



EM&A Report (Final)

# EcoPark Operation Quarterly EM&A Compliance

April to June 2014





**EM&A Report (Final)**

# **EcoPark Operation Quarterly EM&A Compliance**

**April to June 2014**

**Certified By**      **Antony WONG**  
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|                         |                                                       |
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## EXECUTIVE SUMMARY

### General

EcoPark is a key element in the Government's waste management policy that aims to promote the local recycling industry and jump-start a circular economy to provide a sustainable solution to our waste problems. Contract *EP/SP/53/06 Provision of Management Services for EcoPark in Tuen Mun Area 38* for the operation of EcoPark was awarded to Serco Guardian Joint Venture (SGJV) by the Environmental Protection Department (EPD) in November 2006.

SGJV ("the Operator") appointed SMEC Asia Ltd (SMEC) as the Environmental Team (ET) for the Environmental Monitoring and Audit (EM&A) works. Atkins China Ltd is the Independent Environmental Checker (IEC) for the EM&A works. The ET and the IEC carry out the EM&A works for the operation of EcoPark as required by the EM&A Manual and in accordance with the conditions of the Environmental Permit.

This is the twenty-ninth (29<sup>th</sup>) quarterly EM&A report prepared for the operation phase of EcoPark and covers April to June 2014. In the reporting quarter, there were 14 tenants in EcoPark Phase 1 and Phase 2:

Phase 1 tenants comprise:

- Champway Technology Ltd (Champway) – Waste cooking oil
- Shiu Wing Steel Ltd (Shiu Wing) – Waste metals
- Hong Kong Hung Wai Wooden Board Co (Hung Wai) – Waste wood
- Li Tong Group (Li Tong) – Waste Electrical and Electronic Equipment (WEEE)
- Hong Kong Telford Envirotech Group Ltd (Telford) – Waste plastics
- Cosmos Star Holdings Co Ltd (Cosmos) – Waste lead-acid batteries

Phase 2 tenants comprise:

- Yan Oi Tong EcoPark Plastic Resources Recycling Centre (Yan Oi Tong) – Waste plastics
- St. James' Settlement WEEE GO GREEN (St James' Settlement) – WEEE
- K.Wah Construction Products Ltd (K.Wah) – Waste construction materials/waste glass
- E.Tech Management (HK) Ltd (E.Tech) – WEEE
- On Fat Lung Electrical & Metal Co Ltd (On Fat Lung) – Waste rubber tyres
- Chung Yue Steel Group Company Ltd (Chung Yue) – Waste metals
- SSK Metal Ltd (SSK) – Waste lead-acid batteries
- South China Reborn Resources (Zhongshan) Co Ltd (South China) – Food waste

Recycling activities of the following eight tenants were audited in the reporting quarter: Champway, Shiu Wing, Hung Wai, Li Tong, Telford, Yan Oi Tong, St James' Settlement and Chung Yue. Lots under development by Cosmos, K.Wah, E.Tech, On Fat Lung, SSK and South China during the reporting quarter were inspected but not audited under the EM&A programme, as no recycling activities had commenced those lots.

In this reporting quarter, site inspections were conducted by the Operator and the ET on 22 April 2014 and 21 May 2014. A quarterly joint site inspection was carried out by the Operator, the IEC and the ET on 18 June 2014.

## Throughput of Materials / Waste Generated

The throughputs of the eight active tenants in the reporting quarter are summarised below. Please note that product output plus waste disposal does not necessarily equal the waste input, due to material losses during processing and material retained within the lots.

| Material Type  | Waste Input (tonnes) | Product Output (tonnes) | Waste Disposed (tonnes) |
|----------------|----------------------|-------------------------|-------------------------|
| Waste Oil      | 2,399                | 740                     | 1,681                   |
| Waste Wood     | -                    | -                       | -                       |
| WEEE           | 167                  | 197                     | 36                      |
| Waste Metals   | 13,834               | 14,679                  | -                       |
| Waste Plastics | 260                  | 779                     | 120                     |

**Note:** The throughput data presented above is the best available data and has been rounded off to the nearest whole tonne for presentation. The total product output plus the total waste disposed may not be the same as the waste input. This is due to processing of materials that were received before the reporting quarter and were stockpiled within the lots.

## Exceedances of Any Measured Action / Limit Levels

The northern part of EcoPark is located within the 250m Landfill Gas (LFG) Consultation Zone of Shiu Lang Shui Landfill. LFG monitoring during this quarter was undertaken on 18 June 2014 at five locations (three in Phase 1 and two in Phase 2).

No exceedance of Action and Limit Level was recorded in the reporting quarter.

## Summary of Complaints, Summons and Prosecutions

Numbers of complaints, summons and successful prosecutions in the reporting quarter are summarised below:

- **Complaints:** Zero.
- **Summons:** Zero.
- **Successful Prosecutions:** Zero.

## Reporting Changes

There is no change in reporting this quarter.

## Future Key Issues

No key issues are anticipated in the next reporting quarter. Operation phase LFG monitoring for Phase 1 and Phase 2 will continue to be carried out by the ET.



# 1 PROJECT DESCRIPTION

## 1.1 Overview

- 1.1.1 In the document "A Policy Framework for the Management of Municipal Solid Waste (2005 – 2014)" the government set out a comprehensive policy to support the recycling industry. This included allocating suitable land, encouraging research and development, introducing environmental legislation and providing effective support measures. In May 2013, the Environment Bureau launched "Hong Kong Blueprint for Sustainable Use of Resources 2013 – 2022", which promised continuing support for the recycling industry.
- 1.1.2 EcoPark was developed to support the local recycling industry and jump-start a circular economy to provide a sustainable solution to our waste problems. By encouraging and promoting the reuse, recovery and recycling of our waste resources and returning them to the consumption loop, EcoPark will help to realise the full potential of the local recycling industry and alleviate the heavy reliance on the export of recyclable materials recovered from Hong Kong.
- 1.1.3 EcoPark has been developed in Tuen Mun Area 38 (see [Figure 1-1](#)) in two phases (Phase 1 and Phase 2) under Contract EP/SP/52/06 *Development of EcoPark in Tuen Mun Area 38*, which was awarded to Kaden Construction Ltd by the Environmental Protection Department (EPD) in June 2006. Phase 1 construction was completed in July 2009 and Phase 2 construction was completed in November 2010. Contract EP/SP/53/06 *Provision of Management Services for EcoPark in Tuen Mun Area 38* for the operation of EcoPark was awarded to Serco Guardian Joint Venture (SGJV) by EPD in November 2006.
- 1.1.4 SGJV ("the Operator") appointed SMEC Asia Ltd (SMEC) as the Environmental Team (ET) for the Environmental Monitoring and Audit (EM&A) works. Atkins China Ltd (Atkins) has been appointed to provide the Independent Environmental Checker (IEC). The ET and the IEC carry out the EM&A works for EcoPark as required by the EM&A Manual and in accordance with the conditions of the Environmental Permit (EP).

## 1.2 Operation Programme

- 1.2.1 By end-June 2014, there were a total of 14 tenants in EcoPark comprising:
- Eight active tenants (Champway, Shiu Wing, Li Tong, Telford, Yan Oi Tong, St. James' Settlement, Hung Wai and Chung Yue) who have continued full recycling operations or are under trial operation.
  - One tenant (K.Wah) who has substantially completed the plant construction and machinery installation works, and is now in the testing and commissioning stage.
  - Four tenants (E.Tech, On Fat Lung, SSK and South China) who are carrying out plant design and planning or are carrying out construction
  - One tenant (Cosmos) who is now under legal process for termination of the lease agreement.

## 1.3 EM&A Organisation

1.3.1 The majority of submissions required by the EM&A programme and EP are prepared and certified by the ET and verified by the IEC. The key personnel contact details are summarised in **Table 1-1**. The organisation of SGJV is shown in **Figure 1-2** and the current EM&A organisation is illustrated in **Figure 1-3**.

**Table 1-1 EM&A Personnel Contact Details**

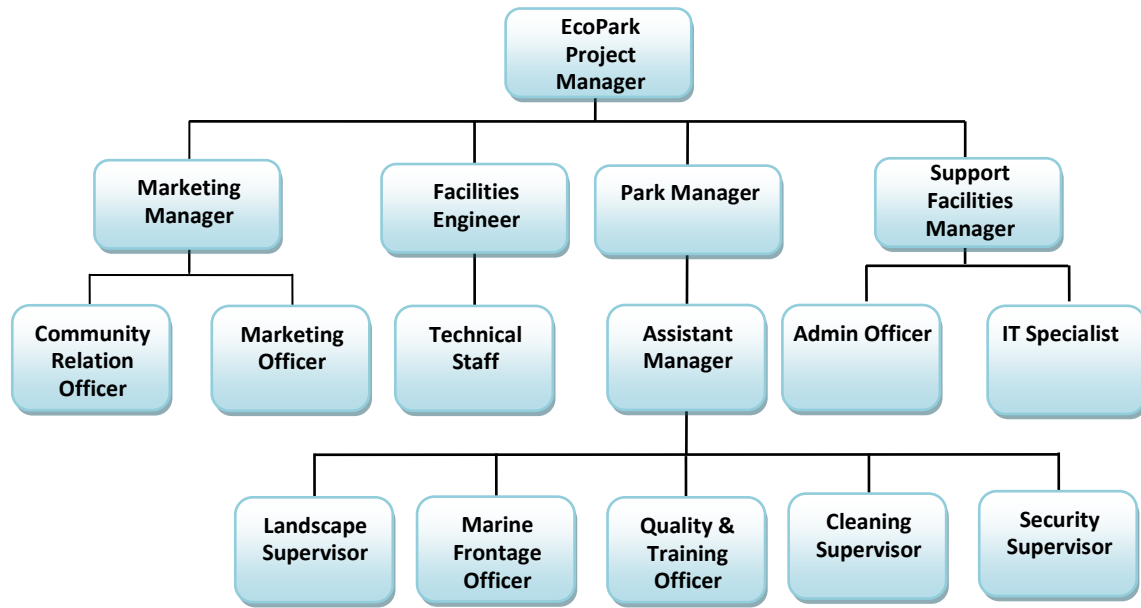
| Position                       | Name        | Email Address               | Telephone No. |
|--------------------------------|-------------|-----------------------------|---------------|
| <b>Project Proponent – EPD</b> |             |                             |               |
| Principal EPO                  | C K CHEN    | ckchen@epd.gov.hk           | 2872 1700     |
| <b>Operator – SGJV</b>         |             |                             |               |
| Project Manager                | Noel AU     | nkfau@ecopark-mgnt.com      | 2496 7633     |
| Park Manager                   | Mabel YUNG  | mabelyung@ecopark-mgnt.com  | 2212 5910     |
| <b>IEC – Atkins</b>            |             |                             |               |
| IEC                            | Sharifah OR | sharifah.or@atkinglobal.com | 2972 1802     |
| IEC Site Inspector             | Keith CHAU  | keith.chau@atkinglobal.com  | 2972 1721     |
| <b>ET – SMEC</b>               |             |                             |               |
| ET Leader                      | Antony WONG | antony.wong@smec.com        | 3995 8120     |
| ET Site Inspector              | Winnie MA   | winnie.ma@smec.com          | 3995 8138     |

**Figure 1-1** Location of EcoPark in Tuen Mun Area 38

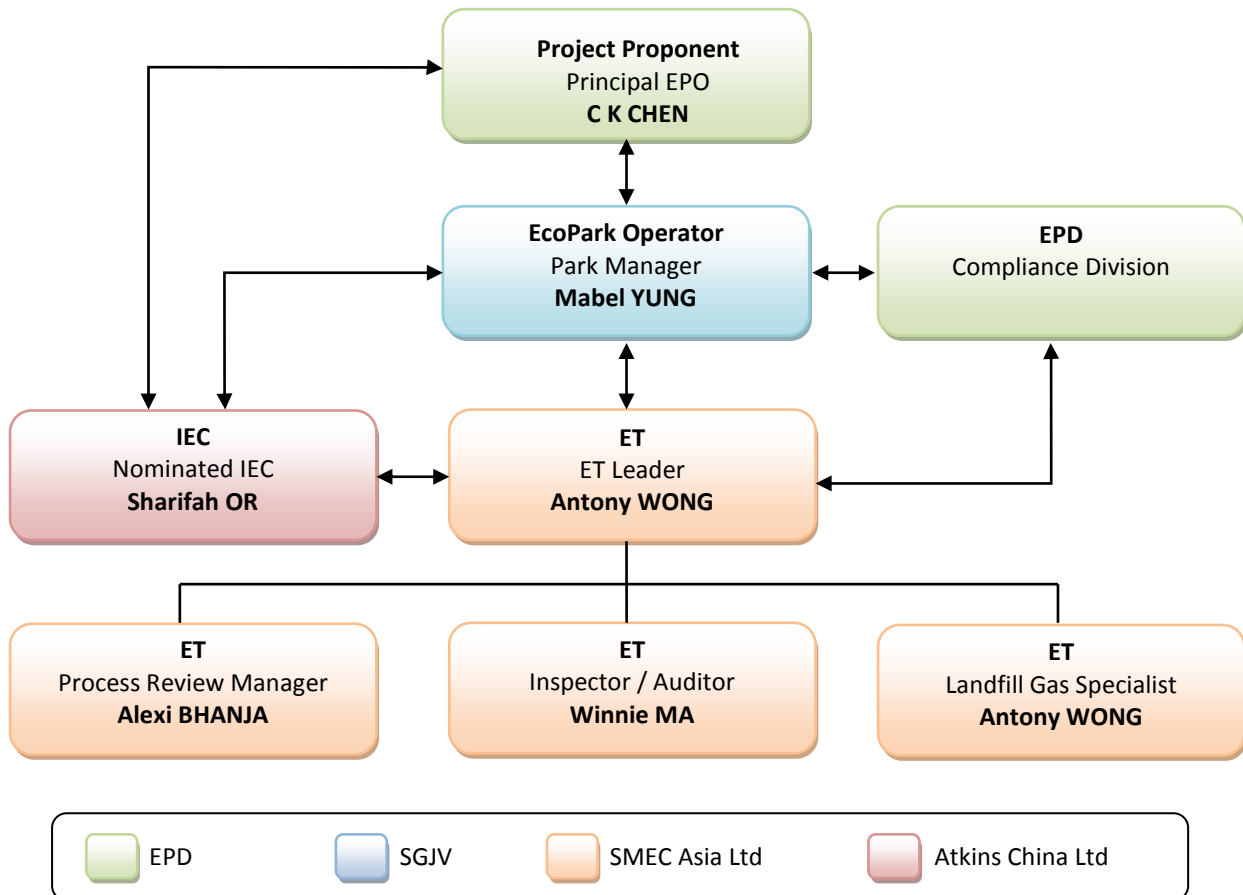


Source: EPD Records (May 2014)

**Figure 1-2 Organisation Chart of SGJV**



**Figure 1-3 Organisation Chart of EM&A Works (Operation)**



## 2 SUMMARY OF EM&A REQUIREMENTS

### 2.1 Monitoring Parameters

- 2.1.1 Landfill Gas (LFG) is required to be monitored quarterly at service voids and utility boxes within EcoPark because the northern part of EcoPark lies within the 250m LFG Consultation Zone for Siu Lang Shui Landfill, which is located to the north of EcoPark.
- 2.1.2 Operational LFG monitoring has been carried out in Phase 1 after completion of construction in July 2009, commencing in the August to October 2009 quarter. In Phase 2, monitoring has been carried out after completion of construction in November 2010, commencing in the November 2010 to January 2011 quarter.
- 2.1.3 The location for LFG monitoring was not specified in the EM&A Manual since the final design of EcoPark was not available when the EM&A Manual was approved. Therefore, during a joint site inspection on 27 July 2009, three monitoring locations were identified and agreed as suitable monitoring locations by the ET Leader, IEC and SGJV. Subsequently, two more monitoring locations in Phase 2 were proposed by the ET Leader and agreed by the IEC and SGJV via email in January 2011. These five monitoring locations are listed in **Table 2-1** and shown in **Figure 2-1**.

**Table 2-1 Operation Phase LFG Monitoring Locations in EcoPark**

| Monitoring Station ID | Type          | Locations                                              |
|-----------------------|---------------|--------------------------------------------------------|
| EP1-1                 | LFG vent pipe | Inside the landscaping area of Administration Building |
| EP1-2                 | Service void  | PCCW below-ground chamber outside Lot EP08-01          |
| EP1-3                 | Service void  | HGC Broadband below-ground chamber outside Lot EP08-03 |
| EP2-1                 | Service void  | HGC Broadband below-ground chamber outside Lot P1      |
| EP2-2                 | Service void  | HGC Broadband below-ground chamber outside Lot P3      |

- 2.1.4 **Figure 2-2** is a replacement figure for the EM&A Manual, in accordance with footnote to Figure 6.1 in the approved EM&A Manual, and shall be deemed to be included in the EM&A Manual.
- 2.1.5 Routine LFG monitoring has been carried out on a quarterly basis. Should EPD alert the Operator that high LFG levels have been detected during monthly monitoring under the Siu Lang Shui Landfill restoration contract, the Operator may be required to increase LFG monitoring to monthly until such time as EPD inform the Operator that quarterly monitoring can be resumed. To-date, EPD has not alerted the Operator.

### 2.2 Environmental Quality Performance Limits and EAP

- 2.2.1 The Action / Limit Levels and Event Action Plan (EAP) for LFG are shown in **Table 2-2**, below. These refer to LFG detected in excavations, utilities and any enclosed on-site areas. No other A/L Levels or EAPs are specified in the EM&A Manual for the operation phase EM&A.

**Table 2-2 Action Levels, Limit Levels and Event and Action Plan for LFG**

| Parameter                         | Level                              | Action                                                                                                                                                                           |
|-----------------------------------|------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Oxygen (O <sub>2</sub> )          | Action Level <19% O <sub>2</sub>   | <ul style="list-style-type: none"> <li>Ventilate trench/void to restore O<sub>2</sub> to &gt; 19%</li> </ul>                                                                     |
|                                   | Limit Level <18% O <sub>2</sub>    | <ul style="list-style-type: none"> <li>Stop works</li> <li>Evacuate personnel / prohibit entry</li> <li>Increase ventilation to restore O<sub>2</sub> to &gt; 19%</li> </ul>     |
| Methane (CH <sub>4</sub> )        | Action Level >10% LEL              | <ul style="list-style-type: none"> <li>Post "No Smoking" signs</li> <li>Prohibit hot works</li> <li>Increase ventilation to restore CH<sub>4</sub> to &lt;10% LEL</li> </ul>     |
|                                   | Limit Level >20% LEL               | <ul style="list-style-type: none"> <li>Stop works</li> <li>Evacuate personnel / prohibit entry</li> <li>Increase ventilation to restore CH<sub>4</sub> to &lt;10% LEL</li> </ul> |
| Carbon Dioxide (CO <sub>2</sub> ) | Action Level >0.5% CO <sub>2</sub> | <ul style="list-style-type: none"> <li>Ventilate to restore CO<sub>2</sub> to &lt; 0.5%</li> </ul>                                                                               |
|                                   | Limit Level >1.5% CO <sub>2</sub>  | <ul style="list-style-type: none"> <li>Stop works</li> <li>Evacuate personnel / prohibit entry</li> <li>Increase ventilation to restore CO<sub>2</sub> to &lt;0.5%</li> </ul>    |

## 2.3 Environmental Audit of Non-Monitored Parameters

2.3.1 Site inspections provide a direct means to trigger and enforce the environmental protection and pollution control measures specified in the Environmental Impact Assessment (EIA) Report. To examine operational practice, site inspections are to be undertaken by the ET once per month, and joint site inspections are to be carried out by the ET and IEC once per quarter. Ad hoc site inspections are also carried out if significant environmental problems are identified. In addition, inspections may be required subsequent to receipt of an environmental complaint, or as part of the investigation work, as specified in the EAP.

2.3.2 The following parameters are required to be audited as part of the operation phase EM&A programme:

- Air Quality
- Water Quality
- Waste Management
- Land Contamination

## 2.4 Environmental Mitigation Measures

2.4.1 Environmental mitigation measures applicable to the operation phase EM&A as stated in the Implementation Schedule are summarised in **Appendix 1**.

## 2.5 Environmental Requirements in Tenancy Agreements

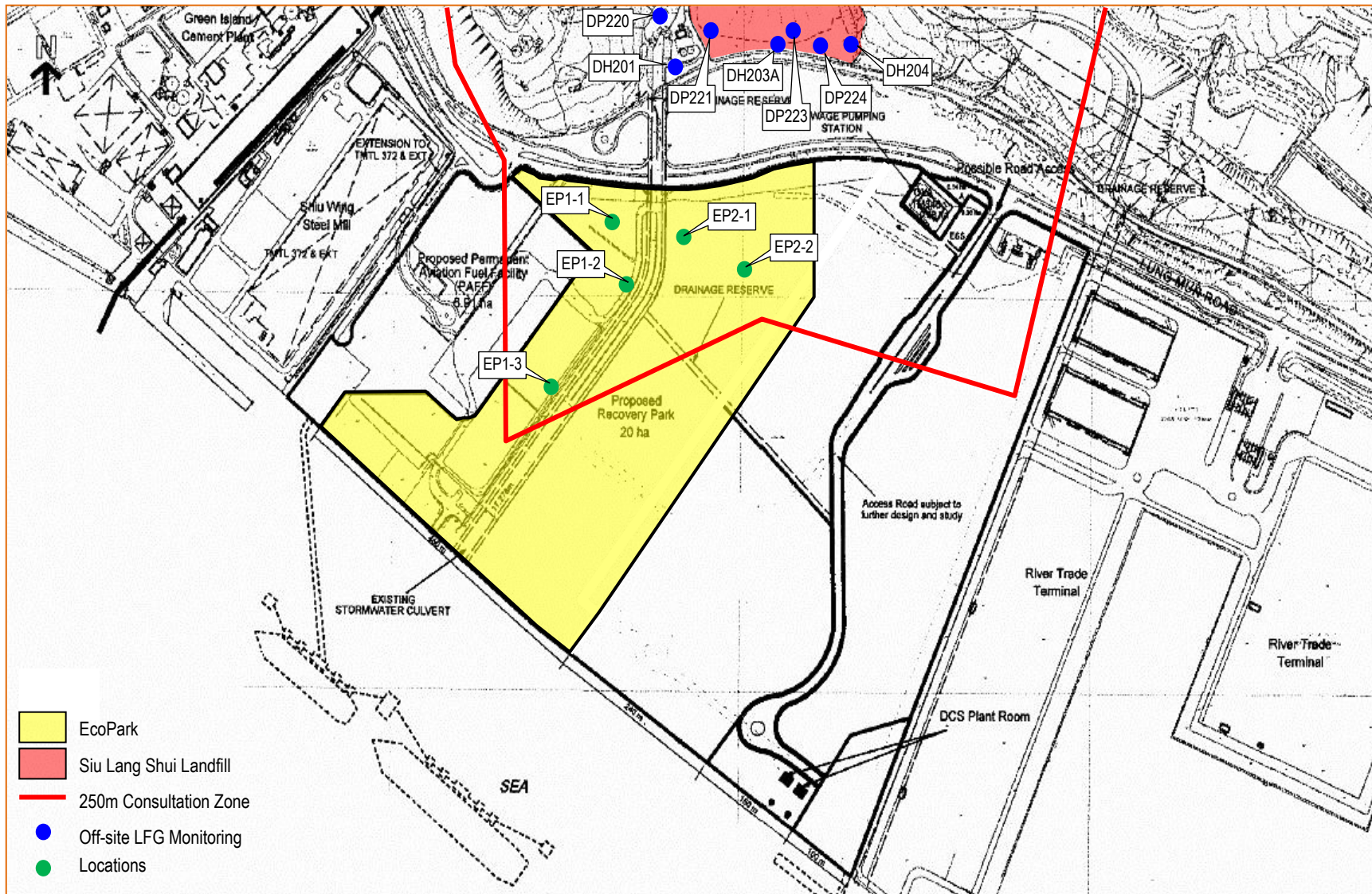
2.5.1 Environmental requirements specified in tenancy agreements are summarised in **Appendix 2**.

**Figure 2-1 LFG Monitoring Locations Within EcoPark**



Area Within the Shiu Lang Shui Landfill Gas Consultation Zone

Figure 2-2 Replacement Figure for EM&A Manual Figure 6.1





## 3 OPERATION STATUS

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### 3.1 General

3.1.1 The location of lots within EcoPark, the tenancy numbers and tenant names are shown in **Figure 3-1**. A summary of waste throughputs is provided in **Section 3.10**.

3.1.2 In the reporting quarter:

- Chung Yue carried out trial operation.
- K.Wah tested and commissioned the installed machinery.
- South China and E.Tech carried out construction works.
- On Fat Lung and SSK continued plant design and planning.

### 3.2 Champway Technology Ltd

- **Tenancy No.:** EP07-03 (Phase 1)
- **Lot Size:** Approx. 6,000m<sup>2</sup>
- **Activity:** Recycling of Organic Waste (Waste Cooking Oil)
- **Recycling Process:** Turn waste cooking oil into biodiesel by extraction, neutralisation, separation and distillation

3.2.1 In this reporting quarter, waste cooking oil was recycled.

### 3.3 Shiu Wing Steel Ltd

- **Tenancy No.:** EP08-03 (Phase 1)
- **Lot Size:** Approx. 9,500m<sup>2</sup>
- **Activity:** Recycling of Waste Metals
- **Recycling Process:** Turn waste metals into light ferrous scrap and heavy ferrous scrap by sorting, baling and shearing

3.3.1 In this reporting quarter, waste metal was recycled.

### 3.4 Hong Kong Hung Wai Wooden Board Co

- **Tenancy No.:** EP06-34 (Phase 1)
- **Lot Size:** Approx. 5,000m<sup>2</sup>
- **Activity:** Recycling of Waste Wood
- **Recycling Process:** Recycle waste wood to wood fuel pellets. Ferrous metals will be separated by magnets.

3.4.1 In this reporting quarter, waste wood was recycled.

### 3.5 Li Tong Group

- **Tenancy No.** : EP07-02 (Phase 1)
- **Lot Size:** Approx. 6,500m<sup>2</sup>
- **Activity:** Recycling of WEEE
- **Recycling Process:** Manually dismantling of WEEE into metals (ferrous materials, aluminium, etc.) and non-metals (fibres, plastics, etc.). Manually dismantling of Cathode Ray Tube (CRT) glass and Liquid Crystal Display (LCD) panels would be carried out upon request.

3.5.1 In this reporting quarter, WEEE was recycled.

### 3.6 Hong Kong Telford Envirotech Group Ltd

- **Tenancy No.** : EP08-01 (Phase 1)
- **Lot Size:** Approx. 5,000m<sup>2</sup>
- **Activity:** Recycling of Waste Plastics
- **Recycling Process:** Sorting, shredding and baling of waste plastics

3.6.1 In this reporting quarter, waste plastic was recycled.

### 3.7 Yan Oi Tong EcoPark Plastic Resources Recycling Centre

- **Tenancy No.** : EP10-01 (Phase 2)
- **Lot Size:** Approx.9,000 m<sup>2</sup>
- **Activity:** Recycling of waste plastics
- **Recycling Process:** Convert mixed waste plastics into pellets/flake/baled materials by pre-washing/sterilization, sorting, flaking, washing, drying, extrusion and chipping.

3.7.1 In this reporting quarter, waste plastic was recycled.

### 3.8 St. James' Settlement WEEE GO GREEN

- **Tenancy No.:** EP10-02 (Phase 2)
- **Lot Size:** Approx. 5,000 m<sup>2</sup>
- **Activity:** Recycling of WEEE
- **Recycling Process:** WEEE will be sorted on site first. WEEE suitable for reuse will be repaired and refurbished, whilst those irreparable / not suitable for repair will be manually dismantled to recover the reusable parts and recyclable materials.

3.8.1 In this reporting quarter, WEEE was recycled.

### 3.9 Chung Yue Steel Group Company Limited

- **Tenancy No.:** EP11-01(1) (Phase 2)
- **Lot Size:** Approx. 100,000 m<sup>2</sup>
- **Activity:** Recycling of Waste Metals
- **Recycling Process:** Turn waste metals into non-ferrous scrap, light ferrous scrap and heavy ferrous scrap by sorting, baling and shearing

3.9.1 In this reporting quarter, trial operation of waste metal recycling was processed.

### 3.10 Throughput Statistics

3.10.1 For the active recyclers, most of the incoming waste materials and outgoing products were delivered by land transportation, although wood chips generated by Hung Wai were delivered by marine transportation.

3.10.2 The throughputs of the eight active tenants in the reporting quarter are summarised in **Table 3-1**, below. Please note that product output plus waste disposal does not necessarily equal the waste input, due to material losses during processing and material retained within the lot.

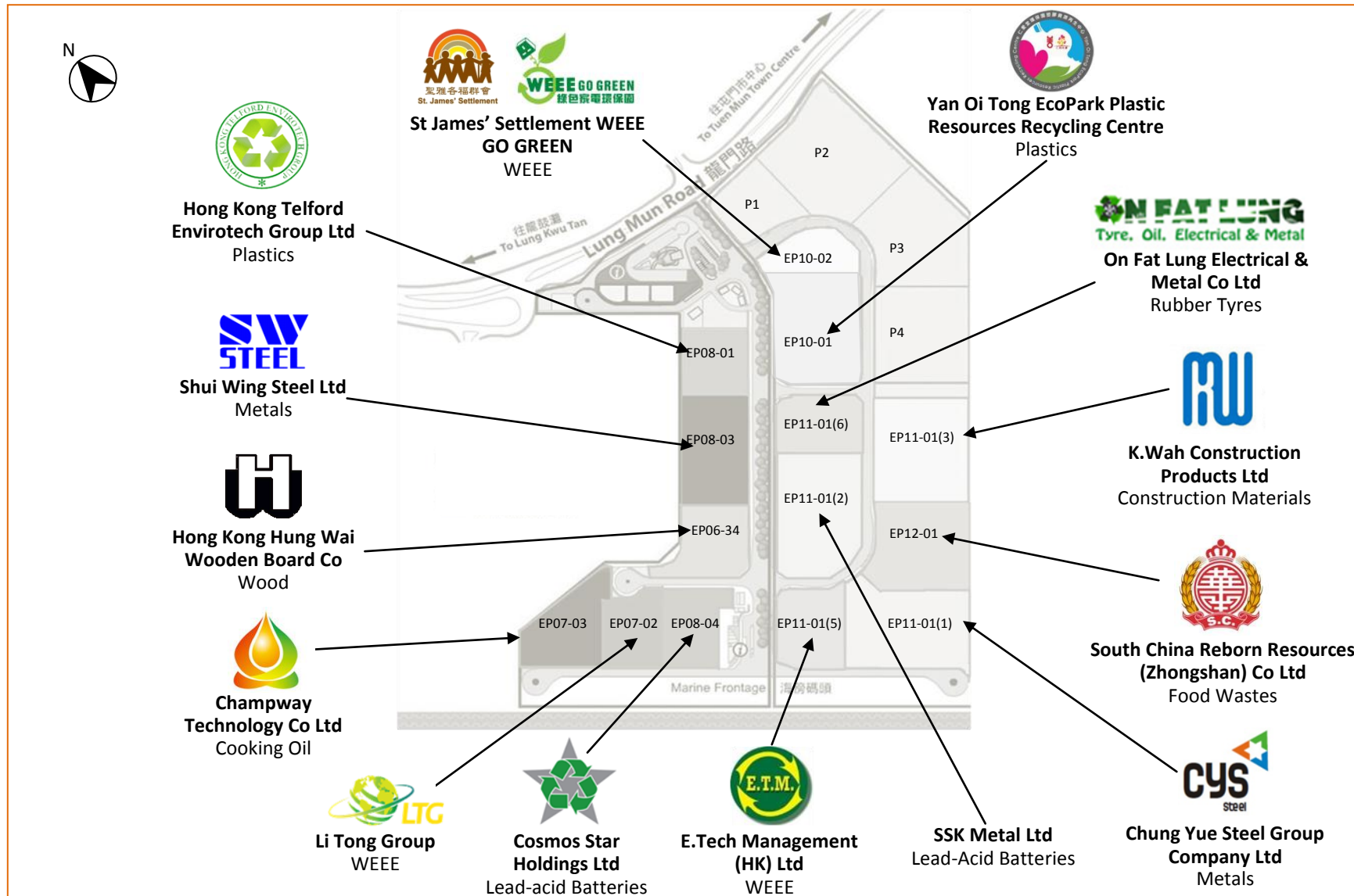
**Table 3-1 Throughput Statistics for April – June 2014**

| Material Type  | Waste Input (tonnes) | Product Output (tonnes) | Waste Disposed (tonnes) |
|----------------|----------------------|-------------------------|-------------------------|
| Waste Oil      | 2,399                | 740                     | 1,681                   |
| Waste Wood     | -                    | -                       | -                       |
| WEEE           | 167                  | 197                     | 36                      |
| Waste Metals   | 13,834               | 14,679                  | -                       |
| Waste Plastics | 260                  | 779                     | 120                     |

**Note:** The throughput data presented above is the best available data and has been rounded off to the nearest whole tonne for presentation. The total product output plus the total waste disposed may not be the same as the waste input. This is due to processing of materials that were received before the reporting quarter and were stockpiled within the lots.

3.10.3 Detailed throughput figures are provided in **Appendix 3**.

**Figure 3-1 Current Lot Usage within EcoPark**



## 4 IMPLEMENTATION STATUS OF ENVIRONMENTAL PROTECTION MEASURES

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- 4.1.1 Environmental mitigation measures applicable to the operation phase EM&A as stated in the implementation schedule are summarised in *Appendix 1*. Environmental requirements specified in tenancy agreements are summarised in *Appendix 2*.
- 4.1.2 As of end-June 2014, eight tenants (Champway, Shiu Wing, Li Tong, Yan Oi Tong, Telford, St. James' Settlement, Hung Wai and Chung Yue) carried out recycling activities within their lots.
- 4.1.3 Appropriate environmental protection measures are in place at all lots.

## 5 MONITORING RESULTS

### 5.1 Monitoring Date, Time, Frequency and Duration

5.1.1 As described in **Section 2.1**, operational LFG monitoring is conducted quarterly at five monitoring locations, three in Phase 1 and two in Phase 2. In this reporting quarter, monitoring was undertaken on 18 June 2014. Monitoring details are shown in **Table 5-1**, below.

**Table 5-1 Sampling Schedule for LFG Monitoring**

| Station ID | Sampling Date | Time          | Duration  | Ambient Air Temp. | Weather |
|------------|---------------|---------------|-----------|-------------------|---------|
| EP1-1      | 18 June 2014  | 10:38 – 10:41 | 3 minutes | 32°C              | Sunny   |
| EP1-2      |               | 10:17 – 10:20 | 3 minutes | 32°C              | Sunny   |
| EP1-3      |               | 10:01 – 10:04 | 3 minutes | 32°C              | Sunny   |
| EP2-1      |               | 10:24 – 10:27 | 3 minutes | 32°C              | Sunny   |
| EP2-2      |               | 10:30 – 10:33 | 3 minutes | 32°C              | Sunny   |

### 5.2 Monitoring Methodology, Parameters and Equipment

5.2.1 The LFG monitoring requirement and methodology are stipulated in Section 6 of the EM&A Manual. The LFG monitoring parameters and their measurement ranges are detailed in **Table 5-2**, below.

**Table 5-2 Parameters and Measurement Ranges for LFG Monitoring**

| Parameters                        | Measurement Ranges        |
|-----------------------------------|---------------------------|
| Methane (CH <sub>4</sub> )        | 0 – 100% LEL & 0-100% v/v |
| Oxygen (O <sub>2</sub> )          | 0 – 25% v/v               |
| Carbon Dioxide (CO <sub>2</sub> ) | 0 – 100% v/v              |
| Barometric Pressure               | mBar (absolute)           |

5.2.2 LFG monitoring shall be carried out using intrinsically-safe, portable multi-gas monitoring instruments. The gas monitoring equipment shall:

1. Where possible, comply with BS 6020 and be approved by BASEEFA as intrinsically safe, suitable for use in a Zone 2 are to BS 5345.
2. Be capable of continuous monitoring of methane, oxygen and carbon dioxide.
3. Be capable of continuous barometric pressure and gas pressure measurements.
4. Normally operate in diffusion mode unless required for spot sampling, when it should be capable of operating by means of an aspirator or pump.
5. Have low battery, fault and over range indication incorporated.
6. Store monitoring data, and shall be capable of being down-loaded directly to a PC.

7. Measure in the following ranges:
- Methane 0 – 100% LEL & 0 - 100% v/v
  - Oxygen 0 – 25% v/v
  - Carbon dioxide 0 – 100% v/v
  - Barometric pressure mBar (absolute)

5.2.3 The monitoring equipment shall alarm (both audibly and visually) in the event that the concentrations of the following are exceeded:

1. Methane – rise to 10% LEL.
2. Oxygen – fall to 18% by volume.
3. Carbon monoxide – maximum short term (1-hour) exposure of 300ppm with long term average (8-hours) not to exceed 50ppm.

### 5.3 Types of Equipment Used and Calibration Details

5.3.1 One InfraRed Gas Analyser Model GA94A (serial number GA3385) was used for LFG measurements. The gas analyser is calibrated at least every 18 months. **Appendix 4** presents the calibration records of the monitoring equipment.

### 5.4 Results and Graphical Plots of Monitoring Parameters

5.4.1 LFG monitoring results are summarised in **Table 5-3** and compared with the Action and Limit Levels tabulated in **Table 2-2**. Graphical plots of the monitoring results are also provided in **Appendix 5**.

