N/A - Result not available. Refer to qualifier code and definition for explanation.

Test results reported relate only to the samples as received by the laboratory.
UNLESS OTHERWISE STATED, ALL SAMPLES WERE RECEIVED IN ACCEPTABLE CONDITION.
Analytical results in unsigned test reports with the DRAFT watermark are subject to change, pending final QC review.

Test	Matrix	Reference	Result	Qualifier	Units	RPD	Limit	Analyzed
PFAS-DI-EX-LCMS-WT		Water						
Batch	R5774646							
WG3723762-3		DUP	WG3723762-5					
Perfluorobutane sulfonic acid (PFBS)		0.144	0.152		ug/L	5.4	20	05-MAY-22
Perfluorohexane sulfonic acid (PFHxS)		1.09	1.06		ug/L	3.0	20	05-MAY-22
Perfluoroheptane sulfonic acid (PFHpS)		0.024	0.024		ug/L	0.0	20	05-MAY-22
Perfluorooctane sulfonic acid (PFOS)		0.672	0.692		ug/L	2.9	20	05-MAY-22
Perfluorodecane sulfonic acid (PFDS)		<0.010	<0.010	RPD-NA	ug/L	N/A	20	05-MAY-22
Perfluorobutanoic acid (PFBA)		0.18	0.18		ug/L	0.0	20	05-MAY-22
Perfluoropentanoic acid (PFPeA)		0.852	0.828		ug/L	2.9	20	05-MAY-22
Perfluorohexanoic acid (PFHxA)		0.632	0.662		ug/L	4.6	20	05-MAY-22
Perfluoroheptanoic acid (PFHpA)		0.118	0.126		ug/L	6.6	20	05-MAY-22
Perfluorooctanoic acid (PFOA)		0.124	0.154	DUP-H	ug/L	22	20	05-MAY-22
Perfluorononanoic acid (PFNA)		<0.010	<0.010	RPD-NA	ug/L	N/A	20	05-MAY-22
Perfluorodecanoic acid (PFDA)		<0.010	<0.010	RPD-NA	ug/L	N/A	20	05-MAY-22
Perfluoroundecanoic acid (PFUnDA)		<0.010	<0.010	RPD-NA	ug/L	N/A	20	05-MAY-22
Perfluorododecanoic acid (PFDoDA)		<0.010	<0.010	RPD-NA	ug/L	N/A	20	05-MAY-22
WG3723762-2		LCS						
Perfluorobutane sulfonic acid (PFBS)			84.7		%		50-150	05-MAY-22
Perfluorohexane sulfonic acid (PFHxS)			102.0		%		50-150	05-MAY-22
Perfluoroheptane sulfonic acid (PFHpS)			103.3		%		50-150	05-MAY-22
Perfluorooctane sulfonic acid (PFOS)			108.7		%		50-150	05-MAY-22
Perfluorodecane sulfonic acid (PFDS)			99.3		%		50-150	05-MAY-22
Perfluorobutanoic acid (PFBA)			91.0		%		50-150	05-MAY-22
Perfluoropentanoic acid (PFPeA)			112.7		%		50-150	05-MAY-22
Perfluorohexanoic acid (PFHxA)			114.0		%		50-150	05-MAY-22
Perfluoroheptanoic acid (PFHpA)			108.0		%		50-150	05-MAY-22
Perfluorooctanoic acid (PFOA)			96.7		%		50-150	05-MAY-22
Perfluorononanoic acid (PFNA)			110.7		%		50-150	05-MAY-22
Perfluorodecanoic acid (PFDA)			108.7		%		50-150	05-MAY-22
Perfluoroundecanoic acid (PFUnDA)			104.0		%		50-150	05-MAY-22
Perfluorododecanoic acid (PFDoDA)			120.7		%		50-150	05-MAY-22
WG3723762-1		MB						
Perfluorobutane sulfonic acid (PFBS)			<0.010		ug/L		0.01	05-MAY-22
Perfluorohexane sulfonic acid (PFHxS)			<0.010		ug/L		0.01	05-MAY-22
Perfluoroheptane sulfonic acid (PFHpS)			<0.010		ug/L		0.01	05-MAY-22
							0.01	



Quality Control Report

Workorder: L2703381

Report Date: 09-MAY-22

Page 2 of 3

Client: MALROZ ENGINEERING INC. (Kingston)
308 Wellington Street, 2nd floor
Kingston ON K7K 7A8

Contact: Mallory Wright

Test	Matrix	Reference	Result	Qualifier	Units	RPD	Limit	Analyzed
PFAS-DI-EX-LCMS-WT Water								
Batch R5774646								
WG3723762-1 MB								
			Perfluorooctane sulfonic acid (PFOS)		<0.010	ug/L	0.01	05-MAY-22
			Perfluorodecane sulfonic acid (PFDS)		<0.010	ug/L	0.01	05-MAY-22
			Perfluorobutanoic acid (PFBA)		<0.10	ug/L	0.1	05-MAY-22
			Perfluoropentanoic acid (PFPeA)		<0.010	ug/L	0.01	05-MAY-22
			Perfluorohexanoic acid (PFHxA)		<0.010	ug/L	0.01	05-MAY-22
			Perfluoroheptanoic acid (PFHpA)		<0.010	ug/L	0.01	05-MAY-22
			Perfluorooctanoic acid (PFOA)		<0.010	ug/L	0.01	05-MAY-22
			Perfluorononanoic acid (PFNA)		<0.010	ug/L	0.01	05-MAY-22
			Perfluorodecanoic acid (PFDA)		<0.010	ug/L	0.01	05-MAY-22
			Perfluoroundecanoic acid (PFUnDA)		<0.010	ug/L	0.01	05-MAY-22
			Perfluorododecanoic acid (PFDODA)		<0.010	ug/L	0.01	05-MAY-22
			Surrogate: C8-PFOS		96.0	%	50-150	05-MAY-22
WG3723762-4 MS WG3723762-5								
			Perfluorobutane sulfonic acid (PFBS)		82.0	%	50-150	05-MAY-22
			Perfluorohexane sulfonic acid (PFHxS)	MS-B	N/A	%	-	05-MAY-22
			Perfluoroheptane sulfonic acid (PFHpS)		95.3	%	50-150	05-MAY-22
			Perfluorooctane sulfonic acid (PFOS)	MS-B	N/A	%	-	05-MAY-22
			Perfluorodecane sulfonic acid (PFDS)		76.7	%	50-150	05-MAY-22
			Perfluorobutanoic acid (PFBA)		86.0	%	50-150	05-MAY-22
			Perfluoropentanoic acid (PFPeA)	MS-B	N/A	%	-	05-MAY-22
			Perfluorohexanoic acid (PFHxA)	MS-B	N/A	%	-	05-MAY-22
			Perfluoroheptanoic acid (PFHpA)		106.7	%	50-150	05-MAY-22
			Perfluorooctanoic acid (PFOA)		101.3	%	50-150	05-MAY-22
			Perfluorononanoic acid (PFNA)		97.3	%	50-150	05-MAY-22
			Perfluorodecanoic acid (PFDA)		96.7	%	50-150	05-MAY-22
			Perfluoroundecanoic acid (PFUnDA)		95.3	%	50-150	05-MAY-22
			Perfluorododecanoic acid (PFDODA)		109.3	%	50-150	05-MAY-22

Quality Control Report

Workorder: L2703381

Report Date: 09-MAY-22

Client: MALROZ ENGINEERING INC. (Kingston)
308 Wellington Street, 2nd floor
Kingston ON K7K 7A8

Page 3 of 3

Contact: Mallory Wright

Legend:

Limit	ALS Control Limit (Data Quality Objectives)
DUP	Duplicate
RPD	Relative Percent Difference
N/A	Not Available
LCS	Laboratory Control Sample
SRM	Standard Reference Material
MS	Matrix Spike
MSD	Matrix Spike Duplicate
ADE	Average Desorption Efficiency
MB	Method Blank
IRM	Internal Reference Material
CRM	Certified Reference Material
CCV	Continuing Calibration Verification
CVS	Calibration Verification Standard
LCSD	Laboratory Control Sample Duplicate

Sample Parameter Qualifier Definitions:

Qualifier	Description
DUP-H	Duplicate results outside ALS DQO, due to sample heterogeneity.
MS-B	Matrix Spike recovery could not be accurately calculated due to high analyte background in sample.
RPD-NA	Relative Percent Difference Not Available due to result(s) being less than detection limit.

Hold Time Exceedances:

All test results reported with this submission were conducted within ALS recommended hold times.

ALS recommended hold times may vary by province. They are assigned to meet known provincial and/or federal government requirements. In the absence of regulatory hold times, ALS establishes recommendations based on guidelines published by the US EPA, APHA Standard Methods, or Environment Canada (where available). For more information, please contact ALS.

The ALS Quality Control Report is provided to ALS clients upon request. ALS includes comprehensive QC checks with every analysis to ensure our high standards of quality are met. Each QC result has a known or expected target value, which is compared against pre-determined data quality objectives to provide confidence in the accuracy of associated test results.

Please note that this report may contain QC results from anonymous Sample Duplicates and Matrix Spikes that do not originate from this Work Order.



Canada Toll Free: 1 800 668 98



12703381-COFC

20 -

e 1 of

Report To						Reports / Recipients															
Contact and company name below will appear on the final report																					
Company: Malroz Engineering - 18806						Select Report Format: ☐ PDF ☒ EXCEL ☐ EDD (DIGITAL)															
Contact: Mallory Wright						Merge QC/QCI Reports with COA ☐ YES ☐ NO ☐ N/A															
Phone: 613-484-9734						☐ Compare Results to Criteria on Report - provide details below if box checked															
Company address below will appear on the final report						Select Distribution: ☒ EMAIL ☐ MAIL ☐ FAX															
Street: 308 Wellington Street, 2nd Floor						Email 1 or Fax MWright@malroz.com															
City/Province: Kingston, ON						Email 2 M.Wright@Malroz.Com															
Postal Code: K7K 7A8						Email 3															
Invoice To Same as Report To ☐ YES ☐ NO						Invoice Recipients															
Copy of Invoice with Report ☐ YES ☐ NO						Select Invoice Distribution: ☐ EMAIL ☐ MAIL ☐ FAX															
Company:						Email 1 or Fax MWright@malroz.com Mahoney@mwr.ca															
Contact:						Email 2															
Project Information						Oil and Gas Required Fields (client use)															
ALS Account # / Quote #: 18806 / Q77378						AFE/Cost Center: PO#															
Job #: 1036						Major/Minor Code: Routing Code:															
PO / AFE:						Requisitioner:															
LSD:						Location:															
ALS Lab Work Order # (ALS use only): L220338ITD						ALS Contact: Costas Farassoglou Sampler:															
ALS Sample # (ALS use only)		Sample Identification and/or Coordinates (This description will appear on the report)				Date (dd-mm-yy)		Time (hh:mm)		Sample Type		NUMBER OF CONTAINERS		PEAS-DI-EX-LONS-WT		SAMPLES ON HOLD		EXTENDED STORAGE REQUIRED		SUSPECTED HAZARD (see notes)	
		22-Wool				02-May-22		10:00		WATER		3 R									
		22-Wood						10:00		WATER		3 R									
		22-WOOD						12:29		WATER		3 R									
		22-WOIZ						13:39		WATER		3 R									
		22-WOZ3				03-may-22		12:23		WATER		3 R									
										WATER		3 R									
										WATER		3 R									
										WATER		3 R									
										WATER		3 R									
										WATER		3 R									
										WATER		3 R									
										WATER		3 R									
										WATER		3 R									
Drinking Water (DW) Samples ¹ (client use)						Notes / Specify Limits for result evaluation by selecting from drop-down below (Excel COC only)						SAMPLE RECEIPT DETAILS (ALS use only)									
Are samples taken from a Regulated DW System? YES NO												Cooling Method: ☐ NONE ☒ ICE ☐ ICE PACKS ☐ FROZEN ☐ COOLING INITIATED									
Are samples for human consumption/ use? ☐ YES ☒ NO												Submission Comments identified on Sample Receipt Notification: ☐ YES ☒ NO									
												Cooler Custody Seals Intact: ☒ YES ☐ N/A Sample Custody Seals Intact: ☐ YES ☒ N/A									
												INITIAL COOLER TEMPERATURES °C FINAL COOLER TEMPERATURES °C									
												3.7									
SHIPMENT RELEASE (client use)						INITIAL SHIPMENT RECEPTION (ALS use only)						FINAL SHIPMENT RECEPTION (ALS use only)									
Released by: M. Wright		Date: 22-05-03		Time: 14:55		Received by:		Date:		Time:		Received by:		Date:		Time:					
														AP 4-MAY-22		10:30					

REFER TO BACK PAGE FOR ALS LOCATIONS AND SAMPLING INFORMATION

WHITE - LABORATORY COPY YELLOW - CLIENT COPY

Failure to complete all portions of this form may delay analysis. Please fill in this form LEGIBLY. By the use of this form the user acknowledges and agrees with the Terms and Conditions as specified on the back page of the white - report copy.

1. If any water samples are taken from a Regulated Drinking Water (DW) System, please submit using an Authorized DW COC form.

AUG 2010 #BOW

C.O.C.: G102906

REPORT No. B22-34820 (i)

Report To:

Malroz Engineering Inc.
308 Wellington Street, 2nd Floor
Kingston ON K7K 7A8 Canada

Attention: Adam Superville

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 22-Nov-22

JOB/PROJECT NO.: 1036

DATE REPORTED: 16-Dec-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W025	22-W027	22-W028	22-W029
			Sample I.D.		B22-34820-1	B22-34820-3	B22-34820-4	B22-34820-5
			Date Collected		21-Nov-22	21-Nov-22	21-Nov-22	21-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	25-Nov-22/O	216	218	190	537
pH @25°C	pH Units		SM 4500H	25-Nov-22/O	8.00	7.98	7.83	7.61
Conductivity @25°C	µmho/cm	1	SM 2510B	25-Nov-22/O	495	464	355	1250
Chloride	mg/L	0.5	SM4110C	25-Nov-22/O	5.5	5.7	< 0.5	69.6
Nitrate (N)	mg/L	0.05	SM4110C	25-Nov-22/O	0.11	2.45	0.50	< 0.05
Nitrite (N)	mg/L	0.05	SM4110C	25-Nov-22/O	< 0.05	< 0.05	< 0.05	< 0.05
Sulphate	mg/L	1	SM4110C	25-Nov-22/O	42	16	3	45
BOD(5 day)	mg/L	3	SM 5210B	24-Nov-22/K	< 3	< 3	< 3	< 3
Total Suspended Solids	mg/L	3	SM2540D	24-Nov-22/K	6	808	548	2780
Phosphorus-Total	mg/L	0.01	E3516.2	01-Dec-22/K	0.04	0.50	0.32	2.42
Total Kjeldahl Nitrogen	mg/L	0.1	E3516.2	01-Dec-22/K	0.2	< 0.1	< 0.1	1.3
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	28-Nov-22/K	0.04	< 0.01	< 0.01	1.10
Total Dissolved Solids	mg/L	3	SM 2540D	28-Nov-22/O	256	240	183	673
Dissolved Organic Carbon	mg/L	0.2	EPA 415.2	24-Nov-22/O	2.8	1.4	2.1	2.7
Phenolics	mg/L	0.001	MOEE 3179	14-Dec-22/K	< 0.001	< 0.001	< 0.001	< 0.001
COD	mg/L	5	SM5220C	29-Nov-22/K	< 5	26	23	60
Hardness (as CaCO3)	mg/L	1	SM 3120	01-Dec-22/O	257	250	196	601
Aluminum	mg/L	0.01	SM 3120	01-Dec-22/O	0.02	0.02	< 0.01	0.05
Arsenic	mg/L	0.0001	EPA 200.8	30-Nov-22/O	0.0006	0.0001	< 0.0001	0.0008
Barium	mg/L	0.001	SM 3120	01-Dec-22/O	0.132	0.301	0.384	0.484
Boron	mg/L	0.005	SM 3120	01-Dec-22/O	0.070	0.024	0.010	0.286
Cadmium	mg/L	0.000010	EPA 200.8	30-Nov-22/O	< 0.000010	< 0.000010	< 0.000010	< 0.000012
Calcium	mg/L	0.02	SM 3120	01-Dec-22/O	57.6	61.8	50.1	154
Chromium	mg/L	0.001	EPA 200.8	30-Nov-22/O	< 0.001	< 0.001	< 0.001	< 0.001
Cobalt	mg/L	0.0001	EPA 200.8	30-Nov-22/O	< 0.0001	< 0.0001	< 0.0001	0.0008
Copper	mg/L	0.0001	EPA 200.8	30-Nov-22/O	< 0.0001	0.0002	0.0003	0.0004
Iron	mg/L	0.005	SM 3120	01-Dec-22/O	0.088	< 0.005	< 0.005	2.11

M. Dubien

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.: G102906

REPORT No. B22-34820 (i)

Report To:

Malroz Engineering Inc.
308 Wellington Street, 2nd Floor
Kingston ON K7K 7A8 Canada

Attention: Adam Superville

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 22-Nov-22

JOB/PROJECT NO.: 1036

DATE REPORTED: 16-Dec-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W025	22-W027	22-W028	22-W029
			Sample I.D.		B22-34820-1	B22-34820-3	B22-34820-4	B22-34820-5
			Date Collected		21-Nov-22	21-Nov-22	21-Nov-22	21-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Lead	mg/L	0.00002	EPA 200.8	30-Nov-22/O	< 0.00002	< 0.00002	< 0.00002	0.00005
Magnesium	mg/L	0.02	SM 3120	01-Dec-22/O	27.6	23.3	17.3	52.8
Manganese	mg/L	0.001	SM 3120	01-Dec-22/O	0.015	< 0.001	< 0.001	0.253
Mercury	mg/L	0.00002	SM 3112 B	25-Nov-22/O	< 0.00002	< 0.00002	< 0.00002	< 0.00002
Potassium	mg/L	0.1	SM 3120	01-Dec-22/O	2.1	1.4	1.1	9.3
Silver	mg/L	0.0001	EPA 200.8	30-Nov-22/O	< 0.0001	< 0.0001	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	01-Dec-22/O	6.9	4.0	1.3	48.9
Strontium	mg/L	0.001	SM 3120	01-Dec-22/O	0.454	0.124	0.061	0.573
Uranium	mg/L	0.00005	EPA 200.8	30-Nov-22/O	0.00051	0.00067	0.00019	0.00265
Vanadium	mg/L	0.0001	EPA 200.8	30-Nov-22/O	< 0.0001	0.0006	< 0.0001	< 0.0001
Zinc	mg/L	0.005	SM 3120	01-Dec-22/O	< 0.005	< 0.005	< 0.005	< 0.005

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Fax: 613-544-2770

DATE RECEIVED: 22-Nov-22

JOB/PROJECT NO.: 1036

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P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W030	22-W031	22-W032	22-W034
			Sample I.D.	B22-34820-6	B22-34820-7	B22-34820-8	B22-34820-9
			Date Collected	21-Nov-22	21-Nov-22	21-Nov-22	21-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Alkalinity(CaCO ₃) to pH4.5	mg/L	5	SM 2320B	25-Nov-22/O	562	253	244
pH @25°C	pH Units		SM 4500H	25-Nov-22/O	7.74	7.92	7.97
Conductivity @25°C	µmho/cm	1	SM 2510B	25-Nov-22/O	1280	559	481
Chloride	mg/L	0.5	SM4110C	25-Nov-22/O	71.9	5.3	0.9
Nitrate (N)	mg/L	0.05	SM4110C	25-Nov-22/O	0.11	0.16	0.17
Nitrite (N)	mg/L	0.05	SM4110C	25-Nov-22/O	< 0.05	< 0.05	< 0.05
Sulphate	mg/L	1	SM4110C	25-Nov-22/O	48	43	19
BOD(5 day)	mg/L	3	SM 5210B	24-Nov-22/K	< 3	< 3	< 3
Total Suspended Solids	mg/L	3	SM2540D	24-Nov-22/K	56600	40	3090
Phosphorus-Total	mg/L	0.01	E3516.2	01-Dec-22/K	19.2	0.05	1.53
Total Kjeldahl Nitrogen	mg/L	0.1	E3516.2	01-Dec-22/K	0.6	< 0.1	0.5
Ammonia (N)-Total	mg/L	0.01	SM4500-NH ₃ -H	28-Nov-22/K	0.04	0.02	< 0.01
Total Dissolved Solids	mg/L	3	SM 2540D	28-Nov-22/O	690	290	249
Dissolved Organic Carbon	mg/L	0.2	EPA 415.2	24-Nov-22/O	2.5	3.0	1.2
Phenolics	mg/L	0.001	MOEE 3179	14-Dec-22/K	< 0.001	< 0.001	< 0.001
COD	mg/L	5	SM5220C	29-Nov-22/K	165	< 5	42
Hardness (as CaCO ₃)	mg/L	1	SM 3120	01-Dec-22/O	638	295	256
Aluminum	mg/L	0.01	SM 3120	01-Dec-22/O	0.04	0.02	0.01
Arsenic	mg/L	0.0001	EPA 200.8	30-Nov-22/O	0.0011	< 0.0001	0.0002
Barium	mg/L	0.001	SM 3120	01-Dec-22/O	0.374	0.259	0.164
Boron	mg/L	0.005	SM 3120	01-Dec-22/O	0.278	0.049	0.007
Cadmium	mg/L	0.000010	EPA 200.8	30-Nov-22/O	< 0.000012	< 0.000010	< 0.000010
Calcium	mg/L	0.02	SM 3120	01-Dec-22/O	141	75.0	56.9
Chromium	mg/L	0.001	EPA 200.8	30-Nov-22/O	< 0.001	< 0.001	< 0.001
Cobalt	mg/L	0.0001	EPA 200.8	30-Nov-22/O	0.0003	0.0001	0.0004
Copper	mg/L	0.0001	EPA 200.8	30-Nov-22/O	0.0004	0.0002	0.0002
Iron	mg/L	0.005	SM 3120	01-Dec-22/O	2.31	0.539	0.007

M. Dubien

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Lab Manager

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DATE RECEIVED: 22-Nov-22

JOB/PROJECT NO.: 1036

DATE REPORTED: 16-Dec-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W030	22-W031	22-W032	22-W034
			Sample I.D.		B22-34820-6	B22-34820-7	B22-34820-8	B22-34820-9
			Date Collected		21-Nov-22	21-Nov-22	21-Nov-22	21-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Lead	mg/L	0.00002	EPA 200.8	30-Nov-22/O	0.00004	< 0.00002	< 0.00002	0.00007
Magnesium	mg/L	0.02	SM 3120	01-Dec-22/O	69.6	26.0	27.8	0.57
Manganese	mg/L	0.001	SM 3120	01-Dec-22/O	0.044	0.044	0.027	0.003
Mercury	mg/L	0.00002	SM 3112 B	25-Nov-22/O	< 0.00002	< 0.00002	< 0.00002	< 0.00002
Potassium	mg/L	0.1	SM 3120	01-Dec-22/O	3.8	1.5	1.7	0.4
Silver	mg/L	0.0001	EPA 200.8	30-Nov-22/O	< 0.0001	< 0.0001	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	01-Dec-22/O	44.1	8.0	4.9	268
Strontium	mg/L	0.001	SM 3120	01-Dec-22/O	0.837	0.562	0.138	0.041
Uranium	mg/L	0.00005	EPA 200.8	30-Nov-22/O	< 0.00005	< 0.00005	0.00110	0.00007
Vanadium	mg/L	0.0001	EPA 200.8	30-Nov-22/O	< 0.0001	< 0.0001	0.0001	< 0.0001
Zinc	mg/L	0.005	SM 3120	01-Dec-22/O	< 0.005	< 0.005	< 0.005	0.010

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DATE RECEIVED: 22-Nov-22

JOB/PROJECT NO.: 1036

DATE REPORTED: 16-Dec-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W035	22-W036	22-W037	22-W038
			Sample I.D.		B22-34820-10	B22-34820-11	B22-34820-12	B22-34820-13
			Date Collected		22-Nov-22	22-Nov-22	22-Nov-22	22-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	25-Nov-22/O	794	448	365	455
pH @25°C	pH Units		SM 4500H	25-Nov-22/O	7.70	7.90	7.85	7.79
Conductivity @25°C	µmho/cm	1	SM 2510B	25-Nov-22/O	1870	983	1330	1220
Chloride	mg/L	0.5	SM4110C	25-Nov-22/O	112	53.3	207	118
Nitrate (N)	mg/L	0.05	SM4110C	25-Nov-22/O	0.11	1.34	1.15	1.46
Nitrite (N)	mg/L	0.05	SM4110C	25-Nov-22/O	< 0.05	< 0.05	< 0.05	< 0.05
Sulphate	mg/L	1	SM4110C	25-Nov-22/O	86	13	15	19
BOD(5 day)	mg/L	3	SM 5210B	24-Nov-22/K	< 3	6	< 3	< 3
Total Suspended Solids	mg/L	3	SM2540D	24-Nov-22/K	26	660	91	1070
Phosphorus-Total	mg/L	0.01	E3516.2	01-Dec-22/K	0.04	0.16	0.05	0.68
Total Kjeldahl Nitrogen	mg/L	0.1	E3516.2	01-Dec-22/K	16.1	0.9	0.1	0.2
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	28-Nov-22/K	12.8	0.38	< 0.01	< 0.01
Total Dissolved Solids	mg/L	3	SM 2540D	28-Nov-22/O	1030	524	720	656
Dissolved Organic Carbon	mg/L	0.2	EPA 415.2	24-Nov-22/O	8.5	2.0	< 0.2	0.5
Phenolics	mg/L	0.001	MOEE 3179	14-Dec-22/K	< 0.001	< 0.001	< 0.001	< 0.001
COD	mg/L	5	SM5220C	29-Nov-22/K	59	19	16	20
Hardness (as CaCO3)	mg/L	1	SM 3120	01-Dec-22/O	767	528	513	508
Aluminum	mg/L	0.01	SM 3120	01-Dec-22/O	0.06	0.04	0.04	0.04
Arsenic	mg/L	0.0001	EPA 200.8	30-Nov-22/O	0.0002	0.0002	< 0.0001	< 0.0001
Barium	mg/L	0.001	SM 3120	01-Dec-22/O	0.130	0.860	0.700	0.930
Boron	mg/L	0.005	SM 3120	01-Dec-22/O	1.28	0.028	0.023	0.090
Cadmium	mg/L	0.000010	EPA 200.8	30-Nov-22/O	< 0.000012	< 0.000010	< 0.000012	< 0.000012
Calcium	mg/L	0.02	SM 3120	01-Dec-22/O	207	146	138	144
Chromium	mg/L	0.001	EPA 200.8	30-Nov-22/O	< 0.001	< 0.001	< 0.001	< 0.001
Cobalt	mg/L	0.0001	EPA 200.8	30-Nov-22/O	0.0008	0.0005	0.0002	0.0004
Copper	mg/L	0.0001	EPA 200.8	30-Nov-22/O	0.0008	0.0005	0.0008	0.0013

M. Dubien

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Michelle Dubien
Lab Manager

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C.O.C.: G102906

REPORT No. B22-34820 (i)

Report To:

Malroz Engineering Inc.
308 Wellington Street, 2nd Floor
Kingston ON K7K 7A8 Canada

Attention: Adam Superville

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 22-Nov-22

JOB/PROJECT NO.: 1036

DATE REPORTED: 16-Dec-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W035	22-W036	22-W037	22-W038
			Sample I.D.		B22-34820-10	B22-34820-11	B22-34820-12	B22-34820-13
			Date Collected		22-Nov-22	22-Nov-22	22-Nov-22	22-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Iron	mg/L	0.005	SM 3120	01-Dec-22/O	8.13	0.104	< 0.005	< 0.005
Lead	mg/L	0.00002	EPA 200.8	30-Nov-22/O	< 0.00004	0.00002	< 0.00004	< 0.00004
Magnesium	mg/L	0.02	SM 3120	01-Dec-22/O	60.8	39.4	40.6	36.2
Manganese	mg/L	0.001	SM 3120	01-Dec-22/O	0.061	0.011	< 0.001	0.002
Mercury	mg/L	0.00002	SM 3112 B	25-Nov-22/O	< 0.00002	< 0.00002	< 0.00002	< 0.00002
Potassium	mg/L	0.1	SM 3120	01-Dec-22/O	37.4	1.7	3.1	3.0
Silver	mg/L	0.0001	EPA 200.8	30-Nov-22/O	< 0.0001	< 0.0001	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	01-Dec-22/O	106	17.4	93.4	76.6
Strontium	mg/L	0.001	SM 3120	01-Dec-22/O	0.864	0.182	0.204	0.320
Uranium	mg/L	0.00005	EPA 200.8	30-Nov-22/O	0.00048	0.00033	0.00066	0.00050
Vanadium	mg/L	0.0001	EPA 200.8	30-Nov-22/O	0.0008	0.0003	< 0.0001	0.0003
Zinc	mg/L	0.005	SM 3120	01-Dec-22/O	< 0.005	< 0.005	< 0.005	< 0.005

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SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W039	22-W040	22-W041	22-W042
			Sample I.D.		B22-34820-14	B22-34820-15	B22-34820-16	B22-34820-17
			Date Collected		22-Nov-22	22-Nov-22	22-Nov-22	22-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Alkalinity(CaCO3) to pH4.5	mg/L	5	SM 2320B	25-Nov-22/O	581	318	335	244
pH @25°C	pH Units		SM 4500H	25-Nov-22/O	7.66	7.91	7.91	7.95
Conductivity @25°C	µmho/cm	1	SM 2510B	25-Nov-22/O	1450	701	1000	652
Chloride	mg/L	0.5	SM4110C	25-Nov-22/O	104	13.7	114	45.7
Nitrate (N)	mg/L	0.05	SM4110C	25-Nov-22/O	0.07	0.07	0.66	5.11
Nitrite (N)	mg/L	0.05	SM4110C	25-Nov-22/O	< 0.05	< 0.05	< 0.05	< 0.05
Sulphate	mg/L	1	SM4110C	25-Nov-22/O	68	54	28	18
BOD(5 day)	mg/L	3	SM 5210B	24-Nov-22/K	< 3	< 3	< 3	< 3
Total Suspended Solids	mg/L	3	SM2540D	24-Nov-22/K	214	55400	2690	4
Phosphorus-Total	mg/L	0.01	E3516.2	01-Dec-22/K	0.10	7.59	0.74	0.03
Total Kjeldahl Nitrogen	mg/L	0.1	E3516.2	01-Dec-22/K	2.2	0.3	0.2	0.2
Ammonia (N)-Total	mg/L	0.01	SM4500-NH3-H	28-Nov-22/K	1.58	0.02	0.01	< 0.01
Total Dissolved Solids	mg/L	3	SM 2540D	28-Nov-22/O	789	364	535	339
Dissolved Organic Carbon	mg/L	0.2	EPA 415.2	24-Nov-22/O	4.1	1.5	0.4	0.6
Phenolics	mg/L	0.001	MOEE 3179	14-Dec-22/K	< 0.001	< 0.001	< 0.001	< 0.001
COD	mg/L	5	SM5220C	29-Nov-22/K	26	112	34	< 5
Hardness (as CaCO3)	mg/L	1	SM 3120	01-Dec-22/O	623	388	439	316
Aluminum	mg/L	0.01	SM 3120	01-Dec-22/O	0.05	0.02	0.04	0.02
Arsenic	mg/L	0.0001	EPA 200.8	30-Nov-22/O	0.0002	0.0002	0.0001	0.0001
Barium	mg/L	0.001	SM 3120	01-Dec-22/O	0.586	0.297	0.468	0.174
Boron	mg/L	0.005	SM 3120	01-Dec-22/O	0.361	0.019	0.098	0.008
Cadmium	mg/L	0.000010	EPA 200.8	30-Nov-22/O	0.000080	< 0.000010	0.000011	< 0.000010
Calcium	mg/L	0.02	SM 3120	01-Dec-22/O	182	90.8	108	78.2
Chromium	mg/L	0.001	EPA 200.8	30-Nov-22/O	< 0.001	< 0.001	< 0.001	< 0.001
Cobalt	mg/L	0.0001	EPA 200.8	30-Nov-22/O	0.0126	0.0005	0.0005	0.0002
Copper	mg/L	0.0001	EPA 200.8	30-Nov-22/O	0.0026	0.0004	0.0009	0.0003

