## CCR Impoundment Weekly Inspection 35 ILL, ADM. Code 845 / 40 CFR Part 257

Station:	Coffeen			Date:	3/16/22				
Impoundment Name:				Time:	0900				
IEPA Number:				Inspector(s):	5B				
			recip. (last 48 hrs):	0,0	Pool F	ilev.:	lev.: <u>630,</u>		
"YES" responses require description (	size, depth, exten	ts, color	) and location in "DESC	CRIPTION" section. "NO" res	ponse indicates no is	ssues w	vere ob:	served	
at the time of inspection. If "ACTION	" selected is "INVE	STIGAT	E", please indicate date	e forwarded via email to Da	m Safety Manager (D	ISM).	Attach		
additional sheets as necessary. Circle	General Conditio	n for ea	ch section.				ACTIO	Al	
	designation	distance							
ITEM	YE	S NO		DESCRIPTION		MONITOR	INVESTIGATE	SENT TO DSM	
CREST	General Condition	n Good	DFair / Poor	Repairs:	Date:				
Cracking	No.	V							
Settlement		1							
Erosion Rills		V							
Animal Burrows		IV							
Misalignment		V	//						
Vegetation (greater than 12")		1						-	
UPSTREAM EMBANKMENT		n: Good	Fair / Poor	Repairs:	Date:			-	
Cracking		4	1						
Sloughing / Bulging		1	1,						
Seepage		L						-	
Sink Holes		1	1,					-	
Animal Burrows		-						-	
Erosion Rills		-					-	-	
Slope Protection / Rip Rap		1					-		
Vegetation (greater than 12"		1					-	-	
DOWNSTREAM EMBANKMENT		p. Goo	/ Fair / Poor	Repairs:	Date:	-		-	
Cracking			Y.					-	
Sloughing / Bulging							-	-	
Seepage		-						+	
Sink Holes		-	1			-	-	+	
Sand Boils (indicate if flowing	g and color)	ì				-		-	
Animal Burrows			1			-	+	+-	
Erosion Rills						-	+-	-	
Vegetation (greater than 12'	")					+		-	
SPILLWAY(S)	General Conditi	on: 800	d / Fair / Poor	Repairs:	Date:	-		-	
Actively Flowing (provide d	lepth)	-	X.			-	-	-	
Obstructions Present						-	-	+	
Seepage						+-	+-	+	
Sand Boils (indicate if flowing	g and color)		1			-	-	+	

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	Station:	Co	offeen			Date	8/16/22			
	Impoundment Name:	Ash	Pond 2			Time	1000			
	IEPA Number:	W1350	150004	-02		Inspector(s)	53			
Sky: Car Temp.:	76	et	P	recip. (last 48 hrs):	0.0	Pool I	Elev.:	N	A	
				1	Variation in "DES	COURTION" section "NO" re	sponse indicates no i	ssues w	ere ob	served
'YES" re	esponses require description (	size, depth	is "INVFS	, color	) and location in DES F", please indicate da	te forwarded via email to Da	ım Safety Manager (E	SM).	Attach	
at the ti addition	nal sheets as necessary. Circle	e General (	Condition	for ea	ch section.			printer and the second second	CTIO	
				-		A	A			
	ITEM		YES	NO		DESCRIPTION		MONITOR	INVESTIGATE	SENT TO
	CREST	General C	condition:	Good	Y Fair / Poor	Repairs:	Date:			
Cra	acking			V						-
processor the processor that the party of	ttlement			1 ~	/					-
	osion Rills			-						-
	nimal Burrows			L	(,					-
and the latest designation of the latest des	isalignment			l						-
ADDRESS OF THE PARTY OF THE PAR	egetation (greater than 12"	)		1				-		-
UPS	TREAM EMBANKMENT	General (	Condition	:G000	/ Fair / Poor	Repairs:	Date:			-
Cr	racking				/			-	-	+-
Sl	oughing / Bulging							-	-	+
STATE OF THE PERSON NAMED IN	eepage							-	-	+
Si	nk Holes			1	/			+	-	+-
A	nimal Burrows			1	1			+	-	+-
Er	rosion Rills				1			+	-	+
SI	lope Protection / Rip Ra	р						+	+	+
V	egetation (greater than 12	")			1		Data	+	+	+
DOW	VNSTREAM EMBANKMEN	T General	Condition	(G00	/ Fair / Poor	Repairs:	Date:	-	-	
C	racking			,	1			+	+	+
S	loughing / Bulging				1	with description of the content of t		+	+	+
S	eepage				1			+	+	+
S	ink Holes				1			+	+	+
S	and Boils (indicate if flowing	g and colo	r)					+	1	+
A	Animal Burrows			_	1			+	+	$\top$
1	rosion Rills			-	1			1	1	1
V	egetation (greater than 12	2")		1	1	Ponsimi	Date:		1	
	SPILLWAY(S)	Genera	l Conditio	n: 609	d / Fair / Poor	Repairs:	Date.			
F	Actively Flowing (provide	depth)			4			+	+	1
(	Obstructions Present				4,			+	1	+
5	Seepage				W			+	+	+
5	Sand Boils (indicate if flow)	ng and cold	or)		Y					1