**Table 5-3 LFG Monitoring Results**

| Station ID | Sampling Date | Monitoring Results      |                         |                        |                         |                            |
|------------|---------------|-------------------------|-------------------------|------------------------|-------------------------|----------------------------|
|            |               | CH <sub>4</sub> (% v/v) | CH <sub>4</sub> (% LEL) | O <sub>2</sub> (% v/v) | CO <sub>2</sub> (% v/v) | Barometric Pressure (mBar) |
| EP1-1      | 18 June 2014  | 0.0                     | 0                       | 21                     | 0.1                     | 1006                       |
| EP1-2      |               | 0.0                     | 0                       | 21                     | 0.0                     | 1007                       |
| EP1-3      |               | 0.0                     | 0                       | 21                     | 0.0                     | 1007                       |
| EP2-1      |               | 0.0                     | 0                       | 21                     | 0.0                     | 1006                       |
| EP2-2      |               | 0.0                     | 0                       | 21                     | 0.0                     | 1006                       |

5.4.2 No exceedance of Action and Limit Levels were recorded in the reporting quarter.

## 6 SUMMARY OF TENANT AUDITS

### 6.1 General

- 6.1.1 Among the 14 tenants, only eight active tenants were under either full operation or trial operation. As such, specific site inspections were only carried out at the lots of these eight tenants. For the lots of those tenants not currently in operation, general site inspections were conducted.
- 6.1.2 Environmental audits based on the approved site inspection checklist were carried out by the Operator and the ET on 22 April 2014 and 21 May 2014. A quarterly joint site inspection was carried out by the Operator, the IEC and the ET on 18 June 2014. The completed audit checklists for tenants are provided in **Appendix 6**.

### 6.2 Champway Technology Co Ltd

- 6.2.1 Audit observations from previous reporting quarters and audit observations from this reporting quarter are summarised in **Table 6-1**, below. The completed checklists for Champway are given in **Appendix 6-1**.

**Table 6-1 Environmental Audit Findings for Champway**

| Date                                                 | Item                                                                                                                                                           | Comment                                                                                                | Status                                                 |
|------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| <b>Observations From Previous Reporting Quarters</b> |                                                                                                                                                                |                                                                                                        |                                                        |
|                                                      | None.                                                                                                                                                          |                                                                                                        |                                                        |
| <b>Observations From This Reporting Quarter</b>      |                                                                                                                                                                |                                                                                                        |                                                        |
| 22/04/2014                                           | No critical issues were identified.                                                                                                                            |                                                                                                        |                                                        |
| 21/05/2014                                           | No critical issues were identified.                                                                                                                            |                                                                                                        |                                                        |
| 18/06/2014                                           | Gaps between concrete blocks along the surface channels were observed that runoff oily contaminated directly discharging into the channel cannot be prevented. | The gaps of the concrete blocks along the surface channel at the oil storage area should be sealed up. | The observation will be followed up in the next audit. |
|                                                      | The soil of the storage area was observed to be oily contaminated.                                                                                             | The tenant shall clean up the oily contaminated soil and properly dispose of the contaminated soil.    | The observation will be followed up in the next audit. |

### 6.3 Shiu Wing Steel Ltd

- 6.3.1 Audit observations from previous reporting quarters and audit observations from this reporting quarter are summarised in **Table 6-2**, below. The completed checklists for Shiu Wing are given in **Appendix 6-2**.



**Table 6-2 Environmental Audit Findings for Shiu Wing**

| Date                                                 | Items                               | Comments | Status |
|------------------------------------------------------|-------------------------------------|----------|--------|
| <i>Observations From Previous Reporting Quarters</i> |                                     |          |        |
|                                                      | None.                               |          |        |
| <i>Observations From This Reporting Quarter</i>      |                                     |          |        |
| 22/04/2014                                           | No critical issues were identified. |          |        |
| 21/05/2014                                           | No critical issues were identified. |          |        |
| 18/06/2014                                           | No critical issues were identified. |          |        |

## 6.4 Hong Kong Hung Wai Wooden Board Co

6.4.1 Audit observations from previous reporting quarters and audit observations from this reporting quarter are summarised in **Table 6-3**, below. The completed checklists for Hung Wai are given in **Appendix 6-3**.

**Table 6-3 Environmental Audit Findings for Hung Wai**

| Date                                                 | Items                               | Comments | Status |
|------------------------------------------------------|-------------------------------------|----------|--------|
| <i>Observations From Previous Reporting Quarters</i> |                                     |          |        |
|                                                      | None                                |          |        |
| <i>Observations From This Reporting Quarter</i>      |                                     |          |        |
| 22/04/2014                                           | No critical issues were identified. |          |        |
| 21/05/2014                                           | No critical issues were identified. |          |        |
| 18/06/2014                                           | No critical issues were identified. |          |        |

## 6.5 Li Tong Group

6.5.1 Audit observations from previous reporting quarters and audit observations from this reporting quarter are summarised in **Table 6-4** below. The completed checklists for Li Tong are given in **Appendix 6-4**.

**Table 6-4 Environmental Audit Findings for Li Tong**

| Date                                                 | Items                               | Comments | Status |
|------------------------------------------------------|-------------------------------------|----------|--------|
| <i>Observations From Previous Reporting Quarters</i> |                                     |          |        |
|                                                      | None.                               |          |        |
| <i>Observations From This Reporting Quarter</i>      |                                     |          |        |
| 22/04/2014                                           | No critical issues were identified. |          |        |
| 21/05/2014                                           | No critical issues were identified. |          |        |
| 18/06/2014                                           | No critical issues were identified. |          |        |

## 6.6 Hong Kong Telford Envirotech Group Ltd

6.6.1 Audit observations from previous reporting quarters and audit observations from this reporting quarter are summarised in **Table 6-5**, below. The completed checklists for Telford are given in **Appendix 6-5**.

**Table 6-5 Environmental Audit Findings for Telford**

| Date                                                 | Items                               | Comments | Status |
|------------------------------------------------------|-------------------------------------|----------|--------|
| <i>Observations From Previous Reporting Quarters</i> |                                     |          |        |
|                                                      | None.                               |          |        |
| <i>Observations From This Reporting Quarter</i>      |                                     |          |        |
| 22/04/2014                                           | No critical issues were identified. |          |        |
| 21/05/2014                                           | No critical issues were identified. |          |        |
| 18/06/2014                                           | No critical issues were identified. |          |        |

## 6.7 Yan Oi Tong EcoPark Plastic Resources Recycling Centre

6.7.1 Audit observations from previous reporting quarters and audit observations from this reporting quarter are summarised in **Table 6-6** below. The completed checklists for Yan Oi Tong are given in **Appendix 6-6**.

**Table 6-6 Environmental Audit Findings for Yan Oi Tong**

| Date                                                 | Items                               | Comments | Status |
|------------------------------------------------------|-------------------------------------|----------|--------|
| <i>Observations From Previous Reporting Quarters</i> |                                     |          |        |
|                                                      | None.                               |          |        |
| <i>Observations From This Reporting Quarter</i>      |                                     |          |        |
| 22/04/2014                                           | No critical issues were identified. |          |        |
| 21/05/2014                                           | No critical issues were identified. |          |        |
| 18/06/2014                                           | No critical issues were identified. |          |        |

## 6.8 St. James' Settlement WEEE GO GREEN

6.8.1 Audit observations from previous reporting quarters and audit observations from this reporting quarter are summarised in **Table 6-7** below. The completed checklists for St James' Settlement are given in **Appendix 6-7**.

**Table 6-7 Environmental Audit Findings for St James' Settlement**

| Date                                                 | Items                               | Comments | Status |
|------------------------------------------------------|-------------------------------------|----------|--------|
| <i>Observations From Previous Reporting Quarters</i> |                                     |          |        |
|                                                      | None.                               |          |        |
| <i>Observations From This Reporting Quarter</i>      |                                     |          |        |
| 22/04/2014                                           | No critical issues were identified. |          |        |
| 21/05/2014                                           | No critical issues were identified. |          |        |
| 18/06/2014                                           | No critical issues were identified. |          |        |

## 6.9 Chung Yue Steel Group Co Ltd

6.9.1 Audit observations from this reporting quarter are summarised in **Table 6-8** below. The completed checklists for Chung Yue are given in **Appendix 6-8**.

**Table 6-8 Environmental Audit Findings for Chung Yue**

| Date                                                 | Items                               | Comments | Status |
|------------------------------------------------------|-------------------------------------|----------|--------|
| <i>Observations From Previous Reporting Quarters</i> |                                     |          |        |
|                                                      | None.                               |          |        |
| <i>Observations From This Reporting Quarter</i>      |                                     |          |        |
| 22/04/2014                                           | No critical issues were identified. |          |        |
| 21/05/2014                                           | No critical issues were identified. |          |        |
| 18/06/2014                                           | No critical issues were identified. |          |        |

## 7 SUMMARY OF GENERAL ECOPARK AUDIT

7.1.1 Audit observations from previous reporting quarters and audit observations from this reporting quarter are summarised in **Table 7-1**, below. The next audit will follow up on any remaining unresolved issues. The completed general checklists for EcoPark (and non-active tenants) are given in **Appendix 7**.

**Table 7-1 General EcoPark Audit Findings**

| Date                                                 | Items                                                                                                                                                                      | Comments                                                                                                                                                 | Status                                                                                                                                                                                                                    |
|------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Observations From Previous Reporting Quarters</b> |                                                                                                                                                                            |                                                                                                                                                          |                                                                                                                                                                                                                           |
|                                                      | <b>K.Wah:</b><br>A stockpile of C&D waste was observed near site entrance.                                                                                                 | The Tenant is reminded to regularly dispose of C&D waste.                                                                                                | Based on the photograph taken at K.Wah on 14 April 2014 by SGJV, the tenant cleared C&D waste on 14 April 2014. No significant amount of waste was found to be stockpiled during the site visit on 22 April 2014 (Closed) |
|                                                      | Water inside the waste water tank was too shallow to be pumped out but the submersible pump was still being operated. In addition, C&D waste was observed inside the tank. | The Tenant is reminded to switch off powered equipment not in use and clear C&D waste inside the tank. The Tenant is also reminded to prevent mosquitos. | No significant amount of waste and stagnant water was observed inside the waste water tank (Closed).                                                                                                                      |
| <b>Observations From This Reporting Quarter</b>      |                                                                                                                                                                            |                                                                                                                                                          |                                                                                                                                                                                                                           |
| 22/04/2014                                           | None.                                                                                                                                                                      |                                                                                                                                                          |                                                                                                                                                                                                                           |
| 21/05/2014                                           | None.                                                                                                                                                                      |                                                                                                                                                          |                                                                                                                                                                                                                           |
| 18/06/2014                                           | <b>South China Reborn Resources:</b><br>Tyre marks were observed outside the site entrance of the lot.                                                                     | The Contractor was reminded to clean up the site entrance and thoroughly clean vehicles prior to leaving the site.                                       | The observation will be followed up in the next audit.                                                                                                                                                                    |

**Note:** The site entrance of the Cosmos lot was locked and so the lot could not be accessed. No issues were found based on the observation from the site entrance.

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## **8 COMPLAINTS, NOTIFICATIONS OF SUMMONS AND SUCCESSFUL PROSECUTIONS**

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- 8.1.1 As of end-June 2014, no complaint, notifications of summons or successful prosecutions related to recycling activities were received in this reporting quarter.

## 9 CONCLUSIONS

- 9.1.1 This is the twenty-ninth (29<sup>th</sup>) quarterly EM&A report prepared for the operation phase of EcoPark and covers the reporting quarter April to June 2014. The tenants' recycling activities are audited on a monthly basis and the results are summarised in this report. In the reporting quarter, there were fourteen tenants in EcoPark Phase 1 and Phase 2.
- 9.1.2 The ET has conducted monthly site inspections while the IEC has carried out quarterly inspections, and some general observations have been made. The approved checklist has been used in the monthly site inspections for various tenants.
- 9.1.3 The throughputs of the eight active tenants in the reporting quarter are summarised in **Table 9-1**, below. Please note that product output plus waste disposal do not necessarily equal the waste input, due to material losses during processing and material retained within the lots.

**Table 9-1 Throughput Statistics for April – June 2014**

| Material Type  | Waste Input (tonnes) | Product Output (tonnes) | Waste Disposed (tonnes) |
|----------------|----------------------|-------------------------|-------------------------|
| Waste Oil      | 2,399                | 740                     | 1,681                   |
| Waste Wood     | -                    | -                       | -                       |
| WEEE           | 167                  | 197                     | 36                      |
| Waste Metals   | 13,834               | 14,679                  | -                       |
| Waste Plastics | 260                  | 779                     | 120                     |

**Note:** The throughput data presented above is the best available data and has been rounded off to the nearest whole tonne for presentation. The total product output plus the total waste disposed may not be the same as the waste input. This is due to processing of materials that were received before the reporting quarter and were stockpiled within the lots.

- 9.1.4 LFG monitoring during the reporting quarter was undertaken on 18 June 2014 at five locations (three in Phase 1 and two in Phase 2). No exceedance of Action Level and Limit levels were recorded in the report quarter.
- 9.1.5 Numbers of complaints, summons and successful prosecutions in the reporting quarter are summarised below:
- **Complaints:** Zero.
  - **Summons:** Zero.
  - **Successful Prosecutions:** Zero.
- 9.1.6 In the next reporting quarter, operation phase LFG monitoring for Phase 1 and Phase 2 will continue.

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## APPENDIX 1

### Environmental Mitigation Measures (from the Implementation Schedule)

| EIA Ref.                            | EM&A Ref.      | Environmental Protection Measures Identified in the Implementation Schedule that are Applicable to the Operation Phase of EcoPark                                                                                                                   | Location / Duration of Measures / Timing of Completion of Measures                                                                        | Implementation Agent                   | Relevant Legislation and Guidelines                                                    |
|-------------------------------------|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|----------------------------------------------------------------------------------------|
| <b>General</b>                      |                |                                                                                                                                                                                                                                                     |                                                                                                                                           |                                        |                                                                                        |
| 5.5.23 to 5.5.25, 10.2.24 & 10.2.37 | 4.2.5 to 4.2.8 | The Operator shall develop and implement an Emergency Response Plan (ERP) that lists the procedures to be followed in case of fire, fuel or chemical spillage or other emergency within the EcoPark.                                                | Throughout the duration of the operation.                                                                                                 | Operator                               |                                                                                        |
| 12.2                                | 7.2            | No process shall be allowed to operate within EcoPark without approval from WFBU. Approval will be based on the ten-step Process Review, which may include a Design Audit if deemed to be necessary.                                                | Throughout the duration of the operation.                                                                                                 | ET<br>IEC<br>Project Proponent         |                                                                                        |
|                                     | 8.1.2          | All reports (including Process Review Checklists and any Design Audits) shall be prepared and certified by the ET, verified by the IEC and approved by the Project Proponent.                                                                       | Throughout the duration of construction works until construction is substantially completed.<br>Throughout the duration of the operation. | ET<br>IEC<br>Project Proponent         |                                                                                        |
| 12.3                                | 7.3            | The Operator shall prepare and implement an Environmental Management Plan (EMP) to define mechanisms for achieving the environmental requirements specified in the EIA, EP and in statutory regulations.                                            | Throughout the duration of the operation.                                                                                                 | Operator                               |                                                                                        |
| <b>Air Quality</b>                  |                |                                                                                                                                                                                                                                                     |                                                                                                                                           |                                        |                                                                                        |
| 13.2                                |                | The Operator shall ensure that EcoPark “base case” assumptions for air quality shown in Table 13.1 of the Final EIA Report are met by tenants, as a whole.                                                                                          | Throughout the duration of the operation.                                                                                                 | Operator                               | Table 13.1 of the Final EIA Report                                                     |
| <b>Water Quality</b>                |                |                                                                                                                                                                                                                                                     |                                                                                                                                           |                                        |                                                                                        |
| 5.4.11 & 5.6.7                      |                | To minimise the chance of accidental spillage during loading and unloading, and thereby reduce marine water quality impacts, well established cargo handling guidelines should be followed.                                                         | Adjacent to EcoPark marine frontage when loading or unloading goods.                                                                      | Operator<br>Operators of bulk carriers | Sections 5 & 6 of IMO Code of Practice for the Safe Loading/Unloading of Bulk Carriers |
| 5.5.19                              |                | Contaminated water collected in the surface drainage systems shall be treated at the WTF or other appropriate treatment facility.                                                                                                                   | Within EcoPark throughout the life of the facility.                                                                                       | Operator                               |                                                                                        |
| 5.5.23 to 5.5.25                    | 4.2.5 to 4.2.7 | An Emergency Response Plan (ERP) will be formulated to address various accident scenarios. The ERP will be certified by the Environmental Team (ET) and verified by the Independent Environmental Checker (IEC) under the operation EM&A programme. | Within EcoPark throughout the life of the facility.                                                                                       | Operator                               |                                                                                        |
| 5.6.4                               |                | For uncovered areas where recovery process identified as causing potentially high level of contamination are located, stop-logs will be installed in the perimeter drainage system to isolate contamination.                                        | Within EcoPark throughout the life of the facility.                                                                                       | Operator                               |                                                                                        |



| EIA Ref.                               | EM&A Ref.     | Environmental Protection Measures Identified in the Implementation Schedule that are Applicable to the Operation Phase of EcoPark                                                                                                                                                                                                    | Location / Duration of Measures / Timing of Completion of Measures | Implementation Agent | Relevant Legislation and Guidelines                                              |
|----------------------------------------|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|----------------------|----------------------------------------------------------------------------------|
|                                        | 4.2.2         | The ET should develop an audit checklist, with the agreement of the IEC, to ensure that each mitigation measure is implemented when appropriate and operated correctly when implemented.                                                                                                                                             | Within EcoPark throughout the life of the facility.                | ET with IEC          |                                                                                  |
| <b>Waste Management</b>                |               |                                                                                                                                                                                                                                                                                                                                      |                                                                    |                      |                                                                                  |
| 6.8.7                                  | 5.2.4         | The Operator should register with EPD as a chemical waste producer.                                                                                                                                                                                                                                                                  | Within EcoPark throughout the life of the facility.                | Operator             | Waste Disposal (Chemical Waste) (General) Regulation                             |
| 6.8.16                                 |               | The dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.                                                                                                                                                                                            | Within EcoPark throughout the life of the facility.                | Operator             | Practice Note for disposal of dusty waste at landfills & Admission Ticket System |
| 6.8.18 & 6.8.22                        | 5.2.4         | Sludge will be disposed of at WENT landfill, or at any future dedicated sludge treatment facility. Sludge will be collected by a Licensed collector at regular intervals, as determined by the operation of the WTF                                                                                                                  | Within EcoPark throughout the life of the facility.                | Operator             |                                                                                  |
| 6.8.21                                 | 5.2.4         | Chemical wastes shall be stored in appropriate containers in a covered area. "No Smoking" signs will be clearly displayed to prevent accidental ignition of flammable materials. Drip trays capable of storing 110% of the volume of the largest container will be used to mitigate possible leakage.                                | Within EcoPark throughout the life of the facility.                | Operator             | Code of Practice on the Packaging, Labelling and Storage of Chemical Wastes      |
|                                        | 5.2.3 & 5.2.5 | The ET should develop an audit checklist, with the agreement of the IEC, to ensure that each mitigation measure is implemented when appropriate and operated correctly when implemented.                                                                                                                                             | Within EcoPark throughout the life of the facility.                | ET with IEC          |                                                                                  |
| <b>Prevention of Contaminated Land</b> |               |                                                                                                                                                                                                                                                                                                                                      |                                                                    |                      |                                                                                  |
| 7.3.1                                  | 5.3.2         | Any spillages of contaminating material shall be cleaned up immediately through the use of an absorbent. Any such used material should then be considered chemical waste and disposed of appropriately.                                                                                                                              | Within EcoPark throughout the life of the facility.                | Operator             |                                                                                  |
| 7.3.3                                  |               | Any areas within the lot to be used for recycling processes shall be concrete paved before recycling activities commence.                                                                                                                                                                                                            | Within EcoPark throughout the life of the facility.                | Operator             |                                                                                  |
| 7.3.5                                  | 5.3.2         | During operation, the greatest risk of land contamination will come from storage of chemical wastes, therefore the measures should be followed :                                                                                                                                                                                     | Within EcoPark throughout the life of the facility.                | Operator             |                                                                                  |
|                                        |               | <ul style="list-style-type: none"> <li>All chemical storage areas shall be provided with locks and be sited on sealed areas. The storage areas shall be surrounded by bunds with a capacity equal to 110% of the storage capacity of the largest tank to prevent spilled oil and chemicals from contaminating the ground.</li> </ul> |                                                                    |                      |                                                                                  |

| EIA Ref.                    | EM&A Ref. | Environmental Protection Measures Identified in the Implementation Schedule that are Applicable to the Operation Phase of EcoPark                                                                                                                                                                                                                                                                                                                              | Location / Duration of Measures / Timing of Completion of Measures | Implementation Agent | Relevant Legislation and Guidelines                                                                               |
|-----------------------------|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|----------------------|-------------------------------------------------------------------------------------------------------------------|
|                             |           | <ul style="list-style-type: none"> <li>Management of chemical waste is implemented through the control of waste storage, labelling of waste, transportation and treatment of chemical waste at an appropriate facility.</li> </ul>                                                                                                                                                                                                                             |                                                                    |                      |                                                                                                                   |
|                             |           | <ul style="list-style-type: none"> <li>Chemical wastes will be collected, stored and disposed of in accordance with the Regulation. Disposal of other construction waste will be undertaken by licensed contractors in accordance with applicable statutory requirements in the WDO.</li> </ul>                                                                                                                                                                |                                                                    |                      | Waste Disposal (Chemical Waste) (General) Regulation                                                              |
|                             |           | <ul style="list-style-type: none"> <li>Chemical wastes shall be handled according to the relevant code of practice. Spent chemicals shall be stored and collected by an approved operator for disposal at a licensed facility in accordance with the relevant regulation.</li> </ul>                                                                                                                                                                           |                                                                    |                      | Code of Practice on the Packaging, Labelling and Storage of Chemical Wastes & Chemical Waste (General) Regulation |
|                             | 5.3.3     | The ET should develop an audit checklist, with the agreement of the IEC, to ensure that each mitigation measure is implemented when appropriate and operated correctly when implemented.                                                                                                                                                                                                                                                                       | Within EcoPark throughout the life of the facility.                | ET with IEC          |                                                                                                                   |
| <b>Landfill Gas</b>         |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                    |                      |                                                                                                                   |
| 8.7.10 & 8.7.11             | 6.1.2     | <ul style="list-style-type: none"> <li>Alert workers and visitors of possible LFG hazards</li> <li>Prohibit smoking and open fires on site</li> <li>Conduct regular (quarterly) LFG monitoring at mobile offices, equipment stores, etc.</li> </ul>                                                                                                                                                                                                            | Within EcoPark throughout the life of the facility.                | Operator             |                                                                                                                   |
|                             | 6.4.3     | Following construction, routine monthly monitoring may be required at service voids and utility boxes. The monitoring requirement and specific locations of monitoring points shall be established based on the findings of the monitoring carried out during construction (i.e. if no LFG is detected during construction then no routine monitoring is required). The need for continued monitoring shall, however, be reviewed through discussion with EPD. | Within EcoPark throughout the life of the facility.                | Operator             |                                                                                                                   |
| <b>Hazard to Life</b>       |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                    |                      |                                                                                                                   |
| 10.4.3                      |           | Building height limit within EcoPark shall be applied to structures within which people may work at elevated levels.                                                                                                                                                                                                                                                                                                                                           | Within EcoPark throughout the life of the facility.                | Operator             | EIA Report Table 10.2                                                                                             |
| <b>Landscape and Visual</b> |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                    |                      |                                                                                                                   |
| 9.4.4                       |           | It recommended that this commonality be promoted throughout EcoPark by the Operator and adopted by tenants, if practicable.                                                                                                                                                                                                                                                                                                                                    | Within EcoPark throughout the life of the facility.                | Operator             |                                                                                                                   |

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## APPENDIX 2

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### Environmental Requirements in Tenancy Agreements

## **APPENDIX 2-1**

### **Environmental Requirements in Tenancy Agreements**

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Phase 1

## GENERAL ENVIRONMENTAL RESPONSIBILITIES

- 9.1 The Tenant shall at its own cost(s) comply with and shall ensure that the Premises is used, designed, constructed, operated and maintained in accordance with:-
- (a) All relevant Ordinances, by-laws, regulations, statutory technical memorandums, codes of practice, rules, non-statutory guidance notes, schemes and abatement notices for the time being in force in Hong Kong including those relating to the environment and governing the control of any form of pollution (see specific Ordinances mentioned hereinbelow) and licensing requirements under relevant Ordinances and regulations.
  - (b) All information, mitigation measures, prohibitions, restrictions, recommendations and requirements under the Environmental Impact Assessment Report for Development of an EcoPark in Tuen Mun Area 38 with Appendices, i.e. the EIA Report (Register No.: AEIAR-086/2005) dated April 2005, the Final EM&A Manual dated April 2005, the application documents including all attachments (Application No. AEP-226/2005) and other relevant documents in the Register (or in any other places, any internet websites or by any other means as specified by the Director), including the prohibitions and mitigation measures for processes in Table 14.1 and the material throughputs, processes and remarks in Table B.1 of the EIA Report (in so far as applicable).
  - (c) All information, conditions, submissions, mitigation measures, orders, notices, requirements, prohibitions, restrictions and time limits under the Environmental Permit No. EP-226/2005 as amended by the Variation of Environmental Permit (EP-226/2005/B) (including updated information about the Permit, any amended permit and any further permit) and all mitigation measures recommended and to be recommended in submissions that shall be deposited with or approved by the Director as a result of permit conditions contained in the Environmental Permit No. EP-226/2005 as amended by the Variation of Environmental Permit – Application No. VEP-221/2006 (including updated information about the Permit, any amended permit and any further permit). The Tenant shall refer to, inter alia, Conditions 4.1 to 4.14 (and Annexes A and B) and Conditions 3.7 and 3.8 (and Figures 2 and 3) of the Environmental Permit No. EP-226/2005 as amended by the Variation of Environmental Permit (EP-226/2005/B) regarding measures to mitigate air quality impact, measures to mitigate hazard to life impact, measures to prevent land contamination, measures to mitigate landfill gas hazard, maintenance of landscape and visual measures (see also hereinbelow regarding Condition 5 of the Environmental Permit and specified Ordinances).
  - (d) All information, conditions, submissions, mitigation measures, orders, notices and requirements under ongoing surveillance and monitoring activities during all stages of the Project and during the tenancy under the Tenancy Agreement (e.g. any additional mitigation measures recommended and to be recommended under the Process Review and Design Audit (carried out and to be carried out in accordance with the EM&A Manual) for various environmental impacts including, but not limited to, noise pollution, air quality, hazard to life, landfill gas hazard, landscape and visual measures, waste management and land contamination).
  - (e) All recommendations referred to in the documents of the EIAO Register which are not expressly referred to in Environmental Permit No. EP-226/2005 as amended by the Variation of Environmental Permit (EP-226/2005/B) and any amended Environmental Permit (unless expressly excluded or impliedly amended in the Environmental Permit No. EP-226/2005 as amended by the Variation of Environmental Permit (EP-226/2005/B) and any amended Environmental Permit).
- 9.2 Further to Condition Nos. 6 and 8 hereinabove, the Tenant shall at its own cost provide relevant environmental monitoring data, information, documents and assistance to the Director and/or the Environmental Protection Department and shall permit authorised representatives of the Environmental Protection Department to access, inspect, take samples and monitor the Premises and operations for the Process Review and the Design Audit carried out and/or to be carried out pursuant to Conditions 4.1 and 5 of the Environmental Permit No. EP-226/2005 as amended by the Variation of Environmental Permit (EP-226/2005/B) (and any updated Permit, amended permit and further permit).

- 9.3 If the Tenant's operations (i.e. activities and facilities for recovery and/or recycling and/or reprocessing) are not covered by the EIA Report and/or deviate from the development parameters mentioned in inter alia the EIA Report, the Environmental Permit No. EP-226/2005 as amended by the Variation of Environmental Permit (EP-226/2005/B) (including the parameters at Annex A) and/or any environmental licence (e.g. the Water Treatment Facility ("WTF") Discharge Licence), and if additional mitigation measures are not available or are not effective in the opinion of the Director, to ensure compliance with the EIA Report, the Environmental Permit No. EP-226/2005 as amended by the Variation of Environmental Permit (EP-226/2005/B) (including any updated Permit, amended permit and further permit) and the relevant environmental licence(s), the Tenant shall comply with any modified parameters and/or the Tenant shall immediately modify its operations in such a way that the findings and requirements of the EIA Report, the Environmental Permit No. EP-226/2005 as amended by the Variation of Environmental Permit (EP-226/2005/B) (including any updated Permit, amended permit and further permit) and the environmental licence(s) are complied with and shall immediately cease to continue the offending part of the operations or activity in question.
- 9.4 The Tenant shall at its own cost(s) apply for, obtain, renew, maintain and comply with all the relevant licences related to compliance with all relevant Ordinances, by-laws, regulations, statutory technical memorandums, codes of practice, rules, non-statutory guidance notes, schemes, abatement notices and the environmental permits for the time being in force in Hong Kong (including those relating to the environment and governing the control of any form of pollution). The Tenant shall obtain, renew and comply with all the said licences within the relevant time limits (in any event, within one (1) calendar month of the date of signing and/or execution of the Tenancy Agreement), shall comply with all abatement notices, orders, directions and requests of the relevant authorities and public officers and shall be responsible for paying all relevant fees, costs, fines and penalties.
- 9.5 The Tenant shall not do anything or omit to do anything which would cause, contribute to or involve a breach or potential breach by the Director relating to any of the matters mentioned in Conditions 9.1 to 9.4 hereinabove (and other Conditions herein below).
- 9.6 The Tenant shall fully indemnify the Government and/or the Director for any fees, costs, damages, expenses, fines, penalties, losses and claims arising (a) out of any breach of any of the matters mentioned in inter alia Conditions 9.1 to 9.4 hereinabove (and other Conditions herein below) or (b) from the use of the Premises or (c) out of any works carried out at any time during the term to or at the Premises or (d) out of anything now or during the term attached to or projecting from the Premises or (e) from any neglect or default by the Tenant or by its respective servants or agents or by any express licensee of the Tenant.

## **SPECIFIC ENVIRONMENTAL RESPONSIBILITIES**

### Air Pollution

10. Save with an appropriate exemption under the Air Pollution Control Ordinance (Cap. 311 of the Laws of Hong Kong) any regulations made thereunder and any amending legislation, the Tenant shall not install or permit or suffer to be installed upon the Premises or any part thereof or any building(s) or structure(s) or part of any building(s) or structure(s) erected or to be erected thereon any furnace, oven, chimney or flue or any other combustion equipment or use or permit or suffer to be used any fuel or any method or process of manufacture or treatment that might in any circumstance result in, cause or contribute to the discharge or emission of any pollutant or any noxious, harmful or corrosive matter, whether it be in the form of gas, smoke, liquid, solid or otherwise (including but not limited to air pollutant as defined in Section 2 of the Air Pollution Control Ordinance (Cap. 311 of the Laws of Hong Kong)), which exists or which is imminent, without the prior written approval of the Director.
11. No alteration to the installation and method of manufacture shall be made without the prior written consent of the Director. In any event, the Tenant shall at its own cost(s) comply with, inter alia, Conditions 4.2 to 4.7 and Annex A of the Environmental Permit No. EP-226/2005 as amended by the Variation of Environmental Permit (EP-226/2005/B) regarding design, installation and operation of chimney, location of fresh air intakes and use of ultra-low sulphur or other cleaner fuel(s) as agreed by the Director (and the conditions of any updated Permit, amended permit and further permit regarding measures to mitigate air quality impact), good practices and relevant provisions of the EIA Report and Final EM&A Manual.

#### Noise Pollution

12. The Tenant shall take all necessary measures as may be required by and to the satisfaction of the Director to ensure that the operation of all plant and equipment, installed or used on the Premises or in any building(s) or structure(s) or any part of any building(s) or structure(s) erected or to be erected thereon, will not result, not cause and/or will not contribute any noise (which exists or which is imminent) which disturbs or annoys the residents or occupiers of any adjoining or neighbouring lot or lots or premises, or causes and/or contributes to disturbance to the general public under the Noise Control Ordinance (Cap. 400 of the Laws of Hong Kong) any regulations made thereunder and any amending legislation.
13. The decision of the Director as to whether any such plant and equipment are causing disturbance or annoyance as aforesaid shall be final and binding on the Tenant.

#### Waste Management

14. The Tenant shall not permit, allow or suffer any fuel or chemical and any sewage, waste water or effluent containing sand, cement, silt or any suspended or dissolved material to flow, escape or run from the Premises onto any adjoining land or allow any waste matter which does not form part of the recovery and/or recycling and/or reprocessing operation or is not part of the final product of such operation to be deposited, kept, held or stored anywhere within the Premises and other areas of EcoPark. The Tenant shall at its own cost(s) have all such matters and all waste arising from recycling activities, chemical waste arising from maintenance of plant and equipment, sewage sludge (from WTF) and general daily waste from the operation removed from the Premises or any building(s) or structure(s) or any part of any building(s) or structure(s) erected or to be erected thereon in a proper manner to the satisfaction of the Director.
15. In any event, the Tenant shall at its own cost(s) comply with, inter alia, Conditions 4.11 and 4.12 of the Environmental Permit No. EP-226/2005 as amended by the Variation of Environmental Permit (EP-226/2005/B) regarding paving all areas of the Premises with concrete/using concrete hardstanding and siting all fuel tanks and chemical storage areas on the specified sealed areas, respectively (and comply with the conditions of any updated Permit, amended permit and further permit regarding measures to prevent land contamination). The Tenant shall at its own cost(s) comply with relevant provisions of the Waste Disposal Ordinance (Cap.354 of the Laws of Hong Kong) good practices and relevant provisions of the EIA Report and Final EM&A Manual.

#### Water Pollution

16. In the event that the Tenant produces, generates, permits, causes, allows or suffers any discharge which is subject to control under the Water Pollution Control Ordinance (Cap. 358 of the Laws of Hong Kong) any regulations made thereunder and any amending legislation, and is not covered by a WTF Discharge Licence issued under the Water Pollution Control Ordinance (Cap. 358 of the Laws of Hong Kong) the Tenant shall apply to the Director for a licence and comply with the terms and conditions stipulated in the licence and the WTF Discharge Licence at the Tenant's own cost(s). Otherwise, the Tenant is not allowed to discharge directly or indirectly or to produce, generate, permit, cause, allow or suffer any discharge into any public sewer, storm-water drain, channel, stream-course, sea or any area inside or outside the Premises any trade effluent or foul or contaminated water or cooling or hot water. Subject to the said licence from the Director and WTF Discharge Licence, the Tenant shall at its own cost(s) separate, collect, discharge and send all process or industrial wastewater to the WTF for treatment to the standard required for discharge into a sewer leading to the sewage treatment works at Pillar Point or other treatment works specified in the licence.
17. Subject to obtaining advance written approval of the Director, the Tenant shall at its own cost(s) provide, install, operate and maintain its own waste water pre-treatment plants within the Premises if such process or industrial wastewater could not meet the influent limits / exceeds the maximum influent criteria of the WTF (in accordance with paragraph 7.2.9 of the Final E&MA Manual). The Tenant shall at its own cost(s) separate, collect, discharge and send all domestic wastewater (i.e. other than process or industrial wastewater) to the Pillar Point Sewage Treatment Works directly for treatment or other treatment works specified in the licence.

18. In any event, the Tenant shall prevent any spilled materials from entering the surface water drainage system and prevent contamination of the sea at its own cost(s) by, inter alia, providing, installing, operating and maintaining stop-logs or interceptors in the surface water drainage system and at the marine frontage area, respectively, or as required by the licence. The Tenant shall at its own cost comply with relevant provisions of the Dumping at Sea Ordinance (Cap 466 of the Laws of Hong Kong) good practices and relevant provisions of the EIA Report and Final EM&A Manual.

Hazard to Life Impact

19. To mitigate hazard to life impact, the Tenant shall comply with, inter alia, Conditions 4.8 to 4.10 of the Environmental Permit No. EP-226/2005 as amended by the Variation of Environmental Permit (EP-226/2005/B) (and comply with the conditions of any updated Permit, amended permit and further permit regarding measures to mitigate hazard to life impact) and shall not:-

- (a) Bring, keep, store or transport chlorine within the Premises and other areas of EcoPark;
- (b) Bring, keep, store, locate or transport dangerous goods, substances and fuels supporting combustion including oxygen, acetylene, hydrogen peroxide, rubber tyres and diesel within 10 metres from the boundary of the site of EcoPark; and
- (c) Exceed the building height restrictions for buildings on the Premises which are on/near the western boundary of the site of EcoPark as mentioned in Annex B to the Environmental Permit No. EP-226/2005 as amended by the Variation of Environmental Permit (EP-226/2005/B) (including any updated Permit, amended permit and further permit).

Landfill Gas Hazard

20. To mitigate landfill gas hazard, the Tenant shall at its own cost(s) comply with, inter alia, Condition 4.13 of the Environmental Permit No. EP-226/2005 as amended by the Variation of Environmental Permit (EP-226/2005/B) regarding raising clear of the ground all buildings and enclosed structures as specified in inter alia Condition 3.7 (and comply with the conditions of any updated Permit, amended permit and further permit regarding measures to mitigate hazard to life impact).

Landscape and Visual Impacts

21. To mitigate landscape and visual impacts, the Tenant shall at its own cost(s) comply with, inter alia, Condition 4.14 of the Environmental Permit No. EP-226/2005 as amended by the Variation of Environmental Permit (EP-226/2005/B) regarding maintaining landscape, planting, treatment and mitigation measures as specified in inter alia Condition 3.8 and Figure 3 (and comply with the conditions of any updated Permit, amended permit and further permit regarding measures to mitigate landscape and visual impacts).



