

## WEEKLY INSPECTION CHECKLIST FOR SURFACE IMPOUNDMENTS

### INSTRUCTIONS:

- 1) An inspection of each ash pond and related embankments/berms at the Station must be conducted:
  - a. Not less than every 7 days, and
  - b. Within 24 hours after a storm event greater than or equal to 6.20 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) This is for all active and inactive ponds.
- 4) Not less than every 30 days, the qualified person must also inspect the CCR Unit Instrumentation.

### GENERAL INFORMATION:

- |  |  |  |                              |
|--|--|--|------------------------------|
| 1) Date                                    | 4/22/2026                                  |  |                              |
| 2) Pond Name                               | Ash Bypass Basin (ABB)                     |  |                              |
| 3) Type of Inspection                      | 7-day <input checked="" type="checkbox"/>  | Storm Event <input type="checkbox"/>     |                              |
| 4) General Condition                       | EMPTY <input type="checkbox"/>             | FULL <input checked="" type="checkbox"/> |                              |
| 5) In Service                              | YES <input checked="" type="checkbox"/>    | NO <input type="checkbox"/>              |                              |
| 6) Is Ash Being Removed During Inspection? | YES <input type="checkbox"/>               | NO <input checked="" type="checkbox"/>   |                              |
| 7) Water Level in Pond                     | NORMAL <input checked="" type="checkbox"/> | HIGH <input type="checkbox"/>            | LOW <input type="checkbox"/> |

### PHYSICAL INSPECTION:

Is the impoundment incised? YES  NO  If yes, skip down to Question 9.

- |  | YES                      | NO                                  |
|--|--------------------------|-------------------------------------|
| 1) Seepage from or through embankment?   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2) Sinkholes/Depressions/Bulges in Pond or embankments?                              | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3) Signs of Piping/Channels or other Internal Erosion on embankments?                | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4) Cracking on Embankments/Berms?  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5) Animal Burrows on embankments?  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6) Excessive or Lacking Vegetative Cover on embankments?                             | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 7) Slope Erosion on berms or embankments?  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 8) Debris on embankments/berms?  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 9) Deterioration, malfunctions, or improper operation of overtopping control systems | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

10) Visible Releases

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

\_\_\_\_\_

1) Is there any damage to Pond Liner: YES  NO  N/A

12.a) If YES, Describe in Detail:

\_\_\_\_\_

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

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

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: \_\_\_\_\_

**30-DAY INSPECTION OF UNIT INSTRUMENTATION**

	GOOD	NEEDS REPAIR	N/A
1) Pump Conditions	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Polymer System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Wetwell/Basin Level	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Freeboard Measuring Device(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5) Other Device(s) (pH meter)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Describe any "Needs Repair" checked above: \_\_\_\_\_

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

## WEEKLY INSPECTION CHECKLIST FOR SURFACE IMPOUNDMENTS (FAB)

### INSTRUCTIONS:

- 1) An inspection of each ash pond and related embankments/berms at the Stations must be conducted:
  - a. Not less than every 7 days, and
  - b. Within 24 hours after a storm event greater or equal to 6.20 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) This is for all active and inactive ponds.
- 4) Not less than every 30 days, the qualified person must also inspect the CCR Unit Instrumentation.

### GENERAL INFORMATION:

- |  |   |  |   |
|--|---|--|---|
| 1) Date                                    | 4/22/2026                                 |  |   |
| 2) Pond Name                               | Former Ash Basin (FAB)                    |  |   |
| 3) Type of Inspection                      | 7-day <input checked="" type="checkbox"/> | Storm Event <input type="checkbox"/>   |   |
| 4) General Condition                       | EMPTY <input checked="" type="checkbox"/> | FULL <input type="checkbox"/>          |   |
| 5) In Service                              | YES <input type="checkbox"/>              | NO <input checked="" type="checkbox"/> |   |
| 6) Is Ash Being Removed During Inspection? | YES <input type="checkbox"/>              | NO <input checked="" type="checkbox"/> |   |
| 7) Water Level in Pond                     | NORMAL <input type="checkbox"/>           | HIGH <input type="checkbox"/>          | LOW <input checked="" type="checkbox"/> |

### PHYSICAL INSPECTION:

Is the impoundment incised? YES  NO  If yes, skip down to Question 9.

- |  | YES                                 | NO                                  |
|--|-------------------------------------|-------------------------------------|
| 1) Seepage from or through embankment?   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 2) Sinkholes/Depressions/Bulges in Pond or embankments?                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 3) Signs of Piping/Channels or other Internal Erosion on embankments?                | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 4) Cracking on Embankments/Berms?  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 5) Animal Burrows on embankments?  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 6) Excessive or Lacking Vegetative Cover on embankments?                             | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 7) Slope Erosion on berms or embankments?  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 8) Debris on embankments/berms?  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 9) Deterioration, malfunctions, or improper operation of overtopping control systems | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

10) Visible Releases

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

There are some large trees growing in the embankment and one area where the side of the embankment appears to have eroded. No significant changes in these conditions were observed.