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Michelle Dubien
Lab Manager

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DATE RECEIVED: 22-Nov-22

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SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W039	22-W040	22-W041	22-W042
			Sample I.D.		B22-34820-14	B22-34820-15	B22-34820-16	B22-34820-17
			Date Collected		22-Nov-22	22-Nov-22	22-Nov-22	22-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Iron	mg/L	0.005	SM 3120	01-Dec-22/O	1.27	< 0.005	0.010	0.017
Lead	mg/L	0.00002	EPA 200.8	30-Nov-22/O	< 0.00004	< 0.00002	< 0.00002	< 0.00002
Magnesium	mg/L	0.02	SM 3120	01-Dec-22/O	41.1	39.3	41.4	29.4
Manganese	mg/L	0.001	SM 3120	01-Dec-22/O	0.733	0.018	0.117	0.007
Mercury	mg/L	0.00002	SM 3112 B	25-Nov-22/O	< 0.00002	< 0.00002	< 0.00002	< 0.00002
Potassium	mg/L	0.1	SM 3120	01-Dec-22/O	20.5	2.5	2.8	1.6
Silver	mg/L	0.0001	EPA 200.8	30-Nov-22/O	< 0.0001	< 0.0001	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	01-Dec-22/O	84.3	8.8	44.3	15.9
Strontium	mg/L	0.001	SM 3120	01-Dec-22/O	0.564	0.165	0.395	0.176
Uranium	mg/L	0.00005	EPA 200.8	30-Nov-22/O	0.00086	0.00255	0.00063	0.00142
Vanadium	mg/L	0.0001	EPA 200.8	30-Nov-22/O	< 0.0001	0.0003	0.0003	0.0007
Zinc	mg/L	0.005	SM 3120	01-Dec-22/O	< 0.005	< 0.005	< 0.005	0.007

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SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W043	22-W044	22-W046	
			Sample I.D.	B22-34820-18	B22-34820-19	B22-34820-20	
			Date Collected	22-Nov-22	22-Nov-22	22-Nov-22	
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Alkalinity(CaCO ₃) to pH4.5	mg/L	5	SM 2320B	25-Nov-22/O	274	293	259
pH @25°C	pH Units		SM 4500H	25-Nov-22/O	7.97	7.92	7.95
Conductivity @25°C	µmho/cm	1	SM 2510B	25-Nov-22/O	962	735	584
Chloride	mg/L	0.5	SM4110C	25-Nov-22/O	92.1	40.9	10.5
Nitrate (N)	mg/L	0.05	SM4110C	25-Nov-22/O	3.86	0.45	3.23
Nitrite (N)	mg/L	0.05	SM4110C	25-Nov-22/O	< 0.05	< 0.05	< 0.05
Sulphate	mg/L	1	SM4110C	25-Nov-22/O	84	42	32
BOD(5 day)	mg/L	3	SM 5210B	24-Nov-22/K	< 3	< 3	< 3
Total Suspended Solids	mg/L	3	SM2540D	24-Nov-22/K	164	< 3	3
Phosphorus-Total	mg/L	0.01	E3516.2	01-Dec-22/K	0.21	0.01	0.02
Total Kjeldahl Nitrogen	mg/L	0.1	E3516.2	01-Dec-22/K	0.5	1.3	0.2
Ammonia (N)-Total	mg/L	0.01	SM4500-NH ₃ -H	28-Nov-22/K	0.01	0.95	< 0.01
Total Dissolved Solids	mg/L	3	SM 2540D	28-Nov-22/O	512	383	303
Dissolved Organic Carbon	mg/L	0.2	EPA 415.2	24-Nov-22/O	1.5	3.4	2.5
Phenolics	mg/L	0.001	MOEE 3179	14-Dec-22/K	< 0.001	< 0.001	< 0.001
COD	mg/L	5	SM5220C	29-Nov-22/K	49	9	< 5
Hardness (as CaCO ₃)	mg/L	1	SM 3120	01-Dec-22/O	296	324	312
Aluminum	mg/L	0.01	SM 3120	01-Dec-22/O	0.02	0.02	0.02
Arsenic	mg/L	0.0001	EPA 200.8	30-Nov-22/O	0.0005	0.0001	0.0001
Barium	mg/L	0.001	SM 3120	01-Dec-22/O	0.032	0.124	0.078
Boron	mg/L	0.005	SM 3120	01-Dec-22/O	0.016	0.799	0.010
Cadmium	mg/L	0.000010	EPA 200.8	30-Nov-22/O	0.000058	< 0.000010	0.000051
Calcium	mg/L	0.02	SM 3120	01-Dec-22/O	77.6	86.9	79.5
Chromium	mg/L	0.001	EPA 200.8	30-Nov-22/O	< 0.001	< 0.001	< 0.001
Cobalt	mg/L	0.0001	EPA 200.8	30-Nov-22/O	0.0002	0.0002	0.0002
Copper	mg/L	0.0001	EPA 200.8	30-Nov-22/O	0.0008	0.0003	0.0216

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Lab Manager

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SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W043	22-W044	22-W046	
			Sample I.D.	B22-34820-18	B22-34820-19	B22-34820-20	
			Date Collected	22-Nov-22	22-Nov-22	22-Nov-22	
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Iron	mg/L	0.005	SM 3120	01-Dec-22/O	< 0.005	0.731	< 0.005
Lead	mg/L	0.00002	EPA 200.8	30-Nov-22/O	< 0.00002	< 0.00002	0.00018
Magnesium	mg/L	0.02	SM 3120	01-Dec-22/O	24.8	25.9	27.6
Manganese	mg/L	0.001	SM 3120	01-Dec-22/O	< 0.001	0.124	0.008
Mercury	mg/L	0.00002	SM 3112 B	25-Nov-22/O	< 0.00002	< 0.00002	< 0.00002
Potassium	mg/L	0.1	SM 3120	01-Dec-22/O	3.4	4.8	1.3
Silver	mg/L	0.0001	EPA 200.8	30-Nov-22/O	< 0.0001	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	01-Dec-22/O	103	36.3	6.6
Strontium	mg/L	0.001	SM 3120	01-Dec-22/O	0.220	2.40	0.120
Uranium	mg/L	0.00005	EPA 200.8	30-Nov-22/O	0.00815	0.00096	0.00081
Vanadium	mg/L	0.0001	EPA 200.8	30-Nov-22/O	0.0004	< 0.0001	0.0003
Zinc	mg/L	0.005	SM 3120	01-Dec-22/O	0.005	< 0.005	0.149

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SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W025	22-W027	22-W028	22-W029
			Sample I.D.	B22-34820-1	B22-34820-3	B22-34820-4	B22-34820-5
			Date Collected	21-Nov-22	21-Nov-22	21-Nov-22	21-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Acetone	µg/L	30	EPA 8260	25-Nov-22/R	< 30	< 30	< 30
Benzene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Bromobenzene	µg/L	0.4	EPA 8260	25-Nov-22/R	< 0.4	< 0.4	< 0.4
Bromodichloromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2
Bromoform	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5
Bromomethane	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Carbon Tetrachloride	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Chloroethane	µg/L	3	EPA 8260	25-Nov-22/R	< 3	< 3	< 3
Chloroform	µg/L	1	EPA 8260	25-Nov-22/R	< 1	< 1	< 1
Chloromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2
Chlorotoluene, 2-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Chlorotoluene, 4-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	25-Nov-22/R	< 0.6	< 0.6	< 0.6
Dibromochloromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2
Dibromoethane, 1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Dibromomethane	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1
Dichlorobenzene, 1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichlorobenzene, 1,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichlorobenzene, 1,4-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichlorodifluoromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2
Dichloroethane, 1,1-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloroethane, 1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloroethylene, 1,1-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5

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SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W025	22-W027	22-W028	22-W029
			Sample I.D.		B22-34820-1	B22-34820-3	B22-34820-4	B22-34820-5
			Date Collected		21-Nov-22	21-Nov-22	21-Nov-22	21-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5	< 5
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Ethylbenzene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Hexachlorobutadiene	µg/L	0.6	EPA 8260	25-Nov-22/R	< 0.6	< 0.6	< 0.6	< 0.6
Hexane	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5	< 5
Isopropylbenzene	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Methyl Butyl Ketone	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5	< 5
Methyl Ethyl Ketone	µg/L	20	EPA 8260	25-Nov-22/R	< 20	< 20	< 20	< 20
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	25-Nov-22/R	< 20	< 20	< 20	< 20
Methyl-t-butyl Ether	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2	< 2
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Naphthalene	µg/L	0.4	EPA 8260	25-Nov-22/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Butylbenzene	µg/L	0.4	EPA 8260	25-Nov-22/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Propylbenzene	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1	< 0.1
sec-Butylbenzene	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Styrene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
tert-Butylbenzene	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5

M. Dubien

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Michelle Dubien
Lab Manager

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REPORT No. B22-34820 (ii)

Report To:

Malroz Engineering Inc.
308 Wellington Street, 2nd Floor
Kingston ON K7K 7A8 Canada

Attention: Adam Superville

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 22-Nov-22

JOB/PROJECT NO.: 1036

DATE REPORTED: 16-Dec-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W025	22-W027	22-W028	22-W029
			Sample I.D.		B22-34820-1	B22-34820-3	B22-34820-4	B22-34820-5
			Date Collected		21-Nov-22	21-Nov-22	21-Nov-22	21-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Tetrachloroethane,1,1,2,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,4-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,1-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5	< 5
Trichloropropane,1,2,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trimethylbenzene,1,2,4-	µg/L	1	EPA 8260	25-Nov-22/R	< 1	< 1	< 1	< 1
Trimethylbenzene,1,3,5-	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	25-Nov-22/R	< 1.0	< 1.0	< 1.0	< 1.0
Xylene, m,p,o-	µg/L	1.1	EPA 8260	25-Nov-22/R	< 1.1	< 1.1	< 1.1	< 1.1
Xylene, o-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5



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SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W030	22-W031	22-W032	22-W034
			Sample I.D.		B22-34820-6	B22-34820-7	B22-34820-8	B22-34820-9
			Date Collected		21-Nov-22	21-Nov-22	21-Nov-22	21-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Acetone	µg/L	30	EPA 8260	25-Nov-22/R	< 30	< 30	< 30	< 30
Benzene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Bromobenzene	µg/L	0.4	EPA 8260	25-Nov-22/R	< 0.4	< 0.4	< 0.4	< 0.4
Bromodichloromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2	< 2
Bromoform	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5	< 5
Bromomethane	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Carbon Tetrachloride	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Chloroethane	µg/L	3	EPA 8260	25-Nov-22/R	< 3	< 3	< 3	< 3
Chloroform	µg/L	1	EPA 8260	25-Nov-22/R	< 1	< 1	< 1	< 1
Chloromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2	< 2
Chlorotoluene,2-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Chlorotoluene,4-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	25-Nov-22/R	< 0.6	< 0.6	< 0.6	< 0.6
Dibromochloromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2	< 2
Dibromoethane,1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Dibromomethane	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Dichlorobenzene,1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichlorobenzene,1,4-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichlorodifluoromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2	< 2
Dichloroethane,1,1-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethane,1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloroethylene,1,1-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5

M. Dubien

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Lab Manager

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Caduceon Environmental Laboratories

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Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 22-Nov-22

JOB/PROJECT NO.: 1036

DATE REPORTED: 16-Dec-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W030	22-W031	22-W032	22-W034
			Sample I.D.		B22-34820-6	B22-34820-7	B22-34820-8	B22-34820-9
			Date Collected		21-Nov-22	21-Nov-22	21-Nov-22	21-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5	< 5
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Ethylbenzene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Hexachlorobutadiene	µg/L	0.6	EPA 8260	25-Nov-22/R	< 0.6	< 0.6	< 0.6	< 0.6
Hexane	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5	< 5
Isopropylbenzene	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Methyl Butyl Ketone	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5	< 5
Methyl Ethyl Ketone	µg/L	20	EPA 8260	25-Nov-22/R	< 20	< 20	< 20	< 20
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	25-Nov-22/R	< 20	< 20	< 20	< 20
Methyl-t-butyl Ether	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2	< 2
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Naphthalene	µg/L	0.4	EPA 8260	25-Nov-22/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Butylbenzene	µg/L	0.4	EPA 8260	25-Nov-22/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Propylbenzene	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1	< 0.1
sec-Butylbenzene	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Styrene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
tert-Butylbenzene	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5

M. Dubien

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Michelle Dubien
Lab Manager

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Fax: 613-544-2770

DATE RECEIVED: 22-Nov-22

JOB/PROJECT NO.: 1036

DATE REPORTED: 16-Dec-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W030	22-W031	22-W032	22-W034
			Sample I.D.		B22-34820-6	B22-34820-7	B22-34820-8	B22-34820-9
			Date Collected		21-Nov-22	21-Nov-22	21-Nov-22	21-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Tetrachloroethane,1,1,2,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,4-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,1-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5	< 5
Trichloropropane,1,2,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trimethylbenzene,1,2,4-	µg/L	1	EPA 8260	25-Nov-22/R	< 1	< 1	< 1	< 1
Trimethylbenzene,1,3,5-	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	25-Nov-22/R	< 1.0	< 1.0	< 1.0	< 1.0
Xylene, m,p,o-	µg/L	1.1	EPA 8260	25-Nov-22/R	< 1.1	< 1.1	< 1.1	< 1.1
Xylene, o-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5



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SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W035	22-W036	22-W037	22-W038
			Sample I.D.	B22-34820-10	B22-34820-11	B22-34820-12	B22-34820-13
			Date Collected	22-Nov-22	22-Nov-22	22-Nov-22	22-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Acetone	µg/L	30	EPA 8260	25-Nov-22/R	< 30	< 30	< 30
Benzene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Bromobenzene	µg/L	0.4	EPA 8260	25-Nov-22/R	< 0.4	< 0.4	< 0.4
Bromodichloromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2
Bromoform	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5
Bromomethane	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Carbon Tetrachloride	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Chloroethane	µg/L	3	EPA 8260	25-Nov-22/R	< 3	< 3	< 3
Chloroform	µg/L	1	EPA 8260	25-Nov-22/R	< 1	< 1	< 1
Chloromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2
Chlorotoluene, 2-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Chlorotoluene, 4-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	25-Nov-22/R	< 0.6	< 0.6	< 0.6
Dibromochloromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2
Dibromoethane, 1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Dibromomethane	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1
Dichlorobenzene, 1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichlorobenzene, 1,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichlorobenzene, 1,4-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichlorodifluoromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2
Dichloroethane, 1,1-	µg/L	0.5	EPA 8260	25-Nov-22/R	0.7	< 0.5	< 0.5
Dichloroethane, 1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloroethylene, 1,1-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5

M. Dubien

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.: G102906

REPORT No. B22-34820 (ii)

Report To:

Malroz Engineering Inc.
308 Wellington Street, 2nd Floor
Kingston ON K7K 7A8 Canada

Attention: Adam Superville

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 22-Nov-22

JOB/PROJECT NO.: 1036

DATE REPORTED: 16-Dec-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W035	22-W036	22-W037	22-W038
			Sample I.D.		B22-34820-10	B22-34820-11	B22-34820-12	B22-34820-13
			Date Collected		22-Nov-22	22-Nov-22	22-Nov-22	22-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5	< 5
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Ethylbenzene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Hexachlorobutadiene	µg/L	0.6	EPA 8260	25-Nov-22/R	< 0.6	< 0.6	< 0.6	< 0.6
Hexane	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5	< 5
Isopropylbenzene	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Methyl Butyl Ketone	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5	< 5
Methyl Ethyl Ketone	µg/L	20	EPA 8260	25-Nov-22/R	< 20	< 20	< 20	< 20
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	25-Nov-22/R	< 20	< 20	< 20	< 20
Methyl-t-butyl Ether	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2	< 2
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Naphthalene	µg/L	0.4	EPA 8260	25-Nov-22/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Butylbenzene	µg/L	0.4	EPA 8260	25-Nov-22/R	< 0.4	< 0.4	< 0.4	< 0.4
n-Propylbenzene	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1	< 0.1
sec-Butylbenzene	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Styrene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
tert-Butylbenzene	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1	< 0.1

M. Dubien

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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REPORT No. B22-34820 (ii)

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Malroz Engineering Inc.
308 Wellington Street, 2nd Floor
Kingston ON K7K 7A8 Canada

Attention: Adam Superville

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 22-Nov-22

JOB/PROJECT NO.: 1036

DATE REPORTED: 16-Dec-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W035	22-W036	22-W037	22-W038
			Sample I.D.	B22-34820-10	B22-34820-11	B22-34820-12	B22-34820-13
			Date Collected	22-Nov-22	22-Nov-22	22-Nov-22	22-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Tetrachloroethane,1,1,2,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,4-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,1-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5
Trichloropropane,1,2,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Trimethylbenzene,1,2,4-	µg/L	1	EPA 8260	25-Nov-22/R	< 1	< 1	< 1
Trimethylbenzene,1,3,5-	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	25-Nov-22/R	< 1.0	< 1.0	< 1.0
Xylene, m,p,o-	µg/L	1.1	EPA 8260	25-Nov-22/R	< 1.1	< 1.1	< 1.1
Xylene, o-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5

M. Dubien

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JOB/PROJECT NO.: 1036

DATE REPORTED: 16-Dec-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W039	22-W040	22-W041	22-W042
			Sample I.D.	B22-34820-14	B22-34820-15	B22-34820-16	B22-34820-17
			Date Collected	22-Nov-22	22-Nov-22	22-Nov-22	22-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Acetone	µg/L	30	EPA 8260	25-Nov-22/R	< 30	< 30	< 30
Benzene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Bromobenzene	µg/L	0.4	EPA 8260	25-Nov-22/R	< 0.4	< 0.4	< 0.4
Bromodichloromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2
Bromoform	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5
Bromomethane	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Carbon Tetrachloride	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Chloroethane	µg/L	3	EPA 8260	25-Nov-22/R	< 3	< 3	< 3
Chloroform	µg/L	1	EPA 8260	25-Nov-22/R	< 1	< 1	< 1
Chloromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2
Chlorotoluene, 2-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Chlorotoluene, 4-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	25-Nov-22/R	< 0.6	< 0.6	< 0.6
Dibromochloromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2
Dibromoethane, 1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Dibromomethane	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1
Dichlorobenzene, 1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichlorobenzene, 1,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichlorobenzene, 1,4-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichlorodifluoromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2
Dichloroethane, 1,1-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloroethane, 1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloroethylene, 1,1-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5

M. Dubien

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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308 Wellington Street, 2nd Floor
Kingston ON K7K 7A8 Canada

Attention: Adam Superville

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 22-Nov-22

JOB/PROJECT NO.: 1036

DATE REPORTED: 16-Dec-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W039	22-W040	22-W041	22-W042
			Sample I.D.	B22-34820-14	B22-34820-15	B22-34820-16	B22-34820-17
			Date Collected	22-Nov-22	22-Nov-22	22-Nov-22	22-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Ethylbenzene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Hexachlorobutadiene	µg/L	0.6	EPA 8260	25-Nov-22/R	< 0.6	< 0.6	< 0.6
Hexane	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5
Isopropylbenzene	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Methyl Butyl Ketone	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5
Methyl Ethyl Ketone	µg/L	20	EPA 8260	25-Nov-22/R	< 20	< 20	< 20
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	25-Nov-22/R	< 20	< 20	< 20
Methyl-t-butyl Ether	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Naphthalene	µg/L	0.4	EPA 8260	25-Nov-22/R	< 0.4	< 0.4	< 0.4
n-Butylbenzene	µg/L	0.4	EPA 8260	25-Nov-22/R	< 0.4	< 0.4	< 0.4
n-Propylbenzene	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1
sec-Butylbenzene	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1
Styrene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
tert-Butylbenzene	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1

M. Dubien

R.L. = Reporting Limit

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DATE RECEIVED: 22-Nov-22

JOB/PROJECT NO.: 1036

DATE REPORTED: 16-Dec-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.		22-W039	22-W040	22-W041	22-W042
			Sample I.D.		B22-34820-14	B22-34820-15	B22-34820-16	B22-34820-17
			Date Collected		22-Nov-22	22-Nov-22	22-Nov-22	22-Nov-22
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed				
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Tetrachloroethane,1,1,2,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,4-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,1-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5	< 5
Trichloropropane,1,2,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5
Trimethylbenzene,1,2,4-	µg/L	1	EPA 8260	25-Nov-22/R	< 1	< 1	< 1	< 1
Trimethylbenzene,1,3,5-	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	25-Nov-22/R	< 1.0	< 1.0	< 1.0	< 1.0
Xylene, m,p,o-	µg/L	1.1	EPA 8260	25-Nov-22/R	< 1.1	< 1.1	< 1.1	< 1.1
Xylene, o-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5	< 0.5

M. Dubien

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P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W043	22-W044	22-W046	
			Sample I.D.	B22-34820-18	B22-34820-19	B22-34820-20	
			Date Collected	22-Nov-22	22-Nov-22	22-Nov-22	
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Acetone	µg/L	30	EPA 8260	25-Nov-22/R	< 30	< 30	< 30
Benzene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Bromobenzene	µg/L	0.4	EPA 8260	25-Nov-22/R	< 0.4	< 0.4	< 0.4
Bromodichloromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2
Bromoform	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5
Bromomethane	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Carbon Tetrachloride	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Chloroethane	µg/L	3	EPA 8260	25-Nov-22/R	< 3	< 3	< 3
Chloroform	µg/L	1	EPA 8260	25-Nov-22/R	< 1	< 1	< 1
Chloromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2
Chlorotoluene, 2-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Chlorotoluene, 4-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Dibromo-3-Chloropropane, 1,2-	µg/L	0.6	EPA 8260	25-Nov-22/R	< 0.6	< 0.6	< 0.6
Dibromochloromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2
Dibromoethane, 1,2- (Ethylene Dibromide)	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Dibromomethane	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1
Dichlorobenzene, 1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichlorobenzene, 1,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichlorobenzene, 1,4-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichlorodifluoromethane	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2
Dichloroethane, 1,1-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloroethane, 1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloroethene, cis-1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloroethene, trans-1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloroethylene, 1,1-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5

M. Dubien

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

C.O.C.: G102906

REPORT No. B22-34820 (ii)

Report To:

Malroz Engineering Inc.
308 Wellington Street, 2nd Floor
Kingston ON K7K 7A8 Canada

Attention: Adam Superville

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 22-Nov-22

JOB/PROJECT NO.: 1036

DATE REPORTED: 16-Dec-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W043	22-W044	22-W046	
			Sample I.D.	B22-34820-18	B22-34820-19	B22-34820-20	
			Date Collected	22-Nov-22	22-Nov-22	22-Nov-22	
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Dichloromethane (Methylene Chloride)	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5
Dichloropropane,1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloropropane,1,3-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Dichloropropane,2,2-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Dichloropropene 1,3-cis+trans	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloropropene, cis-1,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloropropene, trans-1,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Dichloropropene,1,1-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Ethylbenzene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Hexachlorobutadiene	µg/L	0.6	EPA 8260	25-Nov-22/R	< 0.6	< 0.6	< 0.6
Hexane	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5
Isopropylbenzene	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Isopropyltoluene,4-	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Methyl Butyl Ketone	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5
Methyl Ethyl Ketone	µg/L	20	EPA 8260	25-Nov-22/R	< 20	< 20	< 20
Methyl Isobutyl Ketone	µg/L	20	EPA 8260	25-Nov-22/R	< 20	< 20	< 20
Methyl-t-butyl Ether	µg/L	2	EPA 8260	25-Nov-22/R	< 2	< 2	< 2
Monochlorobenzene (Chlorobenzene)	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Naphthalene	µg/L	0.4	EPA 8260	25-Nov-22/R	< 0.4	< 0.4	< 0.4
n-Butylbenzene	µg/L	0.4	EPA 8260	25-Nov-22/R	< 0.4	< 0.4	< 0.4
n-Propylbenzene	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1
sec-Butylbenzene	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1
Styrene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
tert-Butylbenzene	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1

M. Dubien

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

C.O.C.: G102906

REPORT No. B22-34820 (ii)

Report To:

Malroz Engineering Inc.
308 Wellington Street, 2nd Floor
Kingston ON K7K 7A8 Canada

Attention: Adam Superville

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 22-Nov-22

JOB/PROJECT NO.: 1036

DATE REPORTED: 16-Dec-22

P.O. NUMBER:

SAMPLE MATRIX: Groundwater

WATERWORKS NO.

			Client I.D.	22-W043	22-W044	22-W046	
			Sample I.D.	B22-34820-18	B22-34820-19	B22-34820-20	
			Date Collected	22-Nov-22	22-Nov-22	22-Nov-22	
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Tetrachloroethane,1,1,1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Tetrachloroethane,1,1,2,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Tetrachloroethylene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Toluene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Trichlorobenzene,1,2,4-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,1-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Trichloroethane,1,1,2-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Trichloroethylene	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Trichlorofluoromethane	µg/L	5	EPA 8260	25-Nov-22/R	< 5	< 5	< 5
Trichloropropane,1,2,3-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5
Trimethylbenzene,1,2,4-	µg/L	1	EPA 8260	25-Nov-22/R	< 1	< 1	< 1
Trimethylbenzene,1,3,5-	µg/L	0.1	EPA 8260	25-Nov-22/R	< 0.1	< 0.1	< 0.1
Vinyl Chloride	µg/L	0.2	EPA 8260	25-Nov-22/R	< 0.2	< 0.2	< 0.2
Xylene, m,p-	µg/L	1.0	EPA 8260	25-Nov-22/R	< 1.0	< 1.0	< 1.0
Xylene, m,p,o-	µg/L	1.1	EPA 8260	25-Nov-22/R	< 1.1	< 1.1	< 1.1
Xylene, o-	µg/L	0.5	EPA 8260	25-Nov-22/R	< 0.5	< 0.5	< 0.5

M. Dubien

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

GENERAL SAMPLE SUBMISSION FORM



SAMPLES SUBMITTED TO:

Kingston ☒
Ottawa ☐
Richmond Hill ☐
Barrie ☐
London ☐
Windsor ☐

O'Reg 153/04 ☐
O'Reg 406/19 ☐
RPI ☐
Coarse ☐
MISA ☐
Other: ☐

TESTING REQUIREMENTS

Table (1 - 9) ☐
Table (1 - 9.1) ☐
ICC ☐
Medium/Fine ☐
PWQO ☐
Record of Site ☐
SPLP Table (1 - 9.1) ☐
Agricultural ☐
O'Reg 558 TCLP ☐
Landfill Monitoring ☒

REPORT NUMBER (Lab Use)

322-34820-1

Are any samples to be submitted intended for Human Consumption under any Drinking Water Regulations?

☐ Yes ☐ No

(If yes, submit all Drinking Water Samples on a Drinking Water Chain of Custody)

Organization: Malroz EngineeringAddress: 300 Wellington St.
Kingston, ON

Invoicing Address (if different):

Contact: Adam S
Tel: 613-888-8305Email: superulle@malroz.comQuote #: L21 TL1 MALROZProject Name/ #: 1036

Additional Info (email, cell, etc):

P.O. #:

Additional Info:

ANALYSES REQUESTED

TURNAROUND SERVICE
REQUESTED (see back page)

*Must be arranged in advance

☐ Platinum* 200% Surcharge
☐ Gold* 100% Surcharge
☐ Silver 50% Surcharge
☐ Bronze 25% Surcharge
☒ Standard 5-7 days
☐ Specific Date: _____

* Sample Matrix Legend: WW=Waste Water, SW=Surface Water, GW=Groundwater, LS=Liquid Sludge, SS=Solid Sludge, S=Soil, Sed=Sediment, PC=Paint Chips, F=Filter, Oil = Oil

Lab No.	Sample Source and/or Sample Identification	S.P.L.	Sample Matrix *	Date Collected (yy-mm-dd)	Time Collected	Indicate Test For Each Sample By Using A Check Mark In The Box Provided												X	Field		# Bottles/ Sample	Field Filtered Y/N
						pH	Temp.															
1	22-W025		GW	22-11-21	12:20	X												7.68	8.85	9	Y	
2	22-W026 (RB)			22-11-21	12:20	X												7.68	8.85			
3	22-W027			22-11-21	11:24	X												8.86	9.96			
4	22-W028			22-11-21	11:57	X												8.14	8.21			
5	22-W029			22-11-21	12:41	X												7.71	7.78			
6	22-W030			22-11-21	12:55	X												8.18	8.71			
7	22-W031			22-11-21	14:54	X												7.54	7.54			
8	22-W032			22-11-21	13:59	X												5.92	7.6			
9	22-W034			22-11-21	15:02	X												6.89	8.52			
10	22-W035			22-11-22	10:00	X												7.51	6.54			
11	22-W036				10:12	X												7.81	5.99			
12	22-W037				10:35	X												8.34	7.62			

SAMPLE SUBMISSION INFORMATION

SHIPPING INFORMATION

REPORTING / INVOICING

SAMPLE RECEIVING INFORMATION (LABORATORY USE ONLY)

Print: <u>Adam Spornillo</u>	Submitted by: <u>Same</u>	Courier (Client account) ☐	Invoice ☐	Report by Fax ☐	Received By (print): <u>BB</u>	Signature: <u>[Signature]</u>
Sign: <u>Adam Spornillo</u>		Courier (Caduceon account) ☐		Report by Email ☒	Date Received (yy-mm-dd): <u>22-11-22</u>	Time Received: <u>18:42</u>
		Drop Off ☒	# of Pieces ☐	Invoice by Email ☒	Laboratory Prepared Bottles: ☒ Yes ☐ No	
		Caduceon (Pick-up) ☐		Invoice by Mail ☐	Sample Temperature °C: <u>2.0°C</u>	Labeled by: <u>[Signature]</u>

Comments: Missing set #2 - 22-W026. Client cancel sample #22-W026.

Page 2 of 3G **102906**

QUOTATION FOR ANALYTICAL SERVICES

Quote # :	L21_TLTI_Malroz	
Organization:	Malroz	
Contact:	Mallory Wright	
Telephone:	613-548-3446 ex 30	
Facsimile:		
Email:	mwright.malroz.com	
Project #:	Briar Hill -1036	
Address:	308 Wellington Street Kingston ON	
Additional Info:	Please Make Note of Special Reporting Limits- In BOLD text under each parameter section	
Additional Info:	Ground Water ODWS/Surface Water PWQO- Replaces L18_TLTI_Malroz	
Date:	1-Jan-21	Valid Until: 31-Dec-21

Item #	Quantity	Analysis Request	Matrix	Unit Cost, \$	Amount, \$
Ground Water					
1	25	GENERAL CHEMISTRY - Alkalinity, Ammonia, BOD, COD, DOC, Conductivity, Hardness, pH, Phenols, TP/TKN, TDS, TSS, Chloride, NO2/NO3, Sulphate Reporting Instructions (mg/L, with exception of conductivity (µmho/cm) and pH)	Ground Water	98.00	2450.00
1A	25	Metals - Aluminum, Arsenic, Barium, Boron, Cadmium, Calcium, Chromium, Cobalt, Copper, Iron, Lead, Magnesium, Manganese, Mercury, Potassium, Silver, Sodium, Strontium, Uranium, Vanadium, Zinc (mg/L)	Ground water	*	*
2	25	Full VOC List (ug/L) Please see attachment	Ground Water	52.00	1300.00
Surface Water					
3	14	GENERAL CHEMISTRY - Alkalinity, N-Ammonia, Ammonia (UI) BOD, COD, DOC, Conductivity, Hardness, pH, Phenols, TP/TKN, TDS, TSS, Chloride, NO2/NO3, Sulphate, Total Dissolved Phosphorous - Reporting Instructions (mg/L, with exception of conductivity (µmho/cm) and pH)	Surface water	105.00	315.00
3A	14	METALS - Dissolved Aluminum, Arsenic, Barium, Boron, Cadmium, Calcium, Chromium, Cobalt, Copper, Iron, Lead, Magnesium, Manganese, Dissolved Mercury, Nickel, Potassium, Silver, Sodium, Strontium, Vanadium, Zinc (mg/L)	Surface water	*	*
				Subtotal	4,065.00
				HST	528.45
				Total Cost	4,593.45

Prices do not include shipping unless otherwise stated.