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## **APPENDIX 2-2**

### **Environmental Requirements in Tenancy Agreements**

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Phase 2

### **Compliance of Environmental Legislation**

5. The Tenant shall comply with and observe all Ordinances, by-laws, regulations and rules for the time being in force in Hong Kong governing the control of any form of pollution, including air, noise, water and waste pollution, and for the protection of the environment.

### **Air Pollution**

6. Save with an appropriate exemption under the Air Pollution Control Ordinance (Cap. 311) any regulations made thereunder and any amending legislation, the Tenant shall not install or permit or suffer to be installed upon the Premises or any part thereof or any building(s) or structure(s) or part of any building(s) or structure(s) erected or to be erected thereon any furnace, oven, chimney or flue or any other combustion equipment or use or permit or suffer to be used any fuel or any method or process of manufacture or treatment that might in any circumstance result in, cause or contribute to the discharge or emission of any pollutant or any noxious, harmful or corrosive matter, whether it be in the form of gas, smoke, liquid, solid or otherwise (including but not limited to air pollutant as defined in Section 2 of the Air Pollution Control Ordinance (Cap. 311), which exists or which is imminent, without the prior written approval of the Director.

### **Water Pollution**

- 7.(a) In the event that the Tenant produces, generates, permits, causes, allows or suffers any discharge which is subject to control under the Water Pollution Control Ordinance (Cap. 358) any regulations made thereunder and any amending legislation, the Tenant shall apply to the Director for a licence and comply with the terms and conditions stipulated in the licence at the Tenant's own cost(s). Otherwise, the Tenant is not allowed to discharge directly or indirectly or to produce, generate, permit, cause, allow or suffer any discharge into any public sewer, storm-water drain, channel, stream-course, sea or any area inside or outside the Premises any trade effluent or foul or contaminated water or cooling or hot water. Subject to the said licence from the Director, the Tenant shall at its own cost(s) separate, collect, and discharge all process or industrial wastewater which comply with the standard required for discharge into a sewer leading to the sewage treatment works at Pillar Point or other treatment works specified in the licence.
- (b) Subject to obtaining advance written approval of the Director, the Tenant shall at its own cost(s) provide, install, operate and maintain its own waste water pre-treatment plants within the Premises if such process or industrial wastewater could not meet the standard required for discharge into a sewer leading to the sewage treatment works at Pillar Point or other treatment works specified in the licence. The Tenant shall at its own cost(s) separate, collect, discharge and send all domestic wastewater (i.e. other than process or industrial wastewater) to the Pillar Point Sewage Treatment Works directly for treatment or other treatment works specified in the licence.
- (c) In any event, the Tenant shall prevent any spilled materials from entering the surface water drainage system and prevent contamination of the sea at its own cost(s) by, inter alia, providing, installing, operating and maintaining stop-logs or interceptors in the surface water drainage system and at the marine frontage area, respectively, or as required by the licence. The Tenant shall at its own cost comply with relevant provisions of the Dumping at Sea Ordinance (Cap. 466) good practices and relevant provisions of the EIA Report and Final EM&A Manual.

### **Waste Management**

- 8.(a) The Tenant shall at its own cost(s) comply with relevant provisions of the Waste Disposal Ordinance (Cap. 354).
- (b) The Tenant shall not permit, allow or suffer any fuel or chemical and any sewage, waste water or effluent containing sand, cement, silt or any suspended or dissolved material to flow, escape or run from the Premises onto any adjoining land or allow any waste matter which does not form part of the recovery and/or recycling and/or reprocessing operation or is not part of the final product of such operation to be deposited, kept, held or stored anywhere within the Premises and other areas of

EcoPark. The Tenant shall at its own cost(s) have all such matters and all materials arising from recycling activities, chemical materials arising from maintenance of plant and equipment, sewage sludge (from wastewater treatment facilities, if any) and general daily waste from the operation removed from the Premises or any building(s) or structure(s) or any part of any building(s) or structure(s) erected or to be erected thereon in a proper manner to the satisfaction of the Landlord and/or the Director.

#### **Noise Pollution**

- 9.(a) The Tenant shall take all necessary measures as may be required by and to the satisfaction of the Landlord and/or the Director to ensure that the operation of all plant and equipment, installed or used on the Premises or in any building(s) or structure(s) or any part of any building(s) or structure(s) erected or to be erected thereon, will not result, not cause and/or will not contribute any noise (which exists or which is imminent) which disturbs or annoys the residents or occupiers of any adjoining or neighbouring lot or lots or premises, or causes and/or contributes to disturbance to the general public under the Noise Control Ordinance (Cap. 400) any regulations made thereunder and any amending legislation.
- (b) The decision of the Landlord or the Director as to whether any such plant and equipment are causing disturbance or annoyance as aforesaid shall be final and binding on the Tenant.

#### **Landfill Gas Hazard**

10. To mitigate landfill gas hazard, the Tenant shall at its own cost(s) comply with, inter alia, Condition 4.13 of the Environmental Permit No. EP-226/2005/B regarding raising clear of the ground all buildings and enclosed structures as specified in inter alia Condition 3.7 (and comply with the conditions of any updated Permit, amended permit and further permit regarding measures to mitigate hazard to life impact).

#### **EcoPark Being Within the 250m Consultation Zone of Siu Lang Shui Landfill**

- 11.(a) The Tenant acknowledges that the EcoPark is within the 250m Consultation Zone of the Siu Lang Shui Landfill and that the Premises may be affected by problems associated with migrating landfill gas and undertakes to provide suitable precautionary or protection measures at his own expense to control these potential hazards.
- (b) The Tenant shall ensure all personnel entering the Premises and all visitors to the Premises are aware of the potential hazards of the landfill gas by posting suitable warning notices of the potential hazards at his own expense.
- (c) All buildings and enclosed structures, including temporary offices, temporary stores and the administration building, within the 250m Consultation Zone of the Siu Lang Shui Landfill shall be provided with the following measure(s):
- (i) buildings shall be raised clear of the ground with a clear separation distance (as measured from the highest point on the ground surface to the underside of the lowest floor joist) of at least 500mm; or
  - (ii) a low-gas permeability membrane shall be applied to the surface of any wall or floor slab that rests on or is below ground. A gravel-fill vent system shall be provided such that passive venting is achieved around the perimeter of the structure. In addition, other building materials, such as dense well-compacted concrete or steel shuttering which provide a measure of resistance to gas permeation, shall be used to achieve gas protection.
- (d) The Tenant shall ensure that the electrical equipment used on the Premises shall be intrinsically safe. Welding, flame-cutting or other hot works shall be confined to the open areas of the Premises and shall be at least 15m away from any ground-level confined space.

- (e) No drilling, trenching and excavation shall be allowed on the Premises. During any construction work, the Tenant shall observe the guidelines recommended in Chapter 8 of the “Landfill Gas Hazard Assessment Guidance Note” published by the Department of Environmental Protection. In particular, no smoking, naked flames and all other sources of ignition shall be allowed within 15m of any ground-level confined space.

#### **Hazard to Life Impact**

12. To mitigate hazard to life impact, the Tenant shall comply with, inter alia, Conditions 4.8 to 4.10 of the Environmental Permit No. EP-226/2005/B (and comply with the conditions of any updated Permit, amended permit and further permit regarding measures to mitigate hazard to life impact) and shall not:-
- (a) bring, keep, store or transport chlorine within the Premises and other areas of EcoPark;
  - (b) bring, keep, store, locate or transport dangerous goods, substances and fuels supporting combustion including oxygen, acetylene, hydrogen peroxide, rubber tyres and diesel within 10 metres from the boundary of the site of EcoPark; and
  - (c) exceed the building height restrictions for buildings on the Premises which are on/near the western boundary of the site of EcoPark as mentioned in Annex B to the Environmental Permit No. EP-226/2005/B (including any updated Permit, amended permit and further permit).

#### **Landscape and Visual Impacts**

13. To mitigate landscape and visual impacts, the Tenant shall at its own cost(s) comply with, inter alia, Condition 4.14 of the Environmental Permit No. EP-226/2005/B regarding maintaining landscape, planting, treatment and mitigation measures as specified in inter alia Condition 3.8 and Figure 3 (and comply with the conditions of any updated Permit, amended permit and further permit regarding measures to mitigate landscape and visual impacts).

#### **ENVIRONMENTAL RESPONSIBILITIES**

- 14.(a) The Tenant shall at its own cost(s) apply for, obtain, renew, maintain and comply with all the relevant licences related to compliance with all relevant Ordinances, by-laws, regulations, statutory technical memorandums, codes of practice, rules, non-statutory guidance notes, schemes, abatement notices and the environmental permits for the time being in force in Hong Kong (including those relating to the environment and governing the control of any form of pollution including air, noise, water and waste pollution, and for the protection of the environment). The Tenant shall comply with all abatement notices, orders, directions and requests of the relevant authorities and public officers and shall be responsible for paying all relevant fees, costs, fines and penalties.
- (b) The Tenant shall not do anything or omit to do anything which would cause, contribute to or involve a breach or potential breach by the Landlord and/or the Director relating to any of the matters mentioned in Clause 14(a) hereinabove.

#### **ENVIRONMENTAL IMPACT ASSESSMENT**

15. (a) The Tenant shall at its own cost(s) comply with and shall ensure that the Premises is used, designed, constructed, operated and maintained in accordance with:-
- (i) All information, conditions, mitigation measures, prohibitions, restrictions, recommendations and requirements under the Environmental Impact Assessment Report for Development of an EcoPark in Tuen Mun Area 38 (“the Project”) with Appendices, i.e. the EIA Report and EM&A Manual (EIAO Register No.: AEIAR-086/2005), the Environmental Permit

- (ii) No. EP-266/2005/A (and future variations), and other relevant documents in the EIAO Register (or in any other places, any internet websites or by any other means as specified by the Director).
- (ii) All information, conditions, submissions, mitigation measures, orders, notices and requirements under ongoing surveillance and monitoring activities during all stages of the Project and during the lease hereunder (e.g. any additional mitigation measures recommended and to be recommended under the Process Review and Design Audit (carried out and to be carried out in accordance with the EM&A Manual) for various environmental impacts including, but not limited to, noise pollution, air quality, hazard to life, landfill gas hazard, landscape and visual measures, waste management and land contamination).
- (iii) For the purposes of this Clause 15(a), “EIAO Register” shall mean the register kept by the Director pursuant to Section 15 of the Environmental Impact Assessment Ordinance (Cap.499).
- (b) Further to Clauses 2(k) and 10 above, the Tenant shall at its own cost provide relevant environmental monitoring data, information, documents and assistance to the Director and/or the Environmental Protection Department and shall permit authorised representatives of the Environmental Protection Department to access, inspect, take samples and monitor the Premises and operations for the Process Review and the Design Audit carried out and/or to be carried out pursuant to Conditions 4.1 and 5 of the Environmental Permit No. EP-226/2005/B (and future variations).
- (c) If the Tenant’s operations (i.e. activities and facilities for recovery and/or recycling and/or reprocessing) are not covered by the EIA Report and/or deviate from the development parameters mentioned in inter alia the EIA Report, the Environmental Permit No. EP-226/2005/B (and future variations), and if additional mitigation measures are not available or are not effective in the opinion of the Director, to ensure compliance with the EIA Report, the Environmental Permit No. EP-226/2005/B (and future variations), the Tenant shall comply with any modified parameters and/or the Tenant shall immediately modify its operations in such a way that the findings and requirements of the EIA Report, the Environmental Permit No. EP-226/2005/B (and future variations) are complied with and shall immediately cease to continue the offending part of the operations or activity in question.

## APPENDIX 3

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### Material and Waste Throughputs

**Table A3-1 Recycling of Waste Oil**

| Date           | Waste Input (tonnes) | Product Output (tonnes) | Waste Disposal (tonnes) |
|----------------|----------------------|-------------------------|-------------------------|
| Oct-Dec 08     | 130                  | -                       | -                       |
| Jan-Dec 09     | 2,003                | 1,863*                  | 140                     |
| Jan-Dec 10     | 2,494                | 4,254*                  | 337                     |
| Jan-Dec 11     | 9,492                | 6,308*                  | 5,564                   |
| Jan-Dec 12     | 9,693                | 5,057*                  | 3,881                   |
| Jan-Dec 13     | 8,110*               | 3,782*                  | 5,588*                  |
| January 2014   | 817                  | 533*                    | 575                     |
| February 2014  | 690                  | 409*                    | 481                     |
| March 2014     | 873                  | 475*                    | 631                     |
| April 2014     | 799                  | 266                     | 562                     |
| May 2014       | 811                  | 238                     | 569                     |
| June 2014      | 789                  | 236                     | 550                     |
| July 2014      | -                    | -                       | -                       |
| August 2014    | -                    | -                       | -                       |
| September 2014 | -                    | -                       | -                       |
| October 2014   | -                    | -                       | -                       |
| November 2014  | -                    | -                       | -                       |
| December 2014  | -                    | -                       | -                       |

**Note:** The throughput data presented above are the best available data.

The throughout data marked with “\*” have been updated based on the available data.

**Table A3-2 Recycling of Waste Metal**

| Date           | Waste Input (tonnes) | Product Output (tonnes) | Waste Disposal (tonnes) |
|----------------|----------------------|-------------------------|-------------------------|
| Apr-Dec 2010   | 4,562                | 4,562                   | -                       |
| Jan-Dec 2011   | 18,069               | 18,069                  | -                       |
| Jan-Dec 2012   | 32,737               | 32,737                  | -                       |
| Jan-Dec 2013   | 43,149*              | 22,008                  | -                       |
| January 2014   | 9,046                | 8,541                   | -                       |
| February 2014  | 5,131                | 5,913                   | -                       |
| March 2014     | 8,933                | 9,598                   | -                       |
| April 2014     | 9,302                | 10,147                  | -                       |
| May 2014       | 4,532                | 4,532                   | -                       |
| June 2014      | -                    | -                       | -                       |
| July 2014      | -                    | -                       | -                       |
| August 2014    | -                    | -                       | -                       |
| September 2014 | -                    | -                       | -                       |
| October 2014   | -                    | -                       | -                       |
| November 2014  | -                    | -                       | -                       |
| December 2014  | -                    | -                       | -                       |

**Note:** The throughput data presented above are the best available data.

The throughput data marked with “\*” have been updated based on the available data.



**Table A3-3 Recycling of Waste Wood**

| Date           | Waste Input (tonnes) | Product Output (tonnes) | Waste Disposal (tonnes) |
|----------------|----------------------|-------------------------|-------------------------|
| Jun-Dec 2008   | 43*                  | -                       | -                       |
| Jan-Dec 2009   | 0.2*                 | -                       | -                       |
| Jan-Dec 2010   | 4,998*               | 1,072                   | -                       |
| Jan-Dec 2011   | 1,930*               | 5,788                   | -                       |
| Jan-Dec 2012   | 1,308*               | -                       | -                       |
| Jan-Dec 2013   | 1,387*               | 2,400*                  | -                       |
| January 2014   | -                    | -                       | -                       |
| February 2014  | -                    | -                       | -                       |
| March 2014     | -                    | -                       | -                       |
| April 2014     | -                    | -                       | -                       |
| May 2014       | -                    | -                       | -                       |
| June 2014      | -                    | -                       | -                       |
| July 2014      | -                    | -                       | -                       |
| August 2014    | -                    | -                       | -                       |
| September 2014 | -                    | -                       | -                       |
| October 2014   | -                    | -                       | -                       |
| November 2014  | -                    | -                       | -                       |
| December 2014  | -                    | -                       | -                       |

**Note:** The throughput data presented above are the best available data.

The throughout data marked with “\*” have been updated based on the available data.

**Table A3-4 Recycling of WEEE**

| Date           | Waste Input (tonnes) | Product Output (tonnes) | Waste Disposal (tonnes) |
|----------------|----------------------|-------------------------|-------------------------|
| Apr-Dec 2010   | 138*                 | 45                      | 2                       |
| Jan-Dec 2011   | 832                  | 374                     | 27                      |
| Jan-Dec 2012   | 1,163                | 778                     | 32                      |
| Jan-Dec 2013   | 1,246*               | 866*                    | 78                      |
| January 2014   | 130                  | 88                      | 0.3                     |
| February 2014  | 125*                 | 90*                     | 7                       |
| March 2014     | 189                  | 74                      | 14                      |
| April 2014     | 80                   | 55                      | 15                      |
| May 2014       | 87                   | 141                     | 21                      |
| June 2014      | -                    | -                       | -                       |
| July 2014      | -                    | -                       | -                       |
| August 2014    | -                    | -                       | -                       |
| September 2014 | -                    | -                       | -                       |
| October 2014   | -                    | -                       | -                       |
| November 2014  | -                    | -                       | -                       |
| December 2014  | -                    | -                       | -                       |

**Note:** The throughput data presented above is the best available data.

The throughput data marked with “\*” has been updated based on the available data.

**Table A3-5 Recycling of Waste Plastic**

| Date           | Waste Input (tonnes) | Product Output (tonnes) | Waste Disposal (tonnes) |
|----------------|----------------------|-------------------------|-------------------------|
| Jul-Dec 2009   | 20                   | -                       | -                       |
| Jan-Dec 2010   | 738                  | 417                     | 111                     |
| Jan-Dec 2011   | 1,733                | 1,241                   | 149                     |
| Jan-Dec 2012   | 4,207                | 2,862                   | 153                     |
| Jan-Dec 2013   | 5,534                | 5,154*                  | 168                     |
| January 2014   | 180                  | 190                     | 14                      |
| February 2014  | 118                  | 170                     | 10                      |
| March 2014     | 140                  | 206                     | 26                      |
| April 2014     | 136                  | 381                     | 35                      |
| May 2014       | 124                  | 398                     | 85                      |
| June 2014      | -                    | -                       | -                       |
| July 2014      | -                    | -                       | -                       |
| August 2014    | -                    | -                       | -                       |
| September 2014 | -                    | -                       | -                       |
| October 2014   | -                    | -                       | -                       |
| November 2014  | -                    | -                       | -                       |
| December 2014  | -                    | -                       | -                       |

**Note:** The throughput data presented above is the best available data.

The throughput data marked with “\*” has been updated based on the available data.

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## APPENDIX 4

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### Calibration Certificate of Infrared Gas Analyser

**FUGRO TECHNICAL SERVICES LIMITED**

Fugro Development Centre,  
5 Lok Yi Street, Tai Lam,  
Tuen Mun, N.T.,  
Hong Kong.

Tel : +852 2450 8233  
Fax : +852 2450 6138  
E-mail : matlab@fugro.com.hk  
Website : www.materialab.com.hk

**Materialab**

Report No. : 103812EN140624



Page 1 of 1

**Test Report on Landfill Monitoring****Information Supplied by Client**

Client : SMEC Asia Limited

Client's address : 27/F., Ford Glory Plaza, 37-39 Wing Hong Street,  
Cheung Sha Wan, Kowloon, Hong Kong

Project : EcoPark Operation EM&A

Sample description : Five samples of gas

Sampling location : EP1-1 Inside the Landscaping area of Administration Building  
EP1-2 PCCW below-ground chamber outside Lot EP08-01  
EP1-3 HGC Broadband below-ground chamber outside Lot EP08-03  
EP2-1 HGC Broadband below-ground chamber outside Lot P1  
EP2-2 HGC Broadband below-ground chamber outside Lot P3

Test required : For all locations –  
In-situ measurement of methane, carbon dioxide, oxygen and  
barometric pressure

**Laboratory Information**

Date of in-situ testing : 18/06/2014

Test method used : Measured by Infra Red Gas Analyser GA94A

**Results :**

| Sampling location | Sampling time | Barometric pressure, mbar | Methane |      | Carbon dioxide, %v/v | Oxygen, %v/v |
|-------------------|---------------|---------------------------|---------|------|----------------------|--------------|
|                   |               |                           | %v/v    | %LEL |                      |              |
| EP1-1             | 10:38         | 1006                      | 0.0     | 0    | 0.1                  | 20.7         |
| EP1-2             | 10:17         | 1007                      | 0.0     | 0    | 0.0                  | 20.5         |
| EP1-3             | 10:01         | 1007                      | 0.0     | 0    | 0.0                  | 20.8         |
| EP2-1             | 10:24         | 1006                      | 0.0     | 0    | 0.0                  | 20.6         |
| EP2-2             | 10:30         | 1006                      | 0.0     | 0    | 0.0                  | 20.8         |

Remarks : 1. A calibration certificate of the monitoring equipment is attached for reference.  
2. A layout plan showing the sampling location is also attached for reference.

Supervised by :           K.F. Wong          

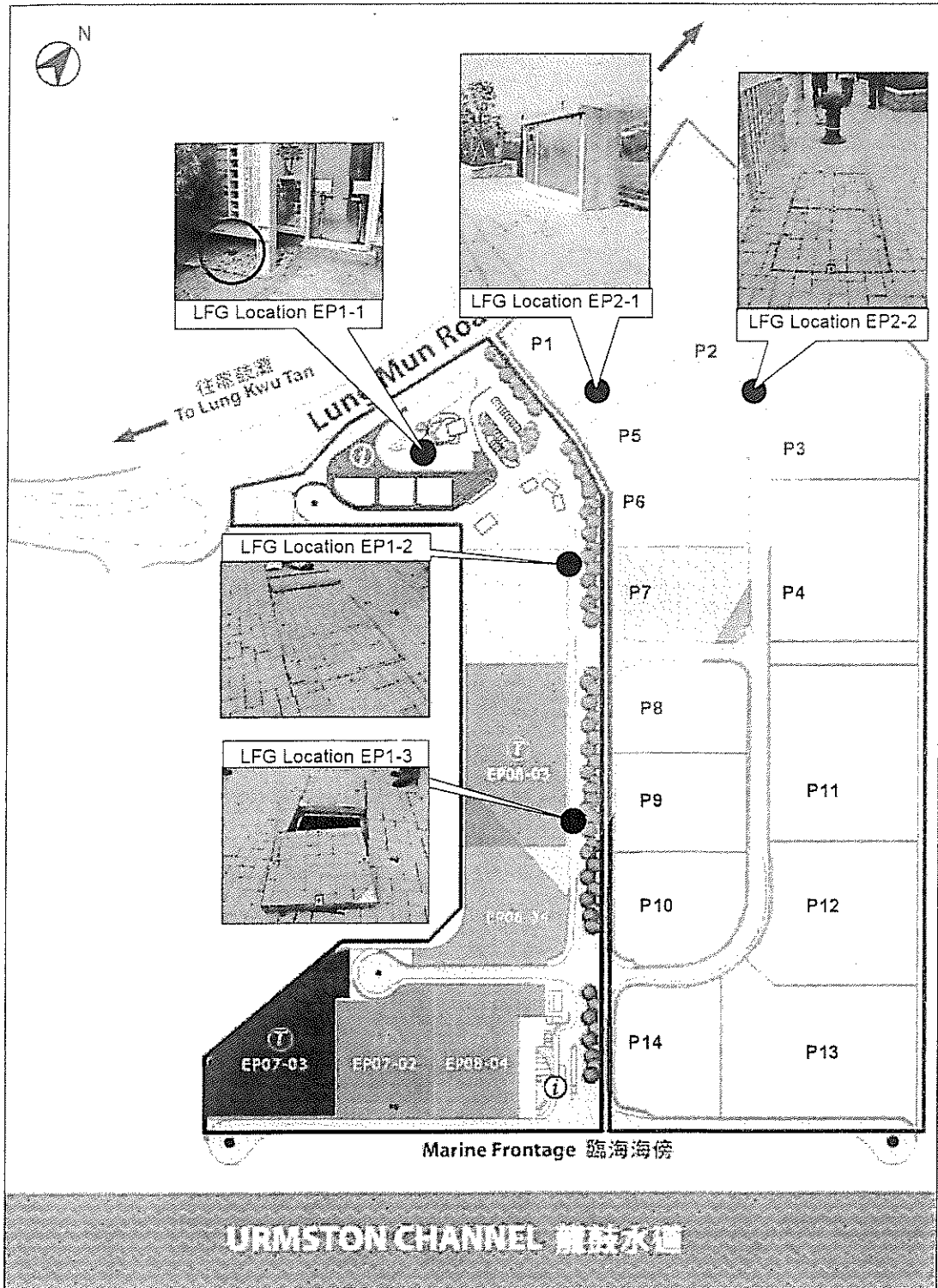
Certified by :   
Approved Signatory : HO Kin Man, John  
Manager – Chemistry Department

Date :           21/6/2014          

\*\* End of Report \*\*

*Note : This report refers only to the sample(s) tested.*

Figure 2-1 LFG Monitoring Locations within EcoPark



Area Within the Shiu Lang Shui Landfill Gas Consultation Zone

**FUGRO TECHNICAL SERVICES LIMITED**

Fugro Development Centre,  
5 Lok Yi Street, Tai Lam,  
Tuen Mun, N.T.,  
Hong Kong.

Tel : +852 2450 8233  
Fax : +852 2450 6138  
E-mail : matlab@fugro.com.hk  
Website : www.materialab.com.hk

**Materialab****REPORT ON CALIBRATION OF INFRA RED GAS ANALYSER**

Client : Fugro Technical Services Limited – Materialab Division

Sample description : One sample of Infra Red Gas Analyser (GA94A)

Sample identification : E / 084 / 1

Serial number : GA3385

Test required : Calibration

Date of calibration : 29/05/2014

Next calibration date : 29/11/2014

Method used : In-house method (Comparison with Standard Gas)

**Results :**

| Parameters                        | Standard Gas Concentration,<br>% volume | Infra Red Gas Analyser Reading,<br>% volume | Deviation,<br>% volume |
|-----------------------------------|-----------------------------------------|---------------------------------------------|------------------------|
| Methane (CH <sub>4</sub> )        | 1.02                                    | 0.9                                         | -0.12                  |
| Carbon dioxide (CO <sub>2</sub> ) | 15.0                                    | 14.9                                        | -0.1                   |
| Oxygen (O <sub>2</sub> )          | 1.03                                    | 1.2                                         | 0.17                   |

Calibrated by : C. F. LeungCertified by : Approved Signatory : Raymond K. F. Wong  
Manager – Chemical & Environmental

Date

\*\* End of Report \*\*

*Note : This report refers only to the sample(s) tested.*

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## APPENDIX 5

### Graphical Plots of LFG Monitoring



Landfill Gas Monitoring Results -

Jun-2014

| Monitoring Station ID | Monitoring Locations                                   | Date      | Weather Conditions | Temperature (degree) | Start Time | End Time | Measurement Results |       |        |                | Action Level        |         |        | Limit Level    |         |        | Remarks |                |
|-----------------------|--------------------------------------------------------|-----------|--------------------|----------------------|------------|----------|---------------------|-------|--------|----------------|---------------------|---------|--------|----------------|---------|--------|---------|----------------|
|                       |                                                        |           |                    |                      |            |          | Methane             |       | Oxygen | Carbon Dioxide | Barometric Pressure | Methane | Oxygen | Carbon Dioxide | Methane | Oxygen |         | Carbon Dioxide |
|                       |                                                        |           |                    |                      |            |          | % v/v               | % LEL | % v/v  | % v/v          | mBar (absolute)     | % LEL   | % v/v  | % v/v          | % LEL   | % v/v  |         | % v/v          |
| EP1-1                 | Inside the landscaping area of Administration Building | 18 Jun 14 | Sunny              | 32                   | 10:38      | 10:41    | 0.0                 | 0     | 21     | 0.1            | 1006                | > 10    | < 19   | > 0.5          | > 20    | < 18   | > 1.5   | Nil            |
| EP1-2                 | PCCW below-ground chamber outside Lot EP08-01          |           |                    | 32                   | 10:17      | 10:20    | 0.0                 | 0     | 21     | 0.0            | 1007                |         |        |                |         |        |         | Nil            |
| EP1-3                 | HGC Broadband below-ground chamber outside Lot EP08-03 |           |                    | 32                   | 10:01      | 10:04    | 0.0                 | 0     | 21     | 0.0            | 1007                |         |        |                |         |        |         | Nil            |
| EP2-1                 | HGC Broadband below-ground chamber outside Lot P1      |           |                    | 32                   | 10:24      | 10:27    | 0.0                 | 0     | 21     | 0.0            | 1006                |         |        |                |         |        |         | Nil            |
| EP2-2                 | HGC Broadband below-ground chamber outside Lot P3      |           |                    | 32                   | 10:30      | 10:33    | 0.0                 | 0     | 21     | 0.0            | 1006                |         |        |                |         |        |         | Nil            |

Note:

(1) Underlined figure indicates an exceedance of Action Level

(2) Shaded area indicates an exceedance of Limit Level

**EP1-1**

| Date      | Methane (% LEL) |              |             | Oxygen (% v/v) |              |             | Carbon Dioxide (% v/v) |              |             | Barometric Pressure (mBar) |
|-----------|-----------------|--------------|-------------|----------------|--------------|-------------|------------------------|--------------|-------------|----------------------------|
|           | Measurement     | Action Level | Limit Level | Measurement    | Action Level | Limit Level | Measurement            | Action Level | Limit Level | Measurement                |
| 21 Jun 13 | 0               | 10           | 20          | 20             | 19           | 18          | 0.0                    | 0.5          | 1.5         | 1006                       |
| 17 Sep 13 | 0               | 10           | 20          | 20             | 19           | 18          | 0.0                    | 0.5          | 1.5         | 1000                       |
| 18 Dec 13 | 0               | 10           | 20          | 21             | 19           | 18          | 0.2                    | 0.5          | 1.5         | 1022                       |
| 27 Mar 14 | 0               | 10           | 20          | 21             | 19           | 18          | 0.0                    | 0.5          | 1.5         | 1000                       |
| 18 Jun 14 | 0               | 10           | 20          | 21             | 19           | 18          | 0.1                    | 0.5          | 1.5         | 1006                       |

**EP1-2**

| Date      | Methane (% LEL) |              |             | Oxygen (% v/v) |              |             | Carbon Dioxide (% v/v) |              |             | Barometric Pressure (mBar) |
|-----------|-----------------|--------------|-------------|----------------|--------------|-------------|------------------------|--------------|-------------|----------------------------|
|           | Measurement     | Action Level | Limit Level | Measurement    | Action Level | Limit Level | Measurement            | Action Level | Limit Level | Measurement                |
| 21 Jun 13 | 0               | 10           | 20          | 20             | 19           | 18          | 0.0                    | 0.5          | 1.5         | 1006                       |
| 17 Sep 13 | 0               | 10           | 20          | 20             | 19           | 18          | 0.2                    | 0.5          | 1.5         | 1003                       |
| 18 Dec 13 | 0               | 10           | 20          | 21             | 19           | 18          | 0.0                    | 0.5          | 1.5         | 1024                       |
| 27 Mar 14 | 0               | 10           | 20          | 20             | 19           | 18          | 0.2                    | 0.5          | 1.5         | 1000                       |
| 18 Jun 14 | 0               | 10           | 20          | 21             | 19           | 18          | 0.0                    | 0.5          | 1.5         | 1007                       |

**EP1-3**

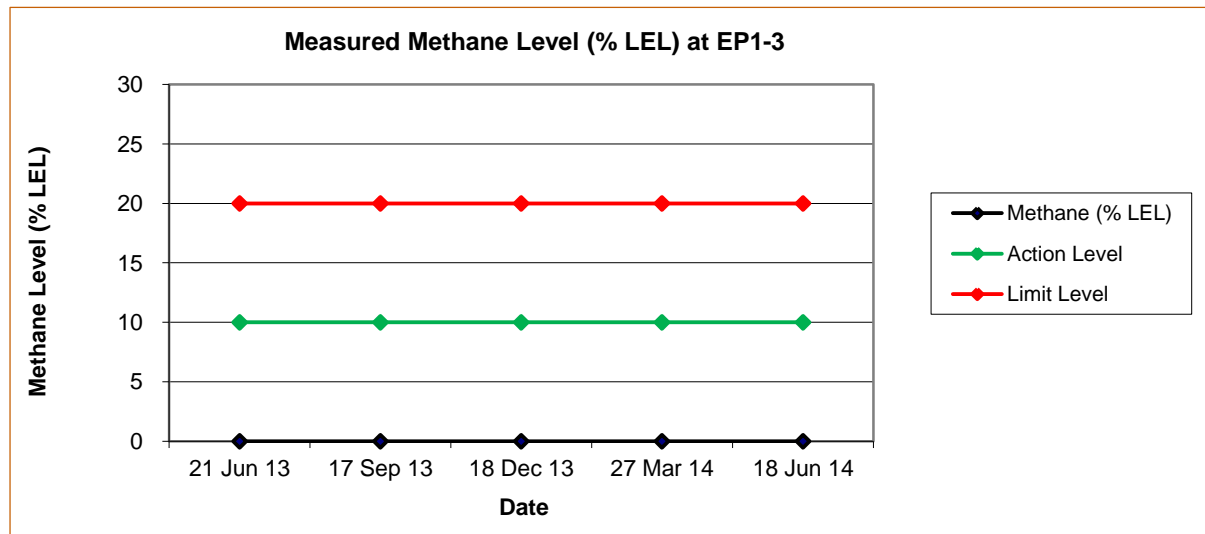
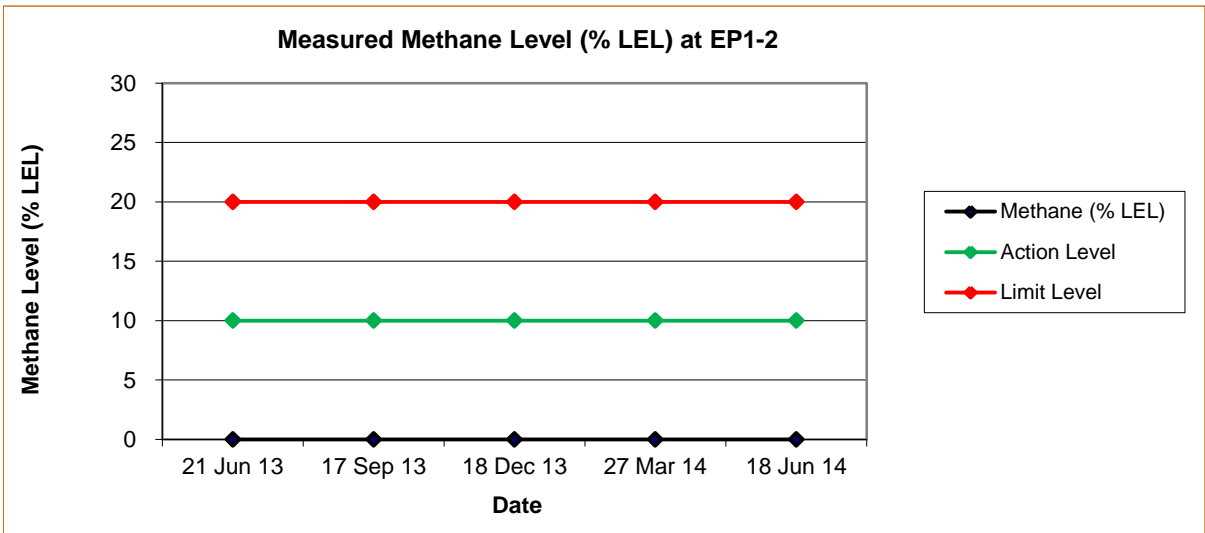
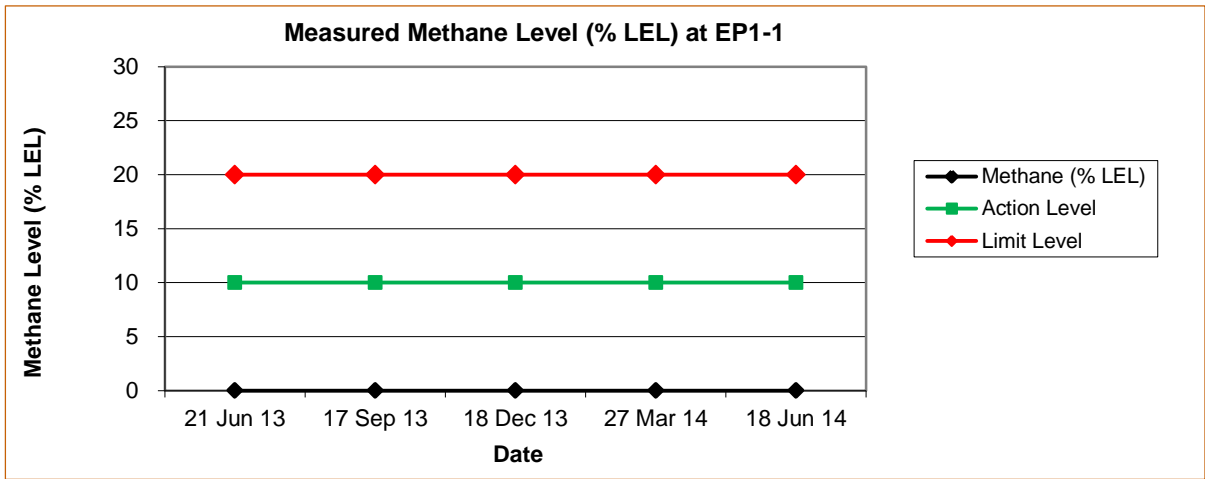
| Date      | Methane (% LEL) |              |             | Oxygen (% v/v) |              |             | Carbon Dioxide (% v/v) |              |             | Barometric Pressure (mBar) |
|-----------|-----------------|--------------|-------------|----------------|--------------|-------------|------------------------|--------------|-------------|----------------------------|
|           | Measurement     | Action Level | Limit Level | Measurement    | Action Level | Limit Level | Measurement            | Action Level | Limit Level | Measurement                |
| 21 Jun 13 | 0               | 10           | 20          | 20             | 19           | 18          | 0.0                    | 0.5          | 1.5         | 1006                       |
| 17 Sep 13 | 0               | 10           | 20          | 21             | 19           | 18          | 0.0                    | 0.5          | 1.5         | 1003                       |
| 18 Dec 13 | 0               | 10           | 20          | 21             | 19           | 18          | 0.0                    | 0.5          | 1.5         | 1024                       |
| 27 Mar 14 | 0               | 10           | 20          | 21             | 19           | 18          | 0.0                    | 0.5          | 1.5         | 1000                       |
| 18 Jun 14 | 0               | 10           | 20          | 21             | 19           | 18          | 0.0                    | 0.5          | 1.5         | 1007                       |

