

Annex B

Monitoring and Complaint Proforma

Data Sheet for TSP Monitoring

Monitoring Location		
Details of Location		
Sampler Identification		
Date & Time of Sampling		
Elapsed-time Start (min.)		
Meter Reading Stop (min.)		
Total Sampling Time (min.)		
Weather Conditions		
Site Conditions		
Initial Flow Rate	Pi (mmHg)	
	Ti (°C)	
	Hi (in.)	
	Qsi (Std. m ³)	
Final Flow Rate	Pf (mmHg)	
	Tf (°C)	
	Hf (in.)	
	Qsf (Std. m ³)	
Average Flow Rate (Std. m ³)		
Total Volume (Std. m ³)		
Filter Identification No.		
Initial Wt. of Filter (g)		
Final Wt. of Filter (g)		
Measured TSP Level (ug/m ³)		

Name & Designation

Signature

Date

Field Operator:

Laboratory Staff:

Checked by:

Data Sheet for Ambient VOCs, Ammonia & H₂S Monitoring

Monitoring Location	
Details of Location	
Sampler Identification	
Date & Time of Sampling	
Weather	Sunny / Fine / Overcast / Shower / Rain
Ambient Temperature	°C
Wind Speed	
Wind Direction	
Wind from the Project Area	Yes / No

Parameter	Value	Parameter	Value
Ammonia		Methane	
Trichloroethylene		Ethanol	
Vinyl chloride		Butan-2-ol	
Methylene chloride		Dimethylsulphide	
Chloroform		Methyl propionate	
1,2-dichloroethane		Ethyl propionate	
1,1,1-trichloroethane		Propyl propionate	
Carbon tetrachloride		Butyl acetate	
Tetrachloroethylene		Ethyl butanoate	
1,2-dibromoethane		Dichlorobenzene	
Benzene		Methyl butanoate	
Toluene		Dipropyl ether	
Carbon disulphide		Methanethiol	
Propyl benzene		Ethanethiol	
Ethyl benzene		Butanethiol	
Butyl benzene		Methanol	
Xylenes		Heptanes	
Decanes		Octanes	
Undecane		Nonanes	
Limonene		Dichlorodifluoromethane	
Terpenes		Hydrogen Sulphide	

Name & Designation

Signature

Date

Field Operator:

Laboratory Staff:

Checked by:

Data Sheet for Odour Monitoring

Date	
Time	
Monitoring Location	
Description of Location	
Site Conditions	

Weather	Sunny / Fine / Overcast / Shower / Rain
Ambient Temperature	°C
Wind Speed	
Wind Direction	
Wind from the Project Area	Yes / No

Odour Characteristic	
Odour Level (0-4) *	0 / 1 / 2 / 3 / 4
Major Odour Sources	<p>SENT:</p> <p>Others:</p>
Remarks	

Note: *

0	Not Detected	No odour perceived or an odour so weak that it cannot be easily characterized or described
1	Slight	Identifiable odour, slight
2	Moderate	Identifiable odour, moderate
3	Strong	Identifiable, strong
4	Extreme	Severe odour

Name & Designation

Signature

Date

Recorded by:

Checked by:

Data Sheet for Thermal Oxidizer / LFG Flare / LFG Generator Monitoring

Monitoring Location	
Details of Location	
Sampler Identification	
Date & Time of Sampling	

Performance Parameter	Value
Gas Combustion Temperature	
Exhaust Gas Temperature	
Exhaust Gas Velocity	
Exhaust Gas Retention Time	

Parameter	Value	
NO ₂		g s ⁻¹
CO		g s ⁻¹
SO ₂		g s ⁻¹
Benzene		g s ⁻¹
Vinyl chloride		g s ⁻¹
NMOCs		mg m ⁻³ / ppm

Name & Designation

Signature

Date

Field Operator:

Laboratory Staff:

Checked by:

Surface Water Quality Monitoring Data Sheet – In-situ Monitoring

Location	Surface	Middle	Bottom
Monitoring Station			
Date			
Weather			
Sea Condition			
Tide Mode			
Start Time (hh:mm)			
Water Depth (m)			
PH			
Temperature (°C)			
Salinity (ppt)			
Turbidity (NTU)			
Electricity Conductivity			
Sample Identification			
DO (mg/l)			
DO Saturation (%)			
Other Observations			

Name & Designation

Signature

Date

Recorded by:

Checked by:

Surface Water Quality Monitoring Data Sheet – Laboratory Testing

Location	
Monitoring Station	
Date	
Time	
Weather	

Parameters	Value	Parameters	Value
SS		Sodium	
COD		Potassium	
BOD		Calcium	
TOC		Magnesium	
Ammonia–nitrogen		Nickel	
Nitrate-nitrogen (N)		Manganese	
Nitrite – nitrogen (N)		Chromium	
Phosphate		Cadmium	
Sulphate		Copper	
Sulphide		Lead	
Carbonate		Iron	
Bicarbonate		Zinc	
Chloride			

Name & Designation

Signature

Date

Field Operator:

Laboratory Staff:

Checked by:

Groundwater Monitoring Data Sheet – In-situ Monitoring

Monitoring Hole Reference No.	
Time	
Depth to water below monitoring hole datum	
Monitoring hole datum level*	
Groundwater level*	
General weather conditions	
Equipments	
pH	
Electricity conductivity	
Comments	

* With reference to Principle Datum

Name & Designation

Signature

Date

Recorded by:

Checked by:

Ground Water Quality Monitoring Data Sheet – Laboratory Testing

Monitoring Station	
Date	
Time	
Weather	

Parameters	Value	Parameters	Value
BOD		Sodium	
COD		Potassium	
TOC		Calcium	
Ammonia-nitrogen		Magnesium	
Nitrate-nitrogen (N)		Nickel	
Nitrate-nitrogen		Manganese	
Nitrite – nitrogen		Chromium	
Sulphate		Cadmium	
Sulphide		Copper	
Carbonate		Lead	
Chloride		Iron	

Name & Designation

Signature

Date

Field Operator:

Laboratory Staff:

Checked by:

Effluent Monitoring Data Sheet – In-situ Monitoring

Effluent from Leachate Treatment Plant

pH	
Electricity conductivity	
Temperature (Leachate)	
Temperature (Air)	
Sampling Device	
Sample Colour	
Sample Clarity	
Comments	

Name & Designation

Signature

Date

Field Operator:

Checked by:

Effluent Monitoring Data Sheet – Laboratory Testing of Effluent from LTP

Monitoring Station	
Date	
Time	
Weather	

Parameters	Value	Parameters	Value
COD		Iron	
BOD		Zinc	
TOC		Alkalinity	
Ammonia–nitrogen		Chloride	
Nitrate-nitrogen		Calcium	
Nitrite–nitrogen		Potassium	
Total Nitrogen		Magnesium	

Name & Designation

Signature

Date

Field Operator:

Laboratory Staff:

Checked by:

Noise Monitoring Field Data Sheet

Monitoring Location		
Description of Location		
Date of Monitoring		
Measurement Start Time (hh:mm)		
Measurement Time Length (min.)		
Noise Meter Model/Identification		
Calibrator Model/Identification		
Measurement Results	L ₉₀ (dB(A))	
	L ₁₀ (dB(A))	
	Leq (dB(A))	
Major Construction Noise Source(s) During Monitoring		
Other Noise Source(s) During Monitoring		
Remarks		

Name & Designation

Signature

Date

Recorded by:

Checked by:

Sample Template for Interim Notifications of Environmental Quality Limits Exceedances

Incidental Report on Action Level or Limit Level Non-compliance

Project	
Date	
Time and Tidal status if relevant	
Monitoring Location	
Parameter	
Action & Limit Levels	
Measured Level	
Possible reason for Action or Limit Level Non-compliance	
Actions taken / to be taken	
Remarks	

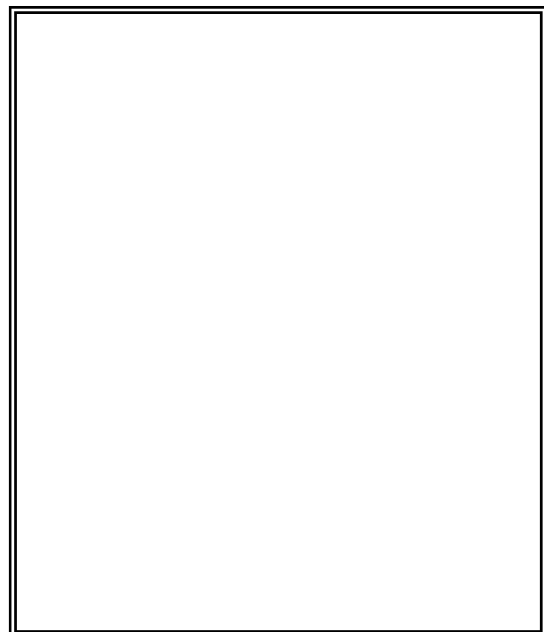
Location Plan

Prepared by: _____

Designation: _____

Signature: _____

Date: _____



Landfill Gas Monitoring –Field Measurement Recording Sheet

Name of site:
Date of measurement:

Sampling equipment used:	Dates calibrated

Sample location	Date of measurement	Sampling time	Monitoring wells / Surface Gas Emission						
			Weather condition	Balance gas (%)	Flammable gas (methane %)	Carbon dioxide (%)	Oxygen (%)	Temp (°C)	Remark

Name & Designation

Signature

Date

Field Operator:

Laboratory Staff:

Checked by:

Landfill Gas Monitoring – Permanent Gas Detection System Field Data Sheet of Alarm System Activation

Date	
Time	
Building	
Detector Head No.	
Fault	

Methane Concentration	
Action Taken	

Name & Designation

Signature

Date

Field Operator:

Laboratory Staff:

Checked by:

Complaint Log

Ref:

Log Ref	Date	Location	Complainant/ Date of Contact	Details of Complaint	Investigation / Mitigation Action	File Closed

Filed by Environmental Team Leader:

Date:

Implementation Status Proforma

Ref:

Ref**	Environmental Protection Measures*	Implementation Status

* All recommendations and requirements resulted during the Course of EIA Process, including ACE and/or accepted public comment to the proposed projects.

** EIA Ref/ EM&A Log Ref/ Design Document Ref

Signed by Environmental Team Leader:

Audited by Independent Environmental Checker:

Date:

Date:

Regulatory Compliance Proforma

Ref:

Ref**	Environmental Licence / Permit*	Control Area / Facility / Location	Effective Date

* Name of Applicant, Business Corporation, relevant regulation and remark of license/permit conditions

** File reference of the license/permittee

Recorded by Environmental Team Leader:

Audited by Independent Environmental Checker:

Date:

Date:

Site Inspection Proforma

Ref:

Date	Location	Requirement Ref.*	Observation / Deficiency	Mitigation Action ** (Responsible Agency)	Date*** of Confirmation

* EIA Ref/EM&A Log Ref/Design Document Ref/Environmental Protection Contract Clause
 ** Specific Environmental Mitigation Measures should be stated, such as, equipment, process, system, practices or technologies
 *** The required completed date to confirm the specified Environmental Protection Action

Recorded by Environmental Team Leader:

Audited by Independent Environmental Checker:

Date:

Date