Environmental Surcharge of \$1.50 per sample set - WAIVED

Caduceon Environmental Laboratories

Ottawa

Kingston

Richmond Hill

London

Windsor

L18 TLTI Malroz Briar Hill

VOCs	(ug/L)	Acetone, Benzene, Bromobenzene, Bromodichloromethane, 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, 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, total, 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, Naphthalene, n-Butylbenzene, n-Propylbenzene, 1,1,1-Trichloroethane, , 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, 1,1,2-Trichloroethane, Trichloroethylene, Trichlorofluoromethane, 1,2,3-Trichloropropane, 1,2,4-Trimethylbenzene, 1,3,5-Trimethylbenzene, Vinyl chloride, m+p-Xylenes, o-Xylene, Xylenes (Total)
------	--------	--

GLW

1x Gen Chem
 1x 250ml plastic
 1x Hg
 1x Phenols
 1x Metch
 1x Nutrients
 1x DOC

2x VOCs uchr

SLW.

1x Gen Chem
 1x 250ml plastic
 1x Hg (mark F.F.)
 1x Phenols
 2x Metch - (mark 1x F.F.)
 1x Nutrient.
 1x DOC

Done
 \$/54

22-11-14

GENERAL SAMPLE SUBMISSION FORM



SAMPLES SUBMITTED TO:

Kingston ☐
Ottawa ☐
Richmond Hill ☐
Barrie ☐
London ☐
Windsor ☐

TESTING REQUIREMENTS

O'Reg 153/04 ☐
O'Reg 406/19 ☐
RPI ☐
Coarse ☐
MISA ☐
Other: ☐
Table (1 - 9) ☐
Table (1 - 9.1) ☐
ICC ☐
Medium/Fine ☐
PWQO ☐
Record of Site ☐
SPLP Table (1 - 9.1) ☐
Agricultural ☐
O'Reg 558 TCLP ☐
Landfill Monitoring ☐

REPORT NUMBER (Lab Use)

B22-34820-2

Are any samples to be submitted intended for Human Consumption under any Drinking Water Regulations?

☐ Yes ☒ No

(If yes, submit all Drinking Water Samples on a Drinking Water Chain of Custody)

Organization: Makvor Eng.	Address: 308 Wellington St Kingston ON.	Invoicing Address (if different):	ANALYSES REQUESTED Suspected Highly Contaminated ☐ Platinum* 200% Surcharge ☐ Gold* 100% Surcharge ☐ Silver 50% Surcharge ☐ Bronze 25% Surcharge ☒ Standard 5-7 days Specific Date:
Contact: Adam S			
Tel: 613-898 8507			
Email:	Quote #: L21 TKT MAKVOR	Project Name#:	
Additional Info (email, cell, etc):	P.O. #:	Additional Info:	

* Sample Matrix Legend: WW=Waste Water, SW=Surface Water, GW=Groundwater, LS=Liquid Sludge, SS=Solid Sludge, S=Soil, Sed=Sediment, PC=Paint Chips, F=Filter, Oil = Oil

Lab No.	Sample Source and/or Sample Identification	S.P.L.	Sample Matrix *	Date Collected (yy-mm-dd)	Time Collected	Indicate Test For Each Sample By Using A Check Mark In The Box Provided										X	Field		# Bottles/ Sample	Field Filtered Y/N
																	pH	Temp.		
13	22-W038		GW	22-11-22	11:20	X											7.58	7.65	09	Y
14	22-W039		GW		11:26	X											7.7	8.64		Y
15	22-W040				12:08	X											8.39	8.93		Y
16	22-W041				11:30	X											8.30	8.72		Y
17	22-W042				14:12	X											8.39	7.70		Y
18	22-W043				14:30	X											8.41	7.66		Y
19	22-W044				15:29	X											8.00	8.4		Y
20	22-W046				18:00	X											8.19	14.33	✓	Y
20 sets = gen chem, 250, nutri, metal, Hg, Phenol, 2x VOC, Doc																				
Missing full set #2.																				

SAMPLE SUBMISSION INFORMATION

SHIPPING INFORMATION

REPORTING / INVOICING

SAMPLE RECEIVING INFORMATION (LABORATORY USE ONLY)

Print: Adam S	Submitted by:	Courier (Client account) ☐	Invoice	Report by Fax ☐	Received By (print): BB	Signature: PAR
Sign: Adam S		Courier (Caduceus account) ☐		Report by Email ☒	Date Received (yy-mm-dd): 22-11-22	Time Received: 18:42
		Drop Off ☒	# of Pieces	Invoice by Email ☒	Laboratory Prepared Bottles: ☒ Yes ☐ No	
		Caduceus (Pick-up) ☐		Invoice by Mail ☐	Sample Temperature °C: 20°C	Labeled by:
Date (yy-mm-dd)/Time:	Date (yy-mm-dd)/Time:					

Comments:

Page 3 of 3

G 102907

Login Kingston

From: Adam Superville <superville@malroz.com>
Sent: 23-Nov-22 2:00 PM
To: Login Kingston
Cc: Robert Varcoe
Subject: Project 1036 Samples

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good afternoon,

I am emailing in regard to some groundwater samples that were brought in Tuesday, Nov 22nd. I am looking to have sample 22-W026 removed from the COC G102906, there is no bottle set for 22-W026.

Thanks,
Adam



Adam Superville
Environmental Technologist
Malroz Engineering Inc.

308 Wellington Street, 2nd floor
Kingston, ON K7K 7A8
C: 613-888-8305

C.O.C.: G102905

REPORT No. B22-34811

Report To:

Malroz Engineering Inc.
308 Wellington Street, 2nd Floor
Kingston ON K7K 7A8 Canada

Attention: Adam Superville

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 22-Nov-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 14-Dec-22

P.O. NUMBER:

SAMPLE MATRIX: Surface Water

WATERWORKS NO.

			Client I.D.	22-W033	22-W045	22-W047	
			Sample I.D.	B22-34811-1	B22-34811-2	B22-34811-3	
			Date Collected	22-Nov-22	22-Nov-22	22-Nov-22	
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Alkalinity(CaCO ₃) to pH4.5	mg/L	5	SM 2320B	24-Nov-22/O	257	234	258
pH @25°C	pH Units		SM 4500H	24-Nov-22/O	8.09	8.04	8.12
Conductivity @25°C	µmho/cm	1	SM 2510B	24-Nov-22/O	575	514	564
Total Dissolved Solids	mg/L	3	SM 2540D	25-Nov-22/O	298	266	292
Chloride	mg/L	0.5	SM4110C	25-Nov-22/O	12.2	7.9	11.9
Nitrate (N)	mg/L	0.05	SM4110C	25-Nov-22/O	2.65	2.74	2.28
Nitrite (N)	mg/L	0.05	SM4110C	25-Nov-22/O	< 0.05	< 0.05	< 0.05
Sulphate	mg/L	1	SM4110C	25-Nov-22/O	31	27	29
BOD(5 day)	mg/L	3	SM 5210B	24-Nov-22/K	< 3	< 3	< 3
Total Suspended Solids	mg/L	3	SM2540D	24-Nov-22/K	5	< 3	< 3
o-Phosphate (P)	mg/L	0.002	PE4500-S	25-Nov-22/K	< 0.002	< 0.002	< 0.002
Phosphorus-Total	mg/L	0.01	E3516.2	29-Nov-22/K	0.03	0.03	0.02
Total Kjeldahl Nitrogen	mg/L	0.1	E3516.2	29-Nov-22/K	0.6	0.6	0.6
Ammonia (N)-Total	mg/L	0.01	SM4500-NH ₃ -H	25-Nov-22/K	0.17	0.05	0.13
Ammonia (N)-unionized	mg/L	0.01	CALC	25-Nov-22/K	< 0.01	< 0.01	0.01
Dissolved Organic Carbon	mg/L	0.2	EPA 415.2	24-Nov-22/O	6.1	5.5	7.1
Phenolics	mg/L	0.001	MOEE 3179	13-Dec-22/K	0.002	0.001	< 0.001
COD	mg/L	5	SM5220C	29-Nov-22/K	12	8	13
Hardness (as CaCO ₃)	mg/L	1	SM 3120	02-Dec-22/O	324	299	316
Aluminum	mg/L	0.01	SM 3120	30-Nov-22/O	0.02	0.03	0.02
Arsenic	mg/L	0.0001	EPA 200.8	01-Dec-22/O	0.0002	0.0002	0.0002
Barium	mg/L	0.001	SM 3120	02-Dec-22/O	0.155	0.145	0.142
Boron	mg/L	0.005	SM 3120	02-Dec-22/O	0.028	0.011	0.022
Cadmium	mg/L	0.000015	EPA 200.8	01-Dec-22/O	< 0.000015	< 0.000015	< 0.000015
Calcium	mg/L	0.02	SM 3120	02-Dec-22/O	78.4	76.7	71.6
Chromium	mg/L	0.001	EPA 200.8	01-Dec-22/O	< 0.001	< 0.001	< 0.001
Cobalt	mg/L	0.0001	EPA 200.8	01-Dec-22/O	0.0004	0.0002	0.0003

M. Dubien

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

C.O.C.: G102905

REPORT No. B22-34811

Report To:

Malroz Engineering Inc.
308 Wellington Street, 2nd Floor
Kingston ON K7K 7A8 Canada

Attention: Adam Superville

Caduceon Environmental Laboratories

285 Dalton Ave
Kingston Ontario K7K 6Z1
Tel: 613-544-2001
Fax: 613-544-2770

DATE RECEIVED: 22-Nov-22

JOB/PROJECT NO.: 1036-Briar Hill

DATE REPORTED: 14-Dec-22

P.O. NUMBER:

SAMPLE MATRIX: Surface Water

WATERWORKS NO.

			Client I.D.	22-W033	22-W045	22-W047	
			Sample I.D.	B22-34811-1	B22-34811-2	B22-34811-3	
			Date Collected	22-Nov-22	22-Nov-22	22-Nov-22	
Parameter	Units	R.L.	Reference Method	Date/Site Analyzed			
Copper	mg/L	0.0001	EPA 200.8	01-Dec-22/O	0.0007	0.0008	0.0008
Iron	mg/L	0.005	SM 3120	02-Dec-22/O	0.334	0.274	0.290
Lead	mg/L	0.00002	EPA 200.8	01-Dec-22/O	0.00007	0.00009	0.00009
Magnesium	mg/L	0.02	SM 3120	02-Dec-22/O	27.4	27.5	24.5
Manganese	mg/L	0.001	SM 3120	02-Dec-22/O	0.067	0.023	0.056
Mercury	mg/L	0.00002	SM 3112 B	29-Nov-22/O	< 0.00002	< 0.00002	< 0.00002
Nickel	mg/L	0.01	SM 3120	02-Dec-22/O	< 0.01	< 0.01	< 0.01
Potassium	mg/L	0.1	SM 3120	02-Dec-22/O	2.0	1.6	1.8
Silver	mg/L	0.0001	EPA 200.8	01-Dec-22/O	< 0.0001	< 0.0001	< 0.0001
Sodium	mg/L	0.2	SM 3120	02-Dec-22/O	9.0	6.6	8.3
Strontium	mg/L	0.001	SM 3120	02-Dec-22/O	0.308	0.304	0.285
Vanadium	mg/L	0.0001	EPA 200.8	01-Dec-22/O	0.0012	0.0016	0.0012
Zinc	mg/L	0.005	SM 3120	02-Dec-22/O	< 0.005	< 0.005	< 0.005

M. Dubien

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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CADUCE **N**TM
ENVIRONMENTAL LABORATORIES
Client committed. Quality assured. Proudly Canadian.

SAMPLES SUBMITTED TO:		TESTING REQUIREMENTS				REPORT NUMBER (Lab Use)	
Kingston	☒	☐	O'Reg 153/04	☐	Table (1 - 9)	☐	Record of Site
Ottawa	☐	☐	O'Reg 406/19	☐	Table (1 - 9.1)	☐	SPLP Table (1 - 9.1)
Richmond Hill	☐	☐	RPI	☐	ICC	☐	Agricultural
Barrie	☐	☐	Coarse	☐	Medium/Fine	☐	O'Reg 558 TCLP
London	☐	☐	MISA	☒	PWQO	☒	Landfill Monitoring
Windsor	☐	☐	Other:				

B22- 34811

☐ Yes ☒ No (If yes, submit all Drinking Water Samples on a Drinking Water Chain of Custody)

Organization: Metroz Engineering		Address: 309 Wallington St Kingston, ON		Invoicing Address (if different):		ANALYSES REQUESTED								TURNAROUND SERVICE REQUESTED (see back page)	
Contact:						As per Quote								*Must be arranged in advance	
Tel:	Fax:													☐ Platinum* 200% Surcharge ☐ Gold* 100% Surcharge ☐ Silver 50% Surcharge ☒ Bronze 25% Surcharge ☒ Standard 5-7 days ☐ Specific Date: _____	
Email:	Quote #:			Project Name#:										Suspected Highly Contaminated	
Email: super@metroz.com Dyke@metroz.com Payerse@metroz.com		Quote #: L21 TL1 MAR02		Project Name#: 1036											
Additional Info (email, cell, etc):		P.O. #:		Additional Info:											

* Sample Matrix Legend: WW=Waste Water, SW=Surface Water, GW=Groundwater, LS=Liquid Sludge, SS=Solid Sludge, S=Soil, Sed=Sediment, PC=Paint Chips, F=Filter, Oil = Oil

[illegible]

SAMPLE SUBMISSION INFORMATION				SHIPPING INFORMATION		REPORTING / INVOICING		SAMPLE RECEIVING INFORMATION (LABORATORY USE ONLY)			
Sampled by: <i>Adam Superyello</i>		Submitted by: <i>Same</i>		Courier (Client account) ☐	Invoice	Report by Fax ☐	Received By (print): <i>BIB</i>	Signature: <i>[Signature]</i>			
Print: <i>Adam Superyello</i>			Courier (Caduceon account) ☐		Report by Email ☒	Date Received (yy-mm-dd): <i>22-11-22</i>	Time Received: <i>18:42</i>				
Sign: <i>Adam Superyello</i>			Drop Off ☒	# of Pieces	Invoice by Email ☒	Laboratory Prepared Bottles: ☒ Yes ☐ No					
Date (yy-mm-dd): <i>22-11-22</i>			Caduceon (Pick-up) ☐		Invoice by Mail ☐	Sample Temperature °C: <i>2.0°C</i>		Labeled by: <i>[Signature]</i>			
Comments:								Page <i>1</i>	of <i>3</i>	G <i>102905</i>	

QUOTATION FOR ANALYTICAL SERVICES

Quote #:	L21_TLTI_Malroz
Organization:	Malroz
Contact:	Mallory Wright
Telephone:	613-548-3446 ex 30
Facsimile:	
Email:	mwright@malroz.com
Project #:	Briar Hill -1036
Address:	308 Wellington Street Kingston ON
Additional Info:	Please Make Note of Special Reporting Limits- In BOLD text under each parameter section
Additional Info:	Ground Water ODWS/Surface Water PWQO- Replaces L18_TLTI_Malroz
Date:	1-Jan-21
Valid Until: 31-Dec-21	

Item #	Quantity	Analysis Request	Matrix	Unit Cost, \$	Amount, \$
Ground Water					
1	25	GENERAL CHEMISTRY - Alkalinity, Ammonia, BOD, COD, DOC, Conductivity, Hardness, pH, Phenols, TP/TKN, TDS, TSS, Chloride, NO2/NO3, Sulphate Reporting Instructions (mg/L, with exception of conductivity (µmho/cm) and pH)	Ground Water	98.00	2450.00
1A	25	Metals - Aluminum, Arsenic, Barium, Boron, Cadmium, Calcium, Chromium, Cobalt, Copper, Iron, Lead, Magnesium, Manganese, Mercury, Potassium, Silver, Sodium, Strontium, Uranium, Vanadium, Zinc (mg/L)	Ground water	*	*
2	25	Full VOC List (ug/L) Please see attachment	Ground Water	52.00	1300.00
Surface Water					
3	14	GENERAL CHEMISTRY - Alkalinity, N-Ammonia, Ammonia (UI) BOD, COD, DOC, Conductivity, Hardness, pH, Phenols, TP/TKN, TDS, TSS, Chloride, NO2/NO3, Sulphate, Total Dissolved Phosphorous - Reporting Instructions (mg/L, with exception of conductivity (µmho/cm) and pH)	Surface water	105.00	315.00
3A	14	METALS - Dissolved Aluminum, Arsenic, Barium, Boron, Cadmium, Calcium, Chromium, Cobalt, Copper, Iron, Lead, Magnesium, Manganese, Dissolved Mercury, Nickel, Potassium, Silver, Sodium, Strontium, Vanadium, Zinc (mg/L)	Surface water	*	*
				Subtotal	4,065.00
				HST	528.45
				Total Cost	4,593.45

Prices do not include shipping unless otherwise stated.

Environmental Surcharge of \$1.50 per sample set - WAIVED

Caduceon Environmental Laboratories

Ottawa

Kingston

Richmond Hill

London

Windsor

CERTIFICATE OF ANALYSIS

Work Order	: WT2222976	Page	: 1 of 4
Client	: Malroz Engineering Inc.	Laboratory	: Waterloo - Environmental
Contact	: Adam Superville	Account Manager	: Costas Farassoglou
Address	: 2nd floor - 308 Wellington Street Kingston ON Canada K7K 7A8	Address	: 60 Northland Road, Unit 1 Waterloo ON Canada N2V 2B8
Telephone	: ----	Telephone	: 613 225 8279
Project	: 1036	Date Samples Received	: 24-Nov-2022 10:30
PO	: ----	Date Analysis Commenced	: 29-Nov-2022
C-O-C number	: ----	Issue Date	: 02-Dec-2022 16:18
Sampler	: CLIENT		
Site	: ----		
Quote number	: Standing Offer 2022		
No. of samples received	: 5		
No. of samples analysed	: 5		

This report supersedes any previous report(s) with this reference. Results apply to the sample(s) as submitted. This document shall not be reproduced, except in full.

This Certificate of Analysis contains the following information:

- General Comments
- Analytical Results
- Surrogate Control Limits

Additional information pertinent to this report will be found in the following separate attachments: Quality Control Report, QC Interpretive report to assist with Quality Review and Sample Receipt Notification (SRN).

Signatories

This document has been electronically signed by the authorized signatories below. Electronic signing is conducted in accordance with US FDA 21 CFR Part 11.

<i>Signatories</i>	<i>Position</i>	<i>Laboratory Department</i>
Katrina Zwambag	Business Manager - Environmental	LCMS, Waterloo, Ontario



General Comments

The analytical methods used by ALS are developed using internationally recognized reference methods (where available), such as those published by US EPA, APHA Standard Methods, ASTM, ISO, Environment Canada, BC MOE, and Ontario MOE. Refer to the ALS Quality Control Interpretive report (QCI) for applicable references and methodology summaries. Reference methods may incorporate modifications to improve performance.

Where a reported less than (<) result is higher than the LOR, this may be due to primary sample extract/digestate dilution and/or insufficient sample for analysis.

Where the LOR of a reported result differs from standard LOR, this may be due to high moisture content, insufficient sample (reduced weight employed) or matrix interference.

Please refer to Quality Control Interpretive report (QCI) for information regarding Holding Time compliance.

Key : CAS Number: Chemical Abstracts Services number is a unique identifier assigned to discrete substances
LOR: Limit of Reporting (detection limit).

Unit	Description
µg/L	micrograms per litre

<: less than.

>: greater than.

Surrogate: An analyte that is similar in behavior to target analyte(s), but that does not occur naturally in environmental samples. For applicable tests, surrogates are added to samples prior to analysis as a check on recovery.

Test results reported relate only to the samples as received by the laboratory.

UNLESS OTHERWISE STATED on SRN or QCI Report, ALL SAMPLES WERE RECEIVED IN ACCEPTABLE CONDITION.



Analytical Results

Sub-Matrix: Water					Client sample ID	22-W025	22-W026	22-W031	22-W034	22-W046
(Matrix: Water)					Client sampling date / time	22-Nov-2022 12:20	22-Nov-2022 12:20	22-Nov-2022 14:54	22-Nov-2022 15:02	22-Nov-2022 18:00
Analyte	CAS Number	Method	LOR	Unit	WT2222976-001	WT2222976-002	WT2222976-003	WT2222976-004	WT2222976-005	
					Result	Result	Result	Result	Result	
Perfluoroalkyl Substances (PFAS)										
eicosafuoro-3-oxaundecane-1-sulfonic acid, 11-chloro- [11CI-PF3OUdS]	763051-92-9	E745B	0.020	µg/L	<0.020	<0.020	<0.020	<0.020	<0.020	
ethyl perfluorooctanesulfonamide, n- [NEtFOSA]	4151-50-2	E745B	0.025	µg/L	<0.025	<0.025	<0.025	<0.025	<0.025	
ethyl perfluorooctanesulfonamidoacetic acid, n- [NEtFOSAA]	2991-50-6	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
ethyl perfluorooctanesulfonamidoethanol, n- [NEtFOSE]	1691-99-2	E745B	0.030	µg/L	<0.030	<0.030	<0.030	<0.030	<0.030	
fluorotelomer sulfonic acid, 10:2 [10:2 FTS]	120226-60-0	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
fluorotelomer sulfonic acid, 4:2 [4:2 FTS]	757124-72-4	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
fluorotelomer sulfonic acid, 6:2 [6:2 FTS]	27619-97-2	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
fluorotelomer sulfonic acid, 8:2 [8:2 FTS]	39108-34-4	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
hexadecafluoro-3-oxanone-1-sulfonic acid, 9-chloro- [9CI-PF3ONS]	756426-58-1	E745B	0.020	µg/L	<0.020	<0.020	<0.020	<0.020	<0.020	
hexafluoropropylene oxide dimer acid [HFPO-DA] (GenX)	13252-13-6	E745B	0.20	µg/L	<0.20	<0.20	<0.20	<0.20	<0.20	
methyl perfluorooctanesulfonamide, n- [NMeFOSA]	31506-32-8	E745B	0.025	µg/L	<0.025	<0.025	<0.025	<0.025	<0.025	
methyl perfluorooctanesulfonamidoacetic acid, n- [NMeFOSAA]	2355-31-9	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
methyl perfluorooctanesulfonamidoethanol, n- [NMeFOSE]	24448-09-7	E745B	0.030	µg/L	<0.030	<0.030	<0.030	<0.030	<0.030	
perfluorobutanesulfonic acid [PFBS]	375-73-5	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
perfluorobutanoic acid [PFBA]	375-22-4	E745B	0.10	µg/L	<0.10	<0.10	<0.10	<0.10	<0.10	
perfluorodecanesulfonic acid [PFDS]	335-77-3	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
perfluorodecanoic acid [PFDA]	335-76-2	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
perfluorododecanoic acid [PFDoA]	307-55-1	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
perfluoroheptanesulfonic acid [PFHpS]	375-92-8	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
perfluoroheptanoic acid [PFHpA]	375-85-9	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
perfluorohexanesulfonic acid [PFHxS]	355-46-4	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
perfluorohexanoic acid [PFHxA]	307-24-4	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
perfluorononanesulfonic acid [PFNS]	68259-12-1	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	



Analytical Results

Sub-Matrix: Water					Client sample ID	22-W025	22-W026	22-W031	22-W034	22-W046
(Matrix: Water)					Client sampling date / time	22-Nov-2022 12:20	22-Nov-2022 12:20	22-Nov-2022 14:54	22-Nov-2022 15:02	22-Nov-2022 18:00
Analyte	CAS Number	Method	LOR	Unit	WT2222976-001	WT2222976-002	WT2222976-003	WT2222976-004	WT2222976-005	
					Result	Result	Result	Result	Result	
Perfluoroalkyl Substances (PFAS)										
perfluorononanoic acid [PFNA]	375-95-1	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
perfluorononanoic acid, 4,8-dioxa-3H- [ADONA]	919005-14-4	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
perfluorooctanesulfonamide [PFOSA]	754-91-6	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
perfluorooctanesulfonic acid [PFOS]	1763-23-1	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
perfluorooctanoic acid [PFOA]	335-67-1	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
perfluoropentanesulfonic acid [PFPeS]	2706-91-4	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
perfluoropentanoic acid [PFPeA]	2706-90-3	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
perfluorotetradecanoic acid [PFTeDA]	376-06-7	E745B	0.025	µg/L	<0.025	<0.025	<0.025	<0.025	<0.025	
perfluorotridecanoic acid [PFTrDA]	72629-94-8	E745B	0.0250	µg/L	<0.0250	<0.0250	<0.0250	<0.0250	<0.0250	
perfluoroundecanoic acid [PFUnA]	2058-94-8	E745B	0.010	µg/L	<0.010	<0.010	<0.010	<0.010	<0.010	
Perfluoroalkyl Substances (PFAS) Surrogates										
perfluorooctanesulfonic acid [13C8-PFOS]	265893-05-6	E745B	1.00	%	108	103	86.0	95.2	96.0	

Please refer to the General Comments section for an explanation of any qualifiers detected.

QUALITY CONTROL INTERPRETIVE REPORT

Work Order	: WT2222976	Page	: 1 of 5
Client	: Malroz Engineering Inc.	Laboratory	: Waterloo - Environmental
Contact	: Adam Superville	Account Manager	: Costas Farassoglou
Address	: 2nd floor - 308 Wellington Street Kingston ON Canada K7K 7A8	Address	: 60 Northland Road, Unit 1 Waterloo, Ontario Canada N2V 2B8
Telephone	: ----	Telephone	: 613 225 8279
Project	: 1036	Date Samples Received	: 24-Nov-2022 10:30
PO	: ----	Issue Date	: 02-Dec-2022 16:19
C-O-C number	: ----		
Sampler	: CLIENT		
Site	: ----		
Quote number	: Standing Offer 2022		
No. of samples received	: 5		
No. of samples analysed	: 5		

This report is automatically generated by the ALS LIMS (Laboratory Information Management System) through evaluation of Quality Control (QC) results and other QA parameters associated with this submission, and is intended to facilitate rapid data validation by auditors or reviewers. The report highlights any exceptions and outliers to ALS Data Quality Objectives, provides holding time details and exceptions, summarizes QC sample frequencies, and lists applicable methodology references and summaries.

Key

Anonymous: Refers to samples which are not part of this work order, but which formed part of the QC process lot.

CAS Number: Chemical Abstracts Service number is a unique identifier assigned to discrete substances.

DQO: Data Quality Objective.

LOR: Limit of Reporting (detection limit).

RPD: Relative Percent Difference.

Workorder Comments

Holding times are displayed as "----" if no guidance exists from CCME, Canadian provinces, or broadly recognized international references.

Summary of Outliers

Outliers : Quality Control Samples

- No Method Blank value outliers occur.
- No Duplicate outliers occur.
- No Laboratory Control Sample (LCS) outliers occur
- No Matrix Spike outliers occur.
- No Test sample Surrogate recovery outliers exist.

Outliers: Reference Material (RM) Samples

- No Reference Material (RM) Sample outliers occur.

Outliers : Analysis Holding Time Compliance (Breaches)

- No Analysis Holding Time Outliers exist.

Outliers : Frequency of Quality Control Samples

- No Quality Control Sample Frequency Outliers occur.



Analysis Holding Time Compliance

This report summarizes extraction / preparation and analysis times and compares each with ALS recommended holding times, which are selected to meet known provincial and /or federal requirements. In the absence of regulatory hold times, ALS establishes recommendations based on guidelines published by organizations such as CCME, US EPA, APHA Standard Methods, ASTM, or Environment Canada (where available). Dates and holding times reported below represent the first dates of extraction or analysis. If subsequent tests or dilutions exceeded holding times, qualifiers are added (refer to COA).

If samples are identified below as having been analyzed or extracted outside of recommended holding times, measurement uncertainties may be increased, and this should be taken into consideration when interpreting results.

Where actual sampling date is not provided on the chain of custody, the date of receipt with time at 00:00 is used for calculation purposes.

Where only the sample date without time is provided on the chain of custody, the sampling date at 00:00 is used for calculation purposes.

Matrix: **Water** Evaluation: * = Holding time exceedance ; ✓ = Within Holding Time

Analyte Group	Method	Sampling Date	Extraction / Preparation				Analysis			
			Preparation Date	Holding Times		Eval	Analysis Date	Holding Times		Eval
				Rec	Actual			Rec	Actual	
Perfluoroalkyl Substances (PFAS) : PFAS in Water by LC-MS-MS										
HDPE (teflon free) 22-W025	E745B	22-Nov-2022	29-Nov-2022	28 days	7 days	✓	01-Dec-2022	28 days	2 days	✓
Perfluoroalkyl Substances (PFAS) : PFAS in Water by LC-MS-MS										
HDPE (teflon free) 22-W026	E745B	22-Nov-2022	29-Nov-2022	28 days	7 days	✓	01-Dec-2022	28 days	2 days	✓
Perfluoroalkyl Substances (PFAS) : PFAS in Water by LC-MS-MS										
HDPE (teflon free) 22-W031	E745B	22-Nov-2022	29-Nov-2022	28 days	7 days	✓	01-Dec-2022	28 days	2 days	✓
Perfluoroalkyl Substances (PFAS) : PFAS in Water by LC-MS-MS										
HDPE (teflon free) 22-W034	E745B	22-Nov-2022	29-Nov-2022	28 days	7 days	✓	01-Dec-2022	28 days	2 days	✓
Perfluoroalkyl Substances (PFAS) : PFAS in Water by LC-MS-MS										
HDPE (teflon free) 22-W046	E745B	22-Nov-2022	29-Nov-2022	28 days	7 days	✓	01-Dec-2022	28 days	2 days	✓

Legend & Qualifier Definitions

Rec. HT: ALS recommended hold time (see units).



Quality Control Parameter Frequency Compliance

The following report summarizes the frequency of laboratory QC samples analyzed within the analytical batches (QC lots) in which the submitted samples were processed. The actual frequency should be greater than or equal to the expected frequency.

Matrix: **Water**

Evaluation: ✖ = QC frequency outside specification; ✔ = QC frequency within specification.

Quality Control Sample Type			Count		Frequency (%)		
Analytical Methods	Method	QC Lot #	QC	Regular	Actual	Expected	Evaluation
Laboratory Duplicates (DUP)							
PFAS in Water by LC-MS-MS	E745B	759747	1	19	5.2	5.0	✓
Laboratory Control Samples (LCS)							
PFAS in Water by LC-MS-MS	E745B	759747	1	19	5.2	5.0	✓
Method Blanks (MB)							
PFAS in Water by LC-MS-MS	E745B	759747	1	19	5.2	5.0	✓
Matrix Spikes (MS)							
PFAS in Water by LC-MS-MS	E745B	759747	1	19	5.2	5.0	✓



Methodology References and Summaries

The analytical methods used by ALS are developed using internationally recognized reference methods (where available), such as those published by US EPA, APHA Standard Methods, ASTM, ISO, Environment Canada, BC MOE, and Ontario MOE. Reference methods may incorporate modifications to improve performance (indicated by "mod").

