

2016 ANNUAL ENGINEERING INSPECTION REPORT

ENTERGY INDEPENDENCE PLANT CLASS 3N LANDFILL

PERMIT NO. 0200-S3N-R2 AFIN: 32-00042

JANUARY 9, 2017

terracon.com



2016 Landfill Inspection Report

Entergy Independence Plant Class 3N Landfill Newark, Arkansas

> Permit No. 0200-S3N-R2 AFIN: 32-00042

> > January 2017 Project No. 35167281

Prepared for:

Entergy Independence Plant 555 Point Ferry Road Newark, AR 72562

Prepared by:

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Environmental Facilities Geotechnical Materials



PROFESSIONAL ENGINEER'S CERTIFICATION

This report on the annual engineering inspection of the Entergy Independence Plant Class 3N Landfill and supporting documentation was prepared under the direction and supervision of a qualified, State of Arkansas-registered Professional Engineer. Mr. David McCormick, PE, of Terracon Consultants, Inc. (Terracon), was responsible for the overall preparation of this report. The report has been prepared to fulfill the requirements of §257.84(b). Based on the inspection of the landfill facility and review of available landfill documents the design, construction, operation, and maintenance of the landfill is consistent with recognized and generally accepted good engineering standards.

David C. McCormick, P.E.

Arkansas Professional Engineer No. 9199

ARKANSAS

REGISTERED
PROFESSIONAL
ENGINEER

No.9199
C. McCOR

Date



Expires 12.31.17



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2016 Annual Inspection CCR Rule Subpart §257.84 (b)

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1.0 INTRODUCTION

1.1 Purpose of Report

The purpose of this report is to document the annual inspection of the Entergy Independence Landfill facility in accordance with 40 CFR §257, Subpart D - Disposal of Coal Combustion Residuals From Electric Utilities (the CCR Rule). In particular, the report has been prepared to comply with §257.84(b), which requires an inspection to be conducted by a qualified professional engineer to ensure that the design, construction, operation, and maintenance of the landfill is consistent with recognized and generally accepted good engineering standards.

The report includes:

- Information on the current layout of the landfill,
- Waste volume estimates for the amount of waste contained in the landfill and remaining disposal capacity, and
- An assessment of the landfill including structural integrity and overall operations with respect to the CCR Rule and the facility permit requirements.

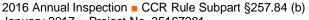
1.2 Independence Power Plant Information

The Plant is located on approximately 1,850 acres about 2-½ miles southeast of Newark in Independence County, Arkansas as shown on Figure 1 (all figures are included in Appendix A). The site is characterized by minimal topographic relief and is situated within the White River floodplain.

The Plant has been in operation since 1983 and has historically generated electricity through the combustion of Powder River Basin (PRB) (Wyoming) sub-bituminous coal. The ash, a coal combustion by-product (or residue) (CCR), is generally segregated into two categories, "fly" and "bottom" ash.

Approximately 80% of the ash produced is classified as fly ash that is derived from the boiler exhaust gas and collected in electrostatic precipitators. The fly ash is composed of very fine particles similar to glass and has the consistency of a powder. Collected fly ash is blown to silos for short-term storage. A subcategory of the fly ash is known as economizer ash. This material is the coarsest fraction of the fly ash that drops out before the electrostatic precipitators, and represents approximately 2% of the fly ash production.

The bottom ash is composed of angular, glassy particles with a porous surface texture and has the consistency of coarse sand. The bottom ash is sluiced principally to dewatering hoppers for removal of water and for storage.



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Historically, approximately 60 to 70% of the two types of ash have been marketed regionally to construction-related industries. The remaining amount of ash has been placed in the onsite Landfill for disposal.

1.3 Permit History

In October 1982, Arkansas Power & Light Company (AP&L) was granted a permit (#200-S) from the Arkansas Department of Environmental Quality (ADEQ) to construct and operate a solid waste disposal facility at the Plant. Entergy Arkansas, Inc. became AP&L's successor in interest in April 1996. The permit was modified in 2002 to update the landfill to comply with Arkansas Pollution Control and Ecology Commission (APCEC) Regulation No. 22 (Solid Waste Management Code) design and operational standards for Class 4 (inert waste) Landfills. The current facility permit (0200-S3N-R2) was issued in December 2014 and includes design and operational modifications to the landfill facility to comply with Regulation No. 22 requirements for Class 3N (Industrial) Landfills.