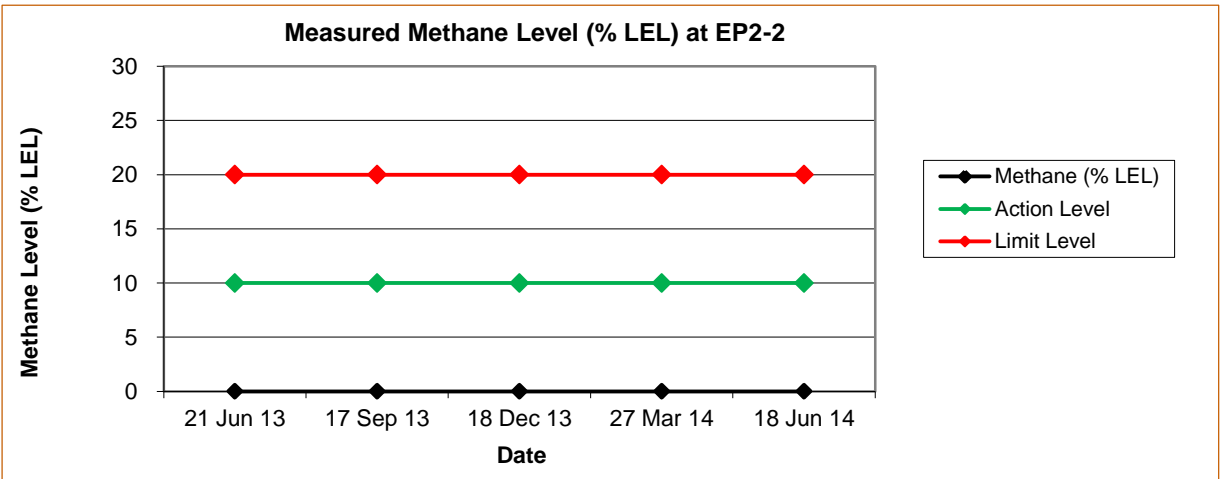
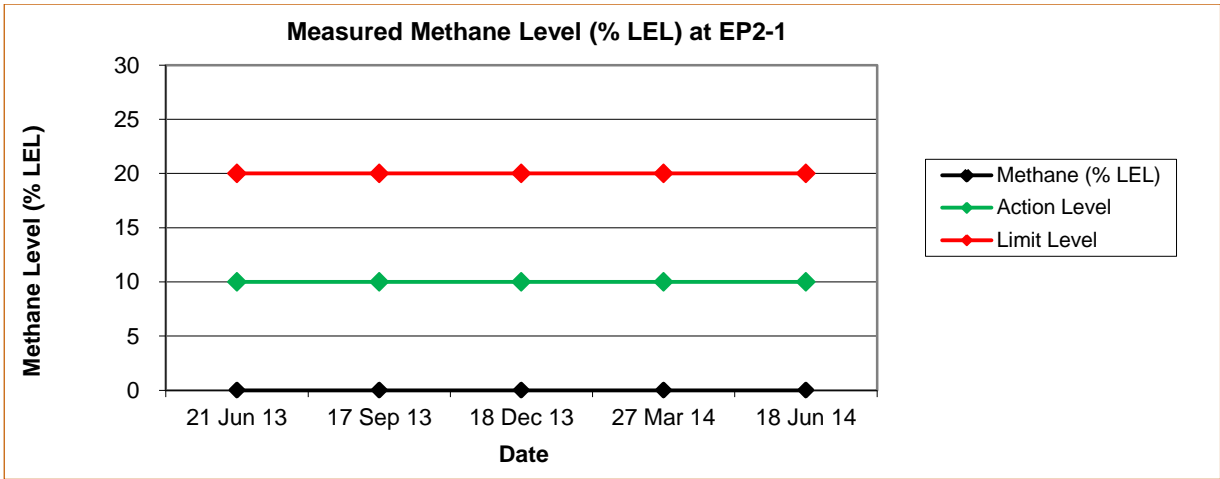
**EP2-1**

| Date      | Methane (% LEL) |              |             | Oxygen (% v/v) |              |             | Carbon Dioxide (% v/v) |              |             | Barometric Pressure (mBar) |
|-----------|-----------------|--------------|-------------|----------------|--------------|-------------|------------------------|--------------|-------------|----------------------------|
|           | Measurement     | Action Level | Limit Level | Measurement    | Action Level | Limit Level | Measurement            | Action Level | Limit Level | Measurement                |
| 21 Jun 13 | 0               | 10           | 20          | 20             | 19           | 18          | 0.2                    | 0.5          | 1.5         | 1006                       |
| 17 Sep 13 | 0               | 10           | 20          | 20             | 19           | 18          | 0.0                    | 0.5          | 1.5         | 1003                       |
| 18 Dec 13 | 0               | 10           | 20          | 21             | 19           | 18          | 0.0                    | 0.5          | 1.5         | 1024                       |
| 27 Mar 14 | 0               | 10           | 20          | 20             | 19           | 18          | 0.1                    | 0.5          | 1.5         | 1000                       |
| 18 Jun 14 | 0               | 10           | 20          | 21             | 19           | 18          | 0.0                    | 0.5          | 1.5         | 1006                       |

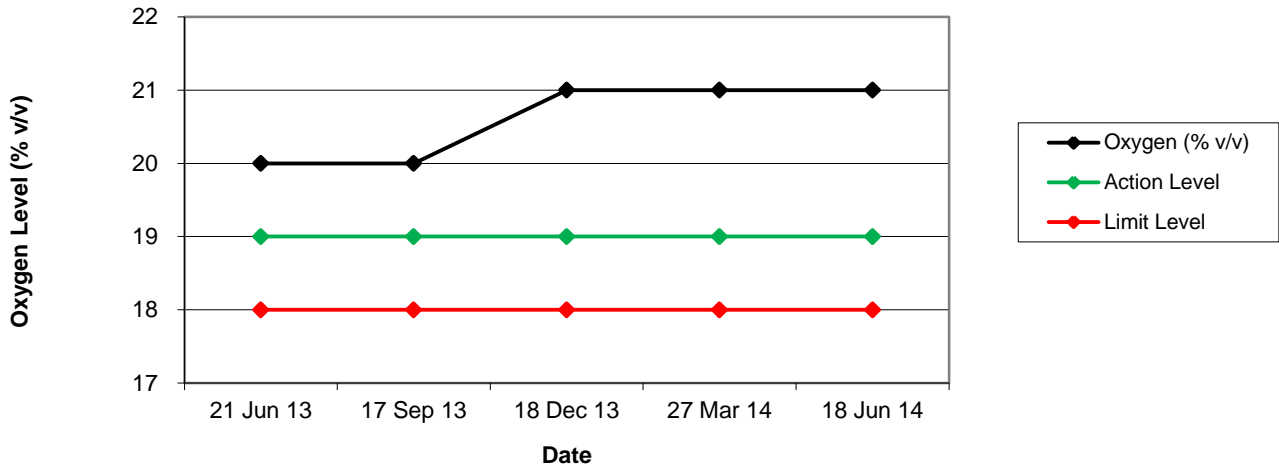
**EP2-2**

| Date      | Methane (% LEL) |              |             | Oxygen (% v/v) |              |             | Carbon Dioxide (% v/v) |              |             | Barometric Pressure (mBar) |
|-----------|-----------------|--------------|-------------|----------------|--------------|-------------|------------------------|--------------|-------------|----------------------------|
|           | Measurement     | Action Level | Limit Level | Measurement    | Action Level | Limit Level | Measurement            | Action Level | Limit Level | Measurement                |
| 21 Jun 13 | 0               | 10           | 20          | 18             | 19           | 18          | 0.3                    | 0.5          | 1.5         | 1006                       |
| 17 Sep 13 | 0               | 10           | 20          | 20             | 19           | 18          | 0.0                    | 0.5          | 1.5         | 1003                       |
| 18 Dec 13 | 0               | 10           | 20          | 21             | 19           | 18          | 0.0                    | 0.5          | 1.5         | 1022                       |
| 27 Mar 14 | 0               | 10           | 20          | 21             | 19           | 18          | 0.0                    | 0.5          | 1.5         | 1000                       |
| 18 Jun 14 | 0               | 10           | 20          | 21             | 19           | 18          | 0.0                    | 0.5          | 1.5         | 1006                       |

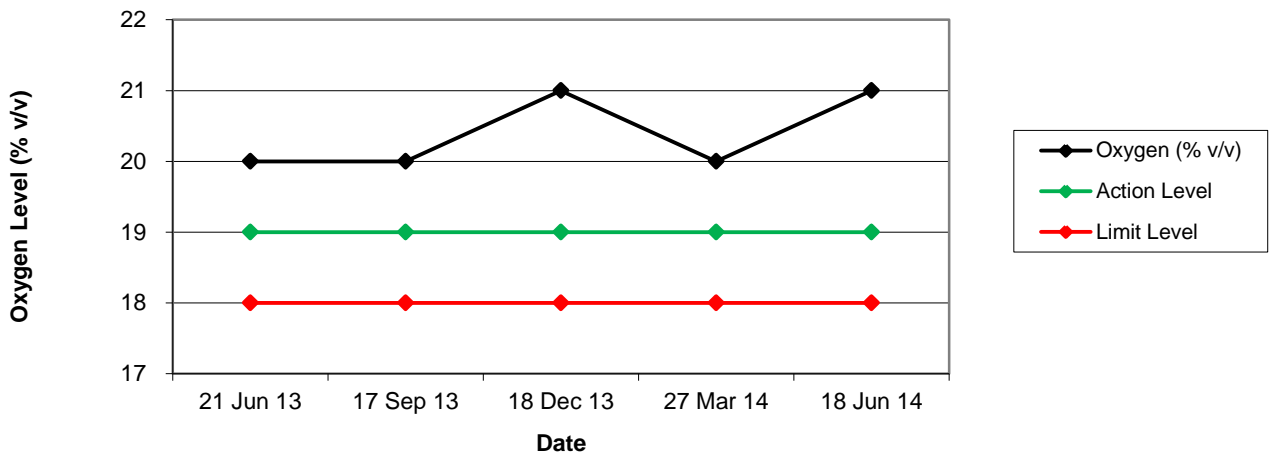




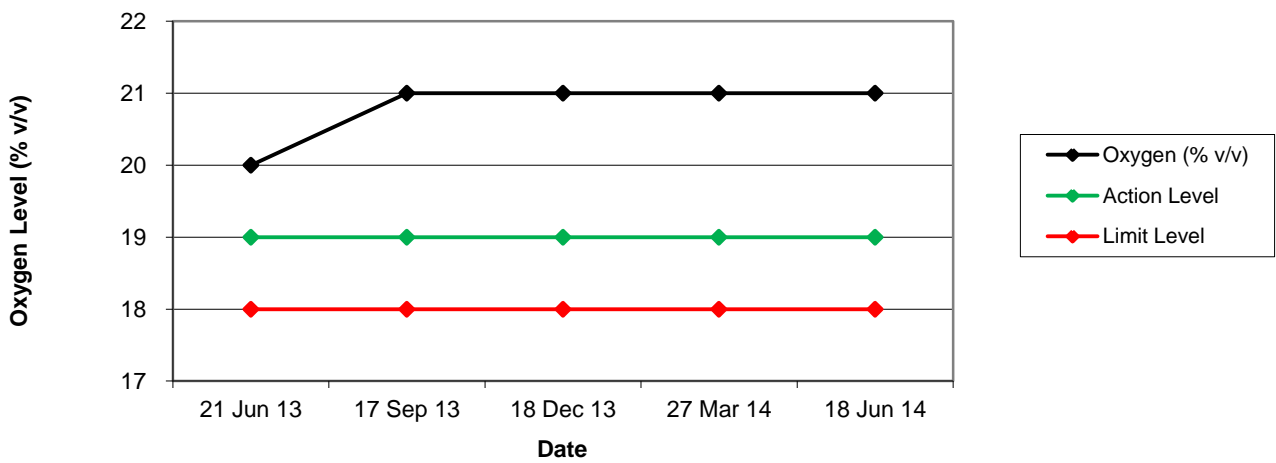
Measured Oxygen Level (% v/v) at EP1-1

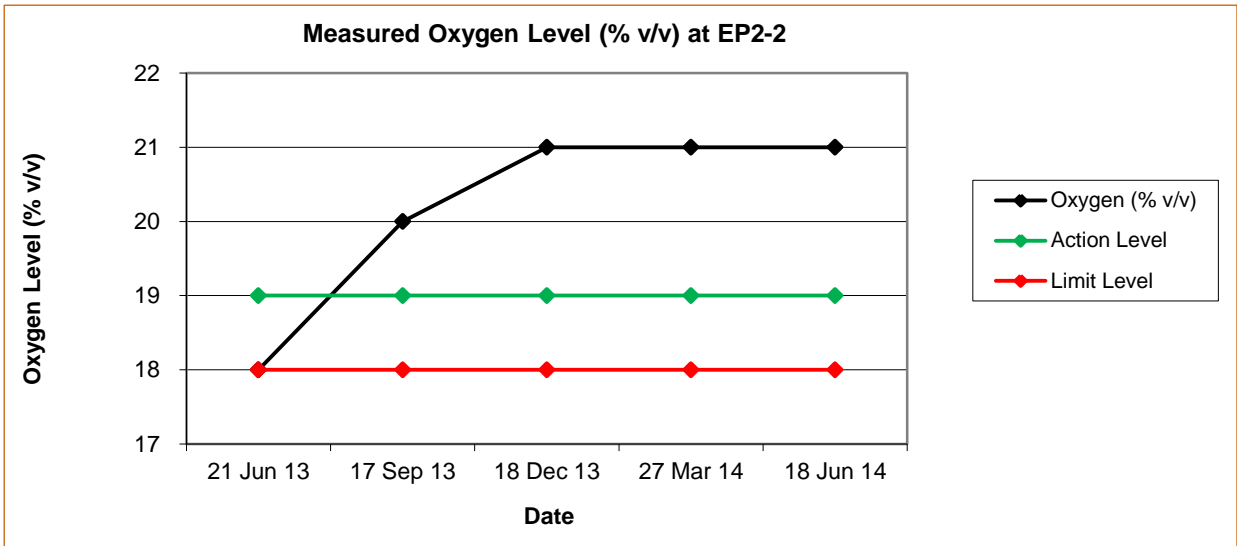
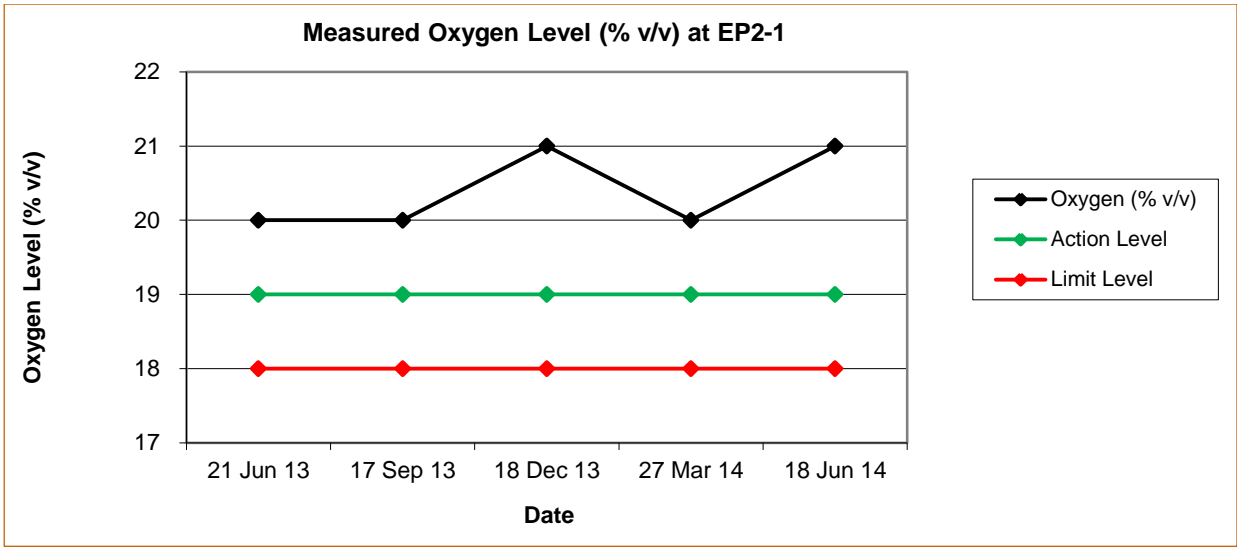


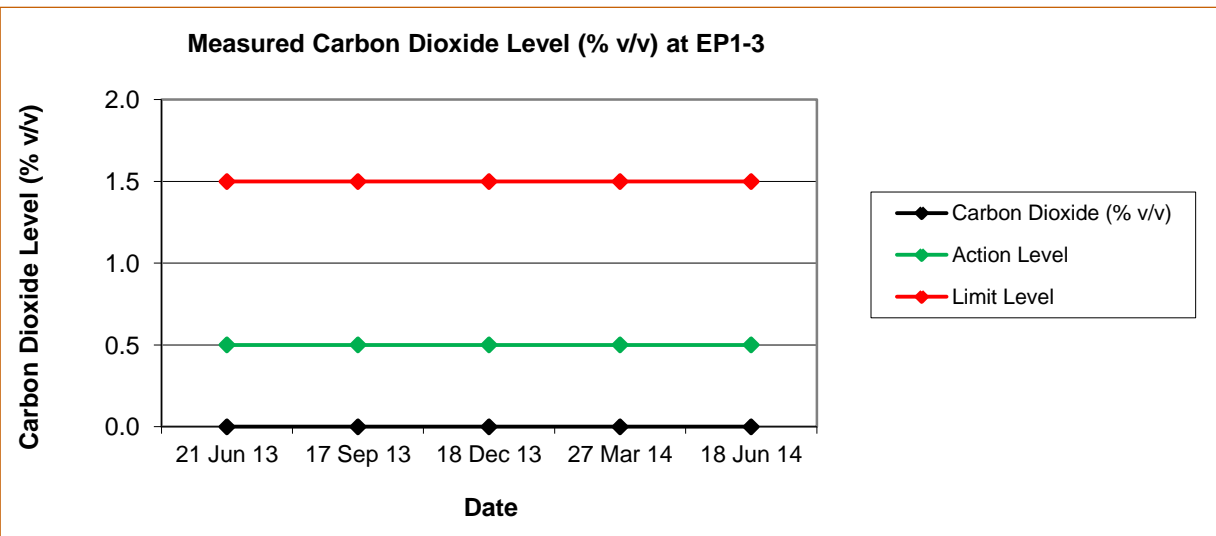
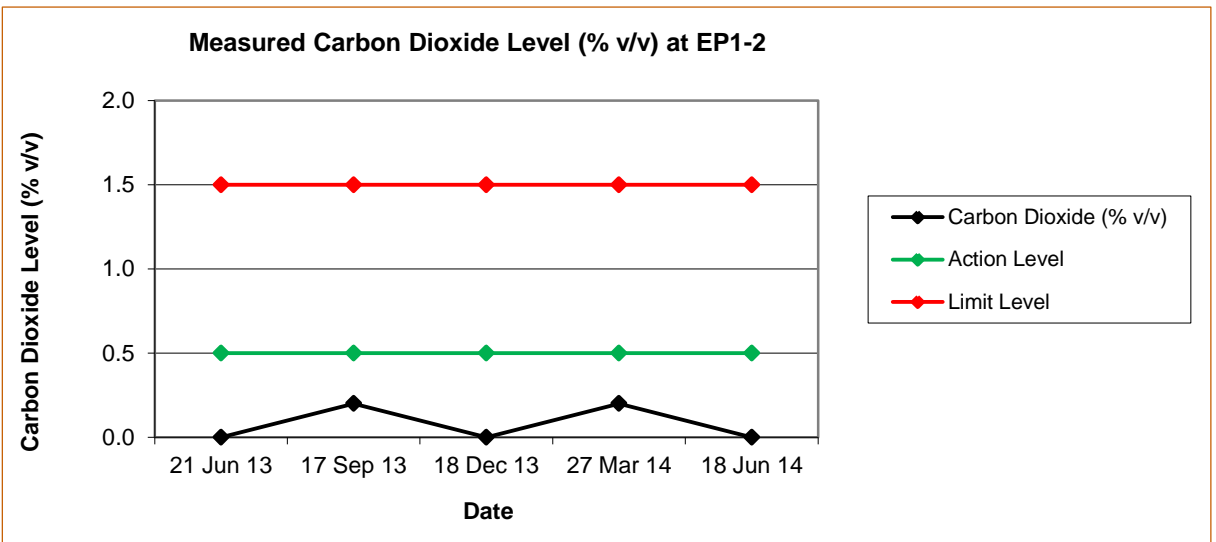
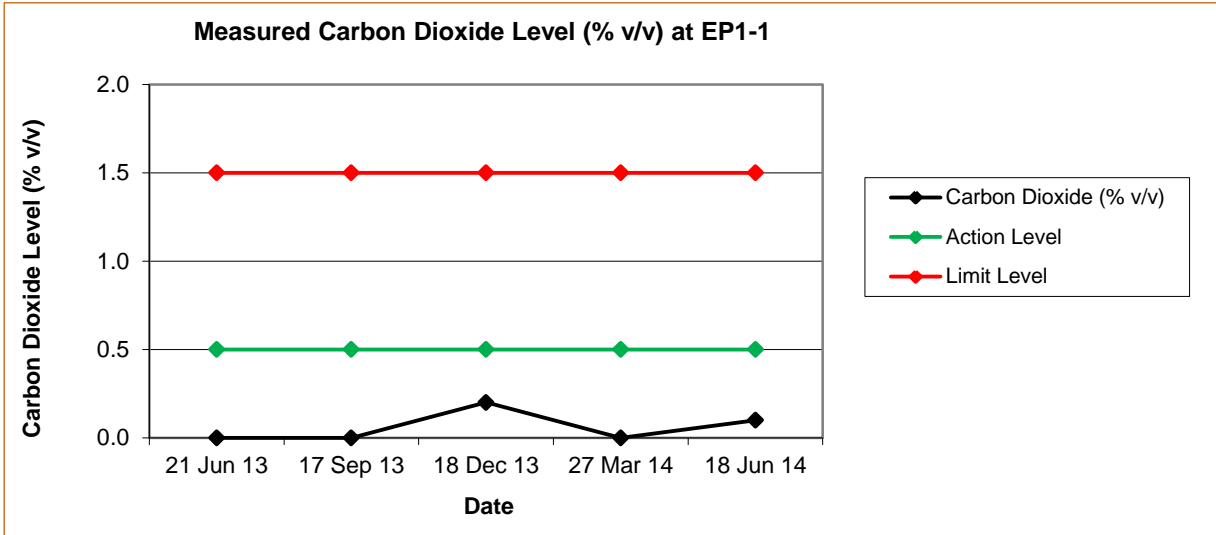
Measured Oxygen Level (% v/v) at EP1-2

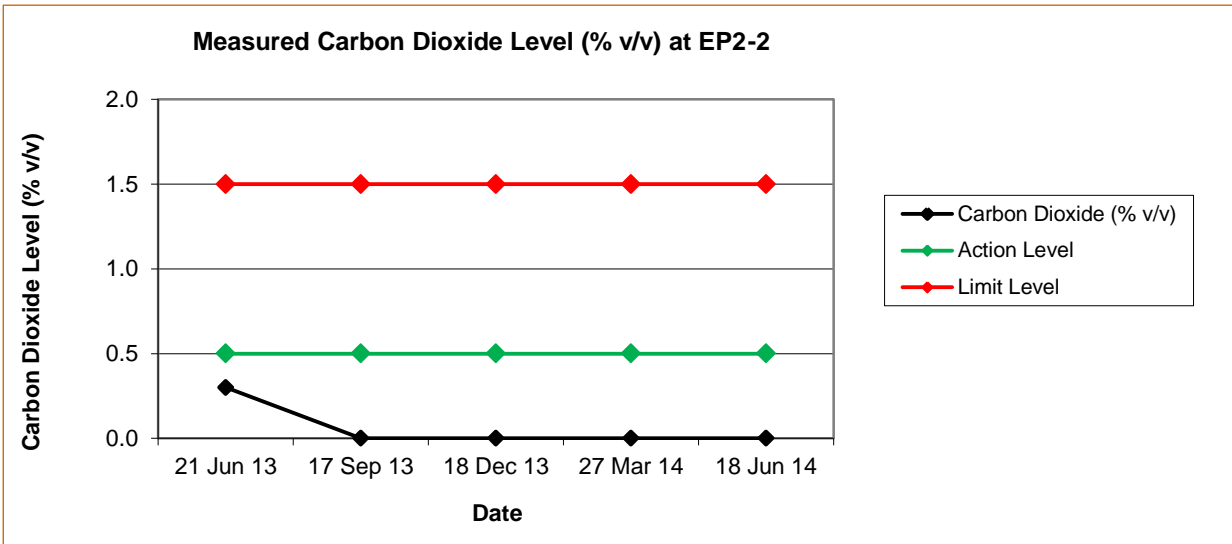
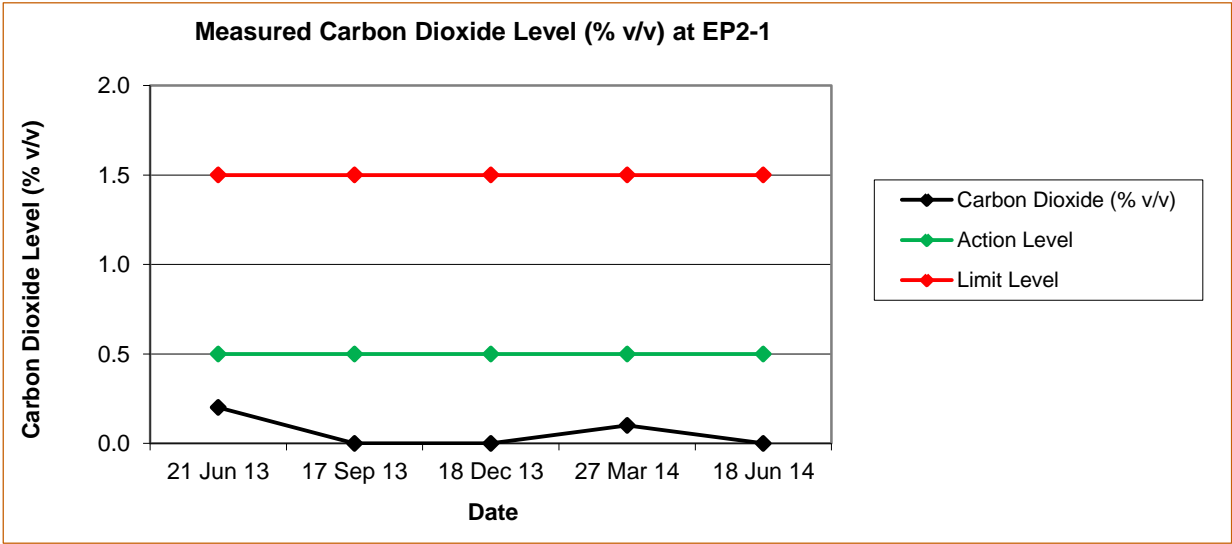


Measured Oxygen Level (% v/v) at EP1-3



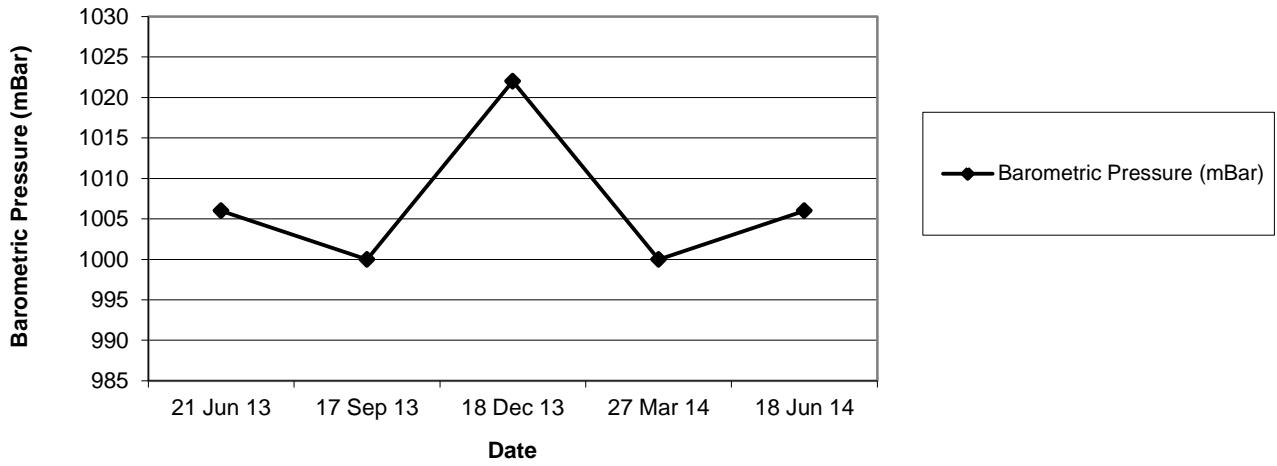




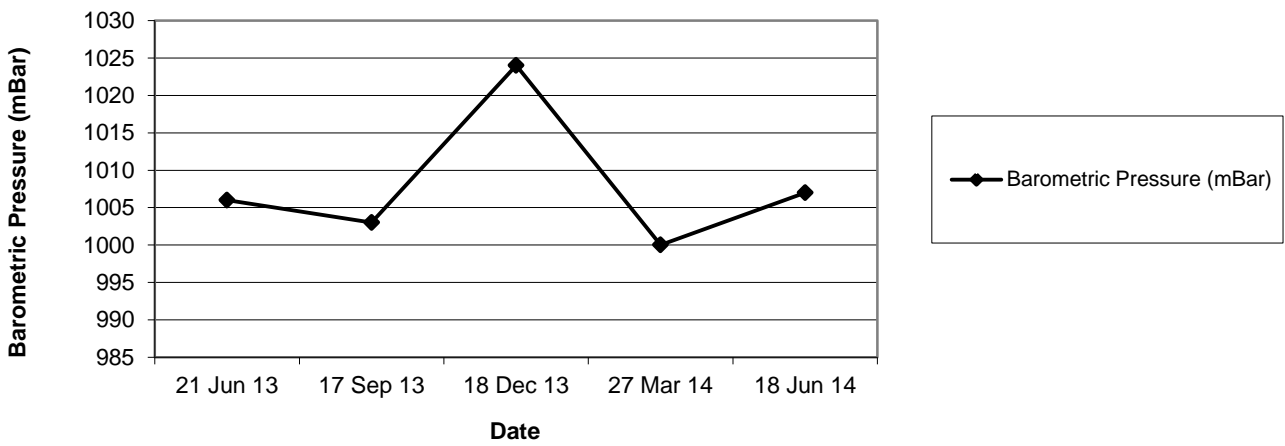




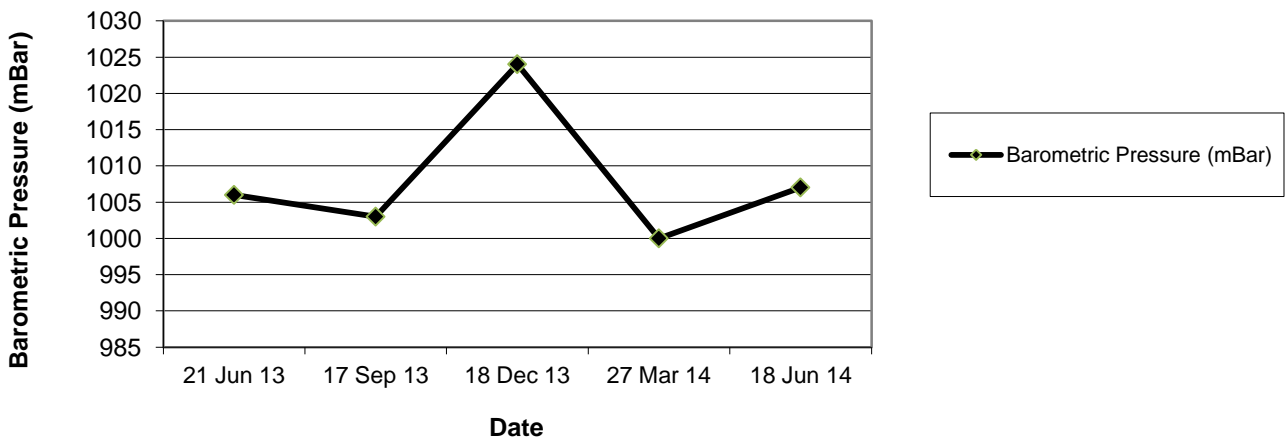
Measured Barometric Pressure (mBar) at EP1-1



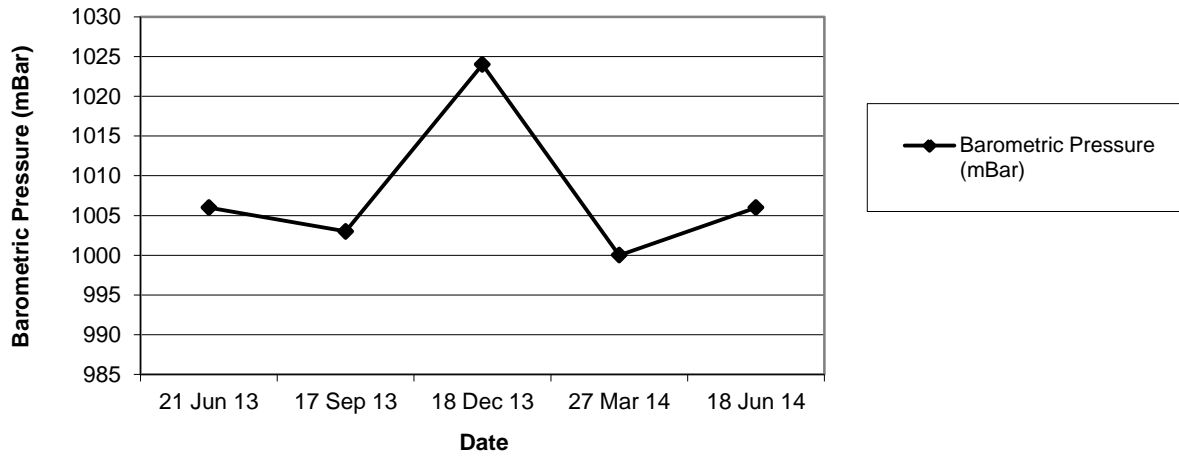
Measured Barometric Pressure (mBar) at EP1-2



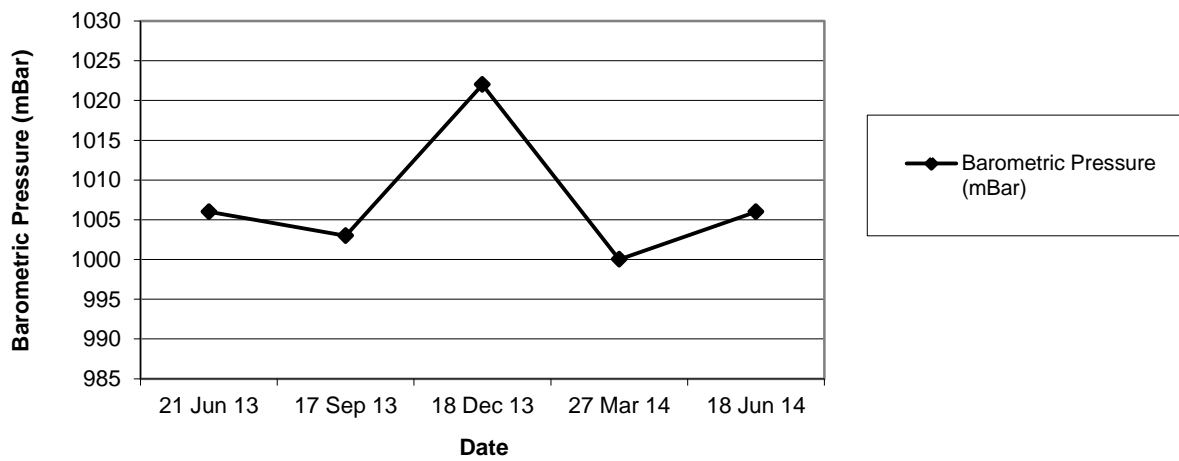
Measured Barometric Pressure (mBar) at EP1-3



Measured Barometric Pressure (mBar) at EP2-1



Measured Barometric Pressure (mBar) at EP2-2



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## APPENDIX 6

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### Tenant-specific Audit Checklists for the Reporting Quarter

## **APPENDIX 6-1**

### **Tenant-specific Audit Checklists for the Reporting Quarter**

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Champway Technology Co Ltd

### Audit Details

|                             |                                          |                                                  |                                                                 |
|-----------------------------|------------------------------------------|--------------------------------------------------|-----------------------------------------------------------------|
| <b>Tenant</b>               | Champway Technology Ltd                  |                                                  |                                                                 |
| <b>Date &amp; Time</b>      | <b>Date</b> 22 April 2014                | <b>Time</b> 10:10am                              |                                                                 |
| <b>Lot No.</b>              | EP07-03                                  |                                                  |                                                                 |
| <b>Audit Ref.</b>           | 42                                       |                                                  |                                                                 |
| <b>IEC Joint Inspection</b> | <input type="checkbox"/> Yes             | <input checked="" type="checkbox"/> No           |                                                                 |
| <b>Weather Conditions</b>   | <input checked="" type="checkbox"/> Fine | <input type="checkbox"/> Hazy                    | <input type="checkbox"/> Overcast <input type="checkbox"/> Rain |
| <b>Wind</b>                 | <input type="checkbox"/> Calm            | <input checked="" type="checkbox"/> Light Breeze | <input type="checkbox"/> Strong Wind                            |
| <b>Temperature</b>          | 26 <sup>o</sup> C                        |                                                  |                                                                 |
| <b>Humidity</b>             | <input type="checkbox"/> Low             | <input checked="" type="checkbox"/> Medium       | <input type="checkbox"/> High                                   |