Analytical Methods	Method / Lab	Matrix	Method Reference	Method Descriptions
PFAS in Water by LC-MS-MS	E745B Waterloo - Environmental	Water	MOECC E3533	An aliquot of water is analyzed for PFAs by direct injection LC/MS/MS

Preparation Methods	Method / Lab	Matrix	Method Reference	Method Descriptions
Preparation of PFAS in Water by Direct Injection	EP745 Waterloo - Environmental	Water	MOECC E3533	An aliquot of water is analyzed for PFAs by direct injection LC/MS/MS

QUALITY CONTROL REPORT

Work Order : **WT2222976**

Client : Malroz Engineering Inc.

Contact : Adam Superville

Address : 2nd floor - 308 Wellington Street
Kingston ON Canada K7K 7A8

Telephone :

Project : 1036

PO : ----

C-O-C number : ----

Sampler : CLIENT ----

Site : ----

Quote number : Standing Offer 2022

No. of samples received : 5

No. of samples analysed : 5

Page : 1 of 10

Laboratory : Waterloo - Environmental

Account Manager : Costas Farassoglou

Address : 60 Northland Road, Unit 1
Waterloo, Ontario Canada N2V 2B8

Telephone : 613 225 8279

Date Samples Received : 24-Nov-2022 10:30

Date Analysis Commenced : 29-Nov-2022

Issue Date : 02-Dec-2022 16:18

This report supersedes any previous report(s) with this reference. Results apply to the sample(s) as submitted. This document shall not be reproduced, except in full.

This Quality Control Report contains the following information:

- Laboratory Duplicate (DUP) Report; Relative Percent Difference (RPD) and Data Quality Objectives
 - Matrix Spike (MS) Report; Recovery and Data Quality Objectives
 - Method Blank (MB) Report; Recovery and Data Quality Objectives
 - Laboratory Control Sample (LCS) Report; Recovery and Data Quality Objectives
-

Signatories

This document has been electronically signed by the authorized signatories below. Electronic signing is conducted in accordance with US FDA 21 CFR Part 11.

Signatories	Position	Laboratory Department
Katrina Zwambag	Business Manager - Environmental	Waterloo LCMS, Waterloo, Ontario



General Comments

The ALS Quality Control (QC) report is optionally provided to ALS clients upon request. ALS test methods include comprehensive QC checks with every analysis to ensure our high standards of quality are met. Each QC result has a known or expected target value, which is compared against predetermined Data Quality Objectives (DQOs) to provide confidence in the accuracy of associated test results. This report contains detailed results for all QC results applicable to this sample submission. Please refer to the ALS Quality Control Interpretation report (QCI) for applicable method references and methodology summaries.

Key :

Anonymous = Refers to samples which are not part of this work order, but which formed part of the QC process lot.

CAS Number = Chemical Abstracts Service number is a unique identifier assigned to discrete substances.

DQO = Data Quality Objective.

LOR = Limit of Reporting (detection limit).

RPD = Relative Percent Difference

= Indicates a QC result that did not meet the ALS DQO.

Workorder Comments

Holding times are displayed as "---" if no guidance exists from CCME, Canadian provinces, or broadly recognized international references.



Laboratory Duplicate (DUP) Report

A Laboratory Duplicate (DUP) is a randomly selected intralaboratory replicate sample. Laboratory Duplicates provide information regarding method precision and sample heterogeneity. ALS DQOs for Laboratory Duplicates are expressed as test-specific limits for Relative Percent Difference (RPD), or as an absolute difference limit of 2 times the LOR for low concentration duplicates within ~ 4-10 times the LOR (cut-off is test-specific).

Sub-Matrix: **Water**

					Laboratory Duplicate (DUP) Report						
Laboratory sample ID	Client sample ID	Analyte	CAS Number	Method	LOR	Unit	Original Result	Duplicate Result	RPD(%) or Difference	Duplicate Limits	Qualifier
Perfluoroalkyl Substances (PFAS) (QC Lot: 759747)											
WT2222956-008	Anonymous	eicosafuoro-3-oxaundecane-1-sulfonic acid, 11-chloro-[11Cl-PF3OUdS]	763051-92-9	E745B	0.020	µg/L	<20 ng/L	<0.020	0	Diff <2x LOR	----
		ethyl perfluorooctanesulfonamide, n-[NEtFOSA]	4151-50-2	E745B	0.025	µg/L	<25 ng/L	<0.025	0	Diff <2x LOR	----
		ethyl perfluorooctanesulfonamido acetic acid, n-[NEtFOSAA]	2991-50-6	E745B	0.010	µg/L	<10 ng/L	<0.010	0	Diff <2x LOR	----
		ethyl perfluorooctanesulfonamido ethanol, n-[NEtFOSE]	1691-99-2	E745B	0.030	µg/L	<30 ng/L	<0.030	0	Diff <2x LOR	----
		fluorotelomer sulfonic acid, 10:2 [10:2 FTS]	120226-60-0	E745B	0.010	µg/L	<10 ng/L	<0.010	0	Diff <2x LOR	----
		fluorotelomer sulfonic acid, 4:2 [4:2 FTS]	757124-72-4	E745B	0.010	µg/L	<10 ng/L	<0.010	0	Diff <2x LOR	----
		fluorotelomer sulfonic acid, 6:2 [6:2 FTS]	27619-97-2	E745B	0.010	µg/L	<10 ng/L	<0.010	0	Diff <2x LOR	----
		fluorotelomer sulfonic acid, 8:2 [8:2 FTS]	39108-34-4	E745B	0.010	µg/L	<10 ng/L	<0.010	0	Diff <2x LOR	----
		hexadecafluoro-3-oxanonane-1-sulfonic acid, 9-chloro-[9Cl-PF3ONS]	756426-58-1	E745B	0.020	µg/L	<20 ng/L	<0.020	0	Diff <2x LOR	----
		hexafluoropropylene oxide dimer acid [HFPO-DA] (GenX)	13252-13-6	E745B	0.20	µg/L	<0.20	<0.20	0	Diff <2x LOR	----
		methyl perfluorooctanesulfonamide, n-[NMeFOSA]	31506-32-8	E745B	0.025	µg/L	<25 ng/L	<0.025	0	Diff <2x LOR	----
		methyl perfluorooctanesulfonamido acetic acid, n-[NMeFOSAA]	2355-31-9	E745B	0.010	µg/L	<10 ng/L	<0.010	0	Diff <2x LOR	----
		methyl perfluorooctanesulfonamido ethanol, n-[NMeFOSE]	24448-09-7	E745B	0.030	µg/L	<30 ng/L	<0.030	0	Diff <2x LOR	----
		perfluorobutanesulfonic acid [PFBS]	375-73-5	E745B	0.020	µg/L	<20 ng/L	<0.020	0	Diff <2x LOR	----
		perfluorobutanoic acid [PFBA]	375-22-4	E745B	0.10	µg/L	<0.10	<0.10	0	Diff <2x LOR	----
		perfluorodecanesulfonic acid [PFDS]	335-77-3	E745B	0.010	µg/L	<10 ng/L	<0.010	0	Diff <2x LOR	----
		perfluorodecanoic acid [PFDA]	335-76-2	E745B	0.010	µg/L	<10 ng/L	<0.010	0	Diff <2x LOR	----
		perfluorododecanoic acid [PFDoA]	307-55-1	E745B	0.010	µg/L	<10 ng/L	<0.010	0	Diff <2x LOR	----
		perfluoroheptanesulfonic acid [PFHpS]	375-92-8	E745B	0.010	µg/L	<10 ng/L	<0.010	0	Diff <2x LOR	----
		perfluoroheptanoic acid [PFHpA]	375-85-9	E745B	0.020	µg/L	<20 ng/L	<0.020	0	Diff <2x LOR	----



Sub-Matrix: Water					Laboratory Duplicate (DUP) Report						
Laboratory sample ID	Client sample ID	Analyte	CAS Number	Method	LOR	Unit	Original Result	Duplicate Result	RPD(%) or Difference	Duplicate Limits	Qualifier
Perfluoroalkyl Substances (PFAS) (QC Lot: 759747) - continued											
WT2222956-008	Anonymous	perfluorohexanesulfonic acid [PFHxS]	355-46-4	E745B	0.020	µg/L	<20 ng/L	<0.020	0	Diff <2x LOR	----
		perfluorohexanoic acid [PFHxA]	307-24-4	E745B	0.020	µg/L	<20 ng/L	<0.020	0	Diff <2x LOR	----
		perfluorononanesulfonic acid [PFNS]	68259-12-1	E745B	0.010	µg/L	<0.010	<0.010	0	Diff <2x LOR	----
		perfluorononanoic acid [PFNA]	375-95-1	E745B	0.020	µg/L	<20 ng/L	<0.020	0	Diff <2x LOR	----
		perfluorononanoic acid, 4,8-dioxa-3H- [ADONA]	919005-14-4	E745B	0.010	µg/L	<10 ng/L	<0.010	0	Diff <2x LOR	----
		perfluorooctanesulfonamide [PFOSA]	754-91-6	E745B	0.010	µg/L	<10 ng/L	<0.010	0	Diff <2x LOR	----
		perfluorooctanesulfonic acid [PFOS]	1763-23-1	E745B	0.010	µg/L	<10 ng/L	<0.010	0	Diff <2x LOR	----
		perfluorooctanoic acid [PFOA]	335-67-1	E745B	0.010	µg/L	<10 ng/L	<0.010	0	Diff <2x LOR	----
		perfluoropentanesulfonic acid [PFPeS]	2706-91-4	E745B	0.010	µg/L	<10 ng/L	<0.010	0	Diff <2x LOR	----
		perfluoropentanoic acid [PFPeA]	2706-90-3	E745B	0.020	µg/L	<20 ng/L	<0.020	0	Diff <2x LOR	----
		perfluorotetradecanoic acid [PFTeDA]	376-06-7	E745B	0.025	µg/L	<25 ng/L	<0.025	0	Diff <2x LOR	----
		perfluorotridecanoic acid [PFTTrDA]	72629-94-8	E745B	0.0250	µg/L	<25.0 ng/L	<0.0250	0	Diff <2x LOR	----
		perfluoroundecanoic acid [PFUnA]	2058-94-8	E745B	0.010	µg/L	<10 ng/L	<0.010	0	Diff <2x LOR	----



Method Blank (MB) Report

A Method Blank is an analyte-free matrix that undergoes sample processing identical to that carried out for test samples. Method Blank results are used to monitor and control for potential contamination from the laboratory environment and reagents. For most tests, the DQO for Method Blanks is for the result to be < LOR.

Sub-Matrix: Water

Analyte	CAS Number	Method	LOR	Unit	Result	Qualifier
Perfluoroalkyl Substances (PFAS) (QCLot: 759747)						
eicosafuoro-3-oxaundecane-1-sulfonic acid, 11-chloro- [11Cl-PF3OUdS]	763051-92-9	E745B	0.02	µg/L	<0.020	----
ethyl perfluorooctanesulfonamide, n- [NEtFOSA]	4151-50-2	E745B	0.025	µg/L	<0.025	----
ethyl perfluorooctanesulfonamidoacetic acid, n- [NEtFOSAA]	2991-50-6	E745B	0.01	µg/L	<0.010	----
ethyl perfluorooctanesulfonamidoethanol, n- [NEtFOSE]	1691-99-2	E745B	0.03	µg/L	<0.030	----
fluorotelomer sulfonic acid, 10:2 [10:2 FTS]	120226-60-0	E745B	0.01	µg/L	<0.010	----
fluorotelomer sulfonic acid, 4:2 [4:2 FTS]	757124-72-4	E745B	0.01	µg/L	<0.010	----
fluorotelomer sulfonic acid, 6:2 [6:2 FTS]	27619-97-2	E745B	0.01	µg/L	<0.010	----
fluorotelomer sulfonic acid, 8:2 [8:2 FTS]	39108-34-4	E745B	0.01	µg/L	<0.010	----
hexadecafluoro-3-oxanonane-1-sulfonic acid, 9-chloro- [9Cl-PF3ONS]	756426-58-1	E745B	0.02	µg/L	<0.020	----
hexafluoropropylene oxide dimer acid [HFPO-DA] (GenX)	13252-13-6	E745B	0.2	µg/L	<0.20	----
methyl perfluorooctanesulfonamide, n- [NMeFOSA]	31506-32-8	E745B	0.025	µg/L	<0.025	----
methyl perfluorooctanesulfonamidoacetic acid, n- [NMeFOSAA]	2355-31-9	E745B	0.01	µg/L	<0.010	----
methyl perfluorooctanesulfonamidoethanol, n- [NMeFOSE]	24448-09-7	E745B	0.03	µg/L	<0.030	----
perfluorobutanesulfonic acid [PFBS]	375-73-5	E745B	0.01	µg/L	<0.010	----
perfluorobutanoic acid [PFBA]	375-22-4	E745B	0.1	µg/L	<0.10	----
perfluorodecanesulfonic acid [PFDS]	335-77-3	E745B	0.01	µg/L	<0.010	----
perfluorodecanoic acid [PFDA]	335-76-2	E745B	0.01	µg/L	<0.010	----
perfluorododecanoic acid [PFDoA]	307-55-1	E745B	0.01	µg/L	<0.010	----
perfluoroheptanesulfonic acid [PFHpS]	375-92-8	E745B	0.01	µg/L	<0.010	----
perfluoroheptanoic acid [PFHpA]	375-85-9	E745B	0.01	µg/L	<0.010	----
perfluorohexanesulfonic acid [PFHxS]	355-46-4	E745B	0.01	µg/L	<0.010	----
perfluorohexanoic acid [PFHxA]	307-24-4	E745B	0.01	µg/L	<0.010	----
perfluorononanesulfonic acid [PFNS]	68259-12-1	E745B	0.01	µg/L	<0.010	----
perfluorononanoic acid [PFNA]	375-95-1	E745B	0.01	µg/L	<0.010	----
perfluorononanoic acid, 4,8-dioxa-3H- [ADONA]	919005-14-4	E745B	0.01	µg/L	<0.010	----
perfluorooctanesulfonamide [PFOSA]	754-91-6	E745B	0.01	µg/L	<0.010	----
perfluorooctanesulfonic acid [PFOS]	1763-23-1	E745B	0.01	µg/L	<0.010	----
perfluorooctanoic acid [PFOA]	335-67-1	E745B	0.01	µg/L	<0.010	----
perfluoropentanesulfonic acid [PFPeS]	2706-91-4	E745B	0.01	µg/L	<0.010	----
perfluoropentanoic acid [PFPeA]	2706-90-3	E745B	0.01	µg/L	<0.010	----



Sub-Matrix: Water

Analyte	CAS Number	Method	LOR	Unit	Result	Qualifier
Perfluoroalkyl Substances (PFAS) (QCLot: 759747) - continued						
perfluorotetradecanoic acid [PFTeDA]	376-06-7	E745B	0.025	µg/L	<0.025	----
perfluorotridecanoic acid [PFTrDA]	72629-94-8	E745B	0.025	µg/L	<0.0250	----
perfluoroundecanoic acid [PFUnA]	2058-94-8	E745B	0.01	µg/L	<0.010	----



Laboratory Control Sample (LCS) Report

A Laboratory Control Sample (LCS) is an analyte-free matrix that has been fortified (spiked) with test analytes at known concentration and processed in an identical manner to test samples. LCS results are expressed as percent recovery, and are used to monitor and control test method accuracy and precision, independent of test sample matrix.

Sub-Matrix: Water

					Laboratory Control Sample (LCS) Report				
					Spike	Recovery (%)	Recovery Limits (%)		
Analyte	CAS Number	Method	LOR	Unit	Concentration	LCS	Low	High	Qualifier
Perfluoroalkyl Substances (PFAS) (QCLot: 759747)									
eicosafuoro-3-oxaundecane-1-sulfonic acid, 11-chloro-[11CI-PF3OUdS]	763051-92-9	E745B	0.02	µg/L	0.3 µg/L	134	50.0	150	----
ethyl perfluorooctanesulfonamide, n- [NEtFOSA]	4151-50-2	E745B	0.025	µg/L	0.3 µg/L	125	50.0	150	----
ethyl perfluorooctanesulfonamidoacetic acid, n- [NEtFOSAA]	2991-50-6	E745B	0.01	µg/L	0.3 µg/L	122	50.0	150	----
ethyl perfluorooctanesulfonamidoethanol, n- [NEtFOSE]	1691-99-2	E745B	0.03	µg/L	0.3 µg/L	94.7	50.0	150	----
fluorotelomer sulfonic acid, 10:2 [10:2 FTS]	120226-60-0	E745B	0.01	µg/L	0.3 µg/L	75.3	50.0	150	----
fluorotelomer sulfonic acid, 4:2 [4:2 FTS]	757124-72-4	E745B	0.01	µg/L	0.3 µg/L	115	50.0	150	----
fluorotelomer sulfonic acid, 6:2 [6:2 FTS]	27619-97-2	E745B	0.01	µg/L	0.3 µg/L	141	50.0	150	----
fluorotelomer sulfonic acid, 8:2 [8:2 FTS]	39108-34-4	E745B	0.01	µg/L	0.3 µg/L	102	50.0	150	----
hexadecafluoro-3-oxanonane-1-sulfonic acid, 9-chloro-[9CI-PF3ONS]	756426-58-1	E745B	0.02	µg/L	0.3 µg/L	123	50.0	150	----
hexafluoropropylene oxide dimer acid [HFPO-DA] (GenX)	13252-13-6	E745B	0.2	µg/L	3 µg/L	87.2	50.0	150	----
methyl perfluorooctanesulfonamide, n- [NMeFOSA]	31506-32-8	E745B	0.025	µg/L	0.3 µg/L	98.7	50.0	150	----
methyl perfluorooctanesulfonamidoacetic acid, n- [NMeFOSAA]	2355-31-9	E745B	0.01	µg/L	0.3 µg/L	125	50.0	150	----
methyl perfluorooctanesulfonamidoethanol, n- [NMeFOSE]	24448-09-7	E745B	0.03	µg/L	0.3 µg/L	132	50.0	150	----
perfluorobutanesulfonic acid [PFBS]	375-73-5	E745B	0.01	µg/L	0.3 µg/L	104	50.0	150	----
perfluorobutanoic acid [PFBA]	375-22-4	E745B	0.1	µg/L	1 µg/L	110	50.0	150	----
perfluorodecanesulfonic acid [PFDS]	335-77-3	E745B	0.01	µg/L	0.3 µg/L	127	50.0	150	----
perfluorodecanoic acid [PFDA]	335-76-2	E745B	0.01	µg/L	0.3 µg/L	148	50.0	150	----
perfluorododecanoic acid [PFDoA]	307-55-1	E745B	0.01	µg/L	0.3 µg/L	123	50.0	150	----
perfluoroheptanesulfonic acid [PFHpS]	375-92-8	E745B	0.01	µg/L	0.3 µg/L	113	50.0	150	----
perfluoroheptanoic acid [PFHpA]	375-85-9	E745B	0.01	µg/L	0.3 µg/L	118	50.0	150	----
perfluorohexanesulfonic acid [PFHxS]	355-46-4	E745B	0.01	µg/L	0.3 µg/L	103	50.0	150	----
perfluorohexanoic acid [PFHxA]	307-24-4	E745B	0.01	µg/L	0.3 µg/L	127	50.0	150	----
perfluorononanesulfonic acid [PFNS]	68259-12-1	E745B	0.01	µg/L	0.3 µg/L	109	50.0	150	----
perfluorononanoic acid [PFNA]	375-95-1	E745B	0.01	µg/L	0.3 µg/L	122	50.0	150	----
perfluorononanoic acid, 4,8-dioxa-3H- [ADONA]	919005-14-4	E745B	0.01	µg/L	0.3 µg/L	126	50.0	150	----
perfluorooctanesulfonamide [PFOSA]	754-91-6	E745B	0.01	µg/L	0.3 µg/L	110	50.0	150	----
perfluorooctanesulfonic acid [PFOS]	1763-23-1	E745B	0.01	µg/L	0.3 µg/L	121	50.0	150	----
perfluorooctanoic acid [PFOA]	335-67-1	E745B	0.01	µg/L	0.3 µg/L	122	50.0	150	----
perfluoropentanesulfonic acid [PFPeS]	2706-91-4	E745B	0.01	µg/L	0.3 µg/L	108	50.0	150	----



Sub-Matrix: Water					Laboratory Control Sample (LCS) Report				
					Spike	Recovery (%)	Recovery Limits (%)		
					Concentration	LCS	Low	High	Qualifier
Analyte	CAS Number	Method	LOR	Unit					
Perfluoroalkyl Substances (PFAS) (QCLot: 759747) - continued									
perfluoropentanoic acid [PFPeA]	2706-90-3	E745B	0.01	µg/L	0.3 µg/L	132	50.0	150	----
perfluorotetradecanoic acid [PFTeDA]	376-06-7	E745B	0.025	µg/L	0.3 µg/L	126	50.0	150	----
perfluorotridecanoic acid [PFTrDA]	72629-94-8	E745B	0.025	µg/L	0.3 µg/L	136	50.0	150	----
perfluoroundecanoic acid [PFUnA]	2058-94-8	E745B	0.01	µg/L	0.3 µg/L	112	50.0	150	----



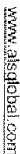
Matrix Spike (MS) Report

A Matrix Spike (MS) is a randomly selected intra-laboratory replicate sample that has been fortified (spiked) with test analytes at known concentration, and processed in an identical manner to test samples. Matrix Spikes provide information regarding analyte recovery and potential matrix effects. MS DQO exceedances due to sample matrix may sometimes be unavoidable; in such cases, test results for the associated sample (or similar samples) may be subject to bias. ND – Recovery not determined, background level >= 1x spike level.

Sub-Matrix: Water					Matrix Spike (MS) Report					
					Spike		Recovery (%)	Recovery Limits (%)		
Laboratory sample ID	Client sample ID	Analyte	CAS Number	Method	Concentration	Target	MS	Low	High	Qualifier
Perfluoroalkyl Substances (PFAS) (QCLot: 759747)										
WT2222956-008	Anonymous	eicosafuoro-3-oxaundecane-1-sulfonic acid, 11-chloro- [11Cl-PF3OUdS]	763051-92-9	E745B	0.448 µg/L	0.3 µg/L	149	50.0	150	----
		ethyl perfluorooctanesulfonamide, n- [NEtFOSA]	4151-50-2	E745B	0.360 µg/L	0.3 µg/L	120	50.0	150	----
		ethyl perfluorooctanesulfonamidoacetic acid, n- [NEtFOSAA]	2991-50-6	E745B	0.382 µg/L	0.3 µg/L	127	50.0	150	----
		ethyl perfluorooctanesulfonamidoeth anol, n- [NEtFOSE]	1691-99-2	E745B	0.258 µg/L	0.3 µg/L	86.0	50.0	150	----
		fluorotelomer sulfonic acid, 10:2 [10:2 FTS]	120226-60-0	E745B	0.208 µg/L	0.3 µg/L	69.3	50.0	150	----
		fluorotelomer sulfonic acid, 4:2 [4:2 FTS]	757124-72-4	E745B	0.376 µg/L	0.3 µg/L	125	50.0	150	----
		fluorotelomer sulfonic acid, 6:2 [6:2 FTS]	27619-97-2	E745B	0.390 µg/L	0.3 µg/L	130	50.0	150	----
		fluorotelomer sulfonic acid, 8:2 [8:2 FTS]	39108-34-4	E745B	0.348 µg/L	0.3 µg/L	116	50.0	150	----
		hexadecafluoro-3-oxanonane-1-sulfonic acid, 9-chloro- [9Cl-PF3ONS]	756426-58-1	E745B	0.430 µg/L	0.3 µg/L	143	50.0	150	----
		hexafluoropropylene oxide dimer acid [HFPO-DA] (GenX)	13252-13-6	E745B	3.25 µg/L	3 µg/L	108	50.0	150	----
		methyl perfluorooctanesulfonamide, n- [NMeFOSA]	31506-32-8	E745B	0.304 µg/L	0.3 µg/L	101	50.0	150	----
		methyl perfluorooctanesulfonamidoace tic acid, n- [NMeFOSAA]	2355-31-9	E745B	0.380 µg/L	0.3 µg/L	127	50.0	150	----
		methyl perfluorooctanesulfonamidoeth anol, n- [NMeFOSE]	24448-09-7	E745B	0.368 µg/L	0.3 µg/L	123	50.0	150	----
		perfluorobutanesulfonic acid [PFBS]	375-73-5	E745B	0.312 µg/L	0.3 µg/L	104	50.0	150	----
		perfluorobutanoic acid [PFBA]	375-22-4	E745B	1.05 µg/L	1 µg/L	105	50.0	150	----
		perfluorodecanesulfonic acid [PFDS]	335-77-3	E745B	0.442 µg/L	0.3 µg/L	147	50.0	150	----
		perfluorodecanoic acid [PFDA]	335-76-2	E745B	0.434 µg/L	0.3 µg/L	145	50.0	150	----
		perfluorododecanoic acid [PFDoA]	307-55-1	E745B	0.364 µg/L	0.3 µg/L	121	50.0	150	----
		perfluoroheptanesulfonic acid [PFHpS]	375-92-8	E745B	0.404 µg/L	0.3 µg/L	135	50.0	150	----
		perfluoroheptanoic acid [PFHpA]	375-85-9	E745B	0.420 µg/L	0.3 µg/L	140	50.0	150	----
		perfluorohexanesulfonic acid [PFHxS]	355-46-4	E745B	0.316 µg/L	0.3 µg/L	105	50.0	150	----
		perfluorohexanoic acid [PFHxA]	307-24-4	E745B	0.382 µg/L	0.3 µg/L	127	50.0	150	----



Sub-Matrix: Water					Matrix Spike (MS) Report					
					Spike		Recovery (%)	Recovery Limits (%)		
					Concentration	Target	MS	Low	High	Qualifier
Laboratory sample ID	Client sample ID	Analyte	CAS Number	Method						
Perfluoroalkyl Substances (PFAS) (QCLot: 759747) - continued										
WT2222956-008	Anonymous	perfluorononanesulfonic acid [PFNS]	68259-12-1	E745B	0.386 µg/L	0.3 µg/L	129	50.0	150	----
		perfluorononanoic acid [PFNA]	375-95-1	E745B	0.328 µg/L	0.3 µg/L	109	50.0	150	----
		perfluorononanoic acid, 4,8-dioxa-3H-[ADONA]	919005-14-4	E745B	0.424 µg/L	0.3 µg/L	141	50.0	150	----
		perfluorooctanesulfonamide [PFOSA]	754-91-6	E745B	0.290 µg/L	0.3 µg/L	96.7	50.0	150	----
		perfluorooctanesulfonic acid [PFOS]	1763-23-1	E745B	0.406 µg/L	0.3 µg/L	135	50.0	150	----
		perfluorooctanoic acid [PFOA]	335-67-1	E745B	0.290 µg/L	0.3 µg/L	96.7	50.0	150	----
		perfluoropentanesulfonic acid [PFPeS]	2706-91-4	E745B	0.304 µg/L	0.3 µg/L	101	50.0	150	----
		perfluoropentanoic acid [PFPeA]	2706-90-3	E745B	0.392 µg/L	0.3 µg/L	131	50.0	150	----
		perfluorotetradecanoic acid [PFTeDA]	376-06-7	E745B	0.392 µg/L	0.3 µg/L	131	50.0	150	----
		perfluorotridecanoic acid [PFTrDA]	72629-94-8	E745B	0.392 µg/L	0.3 µg/L	131	50.0	150	----
		perfluoroundecanoic acid [PFUnA]	2058-94-8	E745B	0.366 µg/L	0.3 µg/L	122	50.0	150	----



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Page

Chain of Custody (COC) / Analytical Request Form

COC Number: 27

Environmental Division
Waterloo

WT2222976

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Appendix I

Historical Analyses and Trends

Appendix K

Historical Bedrock Groundwater Analytical Results

[illegible]

Historical Bedrock Groundwater Analytical Results

[illegible]

Notes "BW###" and "LW#" denote groundwater monitoring well ID
 "RL" denotes reporting limit
 "LP" denotes low flow sampling method used
 "<" denotes results below reporting limit
 "n" denotes not analyzed
 groundwater samples analyzed for metals were field filtered using 0.45 micron filters
 AO aesthetic objective OG operational objective CS chemical standards
 [1] The local medical health officer should be notified when the sodium concentration exceeds 20 mg/L
 [2] Unionized Ammonia calculated using field parameters for pH and temperature
 Malrow was not able to independently validate historic chemistry and exceedances, provided by the Township of Leeds and the Thousand Islands

Data Input: SG
Data Check: TB

Appendix K

Historical Overburden Groundwater Analytical Results

[illegible]

Historical Overburden Groundwater Analytical Results

[illegible]

Appendix K

Historical Overburden Groundwater Analytical Results

[illegible]

Appendix K

Historical Overburden Groundwater Analytical Results

[illegible]

Appendix K

Historical Overburden Groundwater Analytical Results

Historical Overburden Groundwater Analytical Results

[illegible]

Notes "OW###" and "L##" denote groundwater monitoring well ID
 "RL" denotes reporting limit
 "LF" denotes low flow sampling method used
 "<" denotes results below reporting limit
 "--" denotes not analyzed
 groundwater samples analyzed for metals were field filtered
AO aesthetic objective **OG** operational objective **CS** chemical safety
 [4] the local medical health officer should be notified when
 [15] Un-ionized Ammonia calculated using field parameters for
 Malroz was not able to independently validate historic ch

Shading indicates parameters exceeding guideline criteria
 concentration exceeds the Ontario Drinking Water Standards