2.0 LANDFILL LAYOUT

2.1 Existing Conditions of Landfill

The permitted landfill area consists of approximately 335 acres and is located in the northeastern portion of the plant site as shown on Figure 2. The Landfill is designed to be developed through three phases, which only Phases 1 and 2 are currently permitted for development. The current layout of the Landfill includes a total of 22 disposal cells and has a permitted waste capacity of approximately 13,000,000 cubic yards (cy). Waste Cells 1 through 15 have been constructed and Waste Cells 12, 13, 14, and 15 currently comprise the active disposal area of the Landfill having received CCR materials after October 19, 2015.

Construction of the disposal cells has followed the numerical sequence of the cell numbers with all design, construction, operation and maintenance in compliance with the requirements of APCEC Regulation 22. Cells 1 through 11 were constructed, operated and closed prior to the effective date of the CCR Rule and are not covered by the requirements of the Rule. Cells 12 through 15 are existing landfill CCR units and will be operated in accordance with requirements of the CCR Rule.

Table 2.1 presents a summary of the existing CCR Unit disposal cells that have been constructed at the Independence Landfill.

Table 2.1. Construction Summary of Independence Plant Class 3N Landfill

Cell	Year Built	Bottom Liner	Year	Final Cover	Status
Number		System	Closed	System	
12	Pre-1996	Original permit	N/A	N/A	Open and active
					disposal area
13	Pre-1996	Original permit	N/A	N/A	Open and active
					disposal area
14	2000;2006	Original permit;	N/A	N/A	Open and active
		2002 permit			disposal area
15	2011	Current permit	N/A	N/A	Open and active
					disposal area

2.2 Changes Made to Landfill Configuration During Reporting Period

During the reporting period, no changes were made to the landfill configuration. Cells 12 through 15 are open and are actively receiving waste. No new cells were opened, and no existing cells were closed.

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3.0 WASTE VOLUME CALCULATIONS

The landfill facility has been surveyed annually since 1996. Each year's survey is compared to the previous year to compute the amount of CCR disposed. The current survey is also compared to the ADEQ permitted top of waste elevations to determine remaining capacity, or airspace. Additionally, the current survey is compared to an estimated "operational" top of waste to determine the remaining operational capacity. The operational top of waste is the maximum disposal elevation that can be achieved within the open cells while maintaining the required 4:1 exterior and 3:1 interior slopes along with a top width sufficient for disposal activities. If additional operational capacity is needed, construction of an adjacent disposal cell will be required.

Disposal rates for the facility are calculated using the average of the disposal rates from the five most recent years. Disposal rates depend upon CCR production at the plant and sales of the ash. These can vary significantly year to year based upon the current economic climate, weather, and how much the plant is operational.

During the reporting period, there were four waste cells (Waste Cells 12 through 15) open at the site. These areas are shown on Figure 2.

Digital terrain modeling techniques were used to determine volumes of ash disposed during the current reporting period. Surface models were originally created for the Landfill's surface from aerial photography taken in June 1996 and for the originally permitted proposed final surfaces. The surface models were updated in 1997 through 2015 based on field and/or aerial survey data. For this report, the active areas were surveyed on December 12, 2016. The surface generated from the current survey was compared to the December 17, 2015, survey surface model utilizing AutoCAD Civil 3D software to estimate volume changes that have occurred over the reporting period. Table 3.1 summarizes volume changes for the current reporting period and estimated remaining capacity by waste cell.





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Table 3.1 Summary of waste volume calculations.