12) Is there any significant damage to the embankment: YES  NO

12.a) If YES, Describe in Detail: \_\_\_\_\_

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

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

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: \_\_\_\_\_

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

## WEEKLY INSPECTION CHECKLIST FOR SURFACE IMPOUNDMENTS

### INSTRUCTIONS:

- 1) An inspection of each ash pond and related embankments/berms at the Station must be conducted:
  - a. Not less than every 7 days, and
  - b. Within 24 hours after a storm event greater than or equal to 6.20 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) This is for all active and inactive ponds.
- 4) Not less than every 30 days, the qualified person must also inspect the CCR Unit Instrumentation.

### GENERAL INFORMATION:

- |  |   |  |   |
|--|---|--|---|
| 1) Date                                    | 4/22/2026                                 |  |   |
| 2) Pond Name                               | Metal Cleaning Basin (MCB)                |  |   |
| 3) Type of Inspection                      | 7-day <input checked="" type="checkbox"/> | Storm Event <input type="checkbox"/>     |   |
| 4) General Condition                       | EMPTY <input type="checkbox"/>            | FULL <input checked="" type="checkbox"/> |   |
| 5) In Service                              | YES <input type="checkbox"/>              | NO <input checked="" type="checkbox"/>   |   |
| 6) Is Ash Being Removed During Inspection? | YES <input type="checkbox"/>              | NO <input checked="" type="checkbox"/>   |   |
| 7) Water Level in Pond                     | NORMAL <input type="checkbox"/>           | HIGH <input type="checkbox"/>            | LOW <input checked="" type="checkbox"/> |

### PHYSICAL INSPECTION:

Is the impoundment incised? YES  NO  If yes, skip down to Question 9.

- |   | YES                      | NO                                  |
|---|--------------------------|-------------------------------------|
| 1) Seepage from or through embankment?                                | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2) Sinkholes/Depressions/Bulges in Pond or embankments?               | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3) Signs of Piping/Channels or other Internal Erosion on embankments? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4) Cracking on Embankments/Berms?                                     | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5) Animal Burrows on embankments?                                     | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6) Excessive or Lacking Vegetative Cover on embankments?              | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 7) Slope Erosion on berms or embankments?                             | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 8) Debris on embankments/berms?                                       | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

- 9) Deterioration, malfunctions, or improper operation of overtopping control systems
- 10) Visible Releases

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

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

12.a) If YES, Describe in Detail: \_\_\_\_\_

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

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

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: \_\_\_\_\_

**30-DAY INSPECTION OF UNIT INSTRUMENTATION**

	GOOD	NEEDS REPAIR	N/A
1) Pump Conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2) Polymer System	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3) Wetwell/Basin Level	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4) Freeboard Measuring Device(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5) Other Device(s) (pH meter)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Describe any "Needs Repair" checked above: Instrumentation is only used during wastewater treatment. Currently not being treated so not in use

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

## WEEKLY INSPECTION CHECKLIST FOR SURFACE IMPOUNDMENTS

### INSTRUCTIONS:

- 1) An inspection of each ash pond and related embankments/berms at the Station must be conducted:
  - a. Not less than every 7 days, and
  - b. Within 24 hours after a storm event greater than or equal to 6.20 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) This is for all active and inactive ponds.
- 4) Not less than every 30 days, the qualified person must also inspect the CCR Unit Instrumentation.

### GENERAL INFORMATION:

- |  |   |  |   |
|--|---|--|---|
| 1) Date                                    | 4/22/2026                                 |  |   |
| 2) Pond Name                               | Ash Surge Basin (ASB)                     |  |   |
| 3) Type of Inspection                      | 7-day <input checked="" type="checkbox"/> | Storm Event <input type="checkbox"/>   |   |
| 4) General Condition                       | EMPTY <input checked="" type="checkbox"/> | FULL <input type="checkbox"/>          |   |
| 5) In Service                              | YES <input type="checkbox"/>              | NO <input checked="" type="checkbox"/> |   |
| 6) Is Ash Being Removed During Inspection? | YES <input type="checkbox"/>              | NO <input checked="" type="checkbox"/> |   |
| 7) Water Level in Pond                     | NORMAL <input type="checkbox"/>           | HIGH <input type="checkbox"/>          | LOW <input checked="" type="checkbox"/> |

### PHYSICAL INSPECTION:

Is the impoundment incised? YES  NO  If yes, skip down to Question 9.

- |   | YES                      | NO                                  |
|---|--------------------------|-------------------------------------|
| 1) Seepage from or through embankment?                                | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2) Sinkholes/Depressions/Bulges in Pond or embankments?               | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3) Signs of Piping/Channels or other Internal Erosion on embankments? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4) Cracking on Embankments/Berms?                                     | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5) Animal Burrows on embankments?                                     | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6) Excessive or Lacking Vegetative Cover on embankments?              | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 7) Slope Erosion on berms or embankments?                             | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 8) Debris on embankments/berms?                                       | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

9) Deterioration, malfunctions, or improper operation of overtopping control systems

10) Visible Releases

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

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

12.a) If YES, Describe in Detail: \_\_\_\_\_

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

:

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

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: \_\_\_\_\_

### 30-DAY INSPECTION OF UNIT INSTRUMENTATION

	GOOD	NEEDS REPAIR	N/A
1) Pump Conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2) Aluminum Sulfate System	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3) Wetwell/Basin Level	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4) Freeboard Measuring Device(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5) Other Device(s) (pH meter)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Describe any "Needs Repair" checked above:

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Inspector: Inspector: [REDACTED] \_\_\_\_\_