

## Schedule 5 - Notification

These pages outline the information that the operator must provide.

Units of measurement used in information supplied under Part A and B requirements shall be appropriate to the circumstances of the emission. Where appropriate, a comparison should be made of actual emissions and authorised emission limits.

If any information is considered commercially confidential, it should be separated from non-confidential information, supplied on a separate sheet and accompanied by an application for commercial confidentiality under the provisions of the EP Regulations.

### Part A

|                                |                     |
|--------------------------------|---------------------|
| Permit Number                  | PP338CQ - V004      |
| Name of operator               | Excal Limited       |
| Location of Facility           | Napiercaws Landfill |
| Time and date of the detection | 1/6/21 15:00        |

|                                                                                                                                                               |                                                                                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| (a)                                                                                                                                                           |                                                                                      |
| Notification requirements for any activity that gives rise to an incident or accident which significantly affects or may significantly affect the environment |                                                                                      |
| To be notified within 24 hours of detection                                                                                                                   |                                                                                      |
| Date and time of the event                                                                                                                                    | 1/6/21 - 15:00                                                                       |
| Reference or description of the location of the event                                                                                                         | Powercut at operator cabin, blower 2 tripped on reset, pumps default to setting 5.   |
| Description of where any release into the environment took place                                                                                              | Post treatment flow to river, flow diverted to holding lagoon for further treatment. |
| Substances(s) potentially released                                                                                                                            | Leachate.                                                                            |
| Best estimate of the quantity or rate of release of substances                                                                                                | Consent limit not exceeded due to further dilution prior to river.                   |
| Measures taken, or intended to be taken, to stop any emission                                                                                                 | outflow diverted to lagoon for further treatment, system reset.                      |
| Description of the failure or accident.                                                                                                                       | Powercut causes well pumps to increase pump rate.                                    |

|                                                                    |                                                                        |
|--------------------------------------------------------------------|------------------------------------------------------------------------|
| (b) Notification requirements for the breach of a permit condition |                                                                        |
| To be notified within 24 hours of detection                        |                                                                        |
| Emission point reference/ source                                   | Post treatment sample - sequence batch reader.                         |
| Parameter(s)                                                       | Ammonia, Ph, SS, BOD, iron, COD                                        |
| Limit                                                              | 4.0mg/l, 6.9, 30mg/l, 20mg/l, 0.75mg/l                                 |
| Measured value and uncertainty                                     | 2.9mg/l NH4.                                                           |
| Date and time of monitoring                                        | 1/6/21 15:00                                                           |
| Measures taken, or intended to be taken, to stop the emission      | PLC reset and blower back online. pump throughput reduced to 1 from 5. |

| Time periods for notification following detection of a breach of a limit |                     |
|--------------------------------------------------------------------------|---------------------|
| Parameter                                                                | Notification period |
| No limit breached.                                                       |                     |
|                                                                          |                     |
|                                                                          |                     |

(c) In the event of a breach of permit condition which poses an immediate danger to human health or threatens to cause an immediate significant adverse effect on the environment:

| To be notified within 24 hours of detection                     |                                                        |
|-----------------------------------------------------------------|--------------------------------------------------------|
| Description of where the effect on the environment was detected | Increase in NH <sub>4</sub> detected but not exceeded. |
| Substances(s) detected                                          | NH <sub>4</sub> .                                      |
| Concentrations of substances detected                           | 2.9 mg/l at sampling well.                             |
| Date of monitoring/sampling                                     | 1/6/21                                                 |

#### Part B - to be submitted as soon as practicable

|                                                                                                                                                        |                                                                                                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| Any more accurate information on the matters for notification under Part A.                                                                            | N/A.                                                                                                   |
| Measures taken, or intended to be taken, to prevent a recurrence of the incident                                                                       | Post treatment sampled on 2/6/21 and was at 1.5mg/l - possible LPS?                                    |
| Measures taken, or intended to be taken, to rectify, limit or prevent any pollution of the environment which has been or may be caused by the emission | Well pump reduced, lagoon cycled. Testing on 2/6/21 AM confirms system online and treatment effective. |
| The dates of any unauthorised emissions from the facility in the preceding 24 months.                                                                  | N/A.                                                                                                   |

|           |                 |
|-----------|-----------------|
| Name*     | Matthew Sillide |
| Post      | Supervisor      |
| Signature | M. Sillide      |
| Date      | 2/6/21.         |

\* authorised to sign on behalf of the operator