Cell Number	Status	Area (ac)	ADEQ Permitted Waste Capacity (cy)	2016 Volume Placed (cy)	Total Volume Placed (cy)	Operational Remaining Disposal Capacity (cy)	Operational Remaining Life (years)
Cell 12	Active	5.7	434,800	2,600	319,100	115,700	1.0
Cell 13	Active	5.7	372,300	6,700	291,600	80,700	0.7
Cell 14	Active	15.0	807,400	21,200	773,300	34,100	0.3
Cell 15	Active	18.2	1,258,100	51,000	314,700	803,800	7.2
Totals		44.6	2,872,600	81,500	1,698,700	1,034,300	9.2

Based upon the digital terrain model, the net volume of material filled in Waste Cells 12 through 15 during the reporting period was calculated to be approximately 81,500 cubic yards (cy). Final permitted contours are shown in Figure 3. Based upon a 5-year historical annual average disposal rate of approximately 112,400 cy of material, there are about 9.2 years of capacity left in Waste Cells 12 through 15. This time frame is affected by the market for ash material and may be shorter or longer depending on market conditions.

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4.0 ASSESSMENT OF LANDFILL FACILITY

This section of the report provides a summary of the inspection of the Entergy Independence Plant Class 3N Landfill facility that was conducted on December 6, 2016. The assessment included an interview with the landfill operating company, Headwaters Resources Inc. (HRI) personnel, Entergy Services Inc. (Entergy) personnel, review of weekly inspections of the facility, review of documents pertaining to the operation and compliance of the landfill, and an onsite inspection of the landfill facility. Copies of the Weekly Inspection Reports are included in Appendix B. Photographs of the site inspection are included in Appendix C.

4.1 General Operations

In general, the final and interim slopes of the active waste cells appeared to be stable. The sideslopes of the landfill are generally at the required 4:1 external and 3:1 interior slope requirements. No tension cracks, seeps, or other features that indicate a potential slope failure were observed during the site inspection. In addition, no active seeps were noted.

The general operations of the landfill facility are being done in a safe manner and the overall maintenance of the facility is in good condition.

4.2 Landfill Cover System

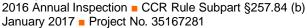
None of the active cells, 12 through 15, are partially closed or have interim cover.

4.3 Leachate Collection System

As required by APCEC Regulation 22, Cell 15 is constructed with a leachate collection system. The system consists of a six-inch diameter high-density polyethylene (HDPE) perforated pipe installed in the center of Waste Cell 15. The pipe drains to a washed gravel-filled sump located on the toe of the eastern slope of the cell. From the sump, leachate is pumped via a dual-contained HDPE pipeline (4" diameter/8" diameter) to the discharge point at the plant's Surge Pond south of the landfill in accordance with the facility's current National Pollutant Discharge Elimination System (NPDES) Permit. Overall, the leachate collection system appeared to be in good working order.

4.4 Stormwater Control System

No issues were found with the Stormwater control system during the inspection. In accordance with the facility's Operation Plan required by the current Class 3N solid waste permit, HRI conducts periodic inspections of the condition of the system and makes appropriate repairs as needed.





Temporary berms are used down gradient of the active area to help minimize the potential for sediment transport from the area. Perimeter ditches and drainage conveyances are used to direct stormwater around the landfill area. Culverts are installed at the southwest corner of the Landfill to allow drainage beneath the perimeter access road.

All stormwater run-on and runoff from the permitted landfill area is ultimately discharged to the Plant's Surge Pond. Water from the Surge Pond is pumped to sedimentation basins that are part of the Plant's wastewater treatment system. After treatment in the sedimentation basins, the water is either used as cooling water in the plant or discharged to the White River. Discharges to the White River are permitted under NPDES Permit No. AR0037451. Treated runoff from the Landfill is a listed source for this NPDES permit.

4.5 Facility Roads

The facility roads were well maintained at the time of the inspection. The disposal access road to the active cells is paved, and it was in excellent condition at the time of the inspection. The perimeter access road has an all-weather surface coarse and was in good condition.

4.6 Fugitive Dust Control

In accordance with the facility's CCR Fugitive Dust Control Plan, HRI routinely sprays the working face and haul roads using water trucks to control dust from the fly ash. Fly ash is deposited in the landfill by belly-dumping from the bottom of the tanker trucks in order to minimize the material drop distance. Bottom ash and economizer ash are in a moist condition when transported to the landfill. The landfill access roads have enforced posted speed limit of 25 mph. Within the landfill boundary, a 5 mph speed limit is enforced. During the inspection, minimal fugitive dust was observed.