Data Input: SG
Data Check: TB

Table 9
PFAS Analytical Results

PARAMETERS				8:2 Fluorotelomer sulfonic acid(8:2 FTS)	6:2 Fluorotelomer sulfonic acid(6:2 FTS)	4:2 Fluorotelomer sulfonic acid(4:2 FTS)	10:2 Fluorotelomer sulfonic acid(10:2 F)	Perfluorobutane sulfonic acid (PFBS)	Perfluorohexane sulfonic acid (PFHxS)	Perfluorotridecanoic acid (PFTfDA)	Perfluorooctane sulfonic acid (PFOS)	Perfluoropentane sulfonic acid (PFPeS)	N-Et PFO sulfonamide (EIFOSA)	N-Et PFO sulfonamidoethanol (EIFOSE)	N-Et PFO sulfonamidoacetic acid(EIFOSAA)	N-Me PFO sulfonamide (MeFOSA)	N-Me PFO sulfonamidoacetic acid(MeFOSAA)	N-Me PFO sulfonamidoethanol (MeFOSE)	Perfluoroheptane sulfonic acid (PFHpS)	Perfluorooctane sulfonamide (PFOSA)	Perfluorodecane sulfonic acid (PFDS)	Perfluorobutanoic acid (PFBA)	Perfluorodecanoic acid (PFDA)	Perfluorododecanoic acid (PFDoDA)	Perfluoroheptanoic acid (PFHpA)	Perfluorohexanoic acid (PFHxA)	Perfluorononanoic acid (PFNA)	Perfluorooctanoic acid (PFOA)	Perfluoropentanoic acid (PFPeA)	Perfluorotetradecanoic acid (PFTeDA)	Perfluoroundecanoic acid (PFUnDA)	icosafiuoro-3-oxaundecane-1-sulfonic acid, 11-chloro- [11Cl-PF3OUdS]	hexadecafluoro-3-oxanonane-1-sulfonic acid, 9-chloro- [9Cl-PF3ONS]	hexafluoropropylene oxide dimer acid [HFPO-DA] (GenX)	perfluoronanesulfonic acid [PFNS]	perfluoronanoic acid, 4,8-dioxa-3H-[ADONA]	PFOA & PFOS ^[1]	Sum of all reported PFAS compound concentrations							
Groundwater Sampling Location	Date	Sample ID	Units	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L	ug/L					
			DL (2022)	0.01	0.01	0.01	0.01	0.01	0.01	0.025	0.01	0.01	0.025	0.03	0.01	0.025	0.01	0.03	0.01	0.01	0.01	0.01	0.01	0.10	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.025	0.01	0.02	0.02	0.2	0.01	0.01	-	0.005					
			DL (October 2021)	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.050	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	0.0010	
			Health Canada PFAS Screening Values	0.2	0.2			15	0.6		0.6														30				0.2	0.2	0.02	0.2	0.2								1				
			MECP Drinking Water Screening Values for Perfluorinated Chemicals																																								0.07		
151 Fortune Line Rd	2021-Feb-03	-	not sampled/access not provided	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
151 Fortune Line Rd	2021-Dec-07	21-W046		<0.001	<0.03	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.05	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	-	-	-	-	-	-	-	<	<0.077	
151 Fortune Line Rd	2022-May-03	22-W023		-	-	-	-	<0.01	<0.01	-	<0.01	-	<0.01	-	-	-	-	-	<0.01	-	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.005
151 Fortune Line Rd	2022-Nov-22	22-W034		<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.025	<0.01	<0.01	<0.025	<0.03	<0.01	<0.025	<0.01	<0.03	<0.01	<0.01	<0.01	<0.01	<0.1	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.025	<0.01	<0.02	<0.02	<0.2	<0.01	<0.01	<	<0.005				
391 Turk Rock Rd	2021-Feb-04	-	not sampled/access not provided	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
391 Turk Rock Rd	2022-May-03	-	not sampled/access not provided	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
391 Turk Rock Rd	2022-Nov-22	22-W046		<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.025	<0.01	<0.01	<0.025	<0.03	<0.01	<0.025	<0.01	<0.03	<0.01	<0.01	<0.01	<0.01	<0.1	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.025	<0.01	<0.02	<0.02	<0.2	<0.01	<0.01	<	<0.005				
OW19	2021-Oct-20	-	dry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
OW22	2021-Oct-20	-	dry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	<0.01	-	<0.01	<0.1	<0.01	<0.01	<0.01	0.048	0.224	<0.01	0.1	0.212	-	<0.01	-	-	-	-	-	-	-	-	-	-			
OW22	2022-May-02	22-W012		-	-	-	-	0.028	0.036	-	0.02	-	-	-	-	-	-	-	-	<0.01	-	<0.01	<0.1	<0.01	<0.01	0.048	0.224	<0.01	0.1	0.212	-	<0.01	-	-	-	-	-	-	-	-	-	0.2667	0.668		
OW22	2022-Nov-22	-	dry	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
OW23	2021-Oct-20	21-W032		<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.05	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	-	-	-	-	-	-	<	<0.077	
OW23	2022-May-02	22-W008		-	-	-	-	0.01	0.01	-	0.01	-	-	-	-	-	-	-	<0.01	-	<0.01	<0.1	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.0083	<0.005
OW23	2022-Nov-22	22-W025		<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.025	<0.01	<0.01	<0.025	<0.03	<0.01	<0.025	<0.01	<0.03	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.025	<0.01	<0.02	<0.02	<0.2	<0.01	<0.01	<	<0.005					
OW23	2022-Nov-22	22-W026	dup	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.025	<0.01	<0.01	<0.025	<0.03	<0.01	<0.025	<0.01	<0.03	<0.01	<0.01	<0.01	<0.01	<0.1	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.025	<0.01	<0.02	<0.02	<0.2	<0.01	<0.01	<	<0.005						
OW24R01	2021-Oct-20	21-W034		<0.001	0.081	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.05	<0.001	<0.001	<0.001	<0.001	0.0023	<0.001	<0.001	0.0030	<0.001	<0.001	<0.001	<0.001	-	-	-	-	-	-	<	0.086			
OW24R01	2021-Oct-20	21-W035	dup	<0.001	0.080	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.05	<0.001	<0.001	<0.001	<0.001	0.0022	<0.001	<0.001	0.0027	<0.001	<0.001	<0.001	<0.001	-	-	-	-	-	-	<	0.085			
OW24R01	2022-May-02	22-W001		-	-	-	-	<0.01	<0.01	-	<0.01	-	-	-	-	-	-	-	<0.01	-	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	-	<0.01	-	-	-	-	-	<	<0.005			
OW24R01	2022-May-02	22-W002	dup	-	-	-	-	<0.01	<0.01	-	<0.01	-	-	-	-	-	-	-	<0.01	-	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.005		
OW24R01	2022-Nov-22	22-W031		<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.025	<0.03	<0.01	<0.025	<0.03	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.01	<0.025	<0.01	<0.02	<0.02	<0.2	<0.01	<0.01	<	<0.005					
FB	2021-Oct-20	21-W025		<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.0020	<0.001	<0.05	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	<0.001	-	-	-	-	-	<	<0.077			

Notes: "OW##" denote groundwater monitoring well
"DL" denotes detection limit
"DUP" denotes duplicate sample
"FB" denotes field blank
"<#" denotes elevated detection limit
"<" denotes results below detection limit
"-" denotes not analyzed

[1] calculated by Malroz and based on additivity principles outlined in Section 10.4 of Health Canada, 2018, Guidelines for Canadian Drinking Water Quality.
This table is intended to summarize analytical results provided by the Ministry of Environment, Conservation and Parks. For complete results please see the laboratory certificates.
The value is the sum of PFOA and PFOS concentration, each divided by their respective Health Canada screening values. Calculation includes detection limit values where results were below the detection limit as a conservative measure.

Shading indicates parameters exceeding guideline criteria

concentration exceeds Health Canada's Drinking Water Screening Values for perfluoroalkylated substances (PFAS)

concentration exceeds Drinking Water Screening Values for Perfluorinated Chemicals in Private Drinking Water Sources, Ministry of Environment, Conservation and Parks, memorandum dated July 25, 2017

Data Input: SG
Data Check: TB

Appendix K
Historical Surface Water Analytical Results

Surface Water Sampling Location	Date Sampled	Sample ID	Alkalinity	N - Ammonia	Ammonia, unionized (tab)	BOD	COD	DOC	Conductivity	Hardness	pH	Phenols	Phosphorus (total)	Phosphorus, total dissolved	Total Dissolved Solids	Total Suspended Solids	Total Kjeldahl - N	Chloride	N - Nitrate	N - Nitrite	Sulphate	Aluminum	Mercury	Arsenic	Barium	Boron	Cadmium	Calcium	Chromium	Cobalt	Copper	Iron	Lead	Magnesium	Manganese	Nickel	Potassium	Silver	Sodium	Strontium	Vanadium	Zinc	Temperature (field)	pH (field)	DO (field)	Conductivity (field)	Un-ionized Ammonia (field) ^[1]	
		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	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 (2022)	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	0.01	0.00002	0.0001	0.005	0.000015	0.02	0.001	0.0001	0.0001	0.0005	0.00002	0.02	0.001	0.1	0.1	0.0001	0.2	0.001	0.0001	0.005	-	-	-	-	0.01	
		PWQO (note a)			0.02						6.5-8.5	0.001	0.02									0.075 ^[b]	0.0002	0.005		0.2	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			0.1						6.0 - 9.0	0.04 ^[h]						180				100		0.15	2.3	3.55	0.00021		0.064		0.0069	1	0.002								0.089				0.1			
		Table B: Canadian Water Quality Guideline										0.004 ^[h]						128	2.9	0.06						1.5	0.000017																0.03					
SW1	2002-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	<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	2002-Nov-01	182	0.24	<0.005	0.9	22	7.7	434	223	7.94	-	0.044	-	146	8	0.77	7.6	0.4	<0.2	34.5	-	-	<0.002	0.095	0.014	<0.0001	54.8	<0.005	nd	0.0007	0.27	<0.0005	19.3	0.088	<0.001	1.9	<0.0001	4.5	0.163	0.0006	<0.005	-	-	-	-	-		
SW1	2003-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	nd	58.1	nd	0.0001	0.0006	0.09	nd	20.7	0.095	nd	0.9	nd	4.6	-	-	-	-	-	-				
SW1	2003-Aug-01	227	0.06	nd	1.7	-	4.6	493	270	-	-	0.125	-	270	-	0.6	11.1	nd	-	37.2	-	-	nd	0.168	0.022	nd	60.8	nd	0.0002	0.0015	0.49	nd	24	0.251	nd	1.3	nd	5.3	-	-	-	-	-	-				
SW1	2003-Oct-01	185	nd	nd	0.7	-	10.2	462	247	7.92	-	0.075	-	302	-	0.92	6.9	3.3	-	52.4	-	-	nd	0.129	0.013	nd	70.7	nd	0.0003	0.002	0.61	nd	22.5	0.076	nd	1.9	nd	5.6	-	-	-	-	-	-				
SW1	2004-May-01	133	0.06	nd	1.1	-	7.9	282	170	7.92	-	0.105	-	200	9	87	4.6	1.6	-	16.8	-	-	nd	0.086	0.011	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	2004-May-01	135	0.07	nd	0.9	-	8.3	276	172	7.93	-	0.105	-	202	9	82	4.6	1.7	-	15.7	-	-	nd	0.088	0.04	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	2004-Aug-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	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	2004-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	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	2004-Nov-01	200	0.03	nd	0.8	-	8.1	430	236	8.19	-	0.048	-	262	-	0.66	7	1.9	-	21	-	-	nd	0.097	0.009	nd	55.6	nd	0.0002	0.0013	0.52	nd	19.9	0.048	nd	1.7	nd	4.8	0.212	0.022	nd	-	-	-	-	-		
SW1	2007-May-01	228	<0.05	<0.05	<2	-	7.1	479	244	7.66	-	<0.01	-	316	-	0.7	6.3	0.3	-	16	-	<0.00003	<0.0005	0.155	0.022	<0.0001	62.3	-	<0.0005	0.0013	0.535	<0.0001	21.5	0.107	<0.01	1.3	<0.005	4.7	-	-	<0.005	-	-	-	-	-		
SW1	2007-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	<0.0001	56.2	<0.002	<0.0005	<0.002	0.223	<0.0001	23.8	0.05	<0.01	1.4	<0.0001	5.1	-	-	<0.005	-	-	-	-	-		
SW1	2007-Oct-01	204	<0.05	<0.05	<2	-	7.7	455	237	7.22	-	0.09	-	300	-	0.6	12	0.2	-	22	-	<0.00003	<0.0005	0.163	0.014	<0.0005	59.4	<0.002	<0.0005	<0.002	0.612	<0.02	22	0.149	<0.01	3.2	<0.005	5.2	-	-	<0.005	-	-	-	-	-		
SW1	2008-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	<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	2008-Sep-01	214	<0.05	<0.05	<2	12	9.1	470	245	7.32	-	0.01	-	258	<2	0.5	8	0.4	-	18	-	-	<0.002	0.152	0.019	<0.0001	61.1	<0.002	<0.0005	<0.002	0.315	<0.0001	22.4	0.068	<0.01	1.9	<0.0001	5.1	-	-	<0.005	-	-	-	-	-		
SW1	2008-Nov-01	203	0.08	<0.05	<2	-	9.1	443	228	7.98	-	<0.01	-	244	-	0.8	6	0.9	<0.1	22	-	-	<0.002	0.102	0.006	<0.0005	58.3	<0.002	0.0002	0.409	<0.02	20.1	0.039	<0.01	1.1	<0.005	4.3	-	-	<0.005	-	-	-	-	-			
SW1	2008-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	<0.005	59.5	<0.002	<0.0005	<0.002	0.37	<0.02	20.6	0.04	<0.01	1.2	<0.005	4.4	-	-	<0.005	-	-	-	-	-		
SW1	2009-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	-	<0.00002	0.002	0.087	<0.005	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	2009-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	-	<0.00002	<0.0005	0.164	0.015	<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	2009-Nov-16	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	-	0.00003	<0.0005	0.124	<0.005	<0.0001	59.4	<0.002	<0.0005	0.0012	0.283	<0.0001	21.5	0.061	<0.01	1.6	<0.0001	4.8	0.207	-	-	<0.005	-	-	-	-	-	
SW1	2010-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	<0.00002	0.0006	0.105	0.015	<0.0001	58.9	<0.002	-	<0.002	0.325	0.0002	20.6	0.035	<0.01	0.8	-	4.6	-	-	<0.005	-	-	-	-	-	
SW1	2010-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	<0.00002	0.0007	0.215	0.023	<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	<0.005	-	-	-	-	-	-
SW1	2010-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	<0.00002	<0.0005	0.113	0.009	<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	<0.005	-	-	-	-	-	-
SW1	2010-Nov-11	193	0.07	<0.01	<2	25	8.5	420	239	8.13	<0.001	0.02	-	231	16	1	6	0.4	<0.1	19	-	0.03	<0.00002	<0.0005	0.114	0.011	<0.0001	60	<0.002	<0.0005	0.0029	0.635	0.0004	21.6	0.052	<0.01	1.4	<0.0001	4.8	0.22	<0.005	0.006	-	-	-	-	-	-
SW1	2011-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	<0.00002	0.0005	0.171	0.03	0.00004	66.9	<0.002	0.0003	<0.002	0.669	0.00056	23.3	0.091	<0.01	1.7	<0.00002	5.3	0.257	<0.005	<0.005	-	-	-	-	-	-
SW1	2011-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	<0.00002	0.0006	0.171	0.03	0.00007	65.8	0.003	0.0004	<0.002	1.04	0.00097	22.9	0.112	<0.01	1.7	<0.00002	5.2	0.253	<0.005	<						

Appendix K
Historical Surface Water Analytical Results

Surface Water Sampling Location	Date Sampled	Sample ID	Alkalinity	N - Ammonia	Ammonia, unionized (lab)	BOD	COD	DOC	Conductivity	Hardness	pH	Phenols	Phosphorus (total)	Phosphorus, total dissolved	Total Dissolved Solids	Total Suspended Solids	Total Kjeldahl - N	Chloride	N - Nitrate	N - Nitrite	Sulphate	Aluminum	Mercury	Arsenic	Barium	Boron	Cadmium	Calcium	Chromium	Cobalt	Copper	Iron	Lead	Magnesium	Manganese	Nickel	Potassium	Silver	Sodium	Strontium	Vanadium	Zinc	Temperature (field)	pH (field)	DO (field)	Conductivity (field)	Un-ionized Ammonia (field) ^[1]	
			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	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	mg/L	°C	pH Units	mg/L	mS/cm	mg/L	
		RL (2022)	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	0.01	0.00002	0.0001	0.001	0.005	0.000015	0.02	0.001	0.0001	0.0001	0.005	0.00002	0.02	0.001	0.01	0.1	0.0001	0.0001	0.001	0.0001	0.005	0.005	-	-	-	-	0.01
		PWQO (note a)			0.02						6.5-8.5	0.001	0.02									0.075 ^[b]	0.0002	0.005		0.2	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			0.1						6.0 - 9.0	0.04 ^[h]						180				100		0.15	2.3	3.55	0.00021		0.064		0.0069	1	0.002							0.089					0.1			
		Table B: Canadian Water Quality Guideline										0.004 ^[h]						128	2.9	0.06						1.5	0.000017														0.03							
SW3	2003-Aug-01	292	0.47	0.008	2.8	-	5.8	641	270	7.82	-	0.425	-	368	-	0.97	25.2	0.9	-	35.5	-	-	nd	0.382	0.073	nd	80.3	nd	0.0038	0.0021	2.55	0.0012	28.4	1.39		4.2	nd	13.3	-	-	0.01	-	-	-	-	-		
SW3	2003-Oct-01	203	nd	nd	0.9	-	10.4	504	268	7.82	-	0.099	-	320	-	1.02	10.5	3	-	51.2	-	-	nd	0.172	0.027	nd	68.4	nd	0.0009	0.0024	0.089	nd	23.1	0.194	0.002	2.6	nd	7.4	-	-	0.007	-	-	-	-	-		
SW3	2004-May-01	138	0.09	nd	1.1	-	7.5	0.281	174	7.93	-	0.107	-	178	13	0.88	4.4	1.6	-	16.3	-	-	nd	0.1	0.015	nd	43.7	nd	0.0005	0.0031	1.02	0.0006	14.7	0.074	0.001	1.4	nd	3.9	0.147	0.0052	0.018	-	-	-	-	-		
SW3	2004-Aug-01	244	0.15	0.005	1.6	-	6.7	499	322	7.96	-	0.042	-	318	10	0.77	11.4	0.2	-	19.2	-	-	nd	0.202	0.04	nd	66.5	nd	0.0005	0.0007	0.28	nd	24.9	0.122	0.001	2.4	nd	8.3	0.254	0.0009	nd	-	-	-	-	-		
SW3	2004-Nov-01	208	0.1	nd	0.8	-	8.9	452	242	7.98	-	0.047	-	272	-	0.76	8.3	1.9	-	20.9	-	-	nd	0.119	0.017	nd	58.7	nd	0.0004	0.0013	0.55	nd	20.8	0.081	nd	2.1	nd	5.9	0.223	0.0021	nd	-	-	-	-	-		
SW3	2007-May-01	244	0.24	<0.05	<2	-	7	503	260	7.68	-	<0.01	-	332	-	0.8	8.6	0.3	-	17	-	<0.00003	<0.0005	0.177	0.03	<0.0001	66.5	-	<0.0005	0.0016	0.528	<0.0001	22.8	0.141	nd	1.8	<0.005	6.1	-	-	<0.005	-	-	-	-	-		
SW3	2007-Aug-01	248	0.2	<0.05	<2	-	4	558	267	7.8	-	0.03	-	368	-	0.6	13	0.4	-	22	-	0.00005	0.0013	0.243	0.043	<0.0001	64.8	<0.002	<0.005	<0.002	0.45	<0.0001	25.6	0.159	<0.01	<0.01	<0.0001	9.1	-	-	<0.005	-	-	-	-	-		
SW3	2007-Oct-01	244	0.15	<0.05	5	-	5.9	536	266	7.2	-	0.05	-	354	-	0.7	16	0.4	-	22	-	<0.00003	<0.0005	0.21	0.036	<0.005	67.6	<0.002	<0.005	<0.002	0.358	<0.02	23.6	0.102	<0.01	4.2	<0.005	8.5	-	-	<0.005	-	-	-	-	-		
SW3	2008-Sep-01	252	0.07	<0.05	<2	14	8.8	543	273	7.51	-	0.05	-	299	2	0.7	12	0.5	-	21	-	<0.0005	0.197	0.031	<0.001	69.3	<0.002	<0.0005	<0.002	0.456	<0.0001	24.3	0.144	<0.01	2.7	<0.0001	7.6	-	-	<0.005	-	-	-	-	-			
SW3	2008-Nov-01	213	0.1	<0.05	<2	-	9.2	466	241	8.06	-	0.07	-	256	-	1	7	0.9	<0.1	23	-	<0.03	0.12	0.013	<0.005	62.2	<0.002	<0.005	0.002	0.42	<0.02	20.9	0.072	<0.01	1.5	<0.005	5.5	-	-	<0.005	-	-	-	-	-			
SW3	2009-Apr-09	154	<0.05	<0.05	<2	<5	7.5	362	182	7.8	<0.001	0.06	-	199	6	0.5	6	0.7	<0.1	13	-	<0.00002	0.0019	0.093	<0.005	0.00010	45.7	0.006	0.0056	<0.002	0.527	<0.0001	16.4	0.053	<0.01	1.5	0.0005	5	0.16	-	-	<0.005	-	-	-	-	-	
SW3	2009-Jul-01	232	<0.05	<0.05	<2	24	7.4	518	268	7.85	<0.001	0.07	-	285	10	0.5	10	0.4	<0.1	18	-	<0.00002	<0.0005	0.179	0.025	<0.0001	66.6	0.006	<0.0005	<0.002	0.63	<0.0001	24.7	0.146	<0.01	1.7	<0.0001	6.9	0.258	-	-	<0.005	-	-	-	-	-	
SW3	2009-Nov-16	236	0.1	<0.05	<2	33	7.5	513	250	7.63	<0.001	0.04	-	282	22	0.5	10	0.6	<0.1	27	-	0.00005	<0.0005	0.154	0.014	<0.0001	63.5	<0.002	<0.0005	0.0019	0.572	<0.0001	22.3	0.163	<0.01	2.1	<0.0001	6.4	0.215	-	-	<0.005	-	-	-	-	-	
SW4	2010-Jun-01	215	0.1	<0.05	<2	-	9.8	488	241	8	0.1	0.04	-	268	8	0.7	5.9	0.6	<0.1	14	-	0.01	<0.00002	0.0005	0.12	0.02	<0.0001	61.7	<0.002	<0.002	0.417	0.0004	21.2	0.078	<0.01	1.2	5.7	-	-	<0.005	-	-	-	-	-			
SW3	2010-Aug-17	269	0.16	<0.05	<2	29	4.9	627	307	8.12	<0.001	0.05	-	345	6	0.7	18	0.5	0.2	28	-	0.13	<0.00002	0.0005	0.267	0.053	<0.0001	79	<0.001	0.0007	<0.002	0.629	0.0002	26.7	0.229	<0.01	3.4	<0.0001	10.4	0.29	<0.005	<0.005	-	-	-	-	-	-
SW3	2010-Nov-11	200	0.13	<0.01	<2	31	8.5	445	247	8.14	<0.001	0.02	-	245	16	0.7	8	0.4	<0.1	19	0.03	<0.00002	<0.0005	0.128	0.018	<0.0001	62.4	<0.002	<0.0005	0.029	0.745	0.0006	22.1	0.09	<0.01	1.7	<0.0001	6	0.224	<0.005	<0.005	-	-	-	-	-	-	
SW3	2011-Jun-01	248	0.2	<0.05	<2	<5	5.9	540	254	7.98	<0.001	0.03	-	297	16	0.8	<1	0.5	0.2	16	0.03	<0.00002	0.0005	0.178	0.036	0.00002	65.2	0.004	0.0006	<0.002	0.749	0.00039	22.2	0.161	<0.01	2.1	<0.00002	6.5	0.24	<0.005	<0.005	-	-	-	-	-	-	
SW3	2011-Aug-19	270	0.17	<0.01	<2	12	5	612	331	8.05	0.002	0.02	-	337	4	0.6	19	0.5	0.2	24	0.04	<0.00002	0.0005	0.309	0.059	<0.00002	83.3	0.0004	0.001	<0.002	0.592	<0.00002	29.9	0.184	<0.01	3.8	<0.00002	12.5	0.284	<0.005	0.008	-	-	-	-	-	-	
SW3	2011-Aug-19	268	0.18	<0.01	<2	5	5.1	612	329	8.05	<0.001	0.04	-	337	4	0.6	19	0.5	0.3	24	0.03	<0.00002	0.0005	0.306	0.058	0.00011	82.8	0.0012	<0.002	0.583	0.0026	29.6	0.182	<0.01	3.7	<0.00002	12.4	0.282	<0.005	<0.005	-	-	-	-	-	-		
SW3	2011-Nov-11	236	0.3	<0.01	<2	12	6.6	540	261	7.82	<0.001	0.02	-	297	8	0.7	12	0.7	<0.1	30	0.02	<0.00002	0.0003	0.17	<0.005	<0.00002	66.5	0.0112	0.0006	<0.002	0.547	0.00011	23.0	0.107	<0.01	2.2	<0.00002	8.2	0.221	-	-	<0.005	-	-	-	-	-	
SW3	2012-May-29	236	0.144	0.011	7	45	6.6	515	260	8.16	<0.001	0.06	-	283	60	0.5	11.7	0.9	<0.1	20	0.2	<0.00002	0.0007	0.166	0.052	<0.00002	66.2	<0.002	-	0.0009	0.577	<0.00002	23.8	0.233	<0.01	2.4	<0.00002	8.4	-	-	-	-	-	-	-	-		
SW3	2012-May-29	234	0.12	0.009	8	35	6.3	517	260	8.15	<0.001	<0.01	-	284	42	<0.1	11.5	0.7	<0.1	20	0.01	<0.00002	0.0007	0.166	0.049	0.00002	64.8	<0.002	-	0.001	0.797	0.00002	23.3	0.276	<0.01	2.3	<0.00002	8.1	-	-	<0.005	-	-	-	-	-		
SW3	2012-Oct-31	289	0.052	<0.005	6	63	10.2	1250	796	7.54	<0.001	0.19	-	686	8	0.6	35.6	<0.1	<0.1	351	0.06	<0.00002	0.0007	0.298	0.211	<0.00002	217	0.00355	0.0021	0.0015	16.1	<0.00002	61.5	0.32	0.58	4.7	<0.00002	18.7	0.529	0.006	<0.005	-	-	-	-	-	-	
SW4	2008-Jun-01	214	<0.05	<0.05	3	28	10	440	225	8.07	-	<0.01	-	242	6	1.3	6	0.2	-	12	-	-	<0.0005	0.138	0.02	<0.0001	57	<0.001	<0.0005	<0.002	0.628	<0.0001	20.0	0.117	<0.01	1	-	5.4	-	-	<0.005	-	-	-	-	-		
SW4	2008-Nov-01	211	0.1	<0.05	<2	-	9.1	469	240	8.05	-	0.05	-	258	-	1	7	0.9	<0.1	23	-	<0.03	0.118	0.013	<0.005	61.7	<0.002	<0.005	<0.002	0.406	<0.02	20.9	0.07	<0.01	1.5	<0.005	5.5	-	-	<0.005	-	-	-	-	-			
SW4	2009-Apr-09	158	<0.05	<0.05	<2	<5	7.5	365	186	7.91	<0.001	0.07	-	201	8	0.5	6	0.8																														

Monitoring Location

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Historical Groundwater VOC Analyses

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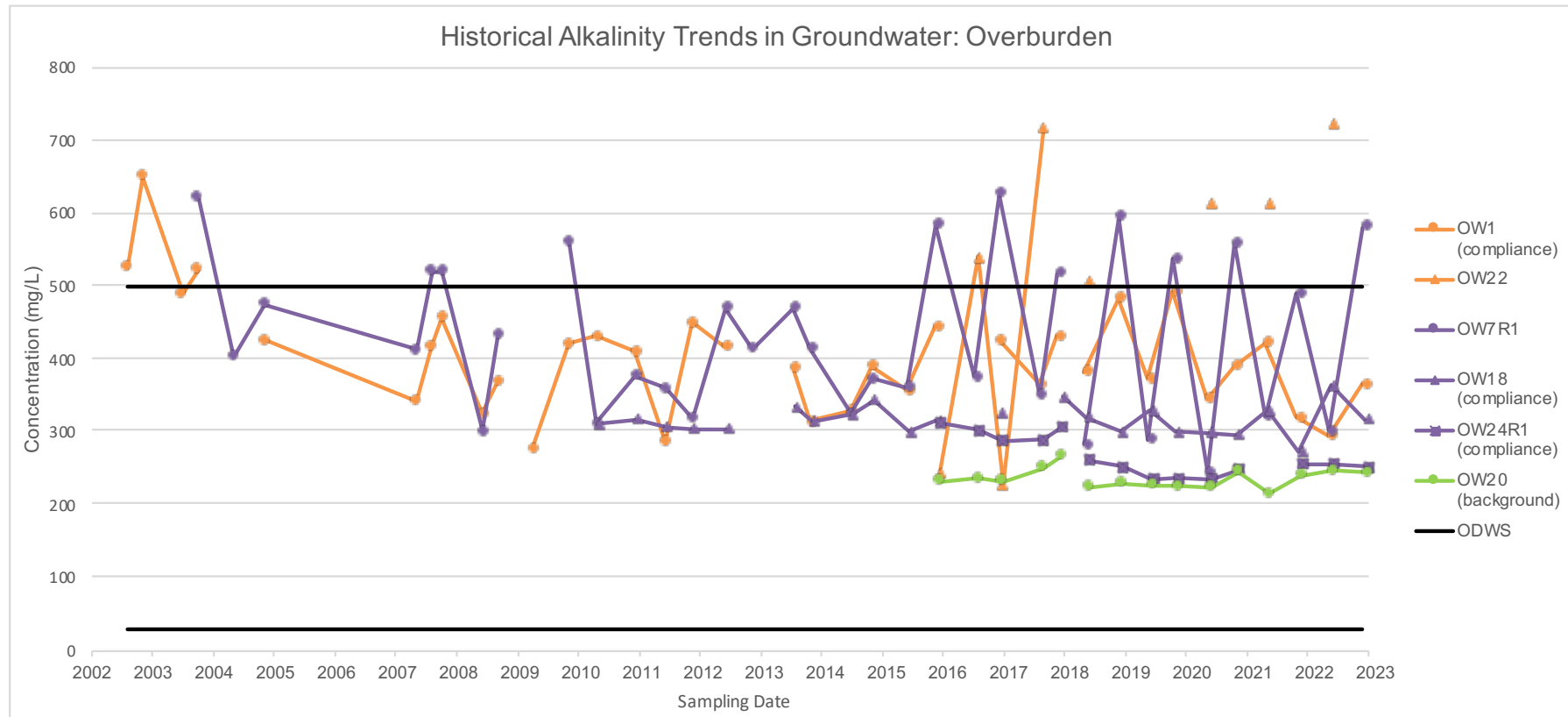
[illegible]

Notes: "BW###", "OW###" and "L#" denote groundwater monitoring well ID
 "RL" denotes reporting limit
 "LP" denotes low flow sampling method used
 "*c###" denotes results below reporting limit
 "N" denotes not analyzed
 AO indicates aesthetic objective OG indicates operational objective CS Chemical standards
 Maloz was not able to independently validate historic chemistry and exceedances, provided by the Township of Leeds and the Thousand Islands

Shading indicates parameters exceeding guideline criteria

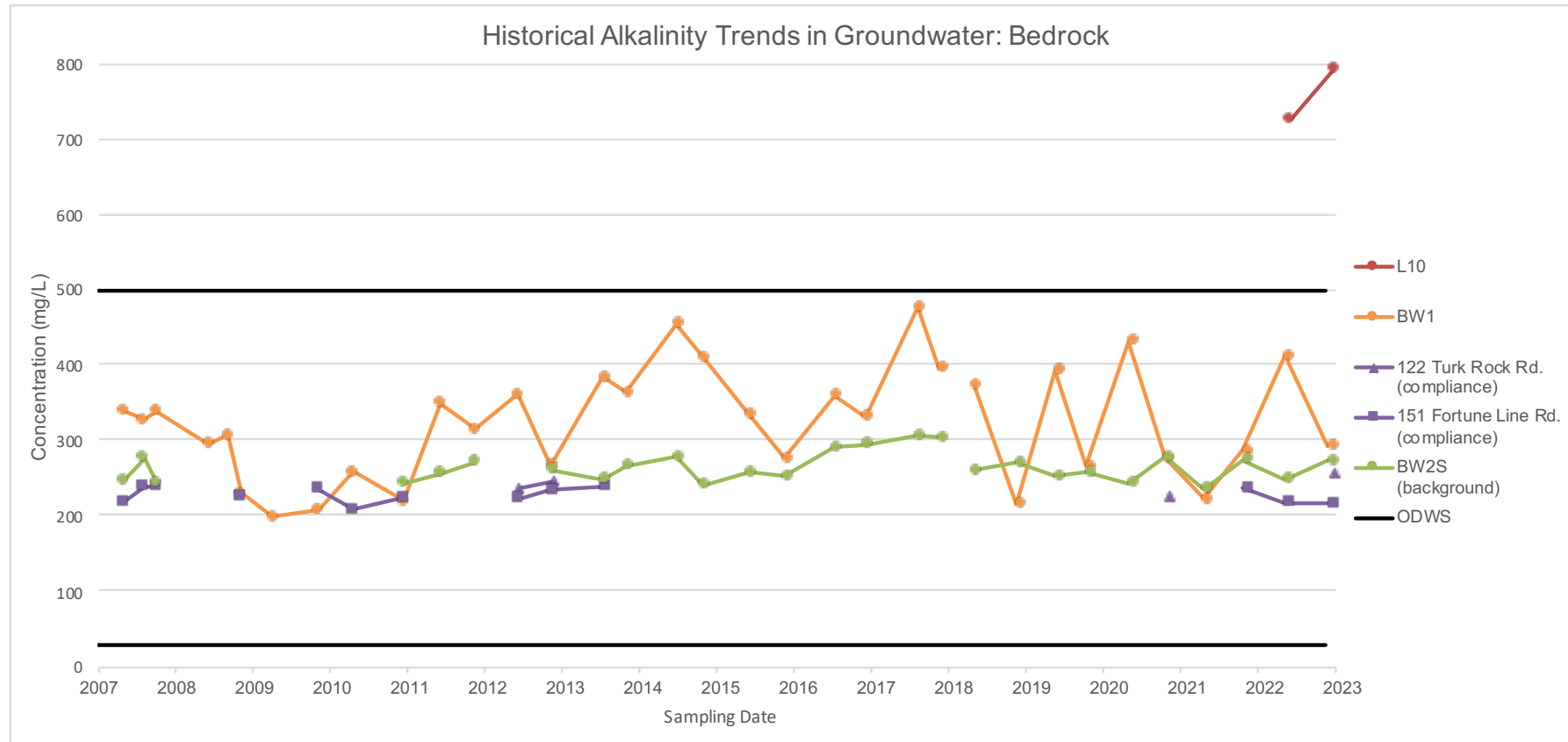
	concentration exceeds the Ontario Drinking Water Standards
	measurable concentration detected

Malroz Engineering Inc.