### 1. General

| Description                                                 | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's Environmental Policy is documented. Tenant follows this.                                                                              |
| 1.3 Environmental Management Plan updated?                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                              |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's ERP is documented. Tenant follows this.                                                                                               |
| b. Drill / training records available?                      | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Tenant does not keep records for ERP training.                                                                                               |
| 1.5 Employee's training record available?                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Tenant keeps a training record for BPI.                                                                                                      |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's WMP is documented. Tenant follows this.                                                                                               |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                                  | N/A                                 | Remarks                                                                         |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------------------------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Licence No. WT00004430-2009 valid until 31 July 2014.                           |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Oil interceptor & grease trap.                                                  |
| If yes, facility is properly maintained and function normally?                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                 |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                                     |                                     |                                                                                 |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | As per the discharge licence, self-monitoring shall be performed when required. |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                 |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                 |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                 |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                 |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                 |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                 |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | See new observation #1                                                          |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                 |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                               |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                                     |                                     |                                     |                                                                                                                                       |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                       |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed.                                                                              |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No contaminated water.                                                                                                                |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Oil replacement (of the heat transmission system) is carried out off-site when needed. This may be needed once every ten years or so. |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                       |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                       |
| c. Collected by licensed collector?                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                       |
| <b>Cargo Handling</b>                                                                                                                          |                                     |                                     |                                     |                                                                                                                                       |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                       |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                       |

### 3. Air Quality

| Description                                                                                                                             | Yes                                 | No                       | N/A                                 | Remarks                                                                                                                                                                                                                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3.1 a. Valid Specified Process License for all specified process available?                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | SP No. L-25-017 (1).                                                                                                                                                                                                                                        |
| b. SP License conditions / monitoring requirements met?                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                                             |
| <b>Odour</b>                                                                                                                            |                                     |                          |                                     |                                                                                                                                                                                                                                                             |
| 3.2 a. Any odour detected?                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Yes but the odour was relatively minor on site.                                                                                                                                                                                                             |
| b. If yes, can the source be identified?                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | From the gaps in the cover of the Surplus Water with Dregs Storage Tank; the Oil/Water Mixture Storage Tanks during cleaning or transfer of oil to the oil separators; the grease trap waste storage tank; uncovered oil buckets; and oil stains on ground. |
| c. Odorous materials are covered?                                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                                             |
| d. If odour control system is installed, is it operating normally?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                                             |
| 3.3 All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No dusty materials were found to be used on-site.                                                                                                                                                                                                           |
| <b>Dust Monitoring</b>                                                                                                                  |                                     |                          |                                     |                                                                                                                                                                                                                                                             |
| 3.4 a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required according to the PRC.                                                                                                                                                                                                                          |
| b. Monitoring frequency met the requirement?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                                             |
| c. Any exceedance?                                                                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                                             |
| d. If yes, follow-up action taken?                                                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                                             |
| 3.5 Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                                             |
| 3.6 Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                                             |



### 3. Air Quality (continued)

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                                               |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-----------------------------------------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site.                                |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                       |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          | <input checked="" type="checkbox"/> |                                                                       |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                       |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Used by all diesel vehicles, fork-lift truck and emergency generator. |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                                  | N/A                                 | Remarks                                                                             |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Registration No. 6311-421-C3617-01 for spent lubricating oil and spent mineral oil. |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | 2-3 times a week.                                                                   |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                     |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                                     |                                     |                                                                                     |
| 4.7 a. Stored in suitable container?                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| b. Container properly closed or sealed?                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No spillage.                                                                        |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                     |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                                     |                                     |                                                                                     |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| b. Label is in proper dimension and bilingual?                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| c. Information is accurate and sufficient?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                  | Yes                      | No                       | N/A                                 | Remarks          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|-------------------------------------|------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                             |                          |                          |                                     |                  |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not observed.    |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| c. Containers kept in receptacle of suitable material and construction (if quantity <50L) or drip trays capable of storing 110% of the volume of largest (if quantity >50L)? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| f. Adequacy of area ventilation?                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| g. Outdoors storage area should be covered?                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No collection.   |
| <b>Storage of Liquid Waste</b>                                                                                                                                               |                          |                          |                                     |                  |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No bulk storage. |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |

**5. Other Issues**

|                                                           | Description                                                                                            | Yes                                 | No                       | N/A                                 | Remarks                                                                                                                                                                                                     |
|-----------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landfill Gas Hazard (within LFG Consultation Zone)</b> |                                                                                                        |                                     |                          |                                     |                                                                                                                                                                                                             |
| 5.1                                                       | a. Workers and visitors alerted to possible LGF hazards?                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Outside the LFG Consultation Zone.                                                                                                                                                                          |
|                                                           | b. Smoking and open fires prohibited?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                             |
| 5.2                                                       | Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                             |
| 5.3                                                       | Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
| 5.4                                                       | Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
| 5.5                                                       | Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No monitoring equipment.                                                                                                                                                                                    |
| <b>Dangerous Goods</b>                                    |                                                                                                        |                                     |                          |                                     |                                                                                                                                                                                                             |
| 5.6                                                       | a. Valid license for manufacturing / storing dangerous goods?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | DG licences for storing methanol, sulphuric acid and fatty acid methyl esters (FAME) obtained (Nos. 021229, 021228 & 021227, and 021225 & 021226). DG licence for manufacturing FAME obtained (No. 001456). |
|                                                           | b. Storage area in compliance with the approved plan?                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
|                                                           | c. Storage area(s) has been securely locked?                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
|                                                           | d. Total storage capacity in compliance with the relevant statutory requirement?                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
|                                                           | e. Proper Labelling?                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
|                                                           | f. Dangerous goods properly packaged?                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
| 5.7                                                       | Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |




**Action Items from This Audit**

| No. | Action                                          | Expected By |
|-----|-------------------------------------------------|-------------|
| 1.  | No critical environmental issues were observed. | Nil         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit Dated 27 March 2014 | Status |
|-----|---------------------------------------------------|--------|
|     | Nil                                               |        |

**Audit Summary and Sign-off**

|                     | ET                                                                                  | IEC*             | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd | Champway                                                                             | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Winnie MA</b>                                                                    | -                | <b>Kenji WONG</b>                                                                    | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Site Auditor                                                                     | IEC              | Operation Director                                                                   | Park Manager                                                                          |
| <b>Signature</b>    |  | -                |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

### Audit Details

|                             |                               |                                                  |                                                                            |
|-----------------------------|-------------------------------|--------------------------------------------------|----------------------------------------------------------------------------|
| <b>Tenant</b>               | Champway Technology Ltd       |                                                  |                                                                            |
| <b>Date &amp; Time</b>      | <b>Date</b> 21 May 2014       | <b>Time</b> 10:10am                              |                                                                            |
| <b>Lot No.</b>              | EP07-03                       |                                                  |                                                                            |
| <b>Audit Ref.</b>           | 43                            |                                                  |                                                                            |
| <b>IEC Joint Inspection</b> | <input type="checkbox"/> Yes  | <input checked="" type="checkbox"/> No           |                                                                            |
| <b>Weather Conditions</b>   | <input type="checkbox"/> Fine | <input type="checkbox"/> Hazy                    | <input type="checkbox"/> Overcast <input checked="" type="checkbox"/> Rain |
| <b>Wind</b>                 | <input type="checkbox"/> Calm | <input checked="" type="checkbox"/> Light Breeze | <input type="checkbox"/> Strong Wind                                       |
| <b>Temperature</b>          | 28 <sup>o</sup> C             |                                                  |                                                                            |
| <b>Humidity</b>             | <input type="checkbox"/> Low  | <input type="checkbox"/> Medium                  | <input checked="" type="checkbox"/> High                                   |

### 1. General

| Description                                                 | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's Environmental Policy is documented. Tenant follows this.                                                                              |
| 1.3 Environmental Management Plan updated?                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                              |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's ERP is documented. Tenant follows this.                                                                                               |
| b. Drill / training records available?                      | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Tenant does not keep records for ERP training.                                                                                               |
| 1.5 Employee's training record available?                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Tenant keeps a training record for BPI.                                                                                                      |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's WMP is documented. Tenant follows this.                                                                                               |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                                  | N/A                                 | Remarks                                                                         |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------------------------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Licence No. WT00004430-2009 valid until 31 July 2014.                           |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Oil interceptor & grease trap.                                                  |
| If yes, facility is properly maintained and function normally?                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                 |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                                     |                                     |                                                                                 |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | As per the discharge licence, self-monitoring shall be performed when required. |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                 |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                 |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                 |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                 |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                 |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                 |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | See new observation #1                                                          |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                 |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                               |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                                     |                                     |                                     |                                                                                                                                       |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                       |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed.                                                                              |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No contaminated water.                                                                                                                |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Oil replacement (of the heat transmission system) is carried out off-site when needed. This may be needed once every ten years or so. |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                       |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                       |
| c. Collected by licensed collector?                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                       |
| <b>Cargo Handling</b>                                                                                                                          |                                     |                                     |                                     |                                                                                                                                       |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                       |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                       |



### 3. Air Quality

| Description                                                                                                                             | Yes                                 | No                       | N/A                                 | Remarks                                                                                                                                                                                                                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3.1 a. Valid Specified Process License for all specified process available?                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | SP No. L-25-017 (1).                                                                                                                                                                                                                                        |
| b. SP License conditions / monitoring requirements met?                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                                             |
| <b>Odour</b>                                                                                                                            |                                     |                          |                                     |                                                                                                                                                                                                                                                             |
| 3.2 a. Any odour detected?                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Yes but the odour was relatively minor on site.                                                                                                                                                                                                             |
| b. If yes, can the source be identified?                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | From the gaps in the cover of the Surplus Water with Dregs Storage Tank; the Oil/Water Mixture Storage Tanks during cleaning or transfer of oil to the oil separators; the grease trap waste storage tank; uncovered oil buckets; and oil stains on ground. |
| c. Odorous materials are covered?                                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                                             |
| d. If odour control system is installed, is it operating normally?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                                             |
| 3.3 All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No dusty materials were found to be used on-site.                                                                                                                                                                                                           |
| <b>Dust Monitoring</b>                                                                                                                  |                                     |                          |                                     |                                                                                                                                                                                                                                                             |
| 3.4 a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required according to the PRC.                                                                                                                                                                                                                          |
| b. Monitoring frequency met the requirement?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                                             |
| c. Any exceedance?                                                                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                                             |
| d. If yes, follow-up action taken?                                                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                                             |
| 3.5 Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                                             |
| 3.6 Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                                             |

### 3. Air Quality (continued)

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                                               |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-----------------------------------------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site.                                |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                       |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          |                                     |                                                                       |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                       |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Used by all diesel vehicles, fork-lift truck and emergency generator. |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                                  | N/A                                 | Remarks                                                                             |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Registration No. 6311-421-C3617-01 for spent lubricating oil and spent mineral oil. |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | 2-3 times a week.                                                                   |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                     |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                                     |                                     |                                                                                     |
| 4.7 a. Stored in suitable container?                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| b. Container properly closed or sealed?                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No spillage.                                                                        |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                     |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                                     |                                     |                                                                                     |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| b. Label is in proper dimension and bilingual?                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| c. Information is accurate and sufficient?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                  | Yes                      | No                       | N/A                                 | Remarks          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|-------------------------------------|------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                             |                          |                          |                                     |                  |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not observed.    |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| c. Containers kept in receptacle of suitable material and construction (if quantity <50L) or drip trays capable of storing 110% of the volume of largest (if quantity >50L)? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| f. Adequacy of area ventilation?                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| g. Outdoors storage area should be covered?                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No collection.   |
| <b>Storage of Liquid Waste</b>                                                                                                                                               |                          |                          |                                     |                  |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No bulk storage. |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                                                                                                                                                     |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landfill Gas Hazard (within LFG Consultation Zone)</b>                                                  |                                     |                          |                                     |                                                                                                                                                                                                             |
| 5.1 a. Workers and visitors alerted to possible LGF hazards?                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Outside the LFG Consultation Zone.                                                                                                                                                                          |
| b. Smoking and open fires prohibited?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                             |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                             |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No monitoring equipment.                                                                                                                                                                                    |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                                                                                                                                                                                             |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | DG licences for storing methanol, sulphuric acid and fatty acid methyl esters (FAME) obtained (Nos. 021229, 021228 & 021227, and 021225 & 021226). DG licence for manufacturing FAME obtained (No. 001456). |
| b. Storage area in compliance with the approved plan?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
| c. Storage area(s) has been securely locked?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
| e. Proper Labelling?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
| f. Dangerous goods properly packaged?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |


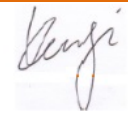

**Action Items from This Audit**

| No. | Action                                          | Expected By |
|-----|-------------------------------------------------|-------------|
| 1.  | No critical environmental issues were observed. | Nil         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit Dated 22 April 2014 | Status |
|-----|---------------------------------------------------|--------|
|     | Nil                                               |        |

**Audit Summary and Sign-off**

|                     | ET                                                                                  | IEC*             | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd | Champway                                                                             | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Winnie MA</b>                                                                    | -                | <b>Kenji WONG</b>                                                                    | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Site Auditor                                                                     | IEC              | Operation Director                                                                   | Park Manager                                                                          |
| <b>Signature</b>    |  | -                |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

### Audit Details

|                             |                                          |                                                  |                                                                 |
|-----------------------------|------------------------------------------|--------------------------------------------------|-----------------------------------------------------------------|
| <b>Tenant</b>               | Champway Technology Ltd                  |                                                  |                                                                 |
| <b>Date &amp; Time</b>      | <b>Date</b> 18 June 2014                 | <b>Time</b> 10:10am                              |                                                                 |
| <b>Lot No.</b>              | EP07-03                                  |                                                  |                                                                 |
| <b>Audit Ref.</b>           | 44                                       |                                                  |                                                                 |
| <b>IEC Joint Inspection</b> | <input checked="" type="checkbox"/> Yes  | <input type="checkbox"/> No                      |                                                                 |
| <b>Weather Conditions</b>   | <input checked="" type="checkbox"/> Fine | <input type="checkbox"/> Hazy                    | <input type="checkbox"/> Overcast <input type="checkbox"/> Rain |
| <b>Wind</b>                 | <input type="checkbox"/> Calm            | <input checked="" type="checkbox"/> Light Breeze | <input type="checkbox"/> Strong Wind                            |
| <b>Temperature</b>          | 32°C                                     |                                                  |                                                                 |
| <b>Humidity</b>             | <input type="checkbox"/> Low             | <input checked="" type="checkbox"/> Medium       | <input type="checkbox"/> High                                   |

### 1. General

| Description                                                 | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's Environmental Policy is documented. Tenant follows this.                                                                              |
| 1.3 Environmental Management Plan updated?                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                              |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's ERP is documented. Tenant follows this.                                                                                               |
| b. Drill / training records available?                      | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Tenant does not keep records for ERP training.                                                                                               |
| 1.5 Employee's training record available?                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Tenant keeps a training record for BPI.                                                                                                      |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's WMP is documented. Tenant follows this.                                                                                               |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                                  | N/A                                 | Remarks                                                                         |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------------------------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Licence No. WT00004430-2009 valid until 31 July 2014.                           |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Oil interceptor & grease trap.                                                  |
| If yes, facility is properly maintained and function normally?                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                 |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                                     |                                     |                                                                                 |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | As per the discharge licence, self-monitoring shall be performed when required. |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                 |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                 |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                 |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | See Action #1                                                                   |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                 |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                 |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                 |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                 |



## 2. Water Quality (continued)

| Description                                                                                                                                    | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                               |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                                     |                                     |                                     |                                                                                                                                       |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                       |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed.                                                                              |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No contaminated water.                                                                                                                |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Oil replacement (of the heat transmission system) is carried out off-site when needed. This may be needed once every ten years or so. |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                       |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                       |
| c. Collected by licensed collector?                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                       |
| <b>Cargo Handling</b>                                                                                                                          |                                     |                                     |                                     |                                                                                                                                       |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                       |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                       |

### 3. Air Quality

| Description                                                                                                                             | Yes                                 | No                       | N/A                                 | Remarks                                                                                                                                                                                                                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3.1 a. Valid Specified Process License for all specified process available?                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | SP No. L-25-017 (1).                                                                                                                                                                                                                                        |
| b. SP License conditions / monitoring requirements met?                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                                             |
| <b>Odour</b>                                                                                                                            |                                     |                          |                                     |                                                                                                                                                                                                                                                             |
| 3.2 a. Any odour detected?                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Yes but the odour was relatively minor on site.                                                                                                                                                                                                             |
| b. If yes, can the source be identified?                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | From the gaps in the cover of the Surplus Water with Dregs Storage Tank; the Oil/Water Mixture Storage Tanks during cleaning or transfer of oil to the oil separators; the grease trap waste storage tank; uncovered oil buckets; and oil stains on ground. |
| c. Odorous materials are covered?                                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                                             |
| d. If odour control system is installed, is it operating normally?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                                             |
| 3.3 All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No dusty materials were found to be used on-site.                                                                                                                                                                                                           |
| <b>Dust Monitoring</b>                                                                                                                  |                                     |                          |                                     |                                                                                                                                                                                                                                                             |
| 3.4 a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required according to the PRC.                                                                                                                                                                                                                          |
| b. Monitoring frequency met the requirement?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                                             |
| c. Any exceedance?                                                                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                                             |
| d. If yes, follow-up action taken?                                                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                                             |
| 3.5 Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                                             |
| 3.6 Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                                             |

### 3. Air Quality (continued)

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                                               |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-----------------------------------------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | There is no chimney installed on-site.                                |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                       |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          | <input checked="" type="checkbox"/> |                                                                       |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                       |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                       |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Used by all diesel vehicles, fork-lift truck and emergency generator. |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                                  | N/A                                 | Remarks                                                                             |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Registration No. 6311-421-C3617-01 for spent lubricating oil and spent mineral oil. |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | 2-3 times a week.                                                                   |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                     |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                                     |                                     |                                                                                     |
| 4.7 a. Stored in suitable container?                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| b. Container properly closed or sealed?                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | See Action # 2.                                                                     |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                     |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                                     |                                     |                                                                                     |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| b. Label is in proper dimension and bilingual?                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |
| c. Information is accurate and sufficient?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                     |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                  | Yes                      | No                       | N/A                                 | Remarks          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|-------------------------------------|------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                             |                          |                          |                                     |                  |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not observed.    |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| c. Containers kept in receptacle of suitable material and construction (if quantity <50L) or drip trays capable of storing 110% of the volume of largest (if quantity >50L)? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| f. Adequacy of area ventilation?                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| g. Outdoors storage area should be covered?                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No collection.   |
| <b>Storage of Liquid Waste</b>                                                                                                                                               |                          |                          |                                     |                  |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No bulk storage. |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                  |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                                                                                                                                                     |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landfill Gas Hazard (within LFG Consultation Zone)</b>                                                  |                                     |                          |                                     |                                                                                                                                                                                                             |
| 5.1 a. Workers and visitors alerted to possible LGF hazards?                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Outside the LFG Consultation Zone.                                                                                                                                                                          |
| b. Smoking and open fires prohibited?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                             |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                             |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No monitoring equipment.                                                                                                                                                                                    |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                                                                                                                                                                                             |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | DG licences for storing methanol, sulphuric acid and fatty acid methyl esters (FAME) obtained (Nos. 021229, 021228 & 021227, and 021225 & 021226). DG licence for manufacturing FAME obtained (No. 001456). |
| b. Storage area in compliance with the approved plan?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
| c. Storage area(s) has been securely locked?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
| e. Proper Labelling?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
| f. Dangerous goods properly packaged?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                             |

**Action Items from This Audit**

| No. | Action | Expected By |
|-----|--------|-------------|
|-----|--------|-------------|

- |    |                                                                                                                                                                                                                |             |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| 1. | Gaps between concrete blocks along the surface channels were observed that oily contaminated runoff (if any) directly discharging into the channel cannot be prevented. The tenant agreed to seal up the gaps. | 4 July 2014 |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|



- |    |                                                                                                                                                                        |             |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| 2. | The soil of the storage area was observed to be oily contaminated. The tenant shall clean up the oily contaminated soil and properly dispose of the contaminated soil. | 4 July 2014 |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|



**Follow-up from Previous Audits**

**No. Follow-up from Previous Audit Dated 21 May 2014**

**Status**

Nil

**Audit Summary and Sign-off**

The oily contaminated soil should be properly cleared and disposed of, and the gaps of the concrete blocks along the surface channel at the oil storage area should be sealed up.

|                     | ET                                                                                 | IEC*                                                                                | Tenant                                                                              | Operator                                                                             |
|---------------------|------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                      | Atkins China Ltd                                                                    | Champway                                                                            | Serco Guardian JV                                                                    |
| <b>Signed By</b>    | <b>Antony WONG</b>                                                                 | <b>Keith CHAU</b>                                                                   | <b>Kenji WONG</b>                                                                   | <b>Mabel YUNG</b>                                                                    |
| <b>Role</b>         | ET Leader                                                                          | IEC's Representative                                                                | Operation Director                                                                  | Park Manager                                                                         |
| <b>Signature</b>    |  |  |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection



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## **APPENDIX 6-2**

### **Tenant-specific Audit Checklists for the Reporting Quarter**

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Shiu Wing Steel Ltd

### Audit Details

|                             |                                          |                                                  |                                                                 |
|-----------------------------|------------------------------------------|--------------------------------------------------|-----------------------------------------------------------------|
| <b>Tenant</b>               | Shiu Wing Steel Limited                  |                                                  |                                                                 |
| <b>Date &amp; Time</b>      | <b>Date</b> 22 April 2014                | <b>Time</b> 9:30am                               |                                                                 |
| <b>Lot No.</b>              | EP08-03                                  |                                                  |                                                                 |
| <b>Audit Ref.</b>           | 43                                       |                                                  |                                                                 |
| <b>IEC Joint Inspection</b> | <input type="checkbox"/> Yes             | <input checked="" type="checkbox"/> No           |                                                                 |
| <b>Weather Conditions</b>   | <input checked="" type="checkbox"/> Fine | <input type="checkbox"/> Hazy                    | <input type="checkbox"/> Overcast <input type="checkbox"/> Rain |
| <b>Wind</b>                 | <input type="checkbox"/> Calm            | <input checked="" type="checkbox"/> Light Breeze | <input type="checkbox"/> Strong Wind                            |
| <b>Temperature</b>          | 26 °C                                    |                                                  |                                                                 |
| <b>Humidity</b>             | <input type="checkbox"/> Low             | <input type="checkbox"/> Medium                  | <input type="checkbox"/> High                                   |

### 1. General

| Description                                                 | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | The Tenant is going to integrate the Environmental Policy into their Safety Operations Manual soon.                                          |
| 1.3 Environmental Management Plan updated?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | The Tenant is going to integrate the EMP into their Safety Operations Manual soon.                                                           |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The ERP has been included in the Tenant's Safety Operations Manual.                                                                          |
| b. Drill / training records available?                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant advised the training records were kept at their HR department.                                                                    |
| 1.5 Employee's training record available?                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant keeps a training record for BPI.                                                                                                  |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's WMP is documented.                                                                                                                    |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No wastewater is generated from the recycling process. |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| If yes, facility is properly maintained and function normally?                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                          |                                     |                                                        |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                      | No                                  | N/A                                 | Remarks                                                                            |
|------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|-------------------------------------|------------------------------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                          |                                     |                                     |                                                                                    |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | The risk of contamination for the recycling process is low.                        |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed.                           |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No contaminated water was found.                                                   |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No equipment oil and lubrication replacement were performed inside the tenant lot. |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                                                      |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                    |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                    |
| <b>Cargo Handling</b>                                                                                                                          |                          |                                     |                                     |                                                                                    |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                                                      |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                    |

**3. Air Quality**

|                        | Description                                                                                                                         | Yes                                 | No                                  | N/A                                 | Remarks       |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------|
| 3.1                    | a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
|                        | b. SP License conditions / monitoring requirements met?                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| <b>Odour</b>           |                                                                                                                                     |                                     |                                     |                                     |               |
| 3.2                    | a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
|                        | b. If yes, can the source be identified?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | c. Odorous materials are covered?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | d. If odour control system is installed, is it operating normally?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.3                    | All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |
| <b>Dust Monitoring</b> |                                                                                                                                     |                                     |                                     |                                     |               |
| 3.4                    | a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | b. Monitoring frequency met the requirement?                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | c. Any exceedance?                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | d. If yes, follow-up action taken?                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.5                    | Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.6                    | Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |

**3. Air Quality (continued)**

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|----------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site. |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          | <input checked="" type="checkbox"/> |                                        |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not yet installed.                     |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not yet installed.                     |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks                                                           |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Registration No. 3839-421-S3054-02 for spent lubricating oil.     |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                   |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | The municipal waste is disposed of daily <i>via</i> the Operator. |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                   |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                   |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                   |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                   |
| 4.7 a. Stored in suitable container?                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No on-site storage.                                               |
| b. Container properly closed or sealed?                                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                   |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                   |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                   |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                   |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No on-site storage.                                               |
| b. Label is in proper dimension and bilingual?                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                   |
| c. Information is accurate and sufficient?                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                   |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                  | Yes                      | No                       | N/A                                 | Remarks             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|-------------------------------------|---------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                             |                          |                          |                                     |                     |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No on-site storage. |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| c. Containers kept in receptacle of suitable material and construction (if quantity <50L) or drip trays capable of storing 110% of the volume of largest (if quantity >50L)? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| f. Adequacy of area ventilation?                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| g. Outdoors storage area should be covered?                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No on-site storage. |
| <b>Storage of Liquid Waste</b>                                                                                                                                               |                          |                          |                                     |                     |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No on-site storage. |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |



**5. Other Issues**

| Description                                                                                                | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                                       |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landfill Gas Hazard (within LFG Consultation Zone)</b>                                                  |                                     |                                     |                                     |                                                                                                                                               |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Lot is within LFG Consultation Zone. Tenant has alerted workers/visitors about possible LFG hazards. A notice is also posted at the entrance. |
| b. Smoking and open fires prohibited?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                               |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                               |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                               |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Most of the areas are covered by metal plates.                                                                                                |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No monitoring equipment.                                                                                                                      |
| <b>Dangerous Goods</b>                                                                                     |                                     |                                     |                                     |                                                                                                                                               |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Diesel storage was 400L, which is within the exempted quantity of 2,500L and so no licence is required.                                       |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                               |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                               |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                               |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                               |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                               |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                               |

**Action Items from This Audit**

| No. | Action                              | Expected by |
|-----|-------------------------------------|-------------|
| 1.  | No critical issues were identified. | N/A         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit Dated 27 March 2014 | Status |
|-----|---------------------------------------------------|--------|
| 1.  | Nil.                                              | N/A    |

**Audit Summary and Sign-off**

No critical issues were identified.

|                     | ET                                                                                  | IEC*             | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd | Shiu Wing                                                                            | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Winnie MA</b>                                                                    | -                | <b>Alex WAI</b>                                                                      | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Site Auditor                                                                     | IEC              | Manager                                                                              | Park Manager                                                                          |
| <b>Signature</b>    |  | -                |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

### Audit Details

|                             |                               |                                                  |                                                                            |
|-----------------------------|-------------------------------|--------------------------------------------------|----------------------------------------------------------------------------|
| <b>Tenant</b>               | Shiu Wing Steel Limited       |                                                  |                                                                            |
| <b>Date &amp; Time</b>      | <b>Date</b> 21 May 2014       | <b>Time</b> 9:30am                               |                                                                            |
| <b>Lot No.</b>              | EP08-03                       |                                                  |                                                                            |
| <b>Audit Ref.</b>           | 44                            |                                                  |                                                                            |
| <b>IEC Joint Inspection</b> | <input type="checkbox"/> Yes  | <input checked="" type="checkbox"/> No           |                                                                            |
| <b>Weather Conditions</b>   | <input type="checkbox"/> Fine | <input type="checkbox"/> Hazy                    | <input type="checkbox"/> Overcast <input checked="" type="checkbox"/> Rain |
| <b>Wind</b>                 | <input type="checkbox"/> Calm | <input checked="" type="checkbox"/> Light Breeze | <input type="checkbox"/> Strong Wind                                       |
| <b>Temperature</b>          | 28 °C                         |                                                  |                                                                            |
| <b>Humidity</b>             | <input type="checkbox"/> Low  | <input type="checkbox"/> Medium                  | <input checked="" type="checkbox"/> High                                   |

### 1. General

| Description                                                 | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | The Tenant is going to integrate the Environmental Policy into their Safety Operations Manual soon.                                          |
| 1.3 Environmental Management Plan updated?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | The Tenant is going to integrate the EMP into their Safety Operations Manual soon.                                                           |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The ERP has been included in the Tenant's Safety Operations Manual.                                                                          |
| b. Drill / training records available?                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant advised the training records were kept at their HR department.                                                                    |
| 1.5 Employee's training record available?                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant keeps a training record for BPI.                                                                                                  |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's WMP is documented.                                                                                                                    |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No wastewater is generated from the recycling process. |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| If yes, facility is properly maintained and function normally?                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                          |                                     |                                                        |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                      | No                                  | N/A                                 | Remarks                                                                            |
|------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|-------------------------------------|------------------------------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                          |                                     |                                     |                                                                                    |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | The risk of contamination for the recycling process is low.                        |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed.                           |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No contaminated water was found.                                                   |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No equipment oil and lubrication replacement were performed inside the tenant lot. |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                                                      |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                    |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                    |
| <b>Cargo Handling</b>                                                                                                                          |                          |                                     |                                     |                                                                                    |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                                                      |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                    |

**3. Air Quality**

|                        | Description                                                                                                                         | Yes                                 | No                                  | N/A                                 | Remarks       |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------|
| 3.1                    | a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
|                        | b. SP License conditions / monitoring requirements met?                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| <b>Odour</b>           |                                                                                                                                     |                                     |                                     |                                     |               |
| 3.2                    | a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
|                        | b. If yes, can the source be identified?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | c. Odorous materials are covered?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | d. If odour control system is installed, is it operating normally?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.3                    | All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |
| <b>Dust Monitoring</b> |                                                                                                                                     |                                     |                                     |                                     |               |
| 3.4                    | a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | b. Monitoring frequency met the requirement?                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | c. Any exceedance?                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | d. If yes, follow-up action taken?                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.5                    | Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.6                    | Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |

**3. Air Quality (continued)**

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|----------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site. |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          | <input checked="" type="checkbox"/> |                                        |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not yet installed.                     |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not yet installed.                     |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks                                                           |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Registration No. 3839-421-S3054-02 for spent lubricating oil.     |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                   |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | The municipal waste is disposed of daily <i>via</i> the Operator. |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                   |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                   |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                   |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                   |
| 4.7 a. Stored in suitable container?                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No on-site storage.                                               |
| b. Container properly closed or sealed?                                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                   |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                   |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                   |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                   |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No on-site storage.                                               |
| b. Label is in proper dimension and bilingual?                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                   |
| c. Information is accurate and sufficient?                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                   |



**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                  | Yes                      | No                       | N/A                                 | Remarks             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|-------------------------------------|---------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                             |                          |                          |                                     |                     |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No on-site storage. |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| c. Containers kept in receptacle of suitable material and construction (if quantity <50L) or drip trays capable of storing 110% of the volume of largest (if quantity >50L)? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| f. Adequacy of area ventilation?                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| g. Outdoors storage area should be covered?                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No on-site storage. |
| <b>Storage of Liquid Waste</b>                                                                                                                                               |                          |                          |                                     |                     |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No on-site storage. |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                                       |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landfill Gas Hazard (within LFG Consultation Zone)</b>                                                  |                                     |                                     |                                     |                                                                                                                                               |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Lot is within LFG Consultation Zone. Tenant has alerted workers/visitors about possible LFG hazards. A notice is also posted at the entrance. |
| b. Smoking and open fires prohibited?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                               |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                               |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                               |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Most of the areas are covered by metal plates.                                                                                                |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No monitoring equipment.                                                                                                                      |
| <b>Dangerous Goods</b>                                                                                     |                                     |                                     |                                     |                                                                                                                                               |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Diesel storage was 400L, which is within the exempted quantity of 2,500L and so no licence is required.                                       |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                               |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                               |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                               |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                               |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                               |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                               |

**Action Items from This Audit**

| No. | Action                              | Expected by |
|-----|-------------------------------------|-------------|
| 1.  | No critical issues were identified. | N/A         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit Dated 22 April 2014 | Status |
|-----|---------------------------------------------------|--------|
| 1.  | Nil.                                              | N/A    |

**Audit Summary and Sign-off**

No critical issues were identified.

|                     | ET                                                                                  | IEC*             | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd | Shiu Wing                                                                            | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Winnie MA</b>                                                                    | -                | <b>Alex WAI</b>                                                                      | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Site Auditor                                                                     | IEC              | Manager                                                                              | Park Manager                                                                          |
| <b>Signature</b>    |  | -                |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

### Audit Details

|                             |                                          |                                                  |                                                                 |
|-----------------------------|------------------------------------------|--------------------------------------------------|-----------------------------------------------------------------|
| <b>Tenant</b>               | Shiu Wing Steel Limited                  |                                                  |                                                                 |
| <b>Date &amp; Time</b>      | <b>Date</b> 18 June 2014                 | <b>Time</b> 9:30am                               |                                                                 |
| <b>Lot No.</b>              | EP08-03                                  |                                                  |                                                                 |
| <b>Audit Ref.</b>           | 45                                       |                                                  |                                                                 |
| <b>IEC Joint Inspection</b> | <input checked="" type="checkbox"/> Yes  | <input type="checkbox"/> No                      |                                                                 |
| <b>Weather Conditions</b>   | <input checked="" type="checkbox"/> Fine | <input type="checkbox"/> Hazy                    | <input type="checkbox"/> Overcast <input type="checkbox"/> Rain |
| <b>Wind</b>                 | <input type="checkbox"/> Calm            | <input checked="" type="checkbox"/> Light Breeze | <input type="checkbox"/> Strong Wind                            |
| <b>Temperature</b>          | 32 °C                                    |                                                  |                                                                 |
| <b>Humidity</b>             | <input type="checkbox"/> Low             | <input checked="" type="checkbox"/> Medium       | <input type="checkbox"/> High                                   |

### 1. General

| Description                                                 | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | The Tenant is going to integrate the Environmental Policy into their Safety Operations Manual soon.                                          |
| 1.3 Environmental Management Plan updated?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | The Tenant is going to integrate the EMP into their Safety Operations Manual soon.                                                           |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The ERP has been included in the Tenant's Safety Operations Manual.                                                                          |
| b. Drill / training records available?                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant advised the training records were kept at their HR department.                                                                    |
| 1.5 Employee's training record available?                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant keeps a training record for BPI.                                                                                                  |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's WMP is documented.                                                                                                                    |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No wastewater is generated from the recycling process. |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| If yes, facility is properly maintained and function normally?                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                          |                                     |                                                        |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                      | No                                  | N/A                                 | Remarks                                                                            |
|------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|-------------------------------------|------------------------------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                          |                                     |                                     |                                                                                    |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | The risk of contamination for the recycling process is low.                        |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed.                           |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No contaminated water was found.                                                   |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No equipment oil and lubrication replacement were performed inside the tenant lot. |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                                                      |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                    |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                    |
| <b>Cargo Handling</b>                                                                                                                          |                          |                                     |                                     |                                                                                    |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                                                      |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                    |

**3. Air Quality**

|                        | Description                                                                                                                         | Yes                                 | No                                  | N/A                                 | Remarks       |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------|
| 3.1                    | a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
|                        | b. SP License conditions / monitoring requirements met?                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| <b>Odour</b>           |                                                                                                                                     |                                     |                                     |                                     |               |
| 3.2                    | a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
|                        | b. If yes, can the source be identified?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | c. Odorous materials are covered?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | d. If odour control system is installed, is it operating normally?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.3                    | All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |
| <b>Dust Monitoring</b> |                                                                                                                                     |                                     |                                     |                                     |               |
| 3.4                    | a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | b. Monitoring frequency met the requirement?                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | c. Any exceedance?                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | d. If yes, follow-up action taken?                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.5                    | Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.6                    | Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |

**3. Air Quality (continued)**

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|----------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site. |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          | <input checked="" type="checkbox"/> |                                        |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not yet installed.                     |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not yet installed.                     |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |



#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks                                                           |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Registration No. 3839-421-S3054-02 for spent lubricating oil.     |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                   |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | The municipal waste is disposed of daily <i>via</i> the Operator. |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                   |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                   |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                   |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                   |
| 4.7 a. Stored in suitable container?                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No on-site storage.                                               |
| b. Container properly closed or sealed?                                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                   |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                   |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                   |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                   |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No on-site storage.                                               |
| b. Label is in proper dimension and bilingual?                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                   |
| c. Information is accurate and sufficient?                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                   |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                  | Yes                      | No                       | N/A                                 | Remarks             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|-------------------------------------|---------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                             |                          |                          |                                     |                     |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No on-site storage. |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| c. Containers kept in receptacle of suitable material and construction (if quantity <50L) or drip trays capable of storing 110% of the volume of largest (if quantity >50L)? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| f. Adequacy of area ventilation?                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| g. Outdoors storage area should be covered?                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No on-site storage. |
| <b>Storage of Liquid Waste</b>                                                                                                                                               |                          |                          |                                     |                     |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No on-site storage. |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                                       |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landfill Gas Hazard (within LFG Consultation Zone)</b>                                                  |                                     |                                     |                                     |                                                                                                                                               |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Lot is within LFG Consultation Zone. Tenant has alerted workers/visitors about possible LFG hazards. A notice is also posted at the entrance. |
| b. Smoking and open fires prohibited?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                               |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                               |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                               |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Most of the areas are covered by metal plates.                                                                                                |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No monitoring equipment.                                                                                                                      |
| <b>Dangerous Goods</b>                                                                                     |                                     |                                     |                                     |                                                                                                                                               |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Diesel storage was 400L, which is within the exempted quantity of 2,500L and so no licence is required.                                       |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                               |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                               |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                               |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                               |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                               |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                               |

