

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

Station: Vermilion
Impoundment Name: North Pond Cell 1&2
IEPA Number: W1838000002-01

Date: 10-16-2021
Time: 0817
Inspector(s): Charles Verone CM
Michael Verone
Pool Elev.: Normal

Sky: Cloudy **Temp.:** 59°F **Precip. (last 48 hrs):** 1.23"

"YES" responses require description (size, depth, extents, color) and location in "DESCRIPTION" section. "NO" response indicates no issues were observed at the time of inspection. If "ACTION" selected is "INVESTIGATE", please indicate date forwarded via email to Dam Safety Manager (DSM). Attach additional sheets as necessary. Circle General Condition for each section.

ITEM	YES	NO	DESCRIPTION	ACTION		
				MONITOR	INVESTIGATE	SENT TO DSM
CREST	General Condition: <u>Good</u> / Fair / Poor		Repairs: _____ Date: _____			
Cracking		<input checked="" type="checkbox"/>				
Settlement		<input checked="" type="checkbox"/>				
Erosion Rills		<input checked="" type="checkbox"/>				
Animal Burrows		<input checked="" type="checkbox"/>				
Misalignment		<input checked="" type="checkbox"/>				
Vegetation (greater than 12")		<input checked="" type="checkbox"/>				
UPSTREAM EMBANKMENT	General Condition: <u>Good</u> / Fair / Poor		Repairs: _____ Date: _____			
Cracking		<input checked="" type="checkbox"/>				
Sloughing / Bulging		<input checked="" type="checkbox"/>				
Seepage		<input checked="" type="checkbox"/>				
Sink Holes		<input checked="" type="checkbox"/>				
Animal Burrows		<input checked="" type="checkbox"/>				
Erosion Rills		<input checked="" type="checkbox"/>				
Slope Protection / Rip Rap		<input checked="" type="checkbox"/>				
Vegetation (greater than 12")	<input checked="" type="checkbox"/>		<u>Trees at River</u>	<input checked="" type="checkbox"/>		
DOWNSTREAM EMBANKMENT	General Condition: <u>Good</u> / Fair / Poor		Repairs: _____ Date: _____			
Cracking		<input checked="" type="checkbox"/>				
Sloughing / Bulging		<input checked="" type="checkbox"/>				
Seepage		<input checked="" type="checkbox"/>				
Sink Holes		<input checked="" type="checkbox"/>				
Sand Boils (indicate if flowing and color)		<input checked="" type="checkbox"/>				
Animal Burrows		<input checked="" type="checkbox"/>				
Erosion Rills		<input checked="" type="checkbox"/>				
Vegetation (greater than 12")	<input checked="" type="checkbox"/>		<u>Trees at River</u>	<input checked="" type="checkbox"/>		
SPILLWAY(S)	General Condition: <u>Good</u> / Fair / Poor		Repairs: _____ Date: _____			
Actively Flowing (provide depth)		<input checked="" type="checkbox"/>	<u>Shut in</u>			
Obstructions Present		<input checked="" type="checkbox"/>				
Seepage		<input checked="" type="checkbox"/>				
Sand Boils (indicate if flowing and color)		<input checked="" type="checkbox"/>				
Erosion Rills		<input checked="" type="checkbox"/>				

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Station: Vermilion
Impoundment Name: Old East Pond
IEPA Number: W1838000002-03

Date: 10-16-2021
Time: 0826

Inspector(s): Charles Nerone CPM
Michael Nerone

Sky: Cloudy **Temp.:** 59° F **Precip. (last 48 hrs):** 1.23" **Pool Elev.:** Capped

"YES" responses require description (size, depth, extents, color) and location in "DESCRIPTION" section. "NO" response indicates no issues were observed at the time of inspection. If "ACTION" selected is "INVESTIGATE", please indicate date forwarded via email to Dam Safety Manager (DSM). Attach additional sheets as necessary. Circle General Condition for each section.