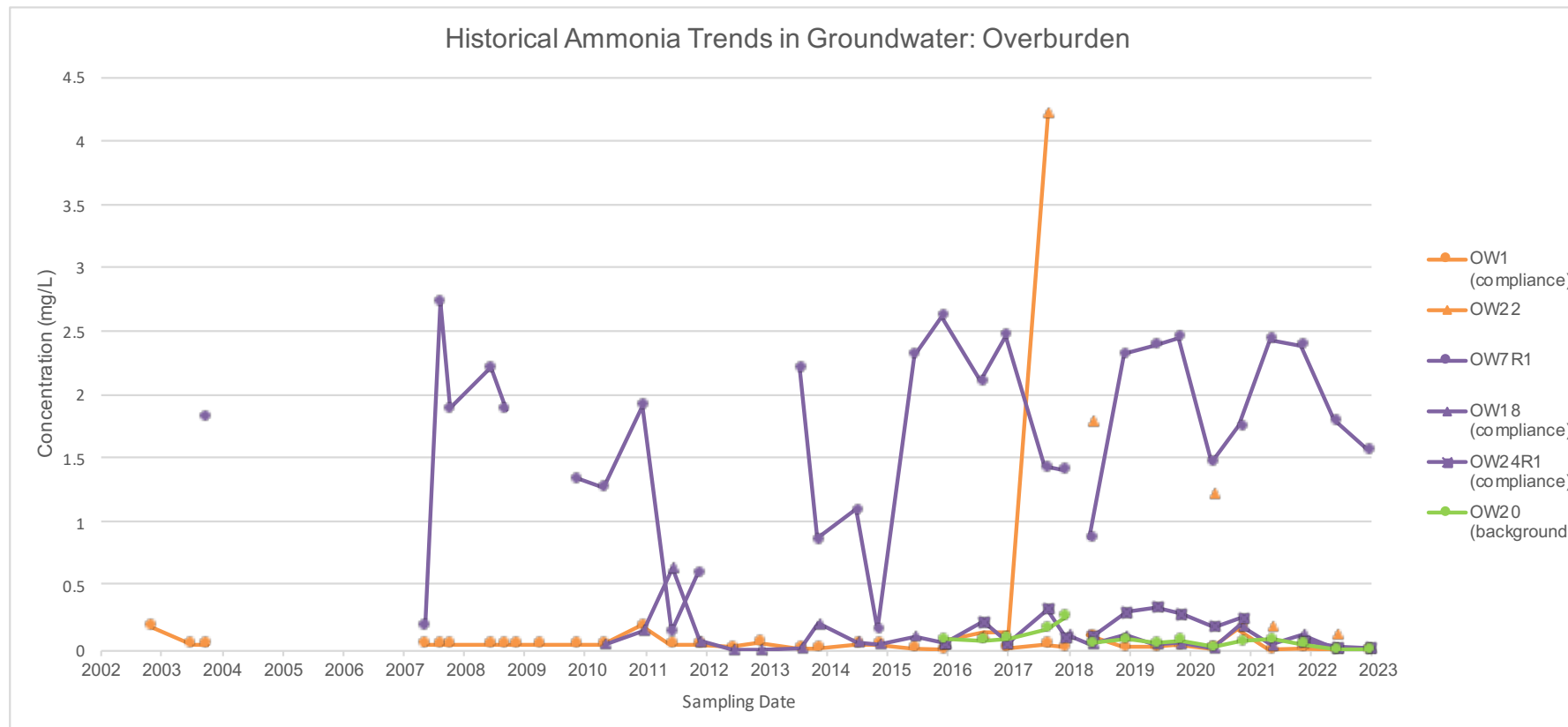
Notes:

- 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.
- for duplicate samples the average was used



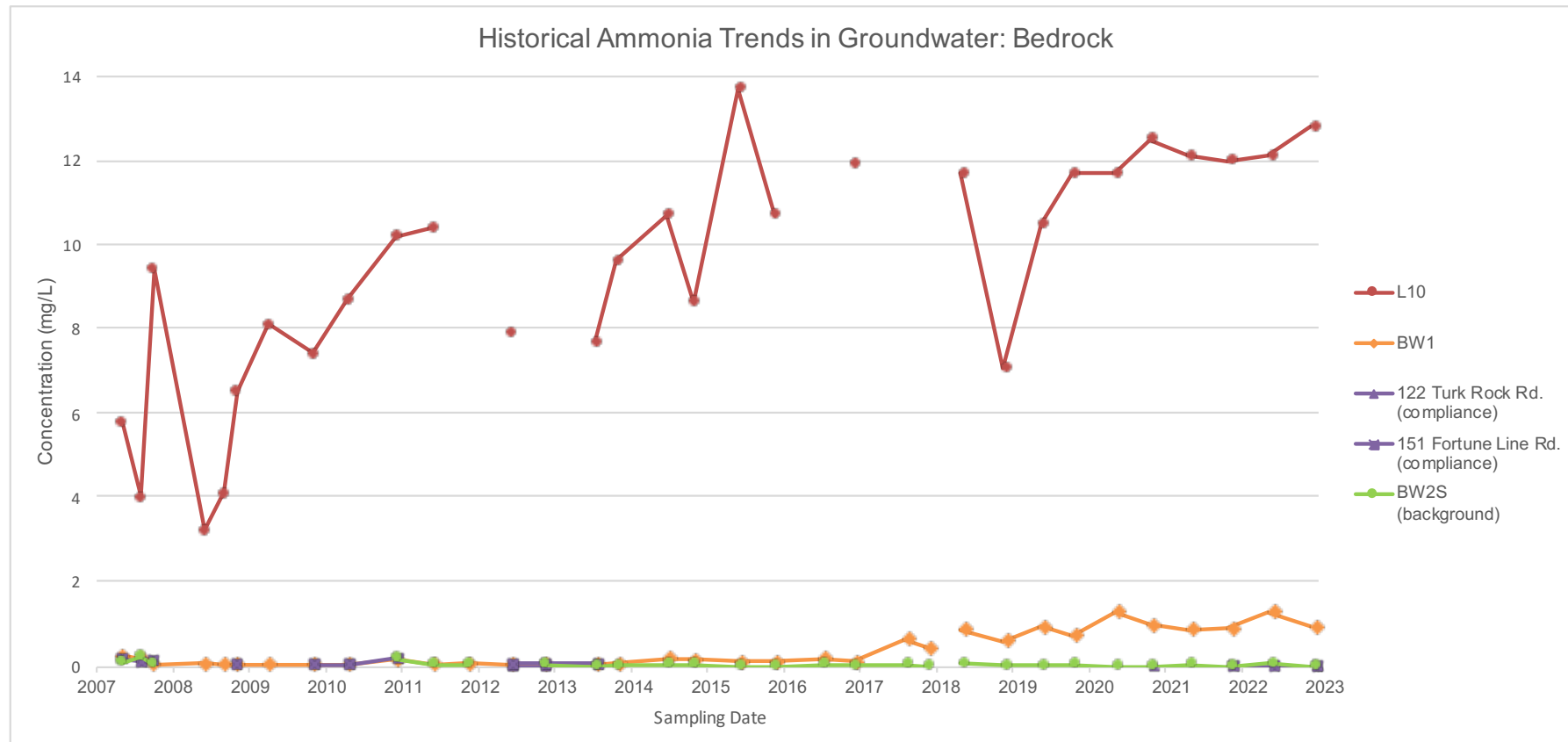
Notes:

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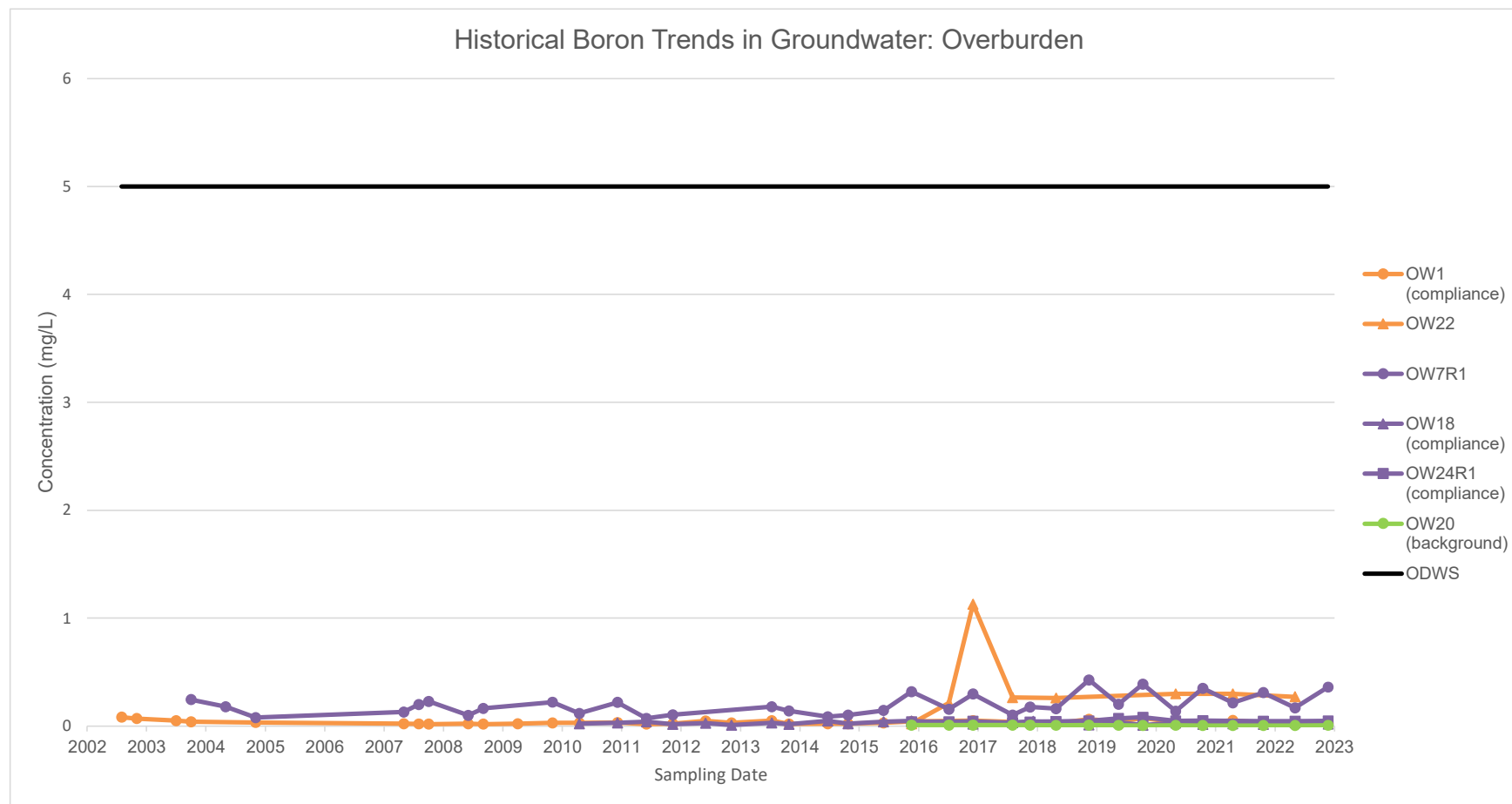
Notes:

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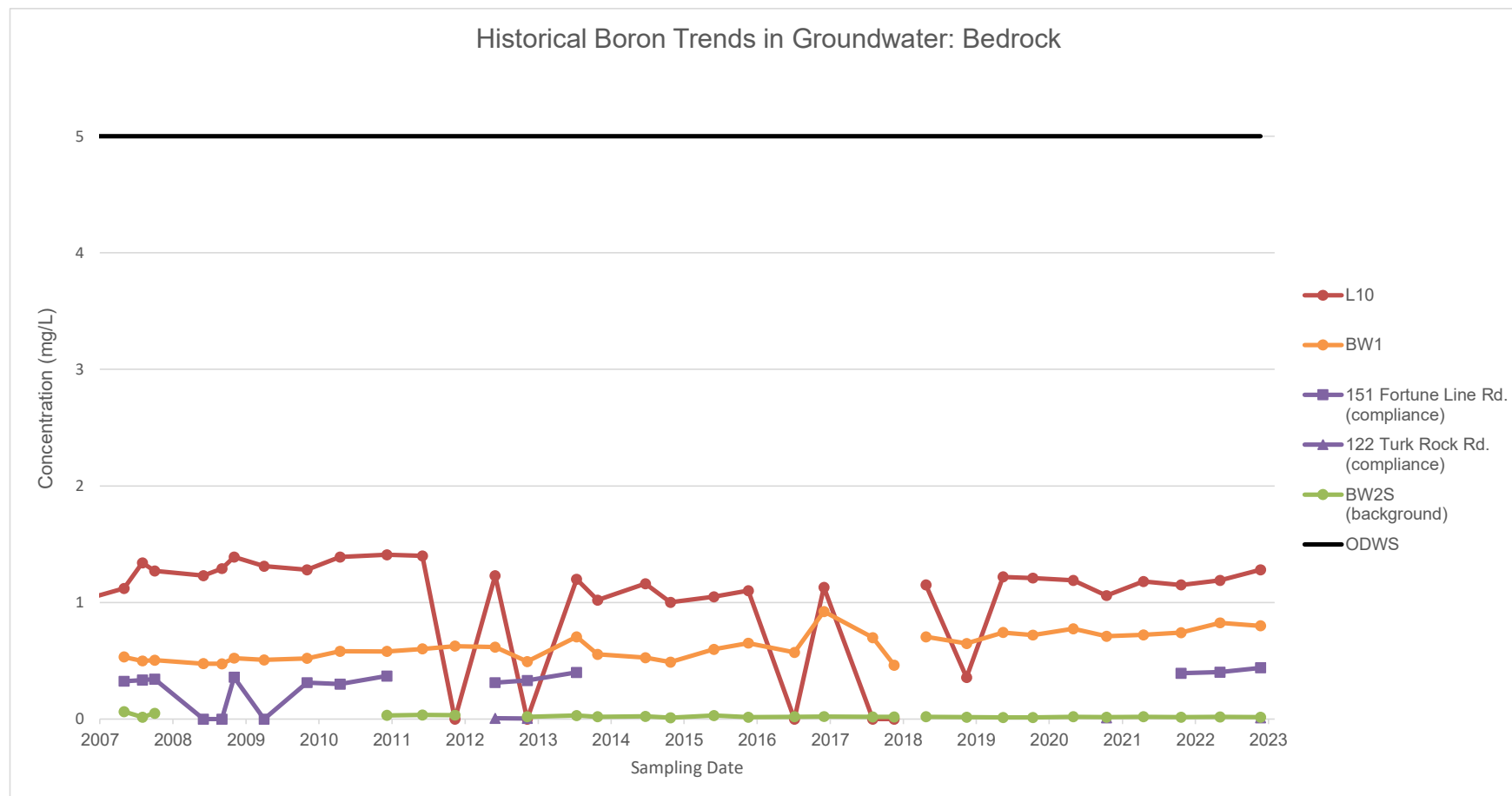
Notes:

- all data prior to and including 2016 was provided by the Township of Leeds and Thousand Islands.
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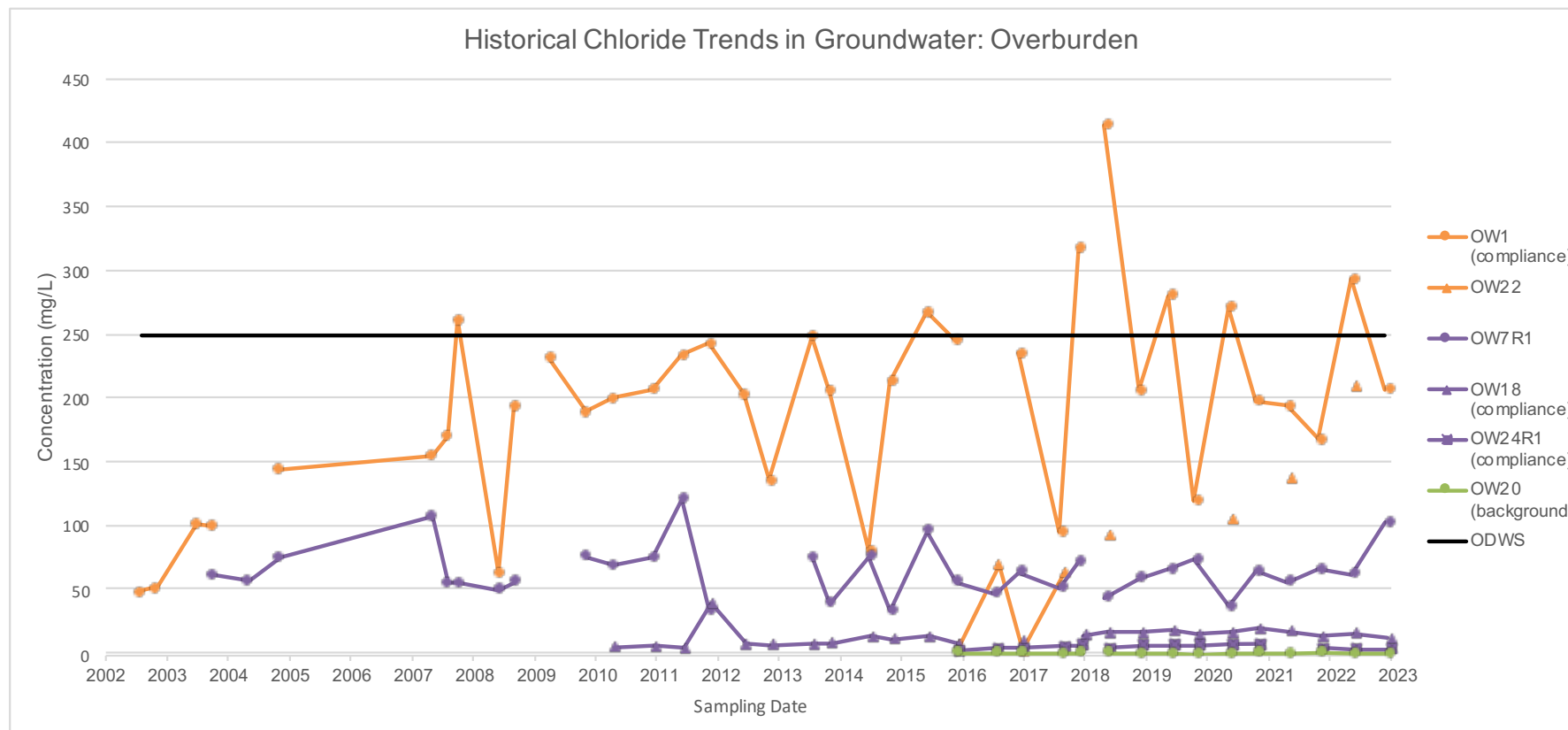
Notes:

- all data prior to and including 2016 was provided by the Township of Leeds and Thousand Islands.
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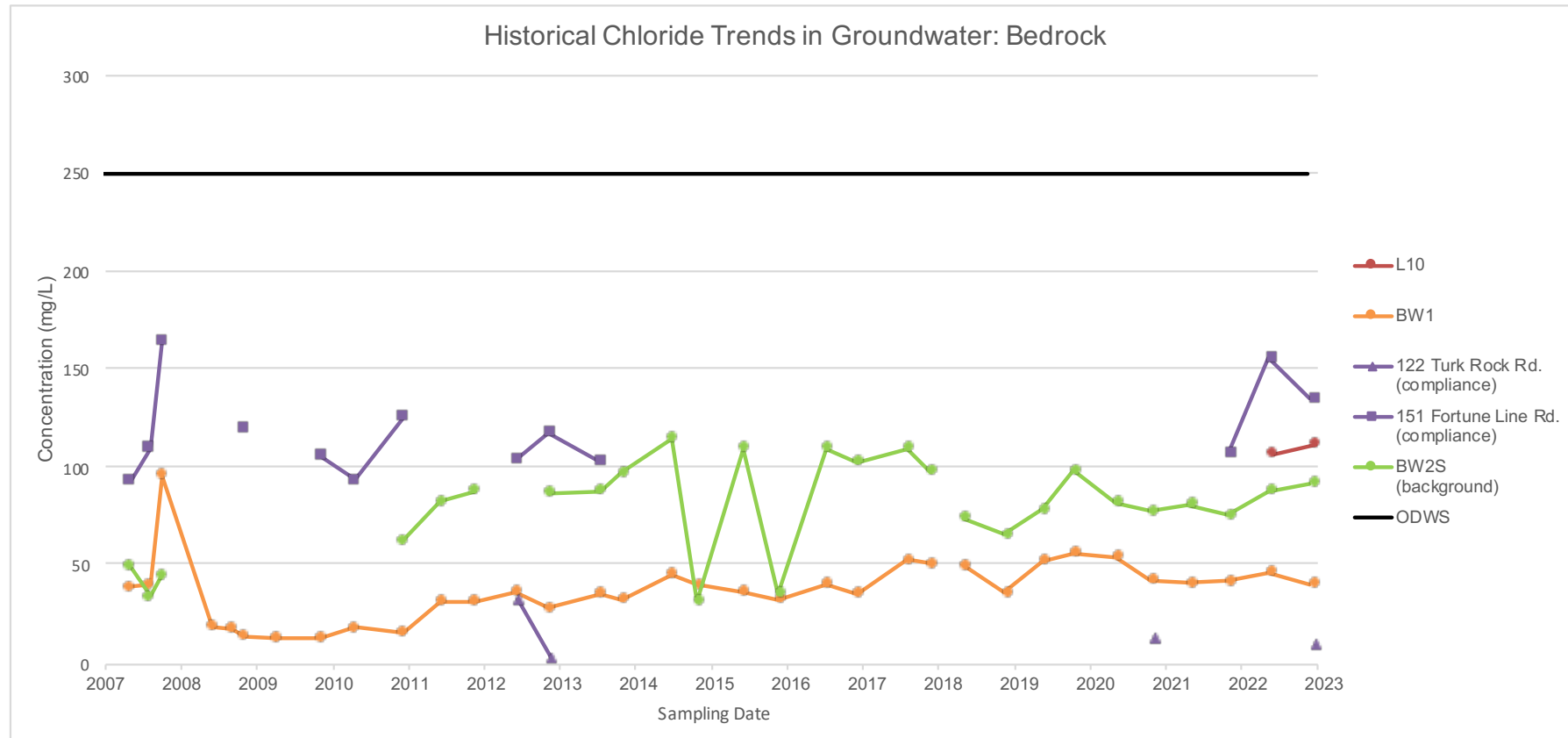
Notes:

- all data prior to and including 2016 was provided by the Township of Leeds and Thousand Islands.
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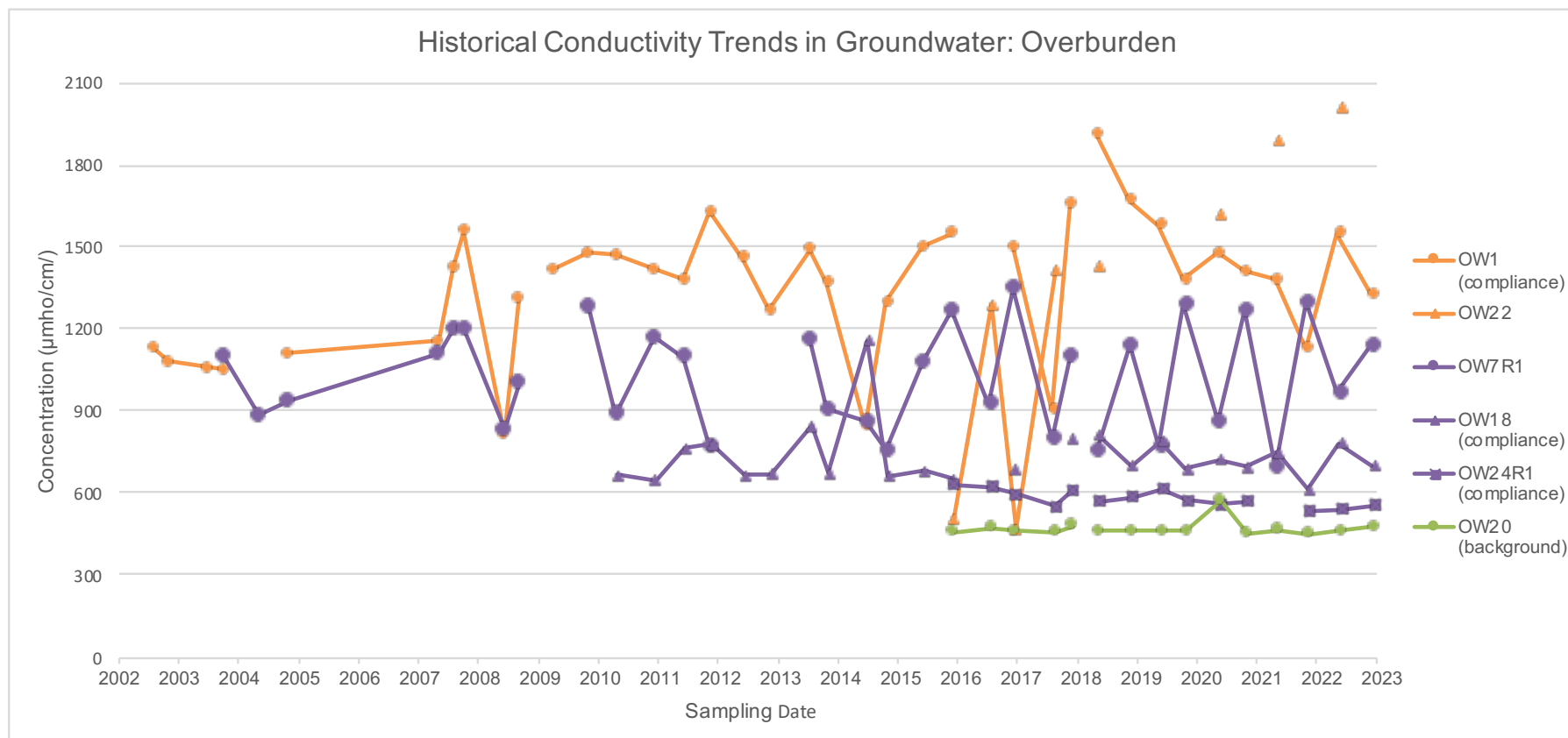
Notes:

- all data prior to and including 2016 was provided by the Township of Leeds and Thousand Islands.
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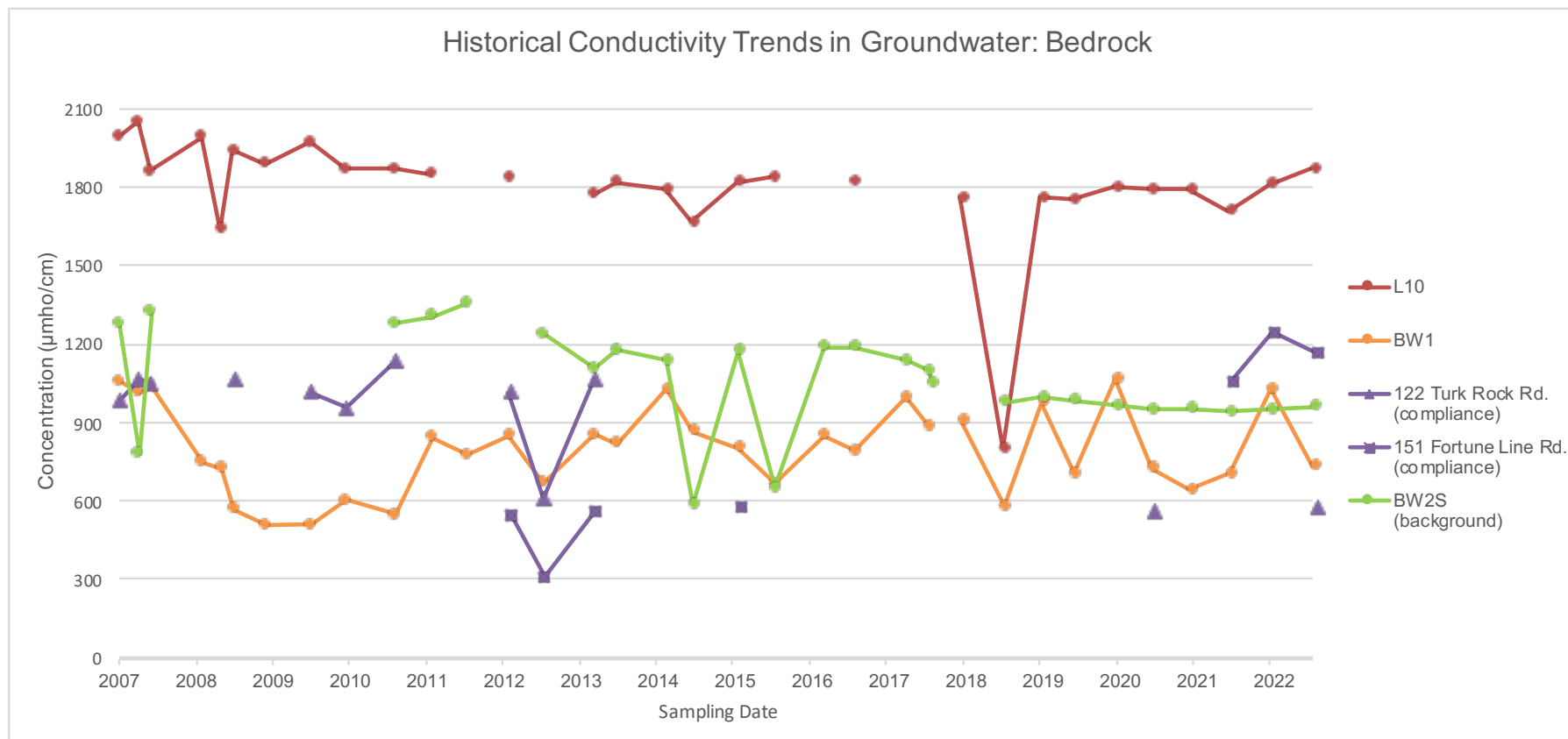
Notes:

- 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.
- for duplicate samples the average was used