### Action Items from This Audit

| No. | Action                              | Expected by |
|-----|-------------------------------------|-------------|
| 1.  | No critical issues were identified. | N/A         |

### Follow-up from Previous Audits

| No. | Follow-up from Previous Audit Dated 21 May 2014 | Status |
|-----|-------------------------------------------------|--------|
| 1.  | Nil.                                            | N/A    |

### Audit Summary and Sign-off

No critical issues were identified.

|              | ET                                                                                  | IEC*                                                                                | Tenant                                                                               | Operator                                                                              |
|--------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| Organisation | SMEC Asia Ltd                                                                       | Atkins China Ltd                                                                    | Shiu Wing                                                                            | Serco Guardian JV                                                                     |
| Signed By    | Antony WONG                                                                         | Sharifah OR                                                                         | Alex WAI                                                                             | Mabel YUNG                                                                            |
| Role         | ET Leader                                                                           | IEC                                                                                 | Manager                                                                              | Park Manager                                                                          |
| Signature    |  |  |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

## **APPENDIX 6-3**

### **Tenant-specific Audit Checklists for the Reporting Quarter**

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**Hong Kong Hung Wai Wooden Board Co**

### Audit Details

**Tenant** Hong Kong Hung Wai Wooden Board Company

**Date & Time** **Date** 22 April 2014 **Time** 11:45am

**Lot No.** EP06-034

**Audit Ref.** 41

**IEC Joint Inspection**  Yes  No

**Weather Conditions**  Fine  Hazy  Overcast  Rain

**Wind**  Calm  Light Breeze  Strong Wind

**Temperature** 26<sup>o</sup>C

**Humidity**  Low  Medium  High

### 1. General

|     | Description                                             | Yes                      | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-----|---------------------------------------------------------|--------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 | EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 | Environmental Policy documented?                        | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's Environmental Policy is documented. Tenant follows this.                                                                              |
| 1.3 | Environmental Management Plan updated?                  | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                              |
| 1.4 | a. Emergency Response Plan (ERP) documented?            | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's ERP is documented. Tenant follows this.                                                                                               |
|     | b. Drill / training records available?                  | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Training has been provided but the records are not available.                                                                                |
| 1.5 | Employee's training record available?                   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Training has been provided but the records are not available.                                                                                |
| 1.6 | Any record of prosecution / complaint?                  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 | Waste Management Plan?                                  | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's WMP is documented. Tenant follows this.                                                                                               |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                                  | N/A                                 | Remarks                                                |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No wastewater is generated from the recycling process. |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                        |
| If yes, facility is properly maintained and function normally?                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                        |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                                     |                                     |                                                        |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                        |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                        |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                        |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                        |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                        |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                        |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                        |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                        |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                        |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                                 | No                                  | N/A                                 | Remarks                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                                     |                                     |                                     |                                                             |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The risk of contamination for the recycling process is low. |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed.    |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No contaminated water was observed.                         |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No oil/lubricant was observed.                              |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| <b>Cargo Handling</b>                                                                                                                          |                                     |                                     |                                     |                                                             |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |



**3. Air Quality**

|                        | Description                                                                                                                         | Yes                                 | No                                  | N/A                                 | Remarks       |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------|
| 3.1                    | a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
|                        | b. SP License conditions / monitoring requirements met?                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| <b>Odour</b>           |                                                                                                                                     |                                     |                                     |                                     |               |
| 3.2                    | a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
|                        | b. If yes, can the source be identified?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | c. Odorous materials are covered?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | d. If odour control system is installed, is it operating normally?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.3                    | All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
| <b>Dust Monitoring</b> |                                                                                                                                     |                                     |                                     |                                     |               |
| 3.4                    | a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
|                        | b. Monitoring frequency met the requirement?                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | c. Any exceedance?                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | d. If yes, follow-up action taken?                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.5                    | Enclosures are provided around the main dust-generating activities?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |
| 3.6                    | Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |

**3. Air Quality (continued)**

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |         |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |         |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          |                                     |         |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |         |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |         |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks       |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required. |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |               |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |               |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |               |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |               |
| 4.7 a. Stored in suitable container?                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| b. Container properly closed or sealed?                                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |               |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| b. Label is in proper dimension and bilingual?                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| c. Information is accurate and sufficient?                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                                                 | Yes                      | No                       | N/A                                 | Remarks |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|-------------------------------------|---------|
| <b>Storage of Chemical Waste</b>                                                                                                                                                                            |                          |                          |                                     |         |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| c. Containers kept in receptacle of suitable material and construction ( <i>if quantity &lt;50L</i> ) <u>or</u> drip trays capable of storing 110% of the volume of largest ( <i>if quantity &gt;50L</i> )? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| f. Adequacy of area ventilation?                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| g. Outdoors storage area should be covered?                                                                                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| <b>Storage of Liquid Waste</b>                                                                                                                                                                              |                          |                          |                                     |         |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                                                           | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                            |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|------------------------------------|
| <b>Landfill Gas Hazard (within LFG Consultation Zone)</b>                                                  |                                     |                          |                                     |                                    |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Outside the LFG Consultation Zone. |
| b. Smoking and open fires prohibited?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No monitoring equipment.           |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                    |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | There were no DGs stored on site.  |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |

**Action Items from This Audit**

| No. | Action                              | Expected By |
|-----|-------------------------------------|-------------|
| 1.  | No critical issues were identified. | N/A         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit Dated 27 March 2014 | Status |
|-----|---------------------------------------------------|--------|
|     | Nil                                               | Nil    |

**Audit Summary and Sign-off**

No critical issues were observed.

|                     | ET                                                                                  | IEC*             | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd | Hung Wai                                                                             | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Winnie MA</b>                                                                    | -                | <b>William WONG</b>                                                                  | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Site Auditor                                                                     | IEC              | General Manager                                                                      | Park Manager                                                                          |
| <b>Signature</b>    |  | -                |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

### Audit Details

**Tenant** Hong Kong Hung Wai Wooden Board Company

**Date & Time** **Date** 21 May 2014 **Time** 11:45am

**Lot No.** EP06-034

**Audit Ref.** 42

**IEC Joint Inspection**  Yes  No

**Weather Conditions**  Fine  Hazy  Overcast  Rain

**Wind**  Calm  Light Breeze  Strong Wind

**Temperature** 28<sup>o</sup>C

**Humidity**  Low  Medium  High

### 1. General

| Description                                                 | Yes                      | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|--------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's Environmental Policy is documented. Tenant follows this.                                                                              |
| 1.3 Environmental Management Plan updated?                  | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                              |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's ERP is documented. Tenant follows this.                                                                                               |
| b. Drill / training records available?                      | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Training has been provided but the records are not available.                                                                                |
| 1.5 Employee's training record available?                   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Training has been provided but the records are not available.                                                                                |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's WMP is documented. Tenant follows this.                                                                                               |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                                  | N/A                                 | Remarks                                                |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No wastewater is generated from the recycling process. |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                        |
| If yes, facility is properly maintained and function normally?                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                        |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                                     |                                     |                                                        |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                        |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                        |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                        |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                        |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                        |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                        |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                        |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                        |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                        |



**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                                 | No                                  | N/A                                 | Remarks                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                                     |                                     |                                     |                                                             |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The risk of contamination for the recycling process is low. |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed.    |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No contaminated water was observed.                         |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No oil/lubricant was observed.                              |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| <b>Cargo Handling</b>                                                                                                                          |                                     |                                     |                                     |                                                             |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |

**3. Air Quality**

|                        | Description                                                                                                                         | Yes                                 | No                                  | N/A                                 | Remarks       |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------|
| 3.1                    | a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
|                        | b. SP License conditions / monitoring requirements met?                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| <b>Odour</b>           |                                                                                                                                     |                                     |                                     |                                     |               |
| 3.2                    | a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
|                        | b. If yes, can the source be identified?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | c. Odorous materials are covered?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | d. If odour control system is installed, is it operating normally?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.3                    | All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
| <b>Dust Monitoring</b> |                                                                                                                                     |                                     |                                     |                                     |               |
| 3.4                    | a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
|                        | b. Monitoring frequency met the requirement?                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | c. Any exceedance?                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | d. If yes, follow-up action taken?                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.5                    | Enclosures are provided around the main dust-generating activities?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |
| 3.6                    | Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |

**3. Air Quality (continued)**

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |         |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |         |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          |                                     |         |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |         |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |         |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks       |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required. |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |               |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |               |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |               |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |               |
| 4.7 a. Stored in suitable container?                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| b. Container properly closed or sealed?                                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |               |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| b. Label is in proper dimension and bilingual?                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| c. Information is accurate and sufficient?                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                                                 | Yes                      | No                       | N/A                                 | Remarks |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|-------------------------------------|---------|
| <b>Storage of Chemical Waste</b>                                                                                                                                                                            |                          |                          |                                     |         |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| c. Containers kept in receptacle of suitable material and construction ( <i>if quantity &lt;50L</i> ) <u>or</u> drip trays capable of storing 110% of the volume of largest ( <i>if quantity &gt;50L</i> )? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| f. Adequacy of area ventilation?                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| g. Outdoors storage area should be covered?                                                                                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| <b>Storage of Liquid Waste</b>                                                                                                                                                                              |                          |                          |                                     |         |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                                                           | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                            |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|------------------------------------|
| <b>Landfill Gas Hazard (within LFG Consultation Zone)</b>                                                  |                                     |                          |                                     |                                    |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Outside the LFG Consultation Zone. |
| b. Smoking and open fires prohibited?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No monitoring equipment.           |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                    |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | There were no DGs stored on site.  |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |

**Action Items from This Audit**

| No. | Action                              | Expected By |
|-----|-------------------------------------|-------------|
| 1.  | No critical issues were identified. | N/A         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit Dated 22 April 2014 | Status |
|-----|---------------------------------------------------|--------|
|     | Nil                                               | Nil    |

**Audit Summary and Sign-off**

No critical issues were observed.

|                     | ET                                                                                  | IEC*             | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd | Hung Wai                                                                             | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Winnie MA</b>                                                                    | -                | <b>William WONG</b>                                                                  | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Site Auditor                                                                     | IEC              | General Manager                                                                      | Park Manager                                                                          |
| <b>Signature</b>    |  | -                |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

### Audit Details

**Tenant** Hong Kong Hung Wai Wooden Board Company

**Date & Time** **Date** 18 June 2014 **Time** 9:50am

**Lot No.** EP06-034

**Audit Ref.** 43

**IEC Joint Inspection**  Yes  No

**Weather Conditions**  Fine  Hazy  Overcast  Rain

**Wind**  Calm  Light Breeze  Strong Wind

**Temperature** 32<sup>o</sup>C

**Humidity**  Low  Medium  High

### 1. General

| Description                                                 | Yes                      | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|--------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's Environmental Policy is documented. Tenant follows this.                                                                              |
| 1.3 Environmental Management Plan updated?                  | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                                              |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's ERP is documented. Tenant follows this.                                                                                               |
| b. Drill / training records available?                      | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Training has been provided but the records are not available.                                                                                |
| 1.5 Employee's training record available?                   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Training has been provided but the records are not available.                                                                                |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | SGJV's WMP is documented. Tenant follows this.                                                                                               |



## 2. Water Quality

| Description                                                                                                | Yes                                 | No                                  | N/A                                 | Remarks                                                |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No wastewater is generated from the recycling process. |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                        |
| If yes, facility is properly maintained and function normally?                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                        |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                                     |                                     |                                                        |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                        |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                        |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                        |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                        |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                        |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                        |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                        |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                        |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                        |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                                 | No                                  | N/A                                 | Remarks                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                                     |                                     |                                     |                                                             |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The risk of contamination for the recycling process is low. |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed.    |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No contaminated water was observed.                         |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No oil/lubricant was observed.                              |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| <b>Cargo Handling</b>                                                                                                                          |                                     |                                     |                                     |                                                             |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |

**3. Air Quality**

|                        | Description                                                                                                                         | Yes                                 | No                                  | N/A                                 | Remarks       |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------|
| 3.1                    | a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
|                        | b. SP License conditions / monitoring requirements met?                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| <b>Odour</b>           |                                                                                                                                     |                                     |                                     |                                     |               |
| 3.2                    | a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
|                        | b. If yes, can the source be identified?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | c. Odorous materials are covered?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | d. If odour control system is installed, is it operating normally?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.3                    | All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
| <b>Dust Monitoring</b> |                                                                                                                                     |                                     |                                     |                                     |               |
| 3.4                    | a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
|                        | b. Monitoring frequency met the requirement?                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | c. Any exceedance?                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|                        | d. If yes, follow-up action taken?                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.5                    | Enclosures are provided around the main dust-generating activities?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |
| 3.6                    | Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |

**3. Air Quality (continued)**

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |         |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |         |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          |                                     |         |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |         |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |         |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks       |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required. |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |               |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |               |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |               |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |               |
| 4.7 a. Stored in suitable container?                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| b. Container properly closed or sealed?                                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |               |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| b. Label is in proper dimension and bilingual?                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |
| c. Information is accurate and sufficient?                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |               |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                                          | Yes                      | No                       | N/A                                 | Remarks |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|-------------------------------------|---------|
| <b>Storage of Chemical Waste</b>                                                                                                                                                                     |                          |                          |                                     |         |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| c. Containers kept in receptacle of suitable material and construction ( <i>if quantity &lt;50L</i> ) or drip trays capable of storing 110% of the volume of largest ( <i>if quantity &gt;50L</i> )? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| f. Adequacy of area ventilation?                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| g. Outdoors storage area should be covered?                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                                           | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| <b>Storage of Liquid Waste</b>                                                                                                                                                                       |                          |                          |                                     |         |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                            |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|------------------------------------|
| <b>Landfill Gas Hazard (within LFG Consultation Zone)</b>                                                  |                                     |                          |                                     |                                    |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Outside the LFG Consultation Zone. |
| b. Smoking and open fires prohibited?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No monitoring equipment.           |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                    |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | There were no DGs stored on site.  |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |

**Action Items from This Audit**

| No. | Action                              | Expected By |
|-----|-------------------------------------|-------------|
| 1.  | No critical issues were identified. | N/A         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit Dated 21 May 2014 | Status |
|-----|-------------------------------------------------|--------|
|     | Nil                                             | Nil    |

**Audit Summary and Sign-off**

No critical issues were observed.

|                     | ET                                                                                  | IEC*                                                                                | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd                                                                    | Hung Wai                                                                             | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Antony WONG</b>                                                                  | <b>Sharifah OR</b>                                                                  | <b>William WONG</b>                                                                  | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Leader                                                                           | IEC                                                                                 | General Manager                                                                      | Park Manager                                                                          |
| <b>Signature</b>    |  |  |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection



## **APPENDIX 6-4**

### **Tenant-specific Audit Checklists for the Reporting Quarter**

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Li Tong Group

### Audit Details

|                             |                                          |                                                  |                                                                 |
|-----------------------------|------------------------------------------|--------------------------------------------------|-----------------------------------------------------------------|
| <b>Tenant</b>               | Li Tong Group                            |                                                  |                                                                 |
| <b>Date &amp; Time</b>      | <b>Date</b> 22 April 2014                | <b>Time</b> 10:00am                              |                                                                 |
| <b>Lot No.</b>              | EP07-02                                  |                                                  |                                                                 |
| <b>Audit Ref.</b>           | 41                                       |                                                  |                                                                 |
| <b>IEC Joint Inspection</b> | <input type="checkbox"/> Yes             | <input checked="" type="checkbox"/> No           |                                                                 |
| <b>Weather Conditions</b>   | <input checked="" type="checkbox"/> Fine | <input type="checkbox"/> Hazy                    | <input type="checkbox"/> Overcast <input type="checkbox"/> Rain |
| <b>Wind</b>                 | <input type="checkbox"/> Calm            | <input checked="" type="checkbox"/> Light Breeze | <input type="checkbox"/> Strong Wind                            |
| <b>Temperature</b>          | 26 °C                                    |                                                  |                                                                 |
| <b>Humidity</b>             | <input type="checkbox"/> Low             | <input checked="" type="checkbox"/> Medium       | <input type="checkbox"/> High                                   |

### 1. General

|     | Description                                             | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-----|---------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 | EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 | Environmental Policy documented?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's Environmental Policy is documented.                                                                                             |
| 1.3 | Environmental Management Plan updated?                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's EMP is documented.                                                                                                              |
| 1.4 | a. Emergency Response Plan (ERP) documented?            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's ERP is documented.                                                                                                              |
|     | b. Drill / training records available?                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                              |
| 1.5 | Employee's training record available?                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                              |
| 1.6 | Any record of prosecution / complaint?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 | Waste Management Plan?                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's WMP is documented.                                                                                                              |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                         |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Licence No. WT00007957-2010 valid until 31 Dec 2015.                            |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required for domestic wastewater.                                           |
| If yes, facility is properly maintained and function normally?                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | A chemical/container toilet is maintained on a monthly basis.                   |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                          |                                     |                                                                                 |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | As per the discharge licence, self-monitoring shall be performed when required. |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                                 | No                                  | N/A                                 | Remarks                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                                     |                                     |                                     |                                                             |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The risk of contamination for the recycling process is low. |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed.    |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No contaminated water was found.                            |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| <b>Cargo Handling</b>                                                                                                                          |                                     |                                     |                                     |                                                             |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |

**3. Air Quality**

|     | Description                                                                                                                         | Yes                                 | No                                  | N/A                                 | Remarks       |
|-----|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------|
| 3.1 | a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
|     | b. SP License conditions / monitoring requirements met?                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | <b>Odour</b>                                                                                                                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
| 3.2 | a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
|     | b. If yes, can the source be identified?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | c. Odorous materials are covered?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | d. If odour control system is installed, is it operating normally?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.3 | All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | <b>Dust Monitoring</b>                                                                                                              | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
| 3.4 | a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | b. Monitoring frequency met the requirement?                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | c. Any exceedance?                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | d. If yes, follow-up action taken?                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.5 | Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.6 | Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |

### 3. Air Quality (continued)

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|----------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site. |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          |                                     |                                        |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required.                          |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks                                                                                                                                           |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Registration No. 3840-421-L2676-01 for various types of chemical waste.                                                                           |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | MSW is disposed of daily via the Operator, whereas the chemical waste is disposed of once or twice per month depending on the quantity generated. |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Recyclable materials were passed to other recyclers.                                                                                              |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                   |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                                                                                                   |
| 4.7 a. Stored in suitable container?                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |
| b. Container properly closed or sealed?                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No spillage.                                                                                                                                      |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                   |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                                                                                                   |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |
| b. Label is in proper dimension and bilingual?                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |
| c. Information is accurate and sufficient?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |

#### 4. Waste / Chemical Management (continued)

| Description                                                                                                                                                                  | Yes                                 | No                       | N/A                                 | Remarks                                                                                                             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                             |                                     |                          |                                     |                                                                                                                     |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| c. Containers kept in receptacle of suitable material and construction (if quantity <50L) or drip trays capable of storing 110% of the volume of largest (if quantity >50L)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| f. Adequacy of area ventilation?                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| g. Outdoors storage area should be covered?                                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Chemical waste was stored indoor.                                                                                   |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | The Tenant itself is a licensed chemical waste collector (Licence No.: 3810-421-L2676-OS) for CRT and LCD monitors. |
| <b>Storage of Liquid Waste</b>                                                                                                                                               |                                     |                          |                                     |                                                                                                                     |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |



**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                            |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|------------------------------------|
| <b>Landfill Gas Hazard (within LFG Consultation Zone)</b>                                                  |                                     |                          |                                     |                                    |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Outside the LFG Consultation Zone. |
| b. Smoking and open fires prohibited?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No monitoring equipment.           |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                    |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | There were no DGs stored on site.  |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |

**Action Items from This Audit**

| No. | Action                                        | Expected By |
|-----|-----------------------------------------------|-------------|
| 1.  | No critical environmental issue was observed. | Nil         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit Dated 27 March 2014 | Status |
|-----|---------------------------------------------------|--------|
| 1.  | Nil                                               | N/A    |

**Audit Summary and Sign-off**

No critical environmental issue was observed.

|                     | ET                                                                                  | IEC*             | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd | Li Tong                                                                              | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Winnie MA</b>                                                                    | -                | <b>Teresa HO</b>                                                                     | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Site Auditor                                                                     | IEC              | Environmental Health and Safety Officer                                              | Park Manager                                                                          |
| <b>Signature</b>    |  | -                |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

### Audit Details

|                             |                               |                                                  |                                                                            |
|-----------------------------|-------------------------------|--------------------------------------------------|----------------------------------------------------------------------------|
| <b>Tenant</b>               | Li Tong Group                 |                                                  |                                                                            |
| <b>Date &amp; Time</b>      | <b>Date</b> 21 May 2014       | <b>Time</b> 10:00am                              |                                                                            |
| <b>Lot No.</b>              | EP07-02                       |                                                  |                                                                            |
| <b>Audit Ref.</b>           | 42                            |                                                  |                                                                            |
| <b>IEC Joint Inspection</b> | <input type="checkbox"/> Yes  | <input checked="" type="checkbox"/> No           |                                                                            |
| <b>Weather Conditions</b>   | <input type="checkbox"/> Fine | <input type="checkbox"/> Hazy                    | <input type="checkbox"/> Overcast <input checked="" type="checkbox"/> Rain |
| <b>Wind</b>                 | <input type="checkbox"/> Calm | <input checked="" type="checkbox"/> Light Breeze | <input type="checkbox"/> Strong Wind                                       |
| <b>Temperature</b>          | 28 °C                         |                                                  |                                                                            |
| <b>Humidity</b>             | <input type="checkbox"/> Low  | <input type="checkbox"/> Medium                  | <input checked="" type="checkbox"/> High                                   |

### 1. General

| Description                                                 | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's Environmental Policy is documented.                                                                                             |
| 1.3 Environmental Management Plan updated?                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's EMP is documented.                                                                                                              |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's ERP is documented.                                                                                                              |
| b. Drill / training records available?                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                              |
| 1.5 Employee's training record available?                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                              |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's WMP is documented.                                                                                                              |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                         |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Licence No. WT00007957-2010 valid until 31 Dec 2015.                            |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required for domestic wastewater.                                           |
| If yes, facility is properly maintained and function normally?                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | A chemical/container toilet is maintained on a monthly basis.                   |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                          |                                     |                                                                                 |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | As per the discharge licence, self-monitoring shall be performed when required. |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                                 | No                                  | N/A                                 | Remarks                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                                     |                                     |                                     |                                                             |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The risk of contamination for the recycling process is low. |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed.    |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No contaminated water was found.                            |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| <b>Cargo Handling</b>                                                                                                                          |                                     |                                     |                                     |                                                             |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |

### 3. Air Quality

|     | Description                                                                                                                         | Yes                                 | No                                  | N/A                                 | Remarks       |
|-----|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------|
| 3.1 | a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
|     | b. SP License conditions / monitoring requirements met?                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | <b>Odour</b>                                                                                                                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
| 3.2 | a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
|     | b. If yes, can the source be identified?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | c. Odorous materials are covered?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | d. If odour control system is installed, is it operating normally?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.3 | All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | <b>Dust Monitoring</b>                                                                                                              | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
| 3.4 | a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | b. Monitoring frequency met the requirement?                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | c. Any exceedance?                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | d. If yes, follow-up action taken?                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.5 | Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.6 | Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |

### 3. Air Quality (continued)

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|----------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site. |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          |                                     |                                        |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required.                          |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks                                                                                                                                           |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Registration No. 3840-421-L2676-01 for various types of chemical waste.                                                                           |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | MSW is disposed of daily via the Operator, whereas the chemical waste is disposed of once or twice per month depending on the quantity generated. |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Recyclable materials were passed to other recyclers.                                                                                              |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                   |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                                                                                                   |
| 4.7 a. Stored in suitable container?                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |
| b. Container properly closed or sealed?                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No spillage.                                                                                                                                      |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                   |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                                                                                                   |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |
| b. Label is in proper dimension and bilingual?                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |
| c. Information is accurate and sufficient?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |



**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                                                 | Yes                                 | No                       | N/A                                 | Remarks                                                                                                             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                                                            |                                     |                          |                                     |                                                                                                                     |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| c. Containers kept in receptacle of suitable material and construction ( <i>if quantity &lt;50L</i> ) <u>or</u> drip trays capable of storing 110% of the volume of largest ( <i>if quantity &gt;50L</i> )? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| f. Adequacy of area ventilation?                                                                                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| g. Outdoors storage area should be covered?                                                                                                                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Chemical waste was stored indoor.                                                                                   |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | The Tenant itself is a licensed chemical waste collector (Licence No.: 3810-421-L2676-OS) for CRT and LCD monitors. |
| <b>Storage of Liquid Waste</b>                                                                                                                                                                              |                                     |                          |                                     |                                                                                                                     |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                            |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|------------------------------------|
| <b>Landfill Gas Hazard (within LFG Consultation Zone)</b>                                                  |                                     |                          |                                     |                                    |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Outside the LFG Consultation Zone. |
| b. Smoking and open fires prohibited?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No monitoring equipment.           |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                    |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | There were no DGs stored on site.  |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |

**Action Items from This Audit**

| No. | Action                                        | Expected By |
|-----|-----------------------------------------------|-------------|
| 1.  | No critical environmental issue was observed. | Nil         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit Dated 22 April 2014 | Status |
|-----|---------------------------------------------------|--------|
| 1.  | Nil                                               | N/A    |

**Audit Summary and Sign-off**

No critical environmental issue was observed.

|                     | ET                                                                                  | IEC*             | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd | Li Tong                                                                              | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Winnie MA</b>                                                                    | -                | <b>Teresa HO</b>                                                                     | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Site Auditor                                                                     | IEC              | Environmental Health and Safety Officer                                              | Park Manager                                                                          |
| <b>Signature</b>    |  | -                |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

### Audit Details

|                             |                                          |                                                  |                                                                 |
|-----------------------------|------------------------------------------|--------------------------------------------------|-----------------------------------------------------------------|
| <b>Tenant</b>               | Li Tong Group                            |                                                  |                                                                 |
| <b>Date &amp; Time</b>      | <b>Date</b> 18 June 2014                 | <b>Time</b> 9:45am                               |                                                                 |
| <b>Lot No.</b>              | EP07-02                                  |                                                  |                                                                 |
| <b>Audit Ref.</b>           | 43                                       |                                                  |                                                                 |
| <b>IEC Joint Inspection</b> | <input checked="" type="checkbox"/> Yes  | <input type="checkbox"/> No                      |                                                                 |
| <b>Weather Conditions</b>   | <input checked="" type="checkbox"/> Fine | <input type="checkbox"/> Hazy                    | <input type="checkbox"/> Overcast <input type="checkbox"/> Rain |
| <b>Wind</b>                 | <input type="checkbox"/> Calm            | <input checked="" type="checkbox"/> Light Breeze | <input type="checkbox"/> Strong Wind                            |
| <b>Temperature</b>          | 32 °C                                    |                                                  |                                                                 |
| <b>Humidity</b>             | <input type="checkbox"/> Low             | <input checked="" type="checkbox"/> Medium       | <input type="checkbox"/> High                                   |

### 1. General

|     | Description                                             | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-----|---------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 | EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 | Environmental Policy documented?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's Environmental Policy is documented.                                                                                             |
| 1.3 | Environmental Management Plan updated?                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's EMP is documented.                                                                                                              |
| 1.4 | a. Emergency Response Plan (ERP) documented?            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's ERP is documented.                                                                                                              |
|     | b. Drill / training records available?                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                              |
| 1.5 | Employee's training record available?                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                              |
| 1.6 | Any record of prosecution / complaint?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 | Waste Management Plan?                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's WMP is documented.                                                                                                              |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                         |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Licence No. WT00007957-2010 valid until 31 Dec 2015.                            |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required for domestic wastewater.                                           |
| If yes, facility is properly maintained and function normally?                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | A chemical/container toilet is maintained on a monthly basis.                   |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                          |                                     |                                                                                 |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | As per the discharge licence, self-monitoring shall be performed when required. |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                                 | No                                  | N/A                                 | Remarks                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                                     |                                     |                                     |                                                             |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The risk of contamination for the recycling process is low. |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed.    |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No contaminated water was found.                            |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| <b>Cargo Handling</b>                                                                                                                          |                                     |                                     |                                     |                                                             |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |

**3. Air Quality**

|     | Description                                                                                                                         | Yes                                 | No                                  | N/A                                 | Remarks       |
|-----|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------|
| 3.1 | a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
|     | b. SP License conditions / monitoring requirements met?                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | <b>Odour</b>                                                                                                                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
| 3.2 | a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
|     | b. If yes, can the source be identified?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | c. Odorous materials are covered?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | d. If odour control system is installed, is it operating normally?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.3 | All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | <b>Dust Monitoring</b>                                                                                                              | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
| 3.4 | a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | b. Monitoring frequency met the requirement?                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | c. Any exceedance?                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | d. If yes, follow-up action taken?                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.5 | Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.6 | Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |

**3. Air Quality (continued)**

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|----------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site. |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          |                                     |                                        |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required.                          |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |



#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks                                                                                                                                           |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Registration No. 3840-421-L2676-01 for various types of chemical waste.                                                                           |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | MSW is disposed of daily via the Operator, whereas the chemical waste is disposed of once or twice per month depending on the quantity generated. |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Recyclable materials were passed to other recyclers.                                                                                              |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                   |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                                                                                                   |
| 4.7 a. Stored in suitable container?                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |
| b. Container properly closed or sealed?                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No spillage.                                                                                                                                      |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                   |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                                                                                                   |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |
| b. Label is in proper dimension and bilingual?                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |
| c. Information is accurate and sufficient?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                   |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                  | Yes                                 | No                       | N/A                                 | Remarks                                                                                                             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                             |                                     |                          |                                     |                                                                                                                     |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| c. Containers kept in receptacle of suitable material and construction (if quantity <50L) or drip trays capable of storing 110% of the volume of largest (if quantity >50L)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| f. Adequacy of area ventilation?                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| g. Outdoors storage area should be covered?                                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Chemical waste was stored indoor.                                                                                   |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | The Tenant itself is a licensed chemical waste collector (Licence No.: 3810-421-L2676-OS) for CRT and LCD monitors. |
| <b>Storage of Liquid Waste</b>                                                                                                                                               |                                     |                          |                                     |                                                                                                                     |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                            |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|------------------------------------|
| <b>Landfill Gas Hazard (within LFG Consultation Zone)</b>                                                  |                                     |                          |                                     |                                    |
| 5.1 a. Workers and visitors alerted to possible LGF hazards?                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Outside the LFG Consultation Zone. |
| b. Smoking and open fires prohibited?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No monitoring equipment.           |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                    |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | There were no DGs stored on site.  |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |

**Action Items from This Audit**

| No. | Action                                        | Expected By |
|-----|-----------------------------------------------|-------------|
| 1.  | No critical environmental issue was observed. | Nil         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit Dated 21 May 2014 | Status |
|-----|-------------------------------------------------|--------|
| 1.  | Nil                                             | N/A    |

**Audit Summary and Sign-off**

No critical environmental issue was observed.

|                     | ET                                                                                  | IEC*                                                                                | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd                                                                    | Li Tong                                                                              | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Antony WONG</b>                                                                  | <b>Sharifah OR</b>                                                                  | <b>Teresa HO</b>                                                                     | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Leader                                                                           | IEC                                                                                 | Environmental Health and Safety Officer                                              | Park Manager                                                                          |
| <b>Signature</b>    |  |  |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

## **APPENDIX 6-5**

### **Tenant-specific Audit Checklists for the Reporting Quarter**

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Hong Kong Telford Envirotech Group Ltd

### Audit Details

**Tenant** Hong Kong Telford Envirotech Group Ltd.

**Date & Time** **Date** 22 April 2014 **Time** 11:35pm

**Lot No.** EP08-01

**Audit Ref.** 28

**IEC Joint Inspection**  Yes  No

**Weather Conditions**  Fine  Hazy  Overcast  Rain

**Wind**  Calm  Light Breeze  Strong Wind

**Temperature** 26 °C

**Humidity**  Low  Medium  High

### 1. General

| Description                                                 | Yes                      | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|--------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Prepared by SGJV                                                                                                                             |
| 1.3 Environmental Management Plan updated?                  | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Prepared by SGJV                                                                                                                             |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Prepared by SGJV                                                                                                                             |
| b. Drill / training records available?                      | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Prepared by SGJV                                                                                                                             |
| 1.5 Employee's training record available?                   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Prepared by SGJV                                                                                                                             |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Prepared by SGJV                                                                                                                             |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                                                      |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | The tenant was reminded to apply valid effluent discharge license prior to any effluent discharge.           |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Water treatment facility was not operated as the process line is suspended and no waste water was generated. |
| If yes, facility is properly maintained and function normally?                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Water treatment facility was not operated as the process line is suspended and no waste water was generated. |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                          |                                     |                                                                                                              |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                              |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                              |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                              |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                              |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                              |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                                 | No                       | N/A                                 | Remarks                                                                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                                     |                          |                                     |                                                                                                              |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | For the majority of the processes / activities.                                                              |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Stop-logs are available for use by the Tenant if needed.                                                     |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Water treatment facility was not operated as the process line is suspended and no waste water was generated. |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not observed.                                                                                                |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Maintenance area was not observed.                                                                           |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| <b>Cargo Handling</b>                                                                                                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not applicable.                                                                                              |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |



**3. Air Quality**

| Description                                                                                                                             | Yes                                 | No                                  | N/A                                 | Remarks       |
|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------|
| 3.1 a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
| b. SP License conditions / monitoring requirements met?                                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| <b>Odour</b>                                                                                                                            |                                     |                                     |                                     |               |
| 3.2 a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
| b. If yes, can the source be identified?                                                                                                | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| c. Odorous materials are covered?                                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| d. If odour control system is installed, is it operating normally?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.3 All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |
| <b>Dust Monitoring</b>                                                                                                                  |                                     |                                     |                                     |               |
| 3.4 a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
| b. Monitoring frequency met the requirement?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| c. Any exceedance?                                                                                                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| d. If yes, follow-up action taken?                                                                                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.5 Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.6 Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |

### 3. Air Quality (continued)

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|----------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plants?                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site. |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          |                                     |                                        |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required.                          |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required.                          |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required.                          |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required.                          |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks                                              |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | To be determined during the next Monthly Site Audit. |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No sludge was generated.                             |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                      |
| 4.7 a. Stored in suitable container?                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| b. Container properly closed or sealed?                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                      |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                      |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No chemical waste was generated.                     |
| b. Label is in proper dimension and bilingual?                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                      |
| c. Information is accurate and sufficient?                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                      |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                  | Yes                                 | No                       | N/A                                 | Remarks                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|----------------------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                             |                                     |                          |                                     |                                  |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No chemical waste was generated. |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |
| c. Containers kept in receptacle of suitable material and construction (if quantity <50L) or drip trays capable of storing 110% of the volume of largest (if quantity >50L)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                  |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |
| f. Adequacy of area ventilation?                                                                                                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |
| g. Outdoors storage area should be covered?                                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No chemical waste was generated. |
| <b>Storage of Liquid Waste</b>                                                                                                                                               |                                     |                          |                                     |                                  |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No liquid waste was generated.   |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                                                             |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------------|
| <b>Landfill Gas Hazard<br/>(within LFG Consultation Zone)</b>                                              |                                     |                          |                                     |                                                                                                                     |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | The lot is within the LFG Consultation Zone and the Tenant has alerted workers/visitors about possible LFG hazards. |
| b. Smoking and open fires prohibited?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No monitoring equipment.                                                                                            |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                                                                                                     |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |

**Action Items from This Audit**

| No. | Action                          | Expected By |
|-----|---------------------------------|-------------|
| 1.  | No critical issue was observed. | N/A         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit Dated 27 March 2014 | Status |
|-----|---------------------------------------------------|--------|
| 1.  | Nil.                                              | N/A    |

**Audit Summary and Sign-off**

No critical issue was observed.

|                     | ET                                                                                  | IEC*             | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd | Telford                                                                              | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Winnie MA</b>                                                                    | -                | <b>Mr. LEE</b>                                                                       | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Site Auditor                                                                     | IEC              | Director                                                                             | Park Manager                                                                          |
| <b>Signature</b>    |  | -                |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

### Audit Details

|                             |                                         |                                                  |                                                                            |
|-----------------------------|-----------------------------------------|--------------------------------------------------|----------------------------------------------------------------------------|
| <b>Tenant</b>               | Hong Kong Telford Envirotech Group Ltd. |                                                  |                                                                            |
| <b>Date &amp; Time</b>      | <b>Date</b> 21 May 2014                 | <b>Time</b> 11:35am                              |                                                                            |
| <b>Lot No.</b>              | EP08-01                                 |                                                  |                                                                            |
| <b>Audit Ref.</b>           | 29                                      |                                                  |                                                                            |
| <b>IEC Joint Inspection</b> | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No           |                                                                            |
| <b>Weather Conditions</b>   | <input type="checkbox"/> Fine           | <input type="checkbox"/> Hazy                    | <input type="checkbox"/> Overcast <input checked="" type="checkbox"/> Rain |
| <b>Wind</b>                 | <input type="checkbox"/> Calm           | <input checked="" type="checkbox"/> Light Breeze | <input type="checkbox"/> Strong Wind                                       |
| <b>Temperature</b>          | 28 °C                                   |                                                  |                                                                            |
| <b>Humidity</b>             | <input type="checkbox"/> Low            | <input type="checkbox"/> Medium                  | <input checked="" type="checkbox"/> High                                   |

