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

	35	ILL.	AE	OM. Code 845 / 40	CFR Part 257	, ,	1		
Station: Coffee		1				Date: //9/2	4		
Impoundment Name:	Ash Pond	1	000000000			Time: ///:/0			
•	W13501500	04-0	1		Insp	ector(s):			
Sky: Pt. Cloudy Temp.:	33	adestron	Pr	recip. (last 48 hrs):	1.19"	Pool	Elev.:	42	9,0
"YES" responses require description at the time of inspection. If "ACTION additional sheets as necessary. Circ	N" selected is "INV	ESTIC	ATE	E", please indicate date	IPTION" section forwarded via e	. "NO" response indicates no mail to Dam Safety Manager (DSM) .	Attach	
							A	ACTIO	N
ITEM	YI	ES N	10		DESCRIPTI	ON	MONITOR	INVESTIGATE	SENT TO DSM
CREST	General Condition	on: Go		/ Fair / Poor	Repairs:	Date:			
Cracking		7							
Settlement		十				Secretary and the second secon			
Erosion Rills			~						
Animal Burrows			V						
Misalignment			/						
Vegetation (greater than 12"	')		/						
UPSTREAM EMBANKMENT	General Condition	on: Go	000	/ Fair / Poor	Repairs:	Date:			
Cracking		4	~						
Sloughing / Bulging			V						-
Seepage			V				-		-
Sink Holes			V						-
Animal Burrows			~						-
Erosion Rills			_				-		+
Slope Protection / Rip Ra	р							-	
Vegetation (greater than 12'	")		5					-	+
DOWNSTREAM EMBANKMEN	T General Condition	on/G	000	/ Fair / Poor	Repairs:	Date:			
Cracking		1	~					-	-
Sloughing / Bulging								-	+-
Seepage			/					-	+
Sink Holes			/				-	-	+
Sand Boils (indicate if flowing	g and color)		/				+	-	+
Animal Burrows			V				+	+	+
Erosion Rills			_				-	+	+-
Vegetation (greater than 12			_				-	+	+
SPILLWAY(S)	General Conditi	ion. G	000	/ Fair / Poor	Repairs:	Date:		-	
Actively Flowing (provide of	depth)		1	}			+	+-	-
Obstructions Present			/				+	+	-
Seepage			V					-	+-
Sand Bolls (indicate if flowing	ng and color)		V					-	

Erosion Rills

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	Station	: Coffe	en			Date	1/9/20			
	Impoundment Name	Ash Po	nd 2			Time:	09:5	0		
		r: W1350150	NAME OF TAXABLE PARTY OF TAXABLE PARTY.	-02		Inspector(s):	12			
	Drizzle Temp	.: 40		Pr	ecip. (last 48 hrs):			Elev.:		
at the ti	me of inspection. If "ACTION	ON" selected is "I	NVES	TIGATE	", please indicate dat	CRIPTION" section. "NO" re e forwarded via email to Da	sponse indicates no i im Safety Manager (I	ssues w DSM) . /	ere ob Attach	served
addition	nal sheets as necessary. Ci	rcle General Cond	ition	for eac	m section.			A	CTIO	N
	ITEM		YES	NO		DESCRIPTION		MONITOR	INVESTIGATE	SENT TO DSM
	CREST	General Cond	ition	Good	Fair / Poor	Repairs:	Date:			
Cr	acking			V						
MATERIAL PROPERTY AND PERSONS ASSESSED.	ttlement			V						
-	osion Rills			V						
adaran mengapakan ka	imal Burrows			~						
-	isalignment			V						
	getation (greater than 1	2")		1						
UPS	TREAM EMBANKMEN	T General Cond	lition:	Good	/ Fair / Poor	Repairs:	Date:			
ALCO PROPERTY AND PERSONS IN	acking			7				-		+
L	oughing / Bulging			/				-	-	+
-	epage			/				-	-	+
Same and the same of the same	nk Holes			/				-		+
A	nimal Burrows			/				-		+
	osion Rills			~				-	-	+
SI	ope Protection / Rip F	Rap		1				-	-	-
Brancon Control (CA)	egetation (greater than :			V				-	-	+
	NSTREAM EMBANKME		dition	Good	/ Fair / Poor	Repairs:	Date:	-	-	
DESCRIPTION OF THE PARTY.	racking		T	~	1			-	-	-
L	oughing / Bulging			1	1			+	-	-
and our expenses of	eepage			1	1			+	+	+
Securioration (COM	ink Holes			1				+	+	-
1	and Boils (indicate if flow	ving and color)		~	1			-	+-	+
Businessanion	nimal Burrows			~	1			-	+-	+
E	rosion Rills			/	1			+	+	+-
V	egetation (greater than	12")		1				+-	+	+-
	SPILLWAY(S)	General Cor	nditio	n: 500	/ Fair / Poor	Repairs:	Date:	-	+-	-
A	ctively Flowing (provid	e depth)		1				-	+-	
	bstructions Present			/	1			-	+-	-
-	eepage			V	1			-	+-	-
	and Boils (indicate if flor	wing and color)		V				+-	+-	+-
E	rosion Rills			1	1					