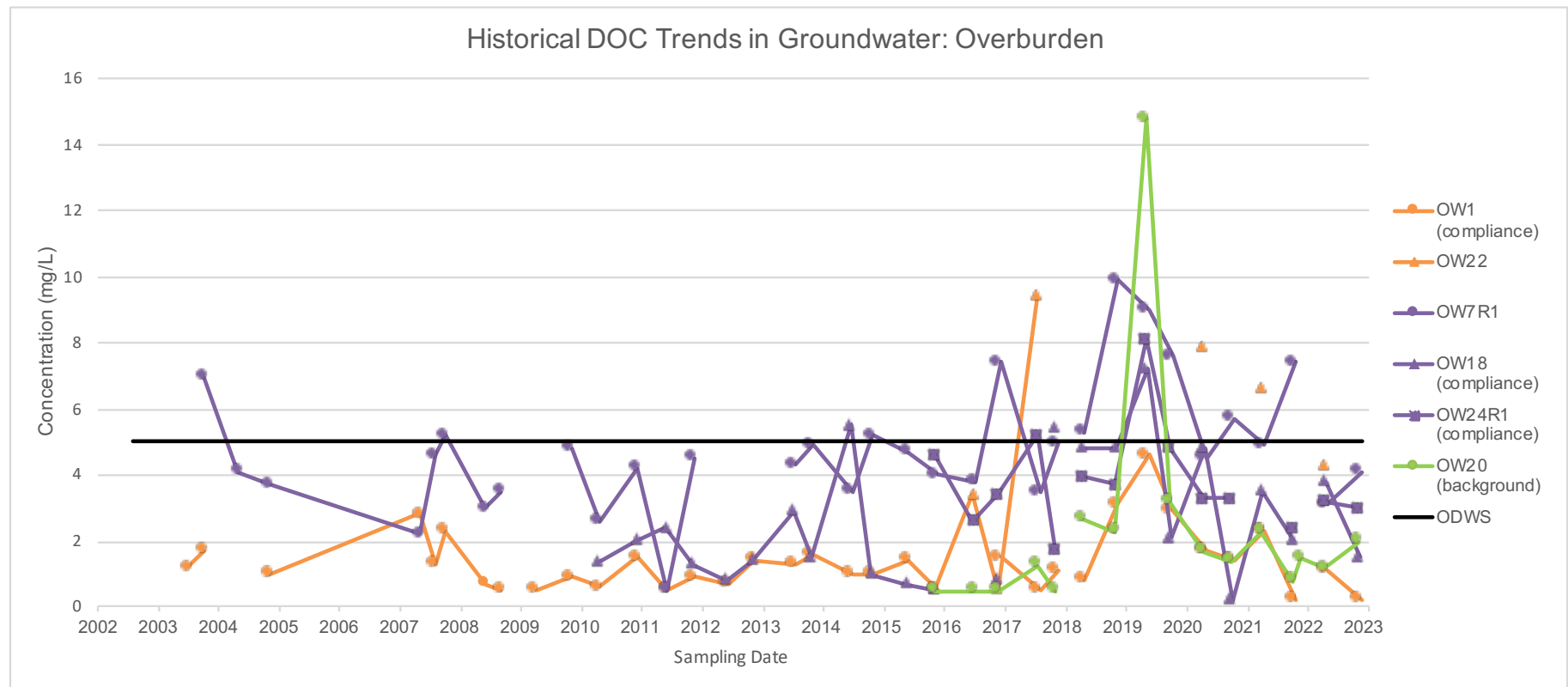
Notes:

- all data prior to and including 2016 was provided by the Township of Leeds and Thousand Islands.
- gaps between points denotes missing data
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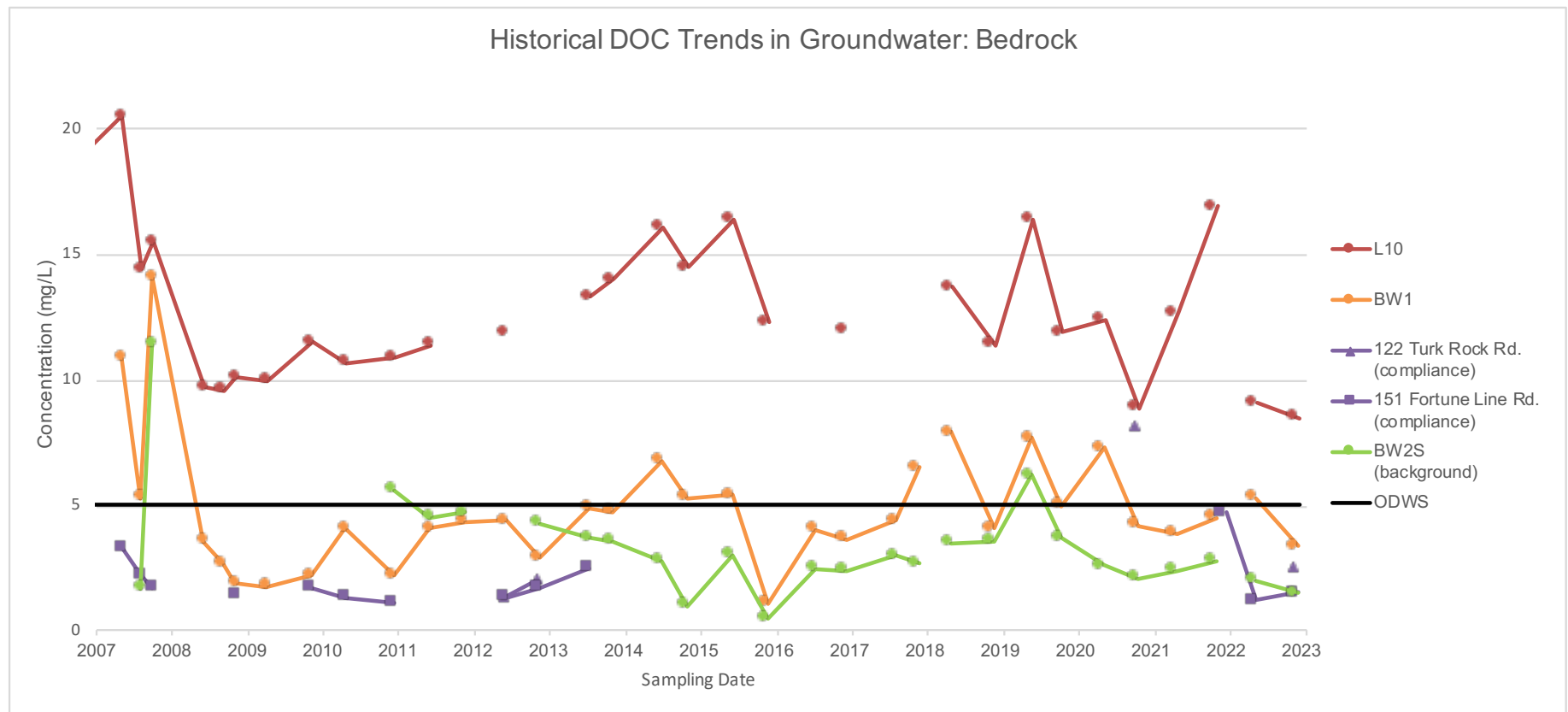
Notes:

- all data prior to and including 2016 was provided by the Township of Leeds and Thousand Islands.
- gaps between points denotes missing data
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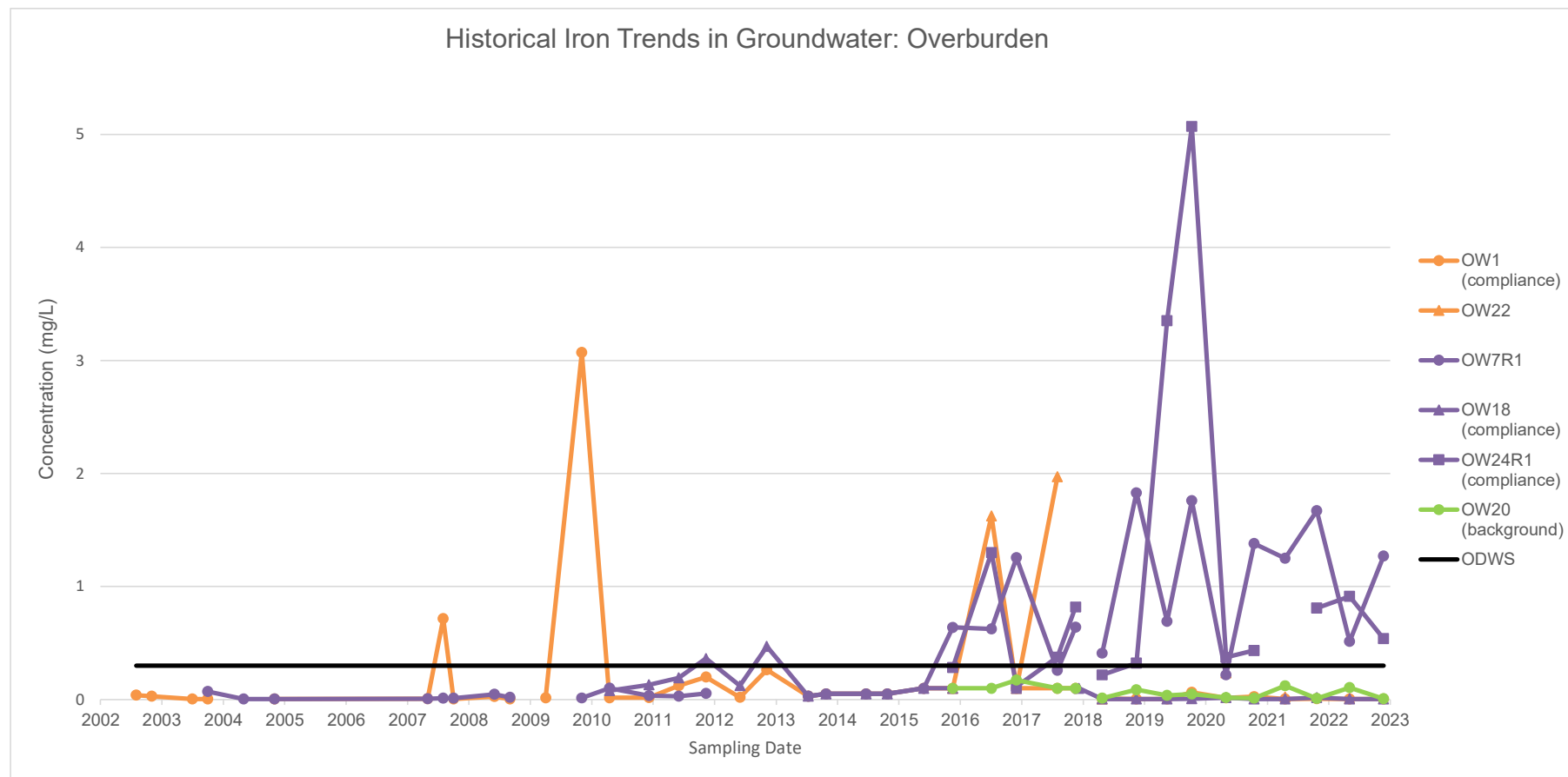
Notes:

- all data prior to and including 2016 was provided by the Township of Leeds and Thousand Islands.
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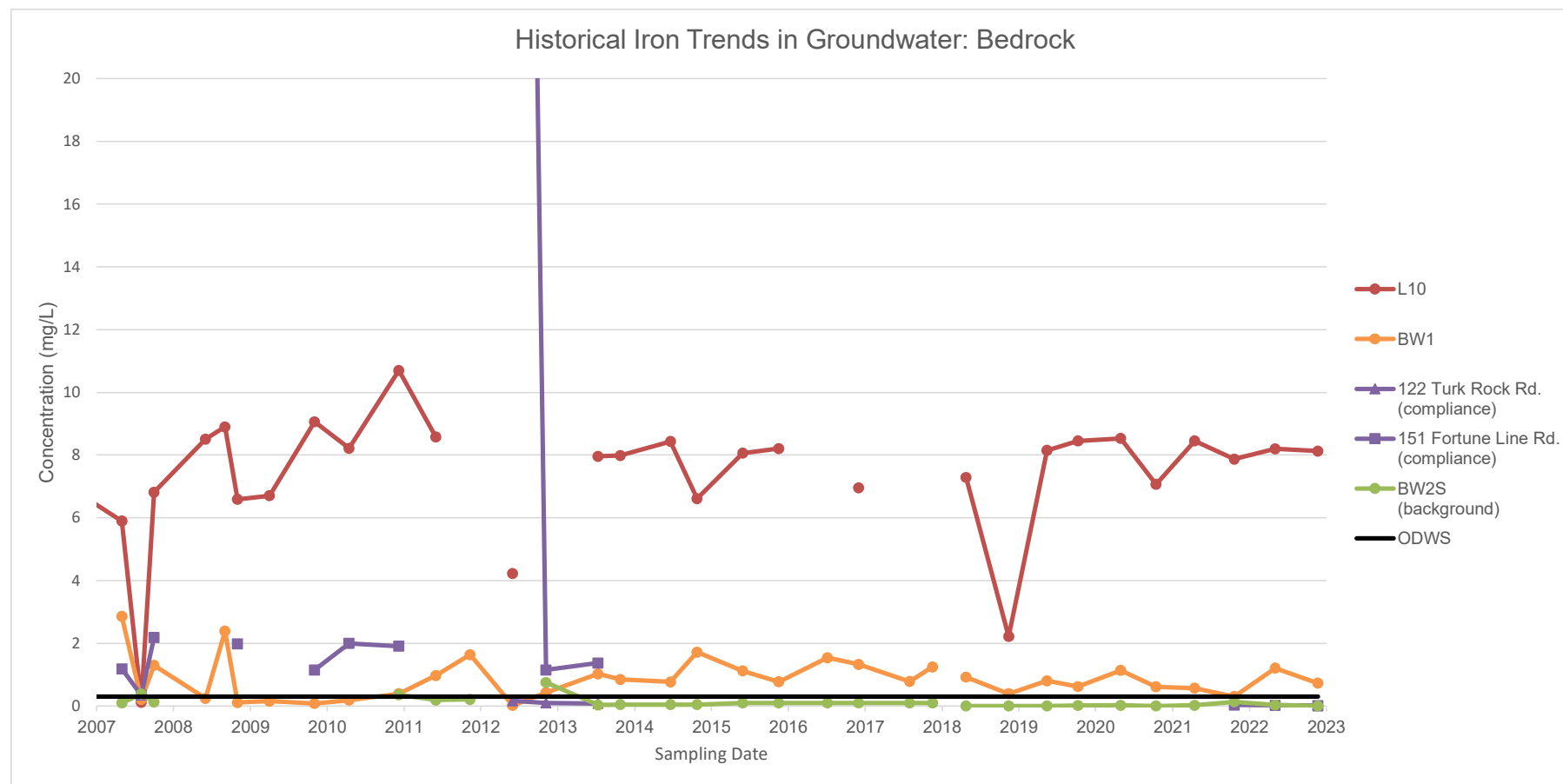
Notes:

- all data prior to and including 2016 was provided by the Township of Leeds and Thousand Islands.
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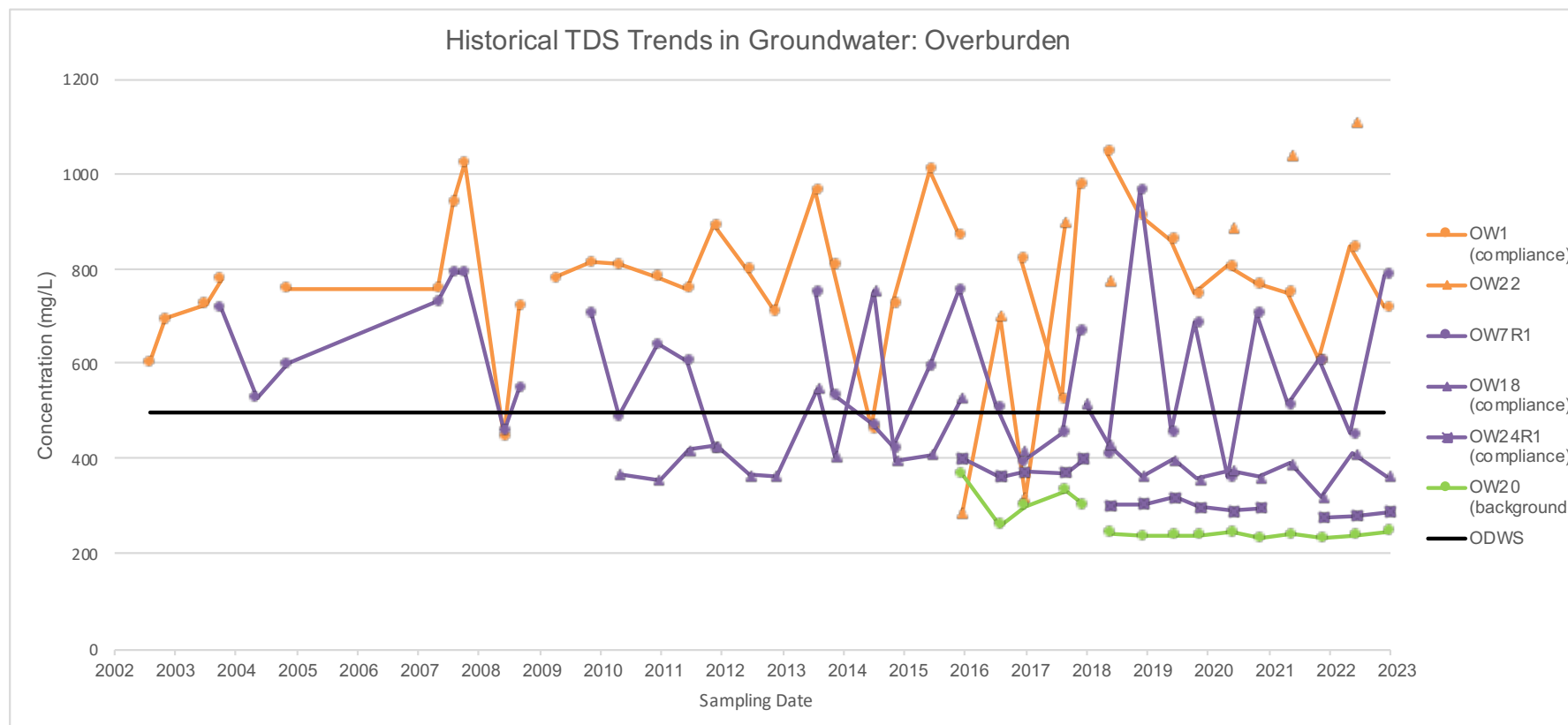
Notes:

- all data prior to and including 2016 was provided by the Township of Leeds and Thousand Islands.
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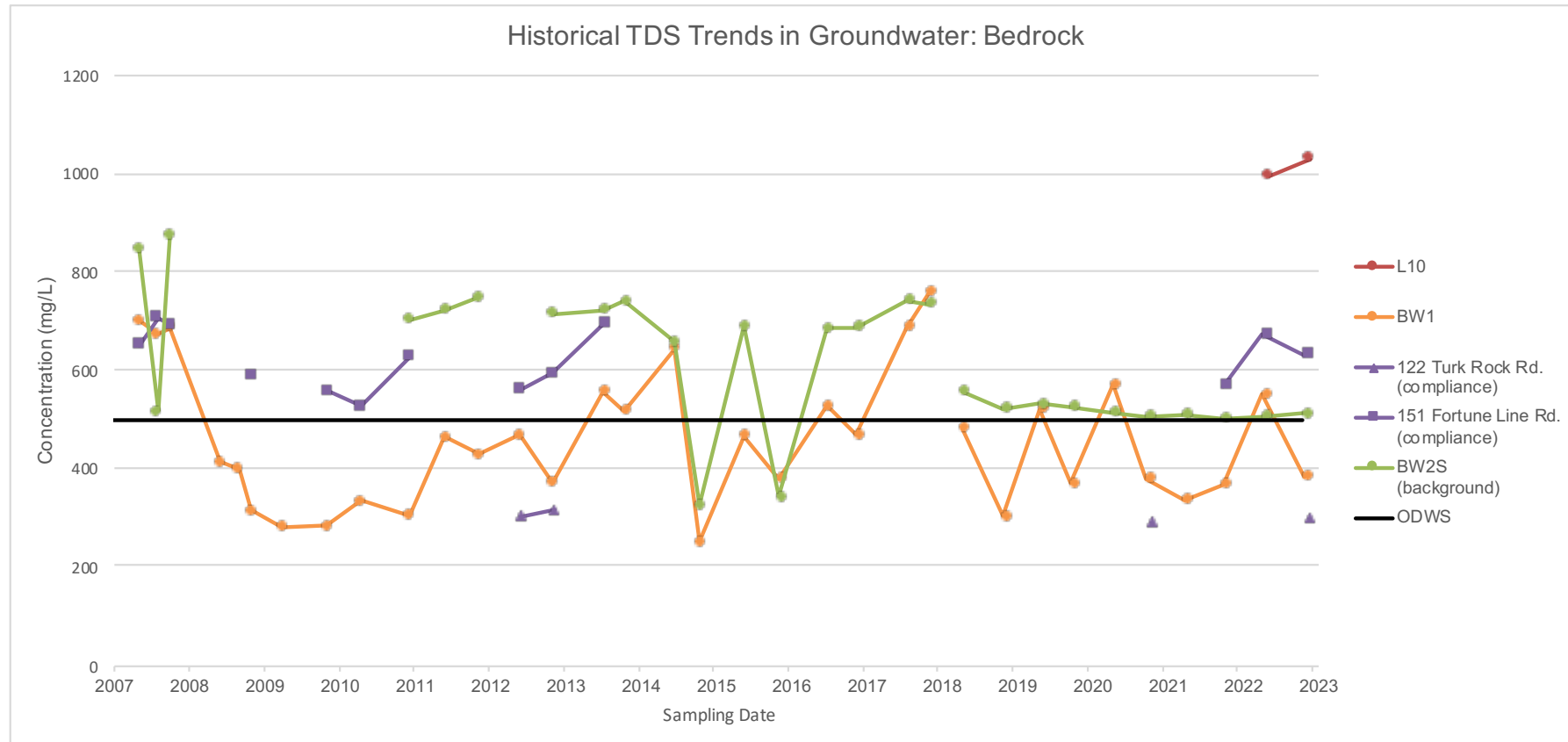
Notes:

- all data prior to and including 2016 was provided by the Township of Leeds and Thousand Islands.
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- 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.
- for duplicate samples the average was used



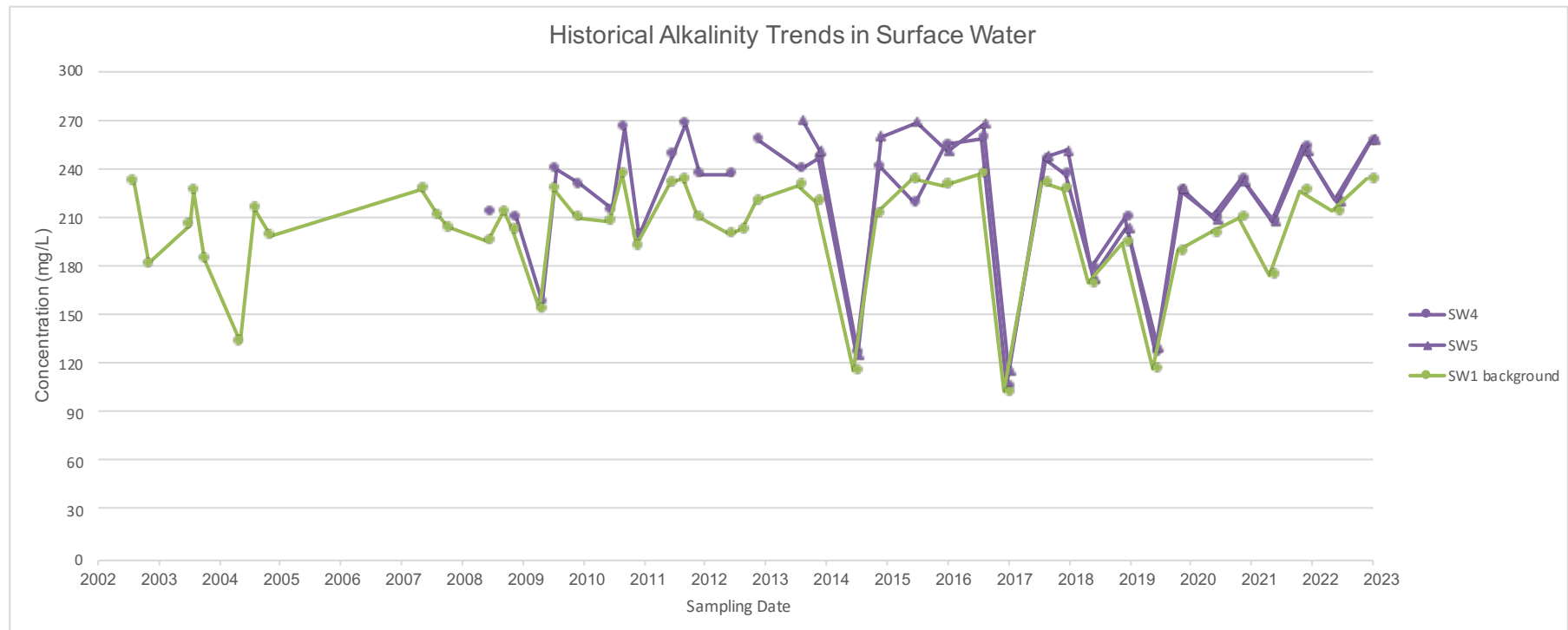
Notes:

- 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.
- for duplicate samples the average was used



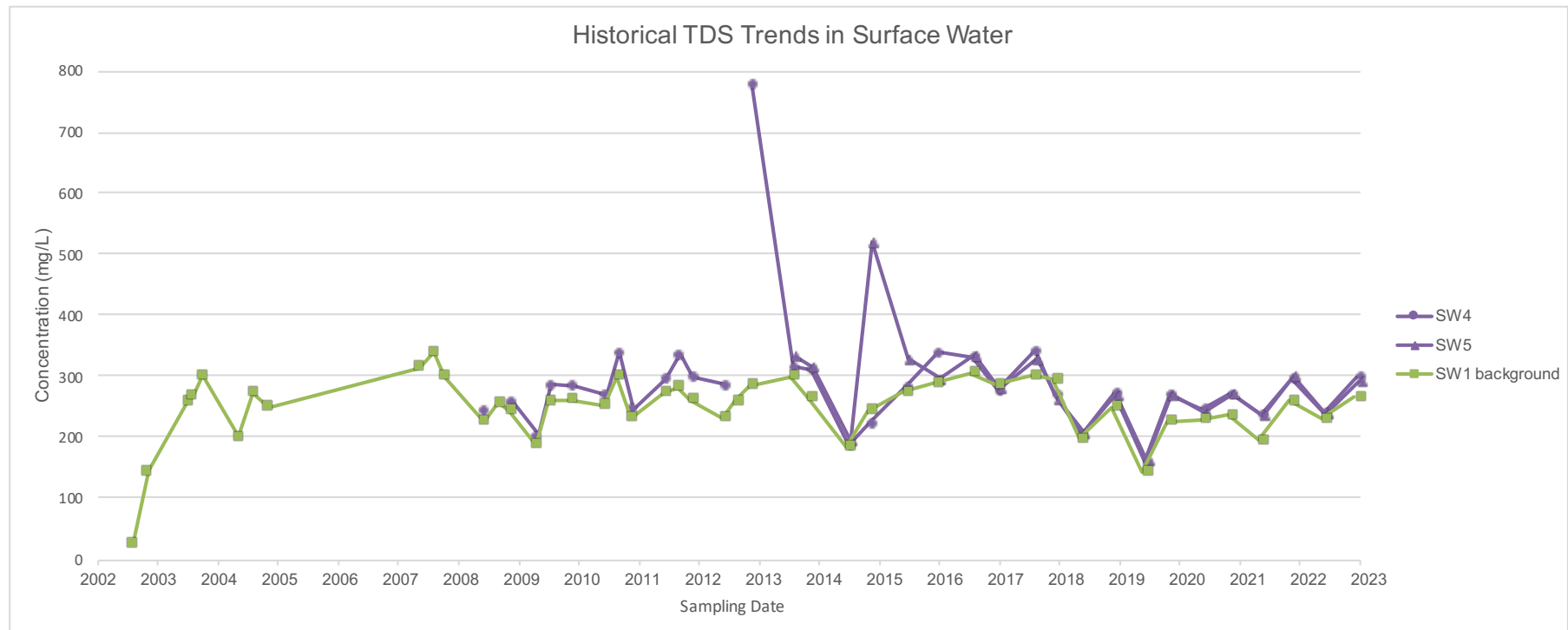
Notes:

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- gaps between points denotes missing data
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- trend graphs provided as an interpretive tool only. Refer to the summary tables for results.
- for duplicate samples the average was used



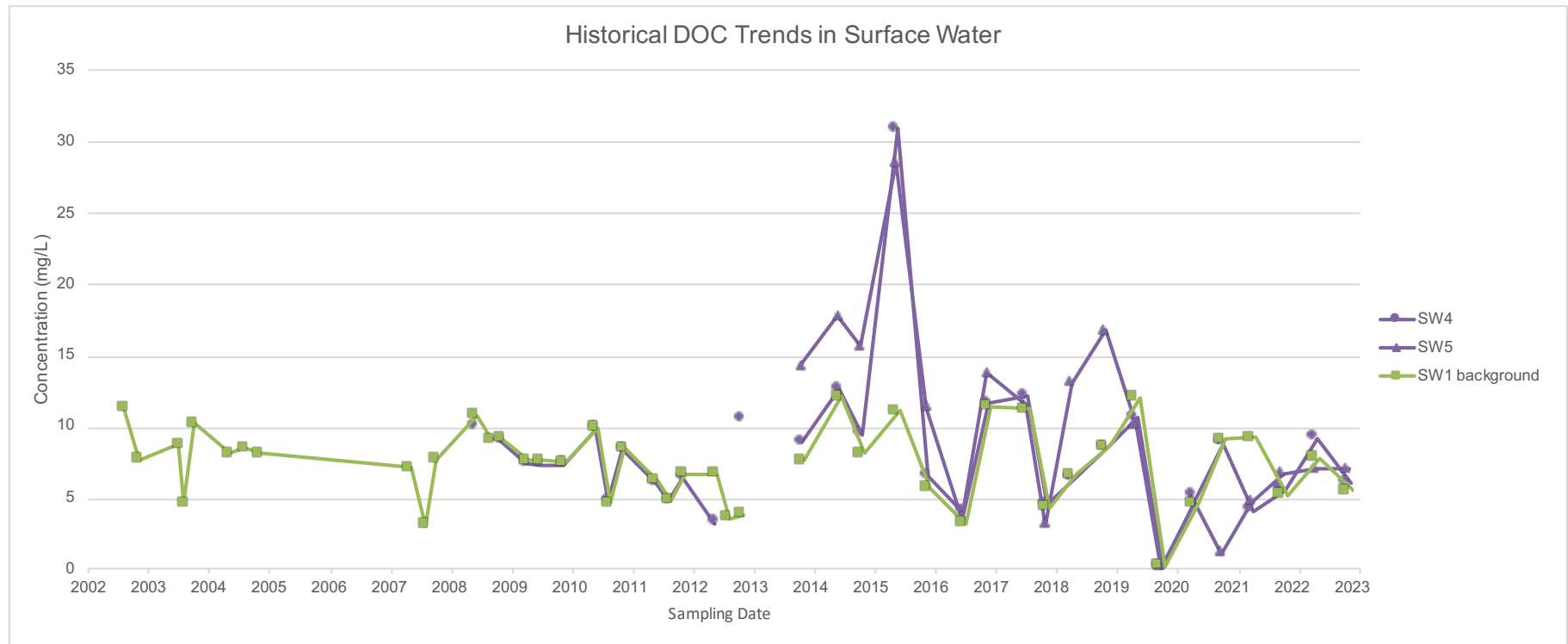
Notes:

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- for duplicate samples the average was used