ITEM	YES	NO	DESCRIPTION	ACTION		
				MONITOR	INVESTIGATE	SENT TO DSM
CREST	General Condition: <u>Good</u> / Fair / Poor		Repairs: _____ Date: _____			
Cracking		<input checked="" type="checkbox"/>				
Settlement		<input checked="" type="checkbox"/>				
Erosion Rills		<input checked="" type="checkbox"/>				
Animal Burrows		<input checked="" type="checkbox"/>				
Misalignment		<input checked="" type="checkbox"/>				
Vegetation (greater than 12")	<input checked="" type="checkbox"/>		<u>Trees Present</u>			<input checked="" type="checkbox"/>
UPSTREAM EMBANKMENT	General Condition: <u>Good</u> / Fair / Poor		Repairs: _____ Date: _____			
Cracking		<input checked="" type="checkbox"/>				
Sloughing / Bulging	<input checked="" type="checkbox"/>		<u>Near River Level</u>			<input checked="" type="checkbox"/>
Seepage		<input checked="" type="checkbox"/>				
Sink Holes		<input checked="" type="checkbox"/>				
Animal Burrows		<input checked="" type="checkbox"/>				
Erosion Rills		<input checked="" type="checkbox"/>				
Slope Protection / Rip Rap		<input checked="" type="checkbox"/>				
Vegetation (greater than 12")	<input checked="" type="checkbox"/>		<u>Trees Present</u>			<input checked="" type="checkbox"/>
DOWNSTREAM EMBANKMENT	General Condition: <u>Good</u> / Fair / Poor		Repairs: _____ Date: _____			
Cracking		<input checked="" type="checkbox"/>				
Sloughing / Bulging		<input checked="" type="checkbox"/>				
Seepage		<input checked="" type="checkbox"/>				
Sink Holes		<input checked="" type="checkbox"/>				
Sand Boils (indicate if flowing and color)		<input checked="" type="checkbox"/>				
Animal Burrows		<input checked="" type="checkbox"/>				
Erosion Rills		<input checked="" type="checkbox"/>				
Vegetation (greater than 12")	<input checked="" type="checkbox"/>		<u>Trees Present</u>			<input checked="" type="checkbox"/>
SPILLWAY(S)	General Condition: <u>Good</u> / Fair / Poor		Repairs: _____ Date: _____			
Actively Flowing (provide depth)		<input checked="" type="checkbox"/>	<u>Capped</u>			
Obstructions Present		<input checked="" type="checkbox"/>				
Seepage		<input checked="" type="checkbox"/>				
Sand Boils (indicate if flowing and color)		<input checked="" type="checkbox"/>				
Erosion Rills		<input checked="" type="checkbox"/>				

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Station: Vermilion
Impoundment Name: New East Pond Cell 1&2
IEPA Number: W183800002-04

Date: 10-16-2021

Time: 0845

Inspector(s): Charles Perone CM

Michael Perone AS

Pool Elev.: Normal

Sky: cloudy **Temp.:** 59°F

Precip. (last 48 hrs): 1.23"

"YES" responses require description (size, depth, extents, color) and location in "DESCRIPTION" section. "NO" response indicates no issues were observed at the time of inspection. If "ACTION" selected is "INVESTIGATE", please indicate date forwarded via email to Dam Safety Manager (DSM). Attach additional sheets as necessary. Circle General Condition for each section.

ITEM	YES	NO	DESCRIPTION	ACTION		
				MONITOR	INVESTIGATE	SENT TO DSM
CREST	General Condition: <u>Good</u> / Fair / Poor		Repairs: _____ Date: _____			
Cracking		✓				
Settlement		✓				
Erosion Rills	✓		Road washout west side			✓
Animal Burrows		✓				
Misalignment		✓				
Vegetation (greater than 12")	✓		Trees Growing in Pond			✓
UPSTREAM EMBANKMENT	General Condition: <u>Good</u> / Fair / Poor		Repairs: _____ Date: _____			
Cracking		✓				
Sloughing / Bulging		✓				
Seepage		✓				
Sink Holes		✓				
Animal Burrows		✓				
Erosion Rills		✓				
Slope Protection / Rip Rap		✓				
Vegetation (greater than 12")	✓		Trees Growing in River			✓
DOWNSTREAM EMBANKMENT	General Condition: <u>Good</u> / Fair / Poor		Repairs: _____ Date: _____			
Cracking						
Sloughing / Bulging						
Seepage						
Sink Holes						
Sand Boils (indicate if flowing and color)						
Animal Burrows						
Erosion Rills						
Vegetation (greater than 12")						
SPILLWAY(S)	General Condition: <u>Good</u> / Fair / Poor		Repairs: _____ Date: _____			
Actively Flowing (provide depth)		✓	Shut in			
Obstructions Present		✓				
Seepage		✓				
Sand Boils (indicate if flowing and color)		✓				
Erosion Rills		✓				