### 1. General

|     | Description                                             | Yes                      | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-----|---------------------------------------------------------|--------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 | EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 | Environmental Policy documented?                        | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Prepared by SGJV                                                                                                                             |
| 1.3 | Environmental Management Plan updated?                  | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Prepared by SGJV                                                                                                                             |
| 1.4 | a. Emergency Response Plan (ERP) documented?            | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Prepared by SGJV                                                                                                                             |
|     | b. Drill / training records available?                  | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Prepared by SGJV                                                                                                                             |
| 1.5 | Employee's training record available?                   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Prepared by SGJV                                                                                                                             |
| 1.6 | Any record of prosecution / complaint?                  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 | Waste Management Plan?                                  | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Prepared by SGJV                                                                                                                             |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                                                      |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | The tenant was reminded to apply valid effluent discharge license prior to any effluent discharge.           |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Water treatment facility was not operated as the process line is suspended and no waste water was generated. |
| If yes, facility is properly maintained and function normally?                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Water treatment facility was not operated as the process line is suspended and no waste water was generated. |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                          |                                     |                                                                                                              |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                              |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                              |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                              |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                              |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                              |



**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                                 | No                       | N/A                                 | Remarks                                                                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                                     |                          |                                     |                                                                                                              |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | For the majority of the processes / activities.                                                              |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Stop-logs are available for use by the Tenant if needed.                                                     |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Water treatment facility was not operated as the process line is suspended and no waste water was generated. |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not observed.                                                                                                |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Maintenance area was not observed.                                                                           |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| <b>Cargo Handling</b>                                                                                                                          |                                     |                          |                                     |                                                                                                              |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not applicable.                                                                                              |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |

### 3. Air Quality

| Description                                                                                                                             | Yes                                 | No                                  | N/A                                 | Remarks       |
|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------|
| 3.1 a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
| b. SP License conditions / monitoring requirements met?                                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| <b>Odour</b>                                                                                                                            |                                     |                                     |                                     |               |
| 3.2 a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
| b. If yes, can the source be identified?                                                                                                | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| c. Odorous materials are covered?                                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| d. If odour control system is installed, is it operating normally?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.3 All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |
| <b>Dust Monitoring</b>                                                                                                                  |                                     |                                     |                                     |               |
| 3.4 a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
| b. Monitoring frequency met the requirement?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| c. Any exceedance?                                                                                                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| d. If yes, follow-up action taken?                                                                                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.5 Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.6 Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |

### 3. Air Quality (continued)

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|----------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plants?                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site. |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          |                                     |                                        |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required.                          |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required.                          |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required.                          |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required.                          |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks                                              |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | To be determined during the next Monthly Site Audit. |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No sludge was generated.                             |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                      |
| 4.7 a. Stored in suitable container?                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| b. Container properly closed or sealed?                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                      |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                      |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No chemical waste was generated.                     |
| b. Label is in proper dimension and bilingual?                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                      |
| c. Information is accurate and sufficient?                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                      |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                  | Yes                                 | No                       | N/A                                 | Remarks                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|----------------------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                             |                                     |                          |                                     |                                  |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No chemical waste was generated. |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |
| c. Containers kept in receptacle of suitable material and construction (if quantity <50L) or drip trays capable of storing 110% of the volume of largest (if quantity >50L)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                  |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |
| f. Adequacy of area ventilation?                                                                                                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |
| g. Outdoors storage area should be covered?                                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No chemical waste was generated. |
| <b>Storage of Liquid Waste</b>                                                                                                                                               |                                     |                          |                                     |                                  |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No liquid waste was generated.   |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                                                             |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------------|
| <b>Landfill Gas Hazard<br/>(within LFG Consultation Zone)</b>                                              |                                     |                          |                                     |                                                                                                                     |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | The lot is within the LFG Consultation Zone and the Tenant has alerted workers/visitors about possible LFG hazards. |
| b. Smoking and open fires prohibited?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No monitoring equipment.                                                                                            |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                                                                                                     |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |

**Action Items from This Audit**

| No. | Action                          | Expected By |
|-----|---------------------------------|-------------|
| 1.  | No critical issue was observed. | N/A         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit Dated 22 April 2014 | Status |
|-----|---------------------------------------------------|--------|
| 1.  | Nil.                                              | N/A    |

**Audit Summary and Sign-off**

No critical issue was observed.

|                     | ET                                                                                  | IEC*             | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd | Telford                                                                              | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Winnie MA</b>                                                                    | -                | <b>Mr. LEE</b>                                                                       | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Site Auditor                                                                     | IEC              | Director                                                                             | Park Manager                                                                          |
| <b>Signature</b>    |  | -                |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

### Audit Details

**Tenant** Hong Kong Telford Envirotech Group Ltd.

**Date & Time** **Date** 18 June 2014 **Time** 11:45am

**Lot No.** EP08-01

**Audit Ref.** 30

**IEC Joint Inspection**  Yes  No

**Weather Conditions**  Fine  Hazy  Overcast  Rain

**Wind**  Calm  Light Breeze  Strong Wind

**Temperature** 32 °C

**Humidity**  Low  Medium  High

### 1. General

| Description                                                 | Yes                      | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|--------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Prepared by SGJV                                                                                                                             |
| 1.3 Environmental Management Plan updated?                  | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Prepared by SGJV                                                                                                                             |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Prepared by SGJV                                                                                                                             |
| b. Drill / training records available?                      | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Prepared by SGJV                                                                                                                             |
| 1.5 Employee's training record available?                   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Prepared by SGJV                                                                                                                             |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Prepared by SGJV                                                                                                                             |



## 2. Water Quality

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                                                      |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | The tenant was reminded to apply valid effluent discharge license prior to any effluent discharge.           |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Water treatment facility was not operated as the process line is suspended and no waste water was generated. |
| If yes, facility is properly maintained and function normally?                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Water treatment facility was not operated as the process line is suspended and no waste water was generated. |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                          |                                     |                                                                                                              |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                              |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                              |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                              |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                              |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                              |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                                 | No                       | N/A                                 | Remarks                                                                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                                     |                          |                                     |                                                                                                              |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | For the majority of the processes / activities.                                                              |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Stop-logs are available for use by the Tenant if needed.                                                     |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Water treatment facility was not operated as the process line is suspended and no waste water was generated. |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not observed.                                                                                                |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Maintenance area was not observed.                                                                           |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| <b>Cargo Handling</b>                                                                                                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not applicable.                                                                                              |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                              |

**3. Air Quality**

| Description                                                                                                                             | Yes                                 | No                                  | N/A                                 | Remarks       |
|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------|
| 3.1 a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
| b. SP License conditions / monitoring requirements met?                                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| <b>Odour</b>                                                                                                                            |                                     |                                     |                                     |               |
| 3.2 a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
| b. If yes, can the source be identified?                                                                                                | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| c. Odorous materials are covered?                                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| d. If odour control system is installed, is it operating normally?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.3 All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |
| <b>Dust Monitoring</b>                                                                                                                  |                                     |                                     |                                     |               |
| 3.4 a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
| b. Monitoring frequency met the requirement?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| c. Any exceedance?                                                                                                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| d. If yes, follow-up action taken?                                                                                                      | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.5 Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.6 Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |

### 3. Air Quality (continued)

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|----------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plants?                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site. |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          |                                     |                                        |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required.                          |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required.                          |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required.                          |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required.                          |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks                                              |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | To be determined during the next Monthly Site Audit. |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No sludge was generated.                             |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                      |
| 4.7 a. Stored in suitable container?                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| b. Container properly closed or sealed?                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                      |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                      |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No chemical waste was generated.                     |
| b. Label is in proper dimension and bilingual?                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                      |
| c. Information is accurate and sufficient?                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                      |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                  | Yes                                 | No                       | N/A                                 | Remarks                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|----------------------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                             |                                     |                          |                                     |                                  |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No chemical waste was generated. |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |
| c. Containers kept in receptacle of suitable material and construction (if quantity <50L) or drip trays capable of storing 110% of the volume of largest (if quantity >50L)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                  |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |
| f. Adequacy of area ventilation?                                                                                                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |
| g. Outdoors storage area should be covered?                                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No chemical waste was generated. |
| <b>Storage of Liquid Waste</b>                                                                                                                                               |                                     |                          |                                     |                                  |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No liquid waste was generated.   |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                  |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                                                             |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------------|
| <b>Landfill Gas Hazard<br/>(within LFG Consultation Zone)</b>                                              |                                     |                          |                                     |                                                                                                                     |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | The lot is within the LFG Consultation Zone and the Tenant has alerted workers/visitors about possible LFG hazards. |
| b. Smoking and open fires prohibited?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No monitoring equipment.                                                                                            |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                                                                                                     |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                     |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                     |

**Action Items from This Audit**

| No. | Action                          | Expected By |
|-----|---------------------------------|-------------|
| 1.  | No critical issue was observed. | N/A         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit Dated 21 May 2014 | Status |
|-----|-------------------------------------------------|--------|
| 1.  | Nil.                                            | N/A    |

**Audit Summary and Sign-off**

No critical issue was observed.

|                     | ET                                                                                  | IEC*                                                                                | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd                                                                    | Telford                                                                              | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Antony WONG</b>                                                                  | <b>Sharifah OR</b>                                                                  | <b>Mr. LEE</b>                                                                       | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Leader                                                                           | IEC                                                                                 | Director                                                                             | Park Manager                                                                          |
| <b>Signature</b>    |  |  |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection



## **APPENDIX 6-6**

### **Tenant-specific Audit Checklists for the Reporting Quarter**

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**Yan Oi Tong EcoPark Plastic Resources Recycling Centre**

### Audit Details

|                             |                                                        |                                                  |                                                                 |
|-----------------------------|--------------------------------------------------------|--------------------------------------------------|-----------------------------------------------------------------|
| <b>Tenant</b>               | Yan Oi Tong EcoPark Plastic Resources Recycling Centre |                                                  |                                                                 |
| <b>Date &amp; Time</b>      | <b>Date</b> 22 April 2014                              | <b>Time</b> 11:25am                              |                                                                 |
| <b>Lot No.</b>              | EP10-01                                                |                                                  |                                                                 |
| <b>Audit Ref.</b>           | 42                                                     |                                                  |                                                                 |
| <b>IEC Joint Inspection</b> | <input type="checkbox"/> Yes                           | <input checked="" type="checkbox"/> No           |                                                                 |
| <b>Weather Conditions</b>   | <input checked="" type="checkbox"/> Fine               | <input type="checkbox"/> Hazy                    | <input type="checkbox"/> Overcast <input type="checkbox"/> Rain |
| <b>Wind</b>                 | <input type="checkbox"/> Calm                          | <input checked="" type="checkbox"/> Light Breeze | <input type="checkbox"/> Strong Wind                            |
| <b>Temperature</b>          | 26°C                                                   |                                                  |                                                                 |
| <b>Humidity</b>             | <input type="checkbox"/> Low                           | <input checked="" type="checkbox"/> Medium       | <input type="checkbox"/> High                                   |

### 1. General

| Description                                                 | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | The Operator's Environmental Policy is documented.                                                                                           |
| 1.3 Environmental Management Plan updated?                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's EMP is documented.                                                                                                              |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's ERP is documented.                                                                                                              |
| b. Drill / training records available?                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                              |
| 1.5 Employee's training record available?                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                              |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant has included the WMP into the EMP.                                                                                                |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                         |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Licence No. WT00006013-2010 valid until 28 Feb 2015.                            |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| If yes, facility is properly maintained and function normally?                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                          |                                     |                                                                                 |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | As per the discharge licence, self-monitoring shall be performed when required. |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                                 | No                                  | N/A                                 | Remarks                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                                     |                                     |                                     |                                                          |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Works for recycling were undertaken at covered areas.    |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed. |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Water is unlikely to be contaminated within the lot.     |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Only grease is used at the lot.                          |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                            |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                          |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                          |
| <b>Cargo Handling</b>                                                                                                                          |                                     |                                     |                                     |                                                          |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                            |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                          |

**3. Air Quality**

|                        | Description                                                                                                                         | Yes                                 | No                                  | N/A                                 | Remarks                                           |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------------------------------------------|
| 3.1                    | a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                     |
|                        | b. SP License conditions / monitoring requirements met?                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| <b>Odour</b>           |                                                                                                                                     |                                     |                                     |                                     |                                                   |
| 3.2                    | a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                   |
|                        | b. If yes, can the source be identified?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | c. Odorous materials are covered?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | d. If odour control system is installed, is it operating normally?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| 3.3                    | All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No dusty materials were found to be used on-site. |
| <b>Dust Monitoring</b> |                                                                                                                                     |                                     |                                     |                                     |                                                   |
| 3.4                    | a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | b. Monitoring frequency met the requirement?                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | c. Any exceedance?                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | d. If yes, follow-up action taken?                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| 3.5                    | Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| 3.6                    | Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                   |

### 3. Air Quality (continued)

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|----------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site. |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          |                                     |                                        |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks                                                                                               |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Registration No. 9211-421-Y2453-03 for spent mineral oil and spent lubricating oil.                   |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                       |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Twice a week.                                                                                         |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                       |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                       |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Sludge / debris from the wastewater treatment facility are collected by licensed collector regularly. |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                                                       |
| 4.7 a. Stored in suitable container?                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No chemical waste was produced.                                                                       |
| b. Container properly closed or sealed?                                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                       |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                       |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                       |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                                                       |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No chemical waste was produced.                                                                       |
| b. Label is in proper dimension and bilingual?                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                       |
| c. Information is accurate and sufficient?                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                       |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                  | Yes                                 | No                       | N/A                                 | Remarks                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                             |                                     |                          |                                     |                                 |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No chemical waste was produced. |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| c. Containers kept in receptacle of suitable material and construction (if quantity <50L) or drip trays capable of storing 110% of the volume of largest (if quantity >50L)? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| f. Adequacy of area ventilation?                                                                                                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| g. Outdoors storage area should be covered?                                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                 |
| <b>Storage of Liquid Waste</b>                                                                                                                                               |                                     |                          |                                     |                                 |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No liquid waste was produced.   |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |



**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                                                                                                      |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landfill Gas Hazard<br/>(within LFG Consultation Zone)</b>                                              |                                     |                          |                                     |                                                                                                                                                              |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | The lot is within the LFG Consultation Zone and the Tenant has alerted workers/visitors about possible LFG hazards. A notice is also posted at the entrance. |
| b. Smoking and open fires prohibited?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                              |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                              |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | The whole lot has been concrete-paved.                                                                                                                       |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                                                                                                                                              |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | There were no DGs stored on site.                                                                                                                            |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                              |

**Action Items from This Audit**

| No. | Action                          | Expected By |
|-----|---------------------------------|-------------|
| 1.  | No critical issue was observed. | N/A         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audits Dated 27 March 2014 | Status |
|-----|----------------------------------------------------|--------|
| 1   | Nil                                                | N/A    |

**Audit Summary and Sign-off**

No critical environmental issue was observed.

|                     | ET                                                                                  | IEC*             | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd | Yan Oi Tong                                                                          | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Winnie MA</b>                                                                    | -                | <b>Asa NG</b>                                                                        | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Site Auditor                                                                     | IEC              | Manager                                                                              | Park Manager                                                                          |
| <b>Signature</b>    |  | -                |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

### Audit Details

|                             |                                                        |                                                  |                                                                            |
|-----------------------------|--------------------------------------------------------|--------------------------------------------------|----------------------------------------------------------------------------|
| <b>Tenant</b>               | Yan Oi Tong EcoPark Plastic Resources Recycling Centre |                                                  |                                                                            |
| <b>Date &amp; Time</b>      | <b>Date</b> 21 May 2014                                | <b>Time</b> 11:25am                              |                                                                            |
| <b>Lot No.</b>              | EP10-01                                                |                                                  |                                                                            |
| <b>Audit Ref.</b>           | 43                                                     |                                                  |                                                                            |
| <b>IEC Joint Inspection</b> | <input type="checkbox"/> Yes                           | <input checked="" type="checkbox"/> No           |                                                                            |
| <b>Weather Conditions</b>   | <input type="checkbox"/> Fine                          | <input type="checkbox"/> Hazy                    | <input type="checkbox"/> Overcast <input checked="" type="checkbox"/> Rain |
| <b>Wind</b>                 | <input type="checkbox"/> Calm                          | <input checked="" type="checkbox"/> Light Breeze | <input type="checkbox"/> Strong Wind                                       |
| <b>Temperature</b>          | 28°C                                                   |                                                  |                                                                            |
| <b>Humidity</b>             | <input type="checkbox"/> Low                           | <input type="checkbox"/> Medium                  | <input checked="" type="checkbox"/> High                                   |

### 1. General

| Description                                                 | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | The Operator's Environmental Policy is documented.                                                                                           |
| 1.3 Environmental Management Plan updated?                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's EMP is documented.                                                                                                              |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's ERP is documented.                                                                                                              |
| b. Drill / training records available?                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                              |
| 1.5 Employee's training record available?                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                              |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant has included the WMP into the EMP.                                                                                                |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                         |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Licence No. WT00006013-2010 valid until 28 Feb 2015.                            |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| If yes, facility is properly maintained and function normally?                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                          |                                     |                                                                                 |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | As per the discharge licence, self-monitoring shall be performed when required. |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                                 | No                                  | N/A                                 | Remarks                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                                     |                                     |                                     |                                                          |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Works for recycling were undertaken at covered areas.    |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed. |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Water is unlikely to be contaminated within the lot.     |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Only grease is used at the lot.                          |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                            |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                          |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                          |
| <b>Cargo Handling</b>                                                                                                                          |                                     |                                     |                                     |                                                          |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                            |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                          |

**3. Air Quality**

|                        | Description                                                                                                                         | Yes                                 | No                                  | N/A                                 | Remarks                                           |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------------------------------------------|
| 3.1                    | a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                     |
|                        | b. SP License conditions / monitoring requirements met?                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| <b>Odour</b>           |                                                                                                                                     |                                     |                                     |                                     |                                                   |
| 3.2                    | a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                   |
|                        | b. If yes, can the source be identified?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | c. Odorous materials are covered?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | d. If odour control system is installed, is it operating normally?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| 3.3                    | All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No dusty materials were found to be used on-site. |
| <b>Dust Monitoring</b> |                                                                                                                                     |                                     |                                     |                                     |                                                   |
| 3.4                    | a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | b. Monitoring frequency met the requirement?                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | c. Any exceedance?                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | d. If yes, follow-up action taken?                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| 3.5                    | Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| 3.6                    | Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                   |

### 3. Air Quality (continued)

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|----------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site. |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          |                                     |                                        |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks                                                                                               |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Registration No. 9211-421-Y2453-03 for spent mineral oil and spent lubricating oil.                   |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                       |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Twice a week.                                                                                         |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                       |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                       |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Sludge / debris from the wastewater treatment facility are collected by licensed collector regularly. |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                                                       |
| 4.7 a. Stored in suitable container?                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No chemical waste was produced.                                                                       |
| b. Container properly closed or sealed?                                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                       |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                       |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                       |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                                                       |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No chemical waste was produced.                                                                       |
| b. Label is in proper dimension and bilingual?                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                       |
| c. Information is accurate and sufficient?                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                       |



**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                                                 | Yes                                 | No                       | N/A                                 | Remarks                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                                                            |                                     |                          |                                     |                                 |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No chemical waste was produced. |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| c. Containers kept in receptacle of suitable material and construction ( <i>if quantity &lt;50L</i> ) <u>or</u> drip trays capable of storing 110% of the volume of largest ( <i>if quantity &gt;50L</i> )? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| f. Adequacy of area ventilation?                                                                                                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| g. Outdoors storage area should be covered?                                                                                                                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                 |
| <b>Storage of Liquid Waste</b>                                                                                                                                                                              |                                     |                          |                                     |                                 |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No liquid waste was produced.   |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                                                                                                      |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landfill Gas Hazard<br/>(within LFG Consultation Zone)</b>                                              |                                     |                          |                                     |                                                                                                                                                              |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | The lot is within the LFG Consultation Zone and the Tenant has alerted workers/visitors about possible LFG hazards. A notice is also posted at the entrance. |
| b. Smoking and open fires prohibited?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                              |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                              |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | The whole lot has been concrete-paved.                                                                                                                       |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                                                                                                                                              |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | There were no DGs stored on site.                                                                                                                            |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                              |

**Action Items from This Audit**

| No. | Action                          | Expected By |
|-----|---------------------------------|-------------|
| 1.  | No critical issue was observed. | N/A         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audits Dated 22 April 2014 | Status |
|-----|----------------------------------------------------|--------|
| 1   | Nil                                                | N/A    |

**Audit Summary and Sign-off**

No critical environmental issue was observed.

|                     | ET                                                                                  | IEC*             | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd | Yan Oi Tong                                                                          | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Winnie MA</b>                                                                    | -                | <b>Asa NG</b>                                                                        | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Site Auditor                                                                     | IEC              | Manager                                                                              | Park Manager                                                                          |
| <b>Signature</b>    |  | -                |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

### Audit Details

|                             |                                                        |                                                  |                                                                 |
|-----------------------------|--------------------------------------------------------|--------------------------------------------------|-----------------------------------------------------------------|
| <b>Tenant</b>               | Yan Oi Tong EcoPark Plastic Resources Recycling Centre |                                                  |                                                                 |
| <b>Date &amp; Time</b>      | <b>Date</b> 18 June 2014                               | <b>Time</b> 11:20am                              |                                                                 |
| <b>Lot No.</b>              | EP10-01                                                |                                                  |                                                                 |
| <b>Audit Ref.</b>           | 44                                                     |                                                  |                                                                 |
| <b>IEC Joint Inspection</b> | <input checked="" type="checkbox"/> Yes                | <input type="checkbox"/> No                      |                                                                 |
| <b>Weather Conditions</b>   | <input checked="" type="checkbox"/> Fine               | <input type="checkbox"/> Hazy                    | <input type="checkbox"/> Overcast <input type="checkbox"/> Rain |
| <b>Wind</b>                 | <input type="checkbox"/> Calm                          | <input checked="" type="checkbox"/> Light Breeze | <input type="checkbox"/> Strong Wind                            |
| <b>Temperature</b>          | 32°C                                                   |                                                  |                                                                 |
| <b>Humidity</b>             | <input type="checkbox"/> Low                           | <input checked="" type="checkbox"/> Medium       | <input type="checkbox"/> High                                   |

### 1. General

| Description                                                 | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | The Operator's Environmental Policy is documented.                                                                                           |
| 1.3 Environmental Management Plan updated?                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's EMP is documented.                                                                                                              |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's ERP is documented.                                                                                                              |
| b. Drill / training records available?                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                              |
| 1.5 Employee's training record available?                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                              |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant has included the WMP into the EMP.                                                                                                |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                         |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Licence No. WT00006013-2010 valid until 28 Feb 2015.                            |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| If yes, facility is properly maintained and function normally?                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                          |                                     |                                                                                 |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | As per the discharge licence, self-monitoring shall be performed when required. |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                                 | No                                  | N/A                                 | Remarks                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                                     |                                     |                                     |                                                          |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Works for recycling were undertaken at covered areas.    |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed. |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Water is unlikely to be contaminated within the lot.     |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Only grease is used at the lot.                          |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                            |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                          |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                          |
| <b>Cargo Handling</b>                                                                                                                          |                                     |                                     |                                     |                                                          |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                            |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                          |

### 3. Air Quality

|                        | Description                                                                                                                         | Yes                                 | No                                  | N/A                                 | Remarks                                           |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------------------------------------------|
| 3.1                    | a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                     |
|                        | b. SP License conditions / monitoring requirements met?                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| <b>Odour</b>           |                                                                                                                                     |                                     |                                     |                                     |                                                   |
| 3.2                    | a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                   |
|                        | b. If yes, can the source be identified?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | c. Odorous materials are covered?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | d. If odour control system is installed, is it operating normally?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| 3.3                    | All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No dusty materials were found to be used on-site. |
| <b>Dust Monitoring</b> |                                                                                                                                     |                                     |                                     |                                     |                                                   |
| 3.4                    | a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | b. Monitoring frequency met the requirement?                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | c. Any exceedance?                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | d. If yes, follow-up action taken?                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| 3.5                    | Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| 3.6                    | Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                   |

### 3. Air Quality (continued)

|      | Description                                                                                                                                    | Yes                                 | No                       | N/A                                 | Remarks                                |
|------|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|----------------------------------------|
| 3.7  | Is no dark smoke emitted from chimney or powered plant?                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site. |
| 3.8  | Vehicles and equipment are switched off while not in use?                                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.9  | Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                              |                                     |                          | <input checked="" type="checkbox"/> |                                        |
|      | a. >25L of conventional liquid fuel per hour                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
|      | b. >35kg of conventional solid fuel per hour                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
|      | c. >1,150 MJ of any gaseous fuel per hour                                                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.10 | Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.11 | Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.12 | a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
|      | b. If yes, record of refrigeration equipment service available?                                                                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.13 | All air pollution control systems are properly maintained and function normally?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.14 | Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |



#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks                                                                                               |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Registration No. 9211-421-Y2453-03 for spent mineral oil and spent lubricating oil.                   |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                       |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Twice a week.                                                                                         |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                       |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                       |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Sludge / debris from the wastewater treatment facility are collected by licensed collector regularly. |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                                                       |
| 4.7 a. Stored in suitable container?                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No chemical waste was produced.                                                                       |
| b. Container properly closed or sealed?                                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                       |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                       |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                       |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                                                       |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No chemical waste was produced.                                                                       |
| b. Label is in proper dimension and bilingual?                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                       |
| c. Information is accurate and sufficient?                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                       |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                                                 | Yes                                 | No                       | N/A                                 | Remarks                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                                                            |                                     |                          |                                     |                                 |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No chemical waste was produced. |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| c. Containers kept in receptacle of suitable material and construction ( <i>if quantity &lt;50L</i> ) <u>or</u> drip trays capable of storing 110% of the volume of largest ( <i>if quantity &gt;50L</i> )? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| f. Adequacy of area ventilation?                                                                                                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| g. Outdoors storage area should be covered?                                                                                                                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                 |
| <b>Storage of Liquid Waste</b>                                                                                                                                                                              |                                     |                          |                                     |                                 |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No liquid waste was produced.   |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                 |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                                                                                                      |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landfill Gas Hazard<br/>(within LFG Consultation Zone)</b>                                              |                                     |                          |                                     |                                                                                                                                                              |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | The lot is within the LFG Consultation Zone and the Tenant has alerted workers/visitors about possible LFG hazards. A notice is also posted at the entrance. |
| b. Smoking and open fires prohibited?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                              |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                              |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | The whole lot has been concrete-paved.                                                                                                                       |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                                                                                                                                              |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | There were no DGs stored on site.                                                                                                                            |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                              |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                              |

**Action Items from This Audit**

| No. | Action                          | Expected By |
|-----|---------------------------------|-------------|
| 1.  | No critical issue was observed. | N/A         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audits Dated 21 May 2014 | Status |
|-----|--------------------------------------------------|--------|
| 1   | Nil                                              | N/A    |

**Audit Summary and Sign-off**

No critical environmental issue was observed.

|                     | ET                                                                                  | IEC*                                                                                | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd                                                                    | Yan Oi Tong                                                                          | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Antony WONG</b>                                                                  | <b>Sharifah OR</b>                                                                  | <b>Asa NG</b>                                                                        | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Leader                                                                           | IEC                                                                                 | Manager                                                                              | Park Manager                                                                          |
| <b>Signature</b>    |  |  |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

## **APPENDIX 6-7**

### **Tenant-specific Audit Checklists for the Reporting Quarter**

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**St. James' Settlement WEEE GO GREEN**

### Audit Details

**Tenant** St. James' Settlement WEEE GO GREEN

**Date & Time** **Date** 22 April 2014 **Time** 11:30am

**Lot No.** EP10-02

**Audit Ref.** 42

**IEC Joint Inspection**  Yes  No

**Weather Conditions**  Fine  Hazy  Overcast  Rain

**Wind**  Calm  Light Breeze  Strong Wind

**Temperature** 26°C

**Humidity**  Low  Medium  High

### 1. General

| Description                                                 | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The SGJV's Environmental Policy is documented. Tenant follows this.                                                                          |
| 1.3 Environmental Management Plan updated?                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's EMP is documented.                                                                                                              |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's ERP is documented.                                                                                                              |
| b. Drill / training records available?                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                              |
| 1.5 Employee's training record available?                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                              |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's WMP is documented.                                                                                                              |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                         |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Licence No. WT00007365-2010 valid until 31 Aug 2015.                            |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | A screen has been installed as treatment device.                                |
| If yes, facility is properly maintained and function normally?                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                          |                                     |                                                                                 |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | As per the discharge licence, self-monitoring shall be performed when required. |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                      | No                                  | N/A                                 | Remarks                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                          |                                     |                                     |                                                             |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | The risk of contamination for the recycling process is low. |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed.    |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No contaminated water was found.                            |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not observed.                                               |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| <b>Cargo Handling</b>                                                                                                                          |                          |                                     |                                     |                                                             |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |



**3. Air Quality**

|                        | Description                                                                                                                         | Yes                                 | No                                  | N/A                                 | Remarks                                           |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------------------------------------------|
| 3.1                    | a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                     |
|                        | b. SP License conditions / monitoring requirements met?                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| <b>Odour</b>           |                                                                                                                                     |                                     |                                     |                                     |                                                   |
| 3.2                    | a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                   |
|                        | b. If yes, can the source be identified?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | c. Odorous materials are covered?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | d. If odour control system is installed, is it operating normally?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| 3.3                    | All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No dusty materials were found to be used on-site. |
| <b>Dust Monitoring</b> |                                                                                                                                     |                                     |                                     |                                     |                                                   |
| 3.4                    | a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                     |
|                        | b. Monitoring frequency met the requirement?                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | c. Any exceedance?                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | d. If yes, follow-up action taken?                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| 3.5                    | Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| 3.6                    | Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                   |

**3. Air Quality (continued)**

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site.     |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                            |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          |                                     |                                            |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                            |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                            |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                            |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                            |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                            |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | All relevant equipment is approved by EPD. |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Recorded by EPD.                           |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                            |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                            |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks                                                                                                                                                                                                                              |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Registration No. 9211-421-S3222-08 for spent lubricating oil, unwanted refrigerant and CRTs.                                                                                                                                         |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Waste from workshop is stored in temporary area and disposed of as general refuse twice a week <i>via</i> the Operator. Chemical waste is transported to EPD's Chemical Waste Treatment Centre by licensed collector once per month. |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Recyclable materials were passed to other recyclers.                                                                                                                                                                                 |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                      |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                                                                                                                                                                                      |
| 4.7 a. Stored in suitable container?                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |
| b. Container properly closed or sealed?                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No spillage.                                                                                                                                                                                                                         |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                      |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                                                                                                                                                                                      |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |
| b. Label is in proper dimension and bilingual?                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |
| c. Information is accurate and sufficient?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                  | Yes                                 | No                       | N/A                                 | Remarks                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-------------------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                             |                                     |                          |                                     |                               |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| c. Containers kept in receptacle of suitable material and construction (if quantity <50L) or drip trays capable of storing 110% of the volume of largest (if quantity >50L)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| f. Adequacy of area ventilation?                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| g. Outdoors storage area should be covered?                                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                               |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| <b>Storage of Liquid Waste</b>                                                                                                                                               |                                     |                          |                                     |                               |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No liquid waste was observed. |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                               |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                               |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                                                                                             |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landfill Gas Hazard<br/>(within LFG Consultation Zone)</b>                                              |                                     |                          |                                     |                                                                                                                                                     |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Lot is within LFG Consultation Zone. Tenant has alerted workers/visitors about possible LFG hazards. A notice is also posted at the visitor centre. |
| b. Smoking and open fires prohibited?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                     |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                     |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                     |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                     |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No monitoring equipment.                                                                                                                            |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                                                                                                                                     |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | There were no DGs stored on site.                                                                                                                   |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                     |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                     |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                     |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                     |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                     |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                     |

**Action Items from This Audit**

| No. | Action                              | Expected By |
|-----|-------------------------------------|-------------|
| 1.  | No critical issues were identified. | N/A         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit Dated 27 March 2014 | Status |
|-----|---------------------------------------------------|--------|
| 1.  | Nil.                                              | N/A    |

**Audit Summary and Sign-off**

The site was generally tidy.

|                     | ET                                                                                  | IEC*             | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd | St. James' Settlement                                                                | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Winnie MA</b>                                                                    | -                | <b>Stephen LUK</b>                                                                   | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Site Auditor                                                                     | IEC              | Assistant Manager                                                                    | Park Manager                                                                          |
| <b>Signature</b>    |  | -                |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

### Audit Details

**Tenant** St. James' Settlement WEEE GO GREEN

**Date & Time** **Date** 21 May 2014 **Time** 11:30am

**Lot No.** EP10-02

**Audit Ref.** 43

**IEC Joint Inspection**  Yes  No

**Weather Conditions**  Fine  Hazy  Overcast  Rain

**Wind**  Calm  Light Breeze  Strong Wind

**Temperature** 28<sup>o</sup>C

**Humidity**  Low  Medium  High

### 1. General

| Description                                                 | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The SGJV's Environmental Policy is documented. Tenant follows this.                                                                          |
| 1.3 Environmental Management Plan updated?                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's EMP is documented.                                                                                                              |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's ERP is documented.                                                                                                              |
| b. Drill / training records available?                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                              |
| 1.5 Employee's training record available?                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                              |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's WMP is documented.                                                                                                              |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                         |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Licence No. WT00007365-2010 valid until 31 Aug 2015.                            |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | A screen has been installed as treatment device.                                |
| If yes, facility is properly maintained and function normally?                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                          |                                     |                                                                                 |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | As per the discharge licence, self-monitoring shall be performed when required. |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |



**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                      | No                                  | N/A                                 | Remarks                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                          |                                     |                                     |                                                             |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | The risk of contamination for the recycling process is low. |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed.    |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No contaminated water was found.                            |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not observed.                                               |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| <b>Cargo Handling</b>                                                                                                                          |                          |                                     |                                     |                                                             |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |

**3. Air Quality**

|                        | <b>Description</b>                                                                                                                  | <b>Yes</b>                          | <b>No</b>                           | <b>N/A</b>                          | <b>Remarks</b>                                    |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------------------------------------------|
| 3.1                    | a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                     |
|                        | b. SP License conditions / monitoring requirements met?                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| <b>Odour</b>           |                                                                                                                                     |                                     |                                     |                                     |                                                   |
| 3.2                    | a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                   |
|                        | b. If yes, can the source be identified?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | c. Odorous materials are covered?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | d. If odour control system is installed, is it operating normally?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| 3.3                    | All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No dusty materials were found to be used on-site. |
| <b>Dust Monitoring</b> |                                                                                                                                     |                                     |                                     |                                     |                                                   |
| 3.4                    | a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                     |
|                        | b. Monitoring frequency met the requirement?                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | c. Any exceedance?                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | d. If yes, follow-up action taken?                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| 3.5                    | Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| 3.6                    | Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                   |

### 3. Air Quality (continued)

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site.     |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                            |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          |                                     |                                            |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                            |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                            |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                            |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                            |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                            |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | All relevant equipment is approved by EPD. |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Recorded by EPD.                           |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                            |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                            |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks                                                                                                                                                                                                                              |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Registration No. 9211-421-S3222-08 for spent lubricating oil, unwanted refrigerant and CRTs.                                                                                                                                         |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Waste from workshop is stored in temporary area and disposed of as general refuse twice a week <i>via</i> the Operator. Chemical waste is transported to EPD's Chemical Waste Treatment Centre by licensed collector once per month. |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Recyclable materials were passed to other recyclers.                                                                                                                                                                                 |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                      |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                                                                                                                                                                                      |
| 4.7 a. Stored in suitable container?                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |
| b. Container properly closed or sealed?                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No spillage.                                                                                                                                                                                                                         |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                      |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                                                                                                                                                                                      |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |
| b. Label is in proper dimension and bilingual?                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |
| c. Information is accurate and sufficient?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                  | Yes                                 | No                       | N/A                                 | Remarks                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-------------------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                             |                                     |                          |                                     |                               |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| c. Containers kept in receptacle of suitable material and construction (if quantity <50L) or drip trays capable of storing 110% of the volume of largest (if quantity >50L)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| f. Adequacy of area ventilation?                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| g. Outdoors storage area should be covered?                                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                               |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| <b>Storage of Liquid Waste</b>                                                                                                                                               |                                     |                          |                                     |                               |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No liquid waste was observed. |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                               |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                               |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                                                                                             |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landfill Gas Hazard<br/>(within LFG Consultation Zone)</b>                                              |                                     |                          |                                     |                                                                                                                                                     |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Lot is within LFG Consultation Zone. Tenant has alerted workers/visitors about possible LFG hazards. A notice is also posted at the visitor centre. |
| b. Smoking and open fires prohibited?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                     |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                     |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                     |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                     |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No monitoring equipment.                                                                                                                            |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                                                                                                                                     |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | There were no DGs stored on site.                                                                                                                   |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                     |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                     |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                     |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                     |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                     |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                     |

**Action Items from This Audit**

| No. | Action                              | Expected By |
|-----|-------------------------------------|-------------|
| 1.  | No critical issues were identified. | N/A         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit Dated 22 April 2014 | Status |
|-----|---------------------------------------------------|--------|
| 1.  | Nil.                                              | N/A    |

**Audit Summary and Sign-off**

The site was generally tidy.