## CCR Impoundment Weekly Inspection 35 ILL. ADM. Code 845 / 40 CFR Part 257

Station:	Coffeen			Date:	8/16/2	>		
Impoundment Name:	GMF Pond	MARCHINA DE LA CONTRACTOR DE LA CONTRACT		Time:	Contraction of the last of the	programment and the second		
Impoundment Name:		THE RESIDENCE OF THE PARTY OF T		Inspector(s):	513			
IEPA Number.	44133013000-	- 03		,				
Sky: Clear Temp.:	76°F	P	recip. (last 48 hrs):	0.0	Pool E	lev.:	627	7.15
"YES" responses require description (si	ize denth extents	color	and location in "DESC	CRIPTION" section. "NO" re	sponse indicates no is	ssues w	ere obs	erved
"YES" responses require description (si at the time of inspection. If "ACTION"	selected is "INVES	STIGAT	E", please indicate date	e forwarded via email to Da	m Safety Manager (D	ISM).	Attach	
additional sheets as necessary. Circle	General Condition	for ea	ch section.			and the second distribution of the second	CTION	1
						A		· ·
ITEM	YES	NO		DESCRIPTION		MONITOR	INVESTIGATE	SENT TO DSM
CREST	General Condition	: Good	DFair / Poor	Repairs:	Date:			
Cracking		V	V					
Settlement		1	/					
Erosion Rills		1	,					
Animal Burrows		1	[					-
Misalignment		1						-
Vegetation (greater than 12")		1						-
UPSTREAM EMBANKMENT	General Condition	: Good	/ Fair / Poor	Repairs:	Date:			-
Cracking		1					-	-
Sloughing / Bulging		-				-	-	-
Seepage		1	1			-	-	-
Sink Holes		1	1			-	+	-
Animal Burrows		/				-	-	+
Erosion Rills		1				-	+	+
Slope Protection / Rip Rap		-				-	-	+
Vegetation (greater than 12")		1	1			-	+	+
DOWNSTREAM EMBANKMENT	General Conditio	n: 200	/ Fair / Poor	Repairs:	Date:	-	-	-
Cracking			Y.			-	+	+
Sloughing / Bulging			1			-	+	+
Seepage		-	1			+	-	+-
Sink Holes		1	1			+	+	+
Sand Boils (indicate if flowing	and color)	1				+-	+	+
Animal Burrows		(	1			+-	+-	+-
Erosion Rills		/	1			-	+	+-
Vegetation (greater than 12")	)	16			Data	-	+	1
SPILLWAY(S)	General Condition	n: 669	/ Fair / Poor	Repairs:	Date:	-		-
Actively Flowing (provide de	epth)	1				+-	+	+
Obstructions Present		-	1			+-	+	+-
Seepage		1	1			-	+	+
Sand Boils (indicate if flowing	and color)					+-	+	+-

## CCR Impoundment Weekly Inspection 35 ILL. ADM. Code 845 / 40 CFR Part 257

	35 H	LL. AL	IVI. Code 645 / 40		2/11/-			
Station: Co	offeen			Date		2		
Impoundment Name: GMF R	ecycle P	ond		Time	NAME OF TAXABLE PARTY OF TAXABLE PARTY.	0		
IEPA Number: W1350				Inspector(s	53			
Sky: <u>Clear</u> Temp.: 76					SERVICE STATE OF THE SERVICE S	l Elev.:	de polony kine Ann Callenga III.	,
YES" responses require description (size, dept the time of inspection. If "ACTION" selected	is "INVES	IIGAII	", please indicate date	RIPTION" section. "NO" reforwarded via email to D	esponse indicates no eam Safety Manager	issues w (DSM) .	vere ob Attach	served
dditional sheets as necessary. Circle General	Condition	Tor ea	n section.		ACTION			
ITEM	YES	NO		DESCRIPTION		MONITOR	INVESTIGATE	SENT TO DSM
CREST General	Condition	Good	Fair / Poor	Repairs:	Date:			
	T		1					
Cracking	_	1V	7					
Settlement Erosion Rills		1						
Animal Burrows		+						
		1						
Misalignment		1						
Vegetation (greater than 12")  UPSTREAM EMBANKMENT General	Condition	: Bood	Fair / Poor	Repairs:	Date:			
Cracking / Rulging								
Sloughing / Bulging		1						
Seepage Sink Holes	_	+						
		+						
Animal Burrows Erosion Rills	-	1						
Slope Protection / Rip Rap		1						
		17						
Vegetation (greater than 12")  DOWNSTREAM EMBANKMENT Genera	Conditio	n: 600	Pair / Poor	Repairs:	Date:			
		1	1					
Cracking Charles A Rulging			-					
Sloughing / Bulging		1						
Seepage	-	+						
Sink Holes	or)		1					
Sand Boils (indicate if flowing and color Animal Burrows	-	-						
		-						
Erosion Rills		+	1					
Vegetation (greater than 12")  SPILLWAY(S)  General	al Conditio	n: 800	d DFair / Poor	Repairs:	Date:			
		6	1					
Actively Flowing (provide depth)		-						
Obstructions Present								
Seepage Sand Boils (indicate if flowing and co	lor)	-	+					
3700 DOIS HINDICATE II HOWING AND CO			A STATE OF THE PARTY OF THE PAR			1	1	1