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		35 IL	L. AD	M. Code 845 / 40	CFR Part 257	1-1-1	/		
Statio	n: Coffe				Dat	e: //9/24			
Impoundment Nam		STATE OF THE OWNER.			Tim	e: 08:10	>		
	er: W135015	NAME OF TAXABLE PARTY.	-03		Inspector(s				
IEPA Numb			ISSUED HOR		- //			,	4 0
Sky: <u> </u>				ecip. (last 48 hrs):	1.19"	pergents	l Elev.:		
"YES" responses require descript at the time of inspection. If "ACT additional sheets as necessary.	TION" selected is "	INVES	IIGAIL	", please indicate date	RIPTION" section. "NO" forwarded via email to	response indicates no Dam Safety Manager		Attach	
								parameters and the same	A
ITEM		YES	NO		DESCRIPTION		MONITOR	INVESTIGATE	SENT TO DSM
aner?	General Cond	dition	Good	/ Fair / Poor	Repairs:	Date:			
CREST	General Con	T		tun ji oo					
Cracking		+-							
Settlement Erosion Rills		+-	V						
Animal Burrows		1							1
Misalignment			V						
Vegetation (greater than	12")		X						-
UPSTREAM EMBANKME	NT General Con	dition	Goog	/ Fair / Poor	Repairs:	Date:		-	
Cracking			V					+	+
Sloughing / Bulging			~						+
Seepage			V					+-	+
Sink Holes			V				_	+-	+
Animal Burrows			/					+	+
Erosion Rills			V				+	+-	+
Slope Protection / Rip	Rap		V				+	+-	+
Vegetation (greater than	n 12")		1		1	Data		+	_
DOWNSTREAM EMBANKN	IENT General Cor	ndition	Good	/ Fair / Poor	Repairs:	Date:	_	+	+
Cracking			1	1			_	+-	+
Sloughing / Bulging			V				-	+	1
Seepage			1	1			+	+	
Sink Holes			-	1			+	+	
Sand Boils (indicate if flo	owing and color)		~	1			_	+	1
Animal Burrows			1					+	
Erosion Rills			-				_	+	_
Vegetation (greater tha	n 12")		1,		lpanalan.	Date:			
SPILLWAY(S)	General Co	nditio	n: G00	d / Fair / Poor	Repairs:	Date.		_	
Actively Flowing (prov	Service and the service of the servi		V						
Obstructions Present			-	1			_	1	
Seepage			V	1				+	_
Sand Boils (indicate if fi	lowing and color)		1	1			_	+	1

Erosion Rills

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

		3	5 IL	L. AD	M. Code 845 / 40 C	FR Part 257	1.1	1		
	Station:	Coffeer	n				Date: //9/24			
l.m.				nd			Time: 08:	50		
Impoundment Name: GMF Recycl IEPA Number: W1350150			04-	04						
	IEPA Number:	W12201200	0-4	04		Inspec			,	
	loudy Temp.:				ecip. (last 48 hrs):	1.19 "	Section of the sectio	ol Elev.:		
at the time o	nses require description (of inspection. If "ACTION neets as necessary. Circle	" selected is "IN	VES I	IGAIL	", please indicate date it	PTION" section. brwarded via em	"NO" response indicates n ail to Dam Safety Manager			
additional 31	ieets as necessary.							A	ACTIO	IN
	ITEM	Y	ES	NO		DESCRIPTIO	N	MONITOR	INVESTIGATE	SENT TO DSM
	COLCE	General Conditi	on:	Good	Fair / Poor	Repairs:	Date:			
	CREST	General Conditi	011.	V	1011/1001					
Cracki	COMPANIES CONTRACTOR AND ADDRESS OF THE PERSON OF THE PERS			1						
Settle										
Erosio	NAME OF TAXABLE PARTY OF TAXABLE PARTY OF TAXABLE PARTY.		er consension							
	al Burrows		planta (Cree							
AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	gnment			-						
Veget	ation (greater than 12" AM EMBANKMENT)	ion	600	/ Fair / Poor	Repairs:	Date:			
		General Condit	1011		7 (0.11 / , 0.01					
Cracki	ALL HARD STATE OF THE PARTY OF		opide Silved	V						
AND RESIDENCE OF THE PARTY OF T	hing / Bulging			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						
Seepa	A STATE OF THE PARTY OF THE PAR			1						
Sink H	THE CONTRACTOR IS NOT THE OWNER, WHEN THE PROPERTY OF THE PROP									
and the same of th	al Burrows			1						
	on Rills		-	1						
-	Protection / Rip Ra		-	1						
Veget	tation (greater than 12	")		10	15 1 10	Repairs:	Date:			
DOWNST	REAM EMBANKMEN	T General Condi	tion			Repairs.			1	
Crack				YV				1		
Sloug	shing / Bulging			V				_	+	
Seep	age			V				_	+	_
	Holes			-					+	1
Sand	Boils (indicate if flowing	ng and color)		V	/			_	1	1
Anim	nal Burrows			V				_	+	
Erosi	on Rills		_	V					+	-
Vege	tation (greater than 12	2")		10	1	T	Data.	-	+	-
	SPILLWAY(S)	General Cond	itior	1: G000	// Fair / Poor	Repairs:	Date:		+	
Activ	ely Flowing (provide	depth)		V	1				-	+
1	ructions Present			V	1				-	_
Seep	age			V					-	-
	Rolls (indicate if flow)	ng and color)		V	1				-	

Erosion Rills