|                     | ET                                                                                  | IEC*             | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd | St. James' Settlement                                                                | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Winnie MA</b>                                                                    | -                | <b>Stephen LUK</b>                                                                   | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Site Auditor                                                                     | IEC              | Assistant Manager                                                                    | Park Manager                                                                          |
| <b>Signature</b>    |  | -                |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

### Audit Details

|                             |                                          |                                                  |                                                                 |
|-----------------------------|------------------------------------------|--------------------------------------------------|-----------------------------------------------------------------|
| <b>Tenant</b>               | St. James' Settlement WEEE GO GREEN      |                                                  |                                                                 |
| <b>Date &amp; Time</b>      | <b>Date</b> 18 June 2014                 | <b>Time</b> 11:30am                              |                                                                 |
| <b>Lot No.</b>              | EP10-02                                  |                                                  |                                                                 |
| <b>Audit Ref.</b>           | 44                                       |                                                  |                                                                 |
| <b>IEC Joint Inspection</b> | <input checked="" type="checkbox"/> Yes  | <input type="checkbox"/> No                      |                                                                 |
| <b>Weather Conditions</b>   | <input checked="" type="checkbox"/> Fine | <input type="checkbox"/> Hazy                    | <input type="checkbox"/> Overcast <input type="checkbox"/> Rain |
| <b>Wind</b>                 | <input type="checkbox"/> Calm            | <input checked="" type="checkbox"/> Light Breeze | <input type="checkbox"/> Strong Wind                            |
| <b>Temperature</b>          | 32 <sup>o</sup> C                        |                                                  |                                                                 |
| <b>Humidity</b>             | <input type="checkbox"/> Low             | <input checked="" type="checkbox"/> Medium       | <input type="checkbox"/> High                                   |

### 1. General

|     | Description                                             | Yes                                 | No                                  | N/A                                 | Remarks                                                                                                                                      |
|-----|---------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 | EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 | Environmental Policy documented?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The SGJV's Environmental Policy is documented. Tenant follows this.                                                                          |
| 1.3 | Environmental Management Plan updated?                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's EMP is documented.                                                                                                              |
| 1.4 | a. Emergency Response Plan (ERP) documented?            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's ERP is documented.                                                                                                              |
|     | b. Drill / training records available?                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                              |
| 1.5 | Employee's training record available?                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                              |
| 1.6 | Any record of prosecution / complaint?                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                              |
| 1.7 | Waste Management Plan?                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The Tenant's WMP is documented.                                                                                                              |



## 2. Water Quality

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                         |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Licence No. WT00007365-2010 valid until 31 Aug 2015.                            |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | A screen has been installed as treatment device.                                |
| If yes, facility is properly maintained and function normally?                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                          |                                     |                                                                                 |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | As per the discharge licence, self-monitoring shall be performed when required. |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                 |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                 |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                      | No                                  | N/A                                 | Remarks                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                          |                                     |                                     |                                                             |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | The risk of contamination for the recycling process is low. |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed.    |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No contaminated water was found.                            |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not observed.                                               |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| <b>Cargo Handling</b>                                                                                                                          |                          |                                     |                                     |                                                             |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |

**3. Air Quality**

|                        | Description                                                                                                                         | Yes                                 | No                                  | N/A                                 | Remarks                                           |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------------------------------------------|
| 3.1                    | a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                     |
|                        | b. SP License conditions / monitoring requirements met?                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| <b>Odour</b>           |                                                                                                                                     |                                     |                                     |                                     |                                                   |
| 3.2                    | a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                                   |
|                        | b. If yes, can the source be identified?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | c. Odorous materials are covered?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | d. If odour control system is installed, is it operating normally?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| 3.3                    | All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No dusty materials were found to be used on-site. |
| <b>Dust Monitoring</b> |                                                                                                                                     |                                     |                                     |                                     |                                                   |
| 3.4                    | a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                     |
|                        | b. Monitoring frequency met the requirement?                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | c. Any exceedance?                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
|                        | d. If yes, follow-up action taken?                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| 3.5                    | Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                   |
| 3.6                    | Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                   |

**3. Air Quality (continued)**

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site.     |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                            |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          |                                     |                                            |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                            |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                            |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                            |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                            |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                            |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | All relevant equipment is approved by EPD. |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Recorded by EPD.                           |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                            |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                            |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks                                                                                                                                                                                                                              |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Registration No. 9211-421-S3222-08 for spent lubricating oil, unwanted refrigerant and CRTs.                                                                                                                                         |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Waste from workshop is stored in temporary area and disposed of as general refuse twice a week <i>via</i> the Operator. Chemical waste is transported to EPD's Chemical Waste Treatment Centre by licensed collector once per month. |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Recyclable materials were passed to other recyclers.                                                                                                                                                                                 |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                      |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                                                                                                                                                                                      |
| 4.7 a. Stored in suitable container?                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |
| b. Container properly closed or sealed?                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No spillage.                                                                                                                                                                                                                         |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                      |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                                                                                                                                                                                                      |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |
| b. Label is in proper dimension and bilingual?                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |
| c. Information is accurate and sufficient?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                                                                                                      |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                  | Yes                                 | No                       | N/A                                 | Remarks                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-------------------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                             |                                     |                          |                                     |                               |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| c. Containers kept in receptacle of suitable material and construction (if quantity <50L) or drip trays capable of storing 110% of the volume of largest (if quantity >50L)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| f. Adequacy of area ventilation?                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| g. Outdoors storage area should be covered?                                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                               |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                               |
| <b>Storage of Liquid Waste</b>                                                                                                                                               |                                     |                          |                                     |                               |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No liquid waste was observed. |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                               |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                               |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                                                                                                             |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landfill Gas Hazard<br/>(within LFG Consultation Zone)</b>                                              |                                     |                          |                                     |                                                                                                                                                     |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Lot is within LFG Consultation Zone. Tenant has alerted workers/visitors about possible LFG hazards. A notice is also posted at the visitor centre. |
| b. Smoking and open fires prohibited?                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                     |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                     |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                     |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                     |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No monitoring equipment.                                                                                                                            |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                                                                                                                                     |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | There were no DGs stored on site.                                                                                                                   |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                     |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                     |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                     |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                     |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                                     |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                                                                                                                     |

**Action Items from This Audit**

| No. | Action                              | Expected By |
|-----|-------------------------------------|-------------|
| 1.  | No critical issues were identified. | N/A         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit Dated 21 May 2014 | Status |
|-----|-------------------------------------------------|--------|
| 1.  | Nil.                                            | N/A    |

**Audit Summary and Sign-off**

The site was generally tidy.

|              | ET                                                                                  | IEC*                                                                                | Tenant                                                                               | Operator                                                                              |
|--------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| Organisation | SMEC Asia Ltd                                                                       | Atkins China Ltd                                                                    | St. James' Settlement                                                                | Serco Guardian JV                                                                     |
| Signed By    | <b>Antony WONG</b>                                                                  | <b>Sharifah OR</b>                                                                  | <b>Stephen LUK</b>                                                                   | <b>Mabel YUNG</b>                                                                     |
| Role         | ET Leader                                                                           | IEC                                                                                 | Assistant Manager                                                                    | Park Manager                                                                          |
| Signature    |  |  |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection



## **APPENDIX 6-8**

### **Tenant-specific Audit Checklists for the Reporting Quarter**

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Chung Yue Steel Group Co Ltd

### Audit Details

**Tenant** Chung Yue Steel Group Company Limited

**Date & Time** **Date** 22 April 2014 **Time** 10:30am

**Lot No.** EP11-01(1)

**Audit Ref.** 04

**IEC Joint Inspection**  Yes  No

**Weather Conditions**  Fine  Hazy  Overcast  Rain

**Wind**  Calm  Light Breeze  Strong Wind

**Temperature** 26 °C

**Humidity**  Low  Medium  High

### 1. General

| Description                                                 | Yes                      | No                       | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|--------------------------|--------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | SGJV's Environmental Policy is documented.                                                                                                   |
| 1.3 Environmental Management Plan updated?                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                              |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | SGJV's ERP is documented.                                                                                                                    |
| b. Drill / training records available?                      | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | The Tenant advised the training records were kept at their HR department.                                                                    |
| 1.5 Employee's training record available?                   | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | The Tenant keeps a training record.                                                                                                          |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | SGJV's WMP is documented.                                                                                                                    |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No wastewater is generated from the recycling process. |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| If yes, facility is properly maintained and function normally?                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                          |                                     |                                                        |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                                 | No                                  | N/A                                 | Remarks                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                                     |                                     |                                     |                                                             |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The risk of contamination for the recycling process is low. |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed.    |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No contaminated water was found.                            |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| <b>Cargo Handling</b>                                                                                                                          |                                     |                                     |                                     |                                                             |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |

**3. Air Quality**

|     | Description                                                                                                                         | Yes                                 | No                                  | N/A                                 | Remarks       |
|-----|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------|
| 3.1 | a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
|     | b. SP License conditions / monitoring requirements met?                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | <b>Odour</b>                                                                                                                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
| 3.2 | a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
|     | b. If yes, can the source be identified?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | c. Odorous materials are covered?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | d. If odour control system is installed, is it operating normally?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.3 | All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | <b>Dust Monitoring</b>                                                                                                              | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
| 3.4 | a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | b. Monitoring frequency met the requirement?                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | c. Any exceedance?                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | d. If yes, follow-up action taken?                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.5 | Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.6 | Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |

### 3. Air Quality (continued)

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|----------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site. |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          |                                     |                                        |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required.                          |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks                                              |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Registration is being processed.                     |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | MSW is disposed of daily via the Operator.           |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Recyclable materials were passed to other recyclers. |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                      |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                      |
| 4.7 a. Stored in suitable container?                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| b. Container properly closed or sealed?                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No spillage.                                         |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                      |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                      |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| b. Label is in proper dimension and bilingual?                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| c. Information is accurate and sufficient?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                  | Yes                                 | No                       | N/A                                 | Remarks             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                             |                                     |                          |                                     |                     |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| c. Containers kept in receptacle of suitable material and construction (if quantity <50L) or drip trays capable of storing 110% of the volume of largest (if quantity >50L)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| f. Adequacy of area ventilation?                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| g. Outdoors storage area should be covered?                                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No on-site storage. |
| <b>Storage of Liquid Waste</b>                                                                                                                                               |                                     |                          |                                     |                     |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |



**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                            |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|------------------------------------|
| <b>Landfill Gas Hazard (within LFG Consultation Zone)</b>                                                  |                                     |                          |                                     |                                    |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Outside the LFG Consultation Zone. |
| b. Smoking and open fires prohibited?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No monitoring equipment.           |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                    |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | There were no DGs stored on site.  |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |

**Action Items from This Audit**

| No. | Action                                        | Expected By |
|-----|-----------------------------------------------|-------------|
| 1.  | No critical environmental issue was observed. | Nil         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit on Dated 27 March 2014 | Status |
|-----|------------------------------------------------------|--------|
| 1.  | Nil                                                  | N/A    |

**Audit Summary and Sign-off**

No critical environmental issue was observed.

|                     | ET                                                                                  | IEC*             | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd | Chung Yue                                                                            | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Winnie MA</b>                                                                    | -                | <b>Tony KWOK</b>                                                                     | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Site Auditor                                                                     | IEC              | Manager                                                                              | Park Manager                                                                          |
| <b>Signature</b>    |  | -                |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

### Audit Details

**Tenant** Chung Yue Steel Group Company Limited

**Date & Time** **Date** 21 May 2014 **Time** 10:30am

**Lot No.** EP11-01(1)

**Audit Ref.** 05

**IEC Joint Inspection**  Yes  No

**Weather Conditions**  Fine  Hazy  Overcast  Rain

**Wind**  Calm  Light Breeze  Strong Wind

**Temperature** 28 °C

**Humidity**  Low  Medium  High

### 1. General

| Description                                                 | Yes                      | No                       | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|--------------------------|--------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | SGJV's Environmental Policy is documented.                                                                                                   |
| 1.3 Environmental Management Plan updated?                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                              |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | SGJV's ERP is documented.                                                                                                                    |
| b. Drill / training records available?                      | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | The Tenant advised the training records were kept at their HR department.                                                                    |
| 1.5 Employee's training record available?                   | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | The Tenant keeps a training record.                                                                                                          |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | SGJV's WMP is documented.                                                                                                                    |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No wastewater is generated from the recycling process. |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| If yes, facility is properly maintained and function normally?                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                          |                                     |                                                        |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                                 | No                                  | N/A                                 | Remarks                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                                     |                                     |                                     |                                                             |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The risk of contamination for the recycling process is low. |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed.    |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No contaminated water was found.                            |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| <b>Cargo Handling</b>                                                                                                                          |                                     |                                     |                                     |                                                             |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |

### 3. Air Quality

|     | Description                                                                                                                         | Yes                                 | No                                  | N/A                                 | Remarks       |
|-----|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------|
| 3.1 | a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
|     | b. SP License conditions / monitoring requirements met?                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | <b>Odour</b>                                                                                                                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
| 3.2 | a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
|     | b. If yes, can the source be identified?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | c. Odorous materials are covered?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | d. If odour control system is installed, is it operating normally?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.3 | All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | <b>Dust Monitoring</b>                                                                                                              | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
| 3.4 | a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | b. Monitoring frequency met the requirement?                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | c. Any exceedance?                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | d. If yes, follow-up action taken?                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.5 | Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.6 | Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |

**3. Air Quality (continued)**

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|----------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site. |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          |                                     |                                        |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required.                          |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |

#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks                                              |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Registration is being processed.                     |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | MSW is disposed of daily via the Operator.           |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Recyclable materials were passed to other recyclers. |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                      |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                      |
| 4.7 a. Stored in suitable container?                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| b. Container properly closed or sealed?                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No spillage.                                         |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                      |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                      |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| b. Label is in proper dimension and bilingual?                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| c. Information is accurate and sufficient?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |



**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                                                 | Yes                                 | No                       | N/A                                 | Remarks             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                                                            |                                     |                          |                                     |                     |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| c. Containers kept in receptacle of suitable material and construction ( <i>if quantity &lt;50L</i> ) <u>or</u> drip trays capable of storing 110% of the volume of largest ( <i>if quantity &gt;50L</i> )? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| f. Adequacy of area ventilation?                                                                                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| g. Outdoors storage area should be covered?                                                                                                                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No on-site storage. |
| <b>Storage of Liquid Waste</b>                                                                                                                                                                              |                                     |                          |                                     |                     |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                            |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|------------------------------------|
| <b>Landfill Gas Hazard (within LFG Consultation Zone)</b>                                                  |                                     |                          |                                     |                                    |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Outside the LFG Consultation Zone. |
| b. Smoking and open fires prohibited?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No monitoring equipment.           |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                    |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | There were no DGs stored on site.  |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |

**Action Items from This Audit**

| No. | Action                                        | Expected By |
|-----|-----------------------------------------------|-------------|
| 1.  | No critical environmental issue was observed. | Nil         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit on Dated 22 April 2014 | Status |
|-----|------------------------------------------------------|--------|
| 1.  | Nil                                                  | N/A    |

**Audit Summary and Sign-off**

No critical environmental issue was observed.

|                     | ET                                                                                  | IEC*             | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd | Chung Yue                                                                            | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Winnie MA</b>                                                                    | -                | <b>Tony KWOK</b>                                                                     | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Site Auditor                                                                     | IEC              | Manager                                                                              | Park Manager                                                                          |
| <b>Signature</b>    |  | -                |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

### Audit Details

**Tenant** Chung Yue Steel Group Company Limited

**Date & Time** **Date** 18 June 2014 **Time** 10:30am

**Lot No.** EP11-01(1)

**Audit Ref.** 06

**IEC Joint Inspection**  Yes  No

**Weather Conditions**  Fine  Hazy  Overcast  Rain

**Wind**  Calm  Light Breeze  Strong Wind

**Temperature** 32 °C

**Humidity**  Low  Medium  High

### 1. General

| Description                                                 | Yes                      | No                       | N/A                                 | Remarks                                                                                                                                      |
|-------------------------------------------------------------|--------------------------|--------------------------|-------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| 1.1 EP for Tenant displayed on notice boards / at entrance? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | EP for EcoPark (EP-226/2005/C) issued on August 5 <sup>th</sup> 2013 is displayed at the entrance of EcoPark. EP for Tenant is not required. |
| 1.2 Environmental Policy documented?                        | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | SGJV's Environmental Policy is documented.                                                                                                   |
| 1.3 Environmental Management Plan updated?                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                              |
| 1.4 a. Emergency Response Plan (ERP) documented?            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | SGJV's ERP is documented.                                                                                                                    |
| b. Drill / training records available?                      | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | The Tenant advised the training records were kept at their HR department.                                                                    |
| 1.5 Employee's training record available?                   | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | The Tenant keeps a training record.                                                                                                          |
| 1.6 Any record of prosecution / complaint?                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                                                                                                              |
| 1.7 Waste Management Plan?                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | SGJV's WMP is documented.                                                                                                                    |

## 2. Water Quality

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                                                |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------|
| 2.1 Valid Effluent Discharge License available?                                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No wastewater is generated from the recycling process. |
| 2.2 Any wastewater treatment facility prior to effluent discharge?                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| If yes, facility is properly maintained and function normally?                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| <b>Effluent Monitoring</b>                                                                                 |                                     |                          |                                     |                                                        |
| 2.3 a. Sampling / Monitoring Record available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| b. Monitoring frequency met the license requirement?                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| c. Any exceedance?                                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| d. If yes, follow-up action taken?                                                                         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| 2.4 Surface run-off control measures in place and adequately maintained?                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                        |
| 2.5 Surface run-off discharging into drainage system?                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |
| 2.6 All manholes are covered?                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |
| 2.7 Foam, oil, grease, litter or other objectionable matters in water of nearby drain / sewer are avoided? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |
| 2.8 Drainage system is well maintained to prevent flooding and overflow?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                        |

**2. Water Quality (continued)**

| Description                                                                                                                                    | Yes                                 | No                                  | N/A                                 | Remarks                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------------------------------|
| <b>Processes with high Risk of Contamination</b>                                                                                               |                                     |                                     |                                     |                                                             |
| 2.9 a. Processes / activities are located under a covered area?                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | The risk of contamination for the recycling process is low. |
| b. Stop-logs installed in the perimeter drainage system for uncovered areas?                                                                   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Stop-logs are available for use by the Tenant if needed.    |
| c. Contaminated water collected in the surface drainage systems is treated at water treatment facility / other appropriate treatment facility? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | No contaminated water was found.                            |
| 2.10 Equipment oil and lubrication replacements are performed only in bunded maintenance area?                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| 2.11 a. Oil interceptor provided for drainage discharging from maintenance area?                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. If yes, oil and grease removed regularly?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| c. Collected by licensed collector?                                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |
| <b>Cargo Handling</b>                                                                                                                          |                                     |                                     |                                     |                                                             |
| 2.12 a. Cargo Handling Guideline available and followed to minimise chance of accidental spillage when loading or unloading?                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required.                                               |
| b. Materials and bulk cargo are properly packed?                                                                                               | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                             |

**3. Air Quality**

|     | Description                                                                                                                         | Yes                                 | No                                  | N/A                                 | Remarks       |
|-----|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------|
| 3.1 | a. Valid Specified Process License for all specified process available?                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
|     | b. SP License conditions / monitoring requirements met?                                                                             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | <b>Odour</b>                                                                                                                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
| 3.2 | a. Any odour detected?                                                                                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |               |
|     | b. If yes, can the source be identified?                                                                                            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | c. Odorous materials are covered?                                                                                                   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | d. If odour control system is installed, is it operating normally?                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.3 | All dusty materials are sprayed with water or covered by impervious sheeting prior to any loading, unloading or transfer operation? | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | <b>Dust Monitoring</b>                                                                                                              | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Not required. |
| 3.4 | a. Monitoring Record available?                                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | b. Monitoring frequency met the requirement?                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | c. Any exceedance?                                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
|     | d. If yes, follow-up action taken?                                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.5 | Enclosures are provided around the main dust-generating activities?                                                                 | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |               |
| 3.6 | Is no open burning carried out?                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |               |

### 3. Air Quality (continued)

| Description                                                                                                                                         | Yes                                 | No                       | N/A                                 | Remarks                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|----------------------------------------|
| 3.7 Is no dark smoke emitted from chimney or powered plant?                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | There is no chimney installed on-site. |
| 3.8 Vehicles and equipment are switched off while not in use?                                                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.9 Approval certificate issued by the Authority is available for furnace, oven or chimney consuming:                                               |                                     |                          |                                     |                                        |
| a. >25L of conventional liquid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| b. >35kg of conventional solid fuel per hour                                                                                                        | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| c. >1,150 MJ of any gaseous fuel per hour                                                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.10 Approval from Authority is available for the use of liquid fuel with a viscosity point of ignition >30 centistokes or an equivalent viscosity? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.11 Dust collected by any air pollution control equipment installed by tenants must be tested to ensure compliance for landfill disposal.          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.12 a. Approval from Authority for the use of controlled refrigerant?                                                                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Not required.                          |
| b. If yes, record of refrigeration equipment service available?                                                                                     | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                        |
| 3.13 All air pollution control systems are properly maintained and function normally?                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |
| 3.14 Only Ultra-Low Sulphur Diesel is used?                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                        |



#### 4. Waste / Chemical Management

| Description                                                                                                           | Yes                                 | No                       | N/A                                 | Remarks                                              |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|------------------------------------------------------|
| 4.1 Chemical Waste Producer Registration completed?                                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Registration is being processed.                     |
| 4.2 Provision of sufficient waste disposal points/ receptacles?                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| 4.3 Waste disposed of regularly and properly?                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | MSW is disposed of daily via the Operator.           |
| 4.4 Sorting of materials on-site for reuse or disposal to designated outlet?                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Recyclable materials were passed to other recyclers. |
| 4.5 Record of quantities of waste generated, recycled and disposed properly kept and easily retrieved for inspection? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| 4.6 Sludge is collected by a licensed collector at regular intervals?                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                      |
| <b>Packaging of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                      |
| 4.7 a. Stored in suitable container?                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| b. Container properly closed or sealed?                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| c. Spillage cleaned up immediately through the use of an absorbent?                                                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No spillage.                                         |
| d. Approval obtained for capacity of containers > 450L?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                                      |
| <b>Labelling of Chemical Waste</b>                                                                                    |                                     |                          |                                     |                                                      |
| 4.8 a. Label is securely attached, clean and visible?                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| b. Label is in proper dimension and bilingual?                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |
| c. Information is accurate and sufficient?                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                                      |

**4. Waste / Chemical Management (continued)**

| Description                                                                                                                                                                                                 | Yes                                 | No                       | N/A                                 | Remarks             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------|
| <b>Storage of Chemical Waste</b>                                                                                                                                                                            |                                     |                          |                                     |                     |
| 4.9 a. Proper "Chemical Waste" signs are displayed?                                                                                                                                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| b. Incompatible wastes separated by an impermeable partition?                                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| c. Containers kept in receptacle of suitable material and construction ( <i>if quantity &lt;50L</i> ) <u>or</u> drip trays capable of storing 110% of the volume of largest ( <i>if quantity &gt;50L</i> )? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| d. Enclosed on 3 sides with no less than 2m in height or height of tallest container or stack of containers?                                                                                                | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| e. Containers with chemical waste are properly stored and locked at designated area which is clean and dry?                                                                                                 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| f. Adequacy of area ventilation?                                                                                                                                                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| g. Outdoors storage area should be covered?                                                                                                                                                                 | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| 4.10 Chemical wastes are collected by a licensed chemical waste collector? (retention of trip ticket copies for 12 months)                                                                                  | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No on-site storage. |
| <b>Storage of Liquid Waste</b>                                                                                                                                                                              |                                     |                          |                                     |                     |
| 4.11 a. Storage area floor/surface permeation-proof?                                                                                                                                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |
| b. Capacity of retention structure sufficient to accommodate contents of the largest container or 20% volume of waste in storage?                                                                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                     |
| c. Walls or partitions of stacked container storage area constructed of impermeable material?                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                     |

**5. Other Issues**

| Description                                                                                                | Yes                                 | No                       | N/A                                 | Remarks                            |
|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|------------------------------------|
| <b>Landfill Gas Hazard (within LFG Consultation Zone)</b>                                                  |                                     |                          |                                     |                                    |
| 5.1 a. Workers and visitors alerted to possible LFG hazards?                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Outside the LFG Consultation Zone. |
| b. Smoking and open fires prohibited?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.2 Security lighting directed downward into the work areas to prevent glare to the surrounding receivers? | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.3 Good housekeeping?                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |
| 5.4 Any areas within the lot to be used for recycling processes are concrete paved?                        | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |
| 5.5 Valid calibration certificate for any monitoring equipment?                                            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | No monitoring equipment.           |
| <b>Dangerous Goods</b>                                                                                     |                                     |                          |                                     |                                    |
| 5.6 a. Valid license for manufacturing / storing dangerous goods?                                          | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | There were no DGs stored on site.  |
| b. Storage area in compliance with the approved plan?                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| c. Storage area(s) has been securely locked?                                                               | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| d. Total storage capacity in compliance with the relevant statutory requirement?                           | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| e. Proper Labelling?                                                                                       | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| f. Dangerous goods properly packaged?                                                                      | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                    |
| 5.7 Potential stagnant pools cleared and mosquito breeding prevented?                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |                                    |

**Action Items from This Audit**

| No. | Action                                        | Expected By |
|-----|-----------------------------------------------|-------------|
| 1.  | No critical environmental issue was observed. | Nil         |

**Follow-up from Previous Audits**

| No. | Follow-up from Previous Audit on Dated 21 May 2014 | Status |
|-----|----------------------------------------------------|--------|
| 1.  | Nil                                                | N/A    |

**Audit Summary and Sign-off**

No critical environmental issue was observed.

|                     | ET                                                                                  | IEC*                                                                                | Tenant                                                                               | Operator                                                                              |
|---------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                       | Atkins China Ltd                                                                    | Chung Yue                                                                            | Serco Guardian JV                                                                     |
| <b>Signed By</b>    | <b>Antony WONG</b>                                                                  | <b>Keith CHAU</b>                                                                   | <b>Tony KWOK</b>                                                                     | <b>Mabel YUNG</b>                                                                     |
| <b>Role</b>         | ET Leader                                                                           | IEC's Representative                                                                | Manager                                                                              | Park Manager                                                                          |
| <b>Signature</b>    |  |  |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

## APPENDIX 7

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### General EcoPark Checklists for the Reporting Quarter

### Audit Details

**Date & Time**      **Date** 22 April 2014      **Time** 9:45am to 11:45pm

**Weather Conditions**     Fine       Hazy       Overcast       Rain

**Wind**       Calm       Light Breeze       Strong Wind




**Temperature**      26 °C

**Humidity**       Low       Medium       High

### Action Items from This Audit

| ID | ET Findings / Recommendations                                                                                                         | Operator / Tenant Follow-up Action |
|----|---------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
|    | <b>Cosmos Star Holdings Co.</b>                                                                                                       |                                    |
| 1. | The site entrance was locked and the lot could not be accessed. No issues were found based on the observation from the site entrance. | Nil                                |
|    | <b>K. Wah Construction Products Ltd.</b>                                                                                              |                                    |
| 2. | Nil                                                                                                                                   | Nil                                |
|    | <b>SSK Metal Ltd.</b>                                                                                                                 |                                    |
| 3. | Nil                                                                                                                                   | Nil                                |
|    | <b>E. Tech Management (HK) Ltd.</b>                                                                                                   |                                    |
| 4. | Nil                                                                                                                                   | Nil                                |
|    | <b>On Fat Lung Electrical &amp; Metal Co. Ltd.</b>                                                                                    |                                    |
| 5. | Nil                                                                                                                                   | Nil                                |
|    | <b>South China Reborn Resources (Zhongshan) Company Limited</b>                                                                       |                                    |
| 6. | Nil                                                                                                                                   | Nil                                |
|    | <b>Other Areas</b>                                                                                                                    |                                    |
| 7. | Nil                                                                                                                                   | Nil                                |

Follow-up from Previous Audits

| ID                                                              | ET Findings / Recommendations                                                                                                                                              | Operator / Tenant Follow-up Action                                                                                                                                                                                                 |
|-----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Cosmos Star Holdings Co.</b>                                 |                                                                                                                                                                            |                                                                                                                                                                                                                                    |
| 1.                                                              | Nil                                                                                                                                                                        | Nil                                                                                                                                                                                                                                |
| <b>K. Wah Construction Products Ltd.</b>                        |                                                                                                                                                                            |                                                                                                                                                                                                                                    |
| 2.                                                              | A stockpile of C&D waste was observed near site entrance.                                                                                                                  | Based on the photograph taken at K.Wah on 14 April 2014 by SGJV, the tenant cleared C&D waste on 14 April 2014. No significant amount of waste was found to be stockpiled during the site visit on 22 April 2014 <b>(Closed)</b> . |
|                                                                 |                                                                                           |                                                                                                                                                  |
|                                                                 | Water inside the waste water tank was too shallow to be pumped out but the submersible pump was still being operated. In addition, C&D waste was observed inside the tank. | Photo on 14 April 2014<br>No significant amount of waste and stagnant water was observed inside the waste water tank. <b>(Closed)</b>                                                                                              |
|                                                                 |                                                                                         |                                                                                                                                                                                                                                    |
| <b>SSK Metal Ltd.</b>                                           |                                                                                                                                                                            |                                                                                                                                                                                                                                    |
| 3.                                                              | Nil                                                                                                                                                                        | Nil                                                                                                                                                                                                                                |
| <b>E. Tech Management (HK) Ltd.</b>                             |                                                                                                                                                                            |                                                                                                                                                                                                                                    |
| 4.                                                              | Nil                                                                                                                                                                        | Nil                                                                                                                                                                                                                                |
| <b>On Fat Lung Electrical &amp; Metal Co. Ltd.</b>              |                                                                                                                                                                            |                                                                                                                                                                                                                                    |
| 5.                                                              | Nil                                                                                                                                                                        | Nil                                                                                                                                                                                                                                |
| <b>South China Reborn Resources (Zhongshan) Company Limited</b> |                                                                                                                                                                            |                                                                                                                                                                                                                                    |
| 6.                                                              | Nil                                                                                                                                                                        | Nil                                                                                                                                                                                                                                |
| <b>Other Areas</b>                                              |                                                                                                                                                                            |                                                                                                                                                                                                                                    |
| 7.                                                              | Nil                                                                                                                                                                        | Nil                                                                                                                                                                                                                                |

**Observations and Sign-off**

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|                     | ET                                                                                | IEC*             | Operator                                                                            |
|---------------------|-----------------------------------------------------------------------------------|------------------|-------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                     | Atkins China Ltd | Serco Guardian JV                                                                   |
| <b>Signed By</b>    | <b>Winnie MA</b>                                                                  | -                | <b>Mabel YUNG</b>                                                                   |
| <b>Role</b>         | ET Site Auditor                                                                   | IEC              | Park Manager                                                                        |
| <b>Signature</b>    |  | -                |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection



### Audit Details

**Date & Time**      **Date** 21 May 2014      **Time** 9:45am to 11:45pm

**Weather Conditions**     Fine       Hazy       Overcast       Rain

**Wind**       Calm       Light Breeze       Strong Wind

**Temperature**      28 °C

**Humidity**       Low       Medium       High

### Action Items from This Audit

| ID | ET Findings / Recommendations                                                                                                         | Operator / Tenant Follow-up Action |
|----|---------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
|    | <b>Cosmos Star Holdings Co.</b>                                                                                                       |                                    |
| 1. | The site entrance was locked and the lot could not be accessed. No issues were found based on the observation from the site entrance. | Nil                                |
|    | <b>K. Wah Construction Products Ltd.</b>                                                                                              |                                    |
| 2. | Nil                                                                                                                                   | Nil                                |
|    | <b>SSK Metal Ltd.</b>                                                                                                                 |                                    |
| 3. | Nil                                                                                                                                   | Nil                                |
|    | <b>E. Tech Management (HK) Ltd.</b>                                                                                                   |                                    |
| 4. | Nil                                                                                                                                   | Nil                                |
|    | <b>On Fat Lung Electrical &amp; Metal Co. Ltd.</b>                                                                                    |                                    |
| 5. | Nil                                                                                                                                   | Nil                                |
|    | <b>South China Reborn Resources (Zhongshan) Company Limited</b>                                                                       |                                    |
| 6. | Nil                                                                                                                                   | Nil                                |
|    | <b>Other Areas</b>                                                                                                                    |                                    |
| 7. | Nil                                                                                                                                   | Nil                                |

**Follow-up from Previous Audits**

| <b>ID</b> | <b>ET Findings / Recommendations</b>                                | <b>Operator / Tenant Follow-up Action</b> |
|-----------|---------------------------------------------------------------------|-------------------------------------------|
|           | <b>Cosmos Star Holdings Co.</b>                                     |                                           |
| 1.        | Nil                                                                 | Nil                                       |
|           | <b>K. Wah Construction Products Ltd.</b>                            |                                           |
| 2.        | Nil                                                                 | Nil                                       |
|           | <b>SSK Metal Ltd.</b>                                               |                                           |
| 3.        | Nil                                                                 | Nil                                       |
|           | <b>E. Tech Management (HK) Ltd.</b>                                 |                                           |
| 4.        | Nil                                                                 | Nil                                       |
|           | <b>On Fat Lung Electrical &amp; Metal Co. Ltd.</b>                  |                                           |
| 5.        | Nil                                                                 | Nil                                       |
|           | <b>South China Reborn Resources (Zhongshan)<br/>Company Limited</b> |                                           |
| 6.        | Nil                                                                 | Nil                                       |
|           | <b>Other Areas</b>                                                  |                                           |
| 7.        | Nil                                                                 | Nil                                       |

**Observations and Sign-off**

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|                     | ET                                                                                | IEC*             | Operator                                                                            |
|---------------------|-----------------------------------------------------------------------------------|------------------|-------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                     | Atkins China Ltd | Serco Guardian JV                                                                   |
| <b>Signed By</b>    | <b>Winnie MA</b>                                                                  | -                | <b>Mabel YUNG</b>                                                                   |
| <b>Role</b>         | ET Site Auditor                                                                   | IEC              | Park Manager                                                                        |
| <b>Signature</b>    |  | -                |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection

### Audit Details

**Date & Time**      **Date** 18 June 2014      **Time** 9:45am to 11:45pm

**Weather Conditions**     Fine       Hazy       Overcast       Rain

**Wind**                     Calm       Light Breeze       Strong Wind

**Temperature**            32 °C

**Humidity**                 Low       Medium       High

### Action Items from This Audit

| ID | ET Findings / Recommendations | Operator / Tenant Follow-up Action |
|----|-------------------------------|------------------------------------|
|----|-------------------------------|------------------------------------|

**Cosmos Star Holdings Co.**

|    |                                                                                                                                       |     |
|----|---------------------------------------------------------------------------------------------------------------------------------------|-----|
| 1. | The site entrance was locked and the lot could not be accessed. No issues were found based on the observation from the site entrance. | Nil |
|----|---------------------------------------------------------------------------------------------------------------------------------------|-----|

**K. Wah Construction Products Ltd.**

|    |     |     |
|----|-----|-----|
| 2. | Nil | Nil |
|----|-----|-----|

**SSK Metal Ltd.**

|    |     |     |
|----|-----|-----|
| 3. | Nil | Nil |
|----|-----|-----|

**E. Tech Management (HK) Ltd.**

|    |     |     |
|----|-----|-----|
| 4. | Nil | Nil |
|----|-----|-----|

**On Fat Lung Electrical & Metal Co. Ltd.**

|    |     |     |
|----|-----|-----|
| 5. | Nil | Nil |
|----|-----|-----|

**South China Reborn Resources (Zhongshan) Company Limited**

|    |                                                                                                                                                                                   |     |
|----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| 6. | Tyre marks were observed outside the site entrance of the lot. The Contractor was reminded to clean up the site entrance and thoroughly clean vehicles prior to leaving the site. | Nil |
|----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|



**Other Areas**

|    |     |     |
|----|-----|-----|
| 7. | Nil | Nil |
|----|-----|-----|

**Follow-up from Previous Audits**

| <b>ID</b> | <b>ET Findings / Recommendations</b>                                | <b>Operator / Tenant Follow-up Action</b> |
|-----------|---------------------------------------------------------------------|-------------------------------------------|
|           | <b>Cosmos Star Holdings Co.</b>                                     |                                           |
| 1.        | Nil                                                                 | Nil                                       |
|           | <b>K. Wah Construction Products Ltd.</b>                            |                                           |
| 2.        | Nil                                                                 | Nil                                       |
|           | <b>SSK Metal Ltd.</b>                                               |                                           |
| 3.        | Nil                                                                 | Nil                                       |
|           | <b>E. Tech Management (HK) Ltd.</b>                                 |                                           |
| 4.        | Nil                                                                 | Nil                                       |
|           | <b>On Fat Lung Electrical &amp; Metal Co. Ltd.</b>                  |                                           |
| 5.        | Nil                                                                 | Nil                                       |
|           | <b>South China Reborn Resources (Zhongshan)<br/>Company Limited</b> |                                           |
| 6.        | Nil                                                                 | Nil                                       |
|           | <b>Other Areas</b>                                                  |                                           |
| 7.        | Nil                                                                 | Nil                                       |

**Observations and Sign-off**

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|                     | ET                                                                                | IEC*                                                                              | Operator                                                                            |
|---------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <b>Organisation</b> | SMEC Asia Ltd                                                                     | Atkins China Ltd                                                                  | Serco Guardian JV                                                                   |
| <b>Signed By</b>    | <b>Antony WONG</b>                                                                | <b>Sharifah OR</b>                                                                | <b>Mabel YUNG</b>                                                                   |
| <b>Role</b>         | ET Leader                                                                         | IEC                                                                               | Park Manager                                                                        |
| <b>Signature</b>    |  |  |  |

**Note:** \* IEC to sign-off only for a joint ET+IEC Inspection