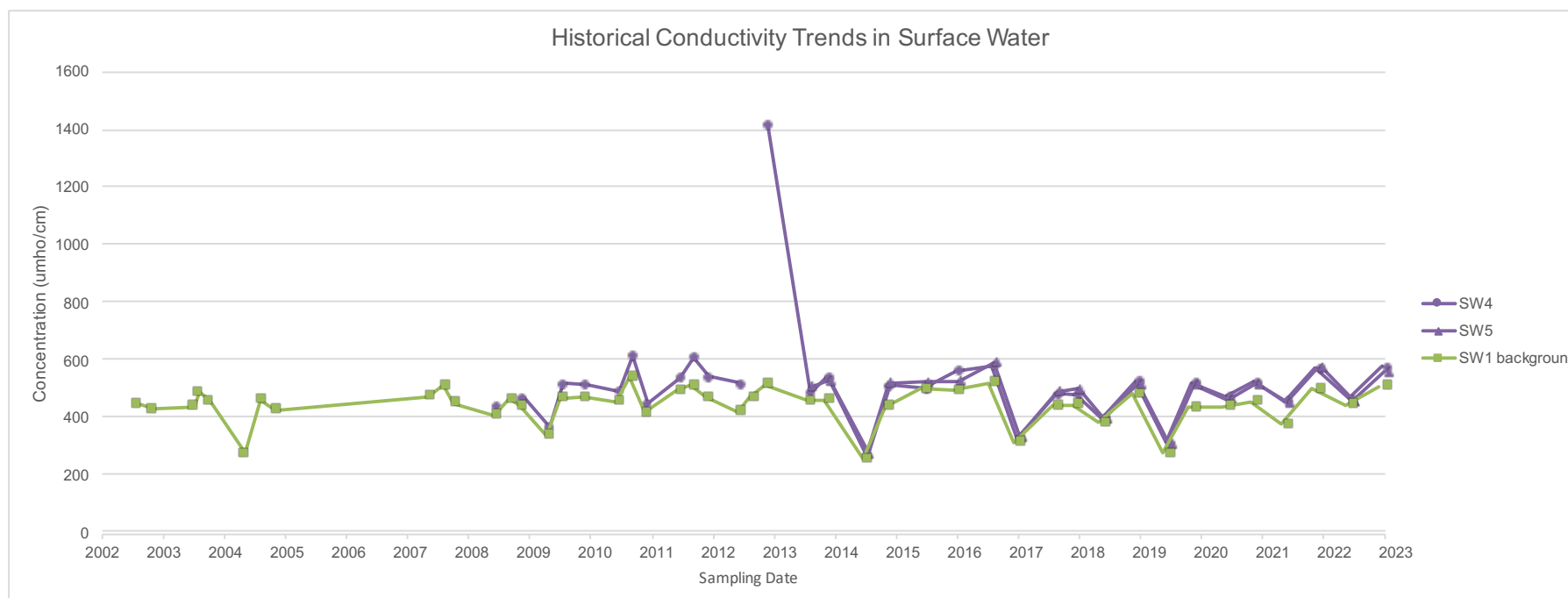
Notes:

- 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.
- for duplicate samples the average was used



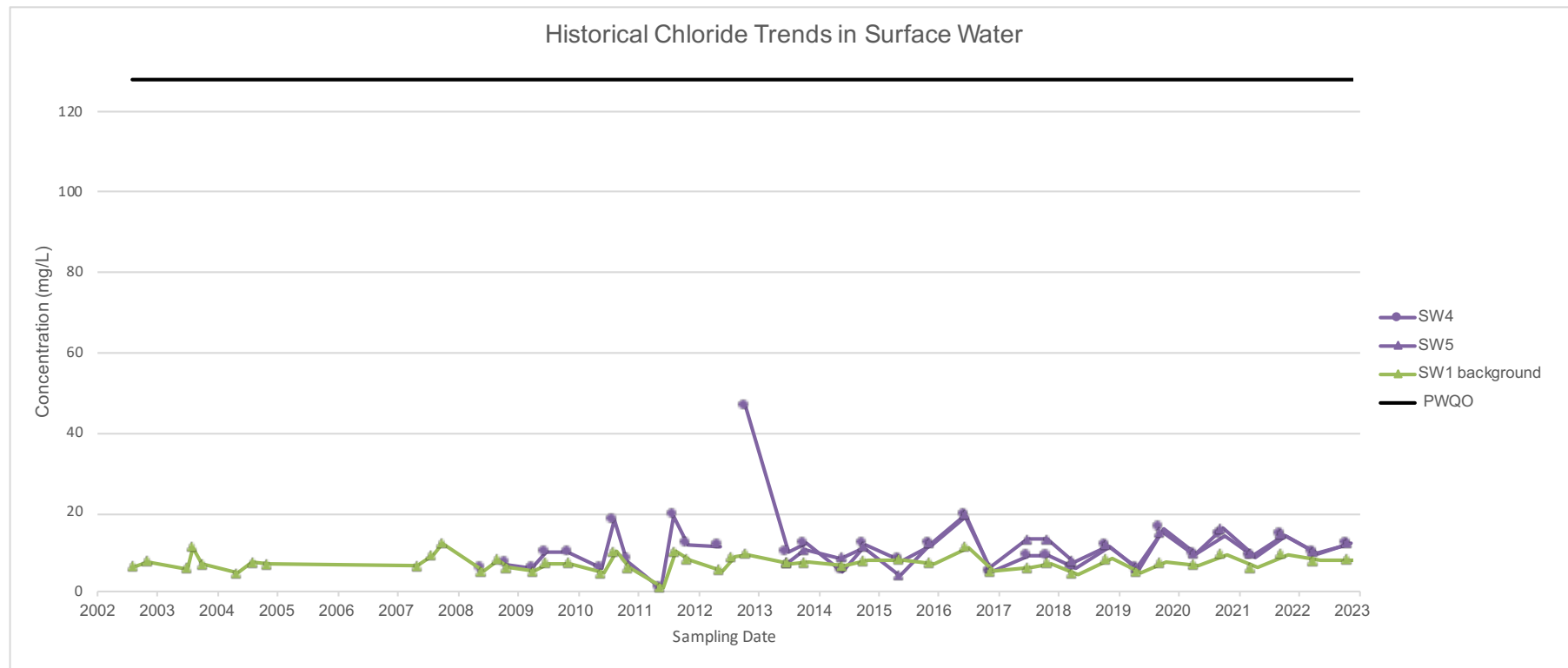
Notes:

- 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.
- for duplicate samples the average was used



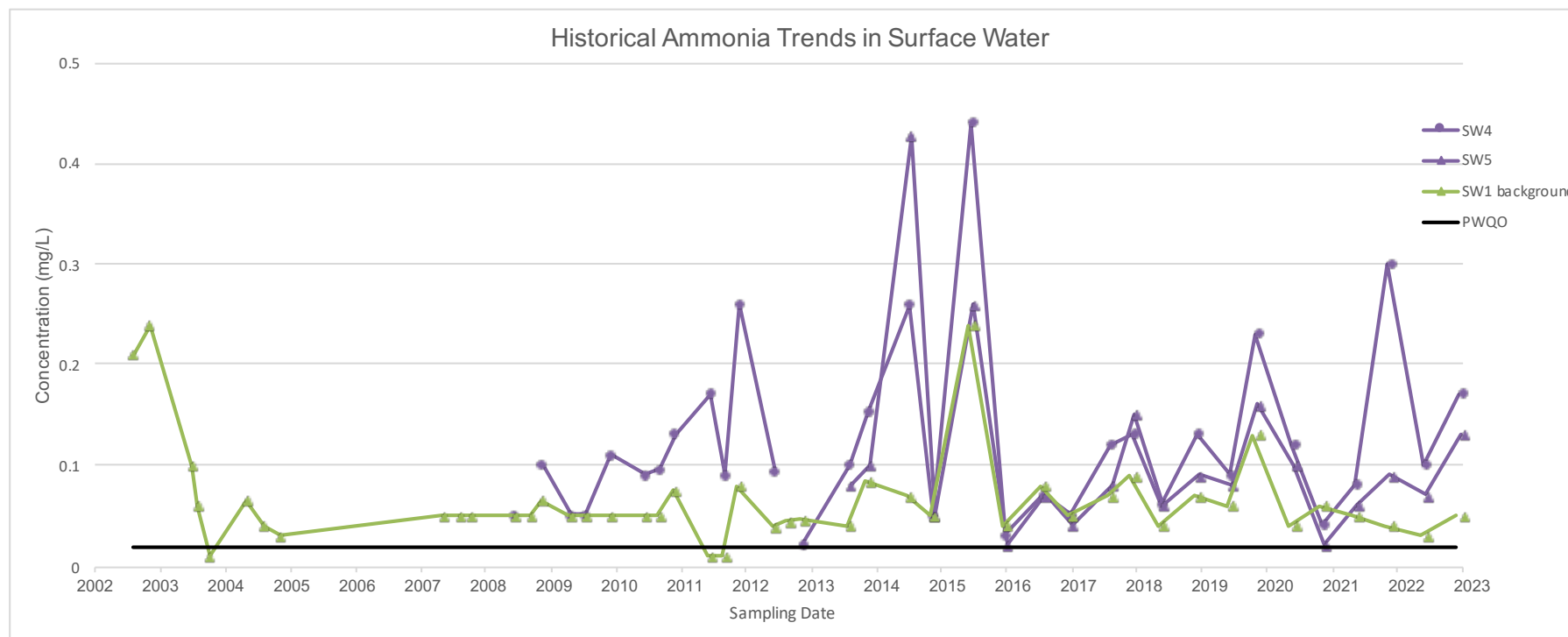
Notes:

- 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.
- for duplicate samples the average was used



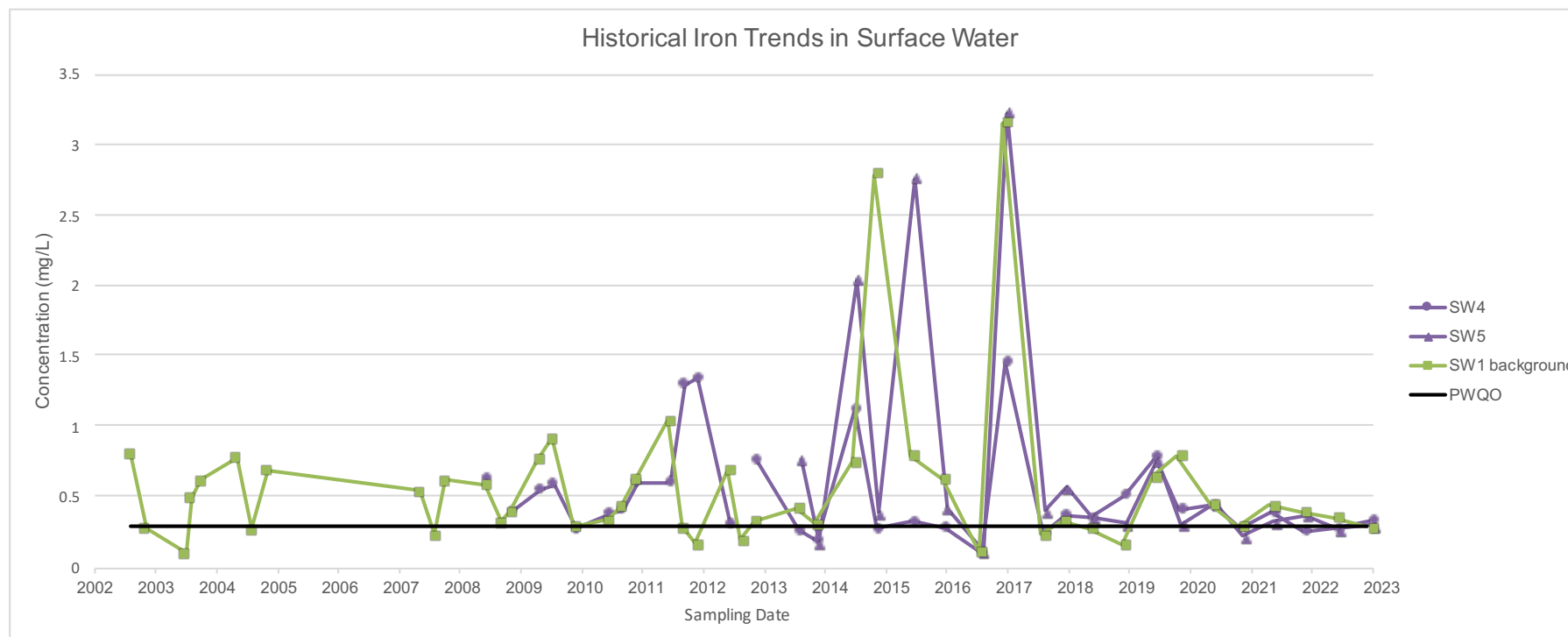
Notes:

- 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.
- for duplicate samples the average was used



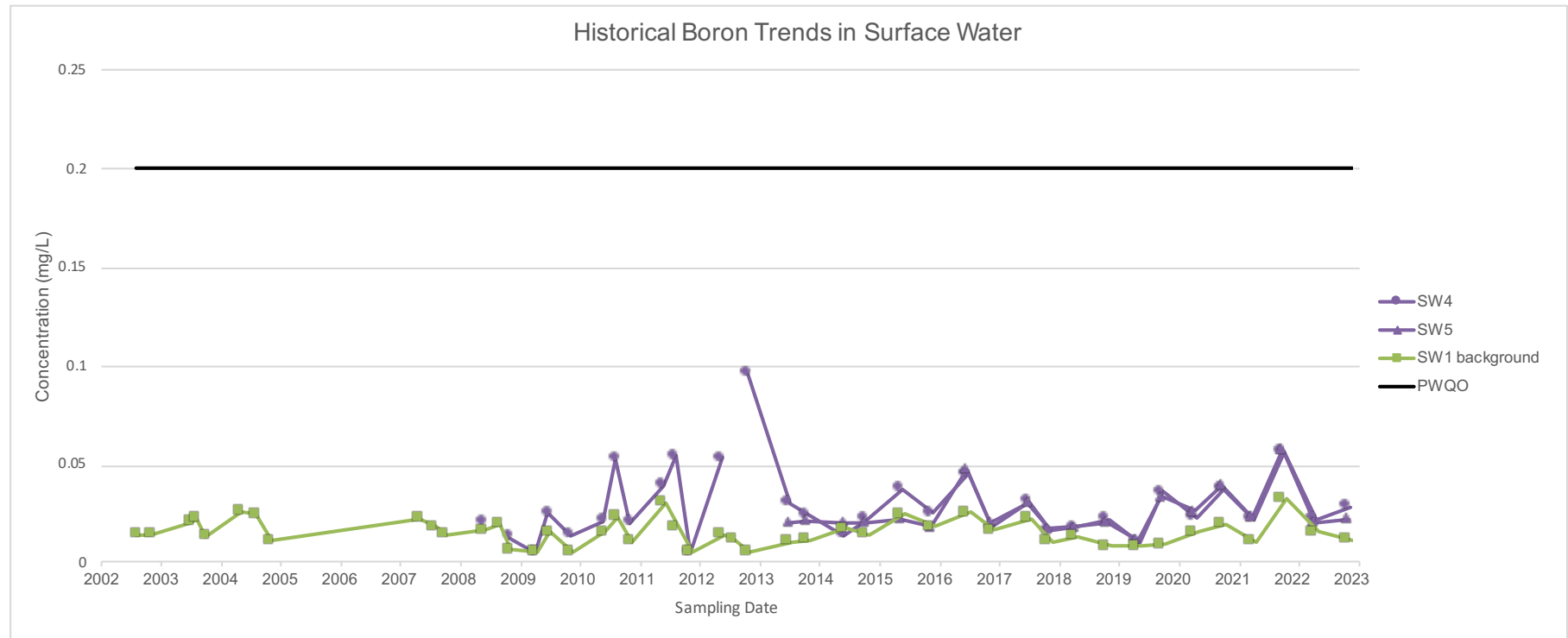
Notes:

- 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
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- for duplicate samples the average was used



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.
- for duplicate samples the average was used



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.
- for duplicate samples the average was used

Appendix J
Water Well Records

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

Ministry Use Only

MUN

CON

LOT

LEEDSTOWNVILLE

RR#/Street Number/Name

114 TURK ROCK R.D.

CITY/TOWN/VILLAGE

KEAR OF LEEDST LANSLOWNE

11

Site/Compartment/Block/Tract etc.

GPS Reading

NAD

Zone

Easting

Northing

Unit Make/Model

Mode of Operation:

Undifferentiated

Averaged

Differentiated, specify

813

18

407003

4932733

MAGELLAN

Log of Overburden and Bedrock Materials (see instructions)

General Colour	Most common material	Other Materials	General Description	Depth From	Metres To
BROWN	SAND	2" GREEN SET	23.5 To 20.4	0	11.3
BROWN	GRAVEL	BACK FILL MATERIAL		11.3	11.6
WHITE-GREY	SANDSTONE	24.3 To 19.8	SAND	11.6	20.4
GREY	SANDSTONE	19.8 To 7.6	BENTONITE	20.4	21
WHITE-GREY	SANDSTONE			21	24.3

Hole Diameter

Depth

Metres

Diameter

From

To

Centimetres

0

11.8

25.4

11.8

24.3

15.25

Water Record

Water found at

Metres

Kind of Water

20.4

Fresh

Sulphur

Gas

Salty

Minerals

Other

UNTESTED

m

Fresh

Sulphur

Gas

Salty

Minerals

Other

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

Metres

From

To

15.8

Steel

Fibreglass

Plastic

Concrete

Galvanized

.48

0

11.8

Casing

Steel

Fibreglass

Plastic

Concrete

Galvanized

Screen

Outside diam

Slot No.

No Casing or Screen

Open hole

11.8

24.3

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

20

2

Final water level end of pumping

metres

3

3

Recommended pump type

Shallow

Deep

Recommended pump depth

metres

4

4

Recommended pump rate

(litres/min)

15

15

If flowing give rate - (litres/min)

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)

11.8

4

CEMENT SLURRY

.3

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

Well Contractor/Technician Information

Name of Well Contractor

Well Contractor's Licence No.

JACK KNOX WELL DRILLING

3202

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

GLEN BURNIE

Name of Well Technician (last name, first name)

Well Technician's Licence No.

KNOX JOHN

2879

Signature of Technician/Contractor

Date Submitted

Y

MM

DD

X

REN

END

Location of Well

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

3

58m

4KM

CIVIC #114

TURK ROCK R.D.

BRIAR HILL R.D.

Audit No.

z 37623

Date Well Completed

YYYY

MM

DD

06

3

16

Was the well owner's information package delivered?

Yes

No

Date Delivered

YYYY

MM

DD

Ministry Use Only

Data Source

Contractor

3202

Date Received

YYYY

MM

DD

APR

11

2006

Date of Inspection

YYYY

MM

DD

Remarks

Well Record Number



Ministry of
the Environment

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.)

A175 283

Well # on Drawing of Deepest Well:

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

Page 1 of 3

Well Cluster Location Information

Address of Well Location (Street Number(s)/Name(s), RR, if available)		Lot(s)	Concession(s)	Geographic Township		County/District/Upper Tier Municipality
Brier Hill & Turk Rock Rd.		17818	11	Leeds & 1000 Islands		Leeds & Grenville United
City, Town, Village or Hamlet		Province	GPS Unit Make	Model	Unit Mode of Operation	☐ Undifferentiated ☐ Averaged
Brier Hill / Lyndhurst		Ontario			☐ Differentiated, specify:	

Mandatory Attachments/Additional Information

- ☒ Land Owner Consent Form must be attached.
☒ 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.

Signature of Technician/Contractor _____ Date (yyyy/mm/dd) _____

Well Details

Well # on Drawing	UTM Coordinates		Hole Depth (m/ft)	Hole Diameter (cm/in)	Method of Construction	Casing Material; Diameter (cm/in)	Casing (m/ft)		Screen Interval (m/ft)		Annular Space Material (m/ft)		Overburden/Bedrock or Abandonment Filing Material Intervals (m/ft)	Static Water Level (m/ft)	Date of Completion (yyyy/mm/dd)
	Zone	Easting Northing					From	To	From	To	From	To			
1	18	4069294933106	17	8"	H.S.A.	Plastic	0	12	12	17			OW22		
2	18	4067284933177	30	8"		2	0	25	25	30			OW15-D		2015/09/23
3	18	4067244933179	12.5	8			0	7.5	7.5	12.5			OW15-S		
4	18	4066224933226	15				0	10	10	15			OW24		
5	18	4066704932992	15				0	10	10	15			OW23		
6	18	4066854932751	20				0	15	15	20			OW20		2015/09/23
7	18	4067044932919	20				0	15	15	20			OW21		
8	18	4068184932922	40				0	35	35	40			OW25		2015/09/24
9	18	4069464933206	12				0	7	7	12			OW7R1		
10	18	4069944933223	12				0	7	7	12			OW6R1		

Well Contractor and Well Technician Information

Business Name of Well Contractor		Business Address (Street Number/Name, RR)		Municipality	Province
Aardvaak Drilling Inc		25C Lewis Rd		Guelph	ON
Postal Code	Bus. Telephone No.	Well Contractor's Licence No.	Business E-mail Address		
N1H1E9	(519) 826 9340	7238	info@aaardvaakdrillinginc.com		
Name of Well Technician (First Name, Last Name)		Well Technician's Licence No.	Signature of Well Technician	Date Submitted (yyyy/mm/dd)	
Kyle Smith		3591	Tyler Inc	2015/10/01	

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

Well Abandonment

Person Abandoning the Wells:

Name

(Print or Type) - See instruction 11 on the back of this form

Ministry Use Only

Date Received (yyyy/mm/dd) Audit No.

C 24076

Comments:



Ontario

Ministry of
the Environment

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

15-099-03

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: # 4175283

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





The Ontario Water Resources Act

WATER WELL RECORD

11

Municipality **36016** Con. **CON** **02**

County or District Marquette		Township/Borough/City/Town/Village Township of Leeds + 1000 IS		Con block tract survey, etc. Con 2		Lot 18	
Owner's surname Township of Leeds		First Name Brown		Address 114		Date completed 26 02 03	
Section 11		Northings 114		Elevations 114		Basin Code 114	
ii		iii		iv			

21

Zone Easting Northing

UT M 10 12 17 18 24 25 26 30 31 47

[illegible]

31

32      

41		WATER RECORD			
Water found at - feet		Kind of water			
10-13	1 ☐ Fresh	3 ☐ Sulphur	4 ☐ Minerals	14	
25	2 ☐ Salty	4 ☐ Gas	6 ☐		
15-18	1 ☐ Fresh	3 ☐ Sulphur	4 ☐ Minerals	19	
	2 ☐ Salty	4 ☐ Gas	6 ☐		
20-23	1 ☐ Fresh	3 ☐ Sulphur	4 ☐ Minerals	24	
	2 ☐ Salty	4 ☐ Gas	6 ☐		
25-28	1 ☐ Fresh	3 ☐ Sulphur	4 ☐ Minerals	29	
	2 ☐ Salty	4 ☐ Gas	6 ☐		
30-33	1 ☐ Fresh	3 ☐ Sulphur	4 ☐ Minerals	34	6
	2 ☐ Salty	4 ☐ Gas	6 ☐		

51 CASING & OPEN HOLE RECORD					
Inside diam inches	Material	Wall thickness inches	Depth - feet		
			From	To	
10-11 2	1 ☐ Steel 2 ☐ Galvanized 3 ☐ Concrete 4 ☒ Open hole 5 ☐ Plastic	12		13-16 8	
17-18	1 ☐ Steel 2 ☐ Galvanized 3 ☐ Concrete 4 ☐ Open hole 5 ☐ Plastic	19		20-23	
24-25	1 ☐ Steel 2 ☐ Galvanized 3 ☐ Concrete 4 ☐ Open hole 5 ☐ Plastic	26		27-30	

SCREEN	Sizes of opening (Slot No.)	31-33	Diameter	34-38	Length	39-40
	0-10		1	inches	5	feet
	Material and type	PVC			Depth at top of screen	30
					2.5	feet

61	PLUGGING & SEALING RECORD		
☒ Annular space		☐ Abandonment	
Depth set at - feet		Material and type (Cement grout, bentonite, etc.)	
From	To		
10-13	16-17		
18-21	22-25		
26-29	30-33		
0 2 2 2.5 26-29 30-33		Bentonite Sand	
		50	

71	Pumping test method		10	Pumping rate		11-14	Duration of pumping		15-16	17-18
	1 ☐ Pump	2 ☐ Bailer				GPM	 Hours		 Mins	
	Static level		Water level end of pumping	Water levels during		1 ☐ Pumping	2 ☐ Recovery			
	19-21	22-24	15 minutes	30 minutes	45 minutes	60 minutes				
	feet	feet	feet	feet	feet	feet				
If flowing give rate		Pump intake set at		Water at end of test						
GPM		feet		☐ Clear ☐ Cloudy						
Recommended pump type		Recommended pump setting		Recommended pump rate						
☐ Shallow ☐ Deep		feet		GPM						

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

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

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

LOCATION OF WELL

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

0w.7 (X) 18T04006151 4933197

0w.6 (X) 18T04006197 4933245

CRACK

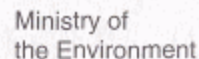
~
↑

Brent Hill Landfill

216505

Name of Well Contractor	G.E.T. Drilling LTD	Well Contractor's Licence No.	2055
Address	RR6 Napanee		
Name of Well Technician	Tim Harris	Well Technician's Licence No.	T-2251
Signature of Technician/Contractor	Submission date		day 01 mo 08 yr 03

MINISTRY USE ONLY	Data source	58 Contractor	59-62	Date received	63-68
		7085		OCT 07 2003	
	Date of inspection		Inspector		
	Remarks				



A092772

Regulation 903 Ontario Water Resources Act

Page 2 of 3

First Name	Last Name	Mailing Address (Street No./Name, RR)	Municipality
Township of Leeds and the 1000 Islands		1 Jessie St	Leedsdowne
Province	Postal Code	E-mail Address	Telephone No. (inc. area code)
ON	K0E1L0		613 659 2415

Address of Well Location (Street Number/Name, RR) 102-114 Turk Rock RD.			Lot 18	Concession 2	Township Leeds and the 1000 ISL.	County/District/Municipality Leeds and Grenville	
City/Town/Village Bever Hill	Province Ontario	Postal Code K0E 1L0	GPS Unit Make Garmin	Model map 63	Unit Mode of Operation ☐ Undifferentiated ☒ Averaged	☐ Differentiated, specify:	

upon request

Signature of Technician/Contractor _____

Date (yyyy/mm/dd)

OW17

OW19

2010 01 05

2010 01 05

Business Name of Well Contractor GET Drilling LTD										Business Address (Street Number/Name, RR) 278 Drive-in RD										Municipality Napanee										Province ON									
Postal Code K7R3L1										Business Telephone No. (inc. area code) 6133544767										Well Contractor's Licence No. 708B										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
---	------------

Date Received (yyyy/mm/dd)	Date Inspected (yyyy/mm/dd)
IAN 28 2010 Audit No. c07462	Remarks m02168

Imagery Date: Jul 25, 2005

44°34'41.20"N 76°04'15.57"W elev 101 m

Image © 2010 DigitalGlobe
© 2009 Google
© 2008 Terra Atlas

Google

Eye alt: 531 m

Location of Well cluster
TAG# A092272
Brier Hill Landfill

Landfill

TUCK ROCK RD

Replacement

WELL #2

Barn
WELL #1

House

WELL #3

RT

JAN 28 2010

C-7085 m02168 c07462

3/3



Measurements recorded in: ☐ Metric ☒ Imperial

No Tag

Well Owner's Information

First Name	Last Name / Organization	E-mail Address	☐ Well Constructed by Well Owner
	Township of Leeds and the Thousand Islands		
Mailing Address (Street Number/Name)	Municipality	Province	Postal Code
1233 Prince St. P.O. Box 280	Landsdowne	ON	K0E1L0
		Telephone No. (inc. area code)	613 659 0415

Well Location

Address of Well Location (Street Number/Name)	Township	Lot	Concession
114 Turk Rock Rd			
County/District/Municipality	City/Town/Village	Province	Postal Code
	Lyndhurst	Ontario	K0E1N0
UTM Coordinates	Zone	Easting	Northing
NAD 83	18T	406944	4933205
Municipal Plan and Sublot Number		Other	

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

General Colour	Most Common Material	Other Materials	General Description	Depth (m/ft)
	Peat		Wet	0 6'
3 MW's Abandoned on site in Cluster				
OW6, OW7, and L8				

Annular Space		
Depth Set at (m/ft)	Type of Sealant Used (Material and Type)	Volume Placed (m ³ /ft ³)
0 8' 3 8"	Hole Plug	

Method of Construction		Well Use	
☐ Cable Tool	☐ Diamond	☐ Public	☐ Commercial
☐ Rotary (Conventional)	☐ Jetting	☐ Domestic	☐ Municipal
☐ Rotary (Reverse)	☐ Driving	☐ Livestock	☒ Test Hole
☒ Boring	☐ Digging	☐ Irrigation	☒ Monitoring
☐ Air percussion		☐ Industrial	☐ Cooling & Air Conditioning
☐ Other, specify		☐ Other, specify	

Construction Record - Casing				Status of Well	
Inside Diameter (cm/in)	Open Hole OR Material (Galvanized, Fibreglass, Concrete, Plastic, Steel)	Wall Thickness (cm/in)	Depth (m/ft)	☐ Water Supply	☐ Replacement Well
From	To	☒ Test Hole			
1"	Plastic	.25"	0 1'	☐ Recharge Well	☐ Dewatering Well
				☒ Observation and/or Monitoring Hole	☐ Alteration (Construction)
				☐ Abandoned, Insufficient Supply	☐ Abandoned, Poor Water Quality
				☐ Abandoned, other, specify	☐ Other, specify

Construction Record - Screen			
Outside Diameter (cm/in)	Material (Plastic, Galvanized, Steel)	Slot No.	Depth (m/ft)
1.25"	Plastic	.10	1' 6'

Water Details		Hole Diameter	
Water found at Depth (m/ft)	Kind of Water: ☐ Fresh ☐ Untested	Depth (m/ft)	Diameter (cm/in)
	☐ Gas ☐ Other, specify	From To	
Water found at Depth (m/ft)	Kind of Water: ☐ Fresh ☐ Untested	0 8' 6"	
	☐ Gas ☐ Other, specify		
Water found at Depth (m/ft)	Kind of Water: ☐ Fresh ☐ Untested		
	☐ Gas ☐ Other, specify		

Well Contractor and Well Technician Information			
Business Name of Well Contractor		Well Contractor's Licence No.	
Can. Envir. Drilling & Contractors Inc.		7 3 2 3	
Business Address (Street Number/Name)		Municipality	
4102 Berth Rd. Inverary		South Frontenac	
Province	Postal Code	Business E-mail Address	
ON	K0H1X0	Jonathan@canedc.com	
Bus. Telephone No. (inc. area code)		Name of Well Technician (Last Name, First Name)	
613 353 2231		FILLION JONATHAN	
Well Technician's Licence No.		Signature of Technician and/or Contractor	
3 3 1 5		20191220	
		Date Submitted	

Results of Well Yield Testing				
After test of well yield, water was: ☐ Clear and sand free ☐ Other, specify	Draw Down		Recovery	
	Time (min)	Water Level (m/ft)	Time (min)	Water Level (m/ft)
If pumping discontinued, give reason:	Static Level			
	1		1	
Pump intake set at (m/ft)	2		2	
Pumping rate (l/min / GPM)	3		3	
Duration of pumping	4		4	
hrs + min	5		5	
Final water level end of pumping (m/ft)	10		10	
If flowing give rate (l/min / GPM)	15		15	
Recommended pump depth (m/ft)	20		20	
Recommended pump rate (l/min / GPM)	25		25	
Well production (l/min / GPM)	30		30	
Disinfected?	40		40	
☐ Yes ☐ No	50		50	
	60		60	

Map of Well Location	
Please provide a map below following instructions on the back.	
Comments:	
Well owner's information package delivered	Date Package Delivered
☒ Yes ☐ No	Y Y Y Y M M D D
	Date Work Completed
	20191028
Ministry Use Only	
Audit No. 322228	
Received	