

**WEEKLY QUALIFIED PERSON CHECK LIST FOR JOLIET 29 ASH PONDS**

**INSTRUCTIONS:**

- 1) An inspection of each ash pond and related embankments/berms at the Stations must be conducted **weekly and within 24 hours after a storm event greater or equal to 6.45 inches.**
- 2) The inspection must be conducted by a "qualified person" and the inspection records should be maintained at the Station for five years.
- 3) Every week, the qualified person must also inspect the CCR Unit Instrumentation.

Date: 5/26/26 Time: 10<sup>30</sup> AM

Type of Inspection: Weekly  Storm Event

**GENERAL INFORMATION:**

|                          | POND 1  | POND 2  | POND 3  |
|--------------------------|---|---|---|
| 1) Water Level in Pond   | NORMAL <input type="checkbox"/><br>HIGH <input type="checkbox"/><br>LOW <input checked="" type="checkbox"/> | NORMAL <input type="checkbox"/><br>HIGH <input type="checkbox"/><br>LOW <input checked="" type="checkbox"/> | NORMAL <input checked="" type="checkbox"/><br>HIGH <input type="checkbox"/><br>LOW <input type="checkbox"/> |
| 2) Is Ash Being Removed? | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>   | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>   | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>   |
| 3) In Service?           | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>   | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>   | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>   |

**PHYSICAL INSPECTION:**

|   |   |   |   |
|---|---|---|---|
| 1) Seepage from or through embankment? Includes roads around ponds and outside fence. | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| 2) Sinkholes/Depressions/Bulges in Pond or embankments?                               | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| 3) Signs of Piping/Channels or other Internal Erosion on embankments?                 | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| 4) Cracking on Embankments/Berms?   | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| 5) Animal Burrows on embankments?   | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| 6) Excessive or Lacking Vegetative Cover on embankments? (should be normal growth)    | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| 7) Slope Erosion on berms or embankments?   | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| 8) Debris on embankments/berms?   | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| 9) Deterioration, malfunctions, or improper operation of overtopping control systems  | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| 10) Visible Releases  | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |

11) If Yes to any of the above, or any other abnormalities are noted, please describe/explain: \_\_\_\_\_

12) Is there any damage to Pond Liner: YES  NO

If YES, answer questions below:

12.a) Describe in Detail: \_\_\_\_\_

12.b) Specific Location: \_\_\_\_\_

12.c) Is Water Level Below Damage? YES  NO

12.d) If No, Did You Reduce Pond Level? YES  N/A

12.e) Notified Shift Supervisor of Damage? YES  Date Notified: \_\_\_\_\_ N/A

12.f) Notified Station Management of Damage? YES  Date Notified: \_\_\_\_\_ N/A

12.g) Additional Comments: \_\_\_\_\_

**POND LEVEL INSTRUMENTATION**

POND 2 Gauge Marking (ft) 3.6 (In Tenth's of Feet)

Elevation FT/MSL 521.3

Gauge Marker Instrument is in good condition and readable YES  NO

***NOTE: Joliet 29 Pond 1 & Pond 3 are not CCR Surface Impoundments. Inspections are conducted as part of Operations Best Practices***

Inspector Name (Print) \_\_\_\_\_

Inspector Signature: \_\_\_\_\_



11) If Yes to any of the above, or any other abnormalities are noted, please describe/explain: \_\_\_\_\_

12) Is there any damage to Pond Liner: YES  NO

If YES, answer questions below:

12.a) Describe in Detail: \_\_\_\_\_

12.b) Specific Location: \_\_\_\_\_

12.c) Is Water Level Below Damage? YES  NO

12.d) If No, Did You Reduce Pond Level? YES  N/A

12.e) Notified Shift Supervisor of Damage? YES  Date Notified: \_\_\_\_\_ N/A

12.f) Notified Station Management of Damage? YES  Date Notified: \_\_\_\_\_ N/A

12.g) Additional Comments: \_\_\_\_\_

**POND LEVEL INSTRUMENTATION**

POND 2 Gauge Marking (ft) 3.5' (In Tenth's of Feet)

Elevation FT/MSL 521.0'

Gauge Marker Instrument is in good condition and readable YES  NO

***NOTE: Joliet 29 Pond 1 & Pond 3 are not CCR Surface Impoundments. Inspections are conducted as part of Operations Best Practices***

Inspector Name (Print \_\_\_\_\_

Inspector Signatu \_\_\_\_\_