APPENDIX A

Figures



SITE MAP

Project Mngr:	
Project Mingr:	TLB
Drawn By:	
	SRE
Checked By:	
	DCM
Approved By:	
	DCM

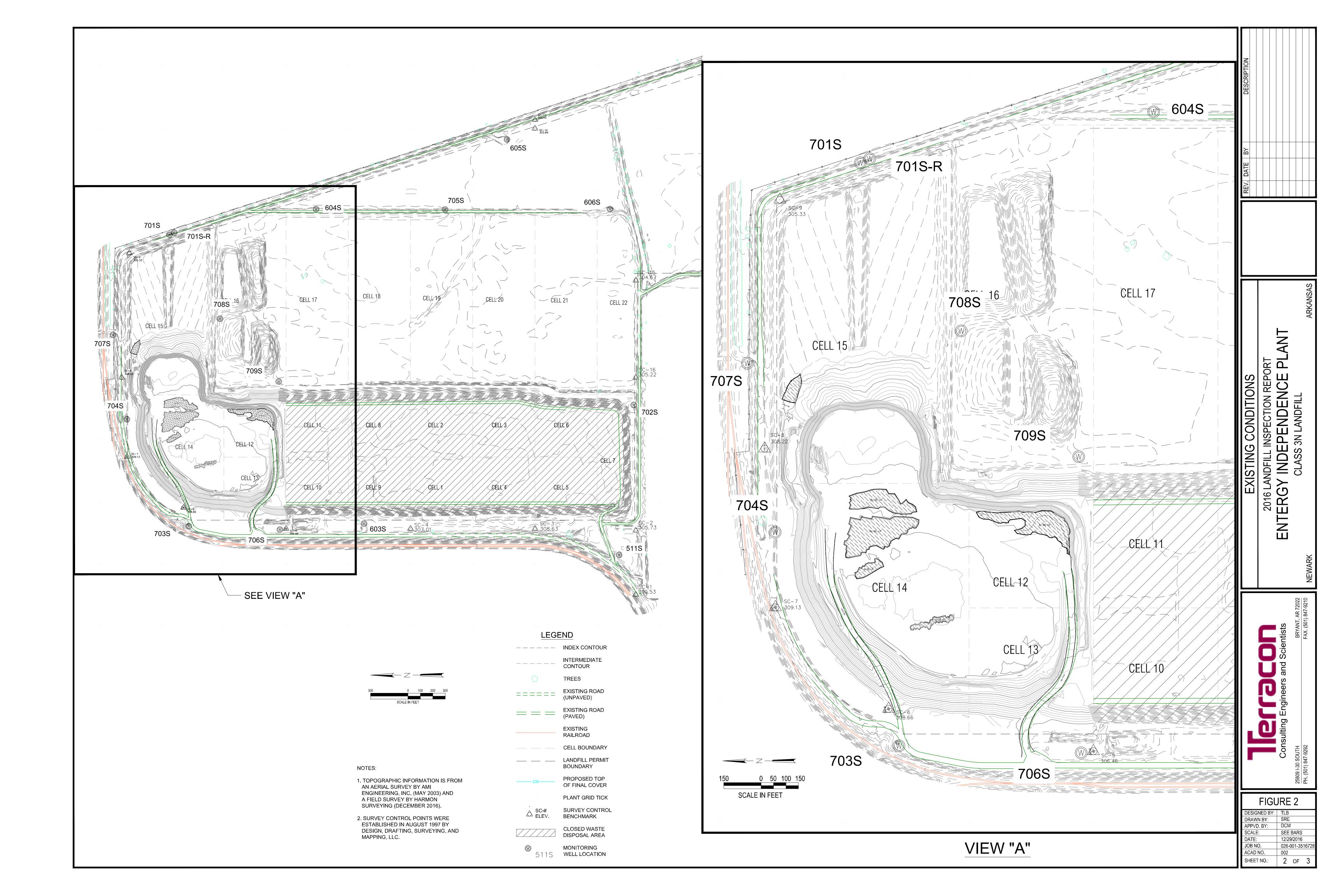
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	12/29/2016

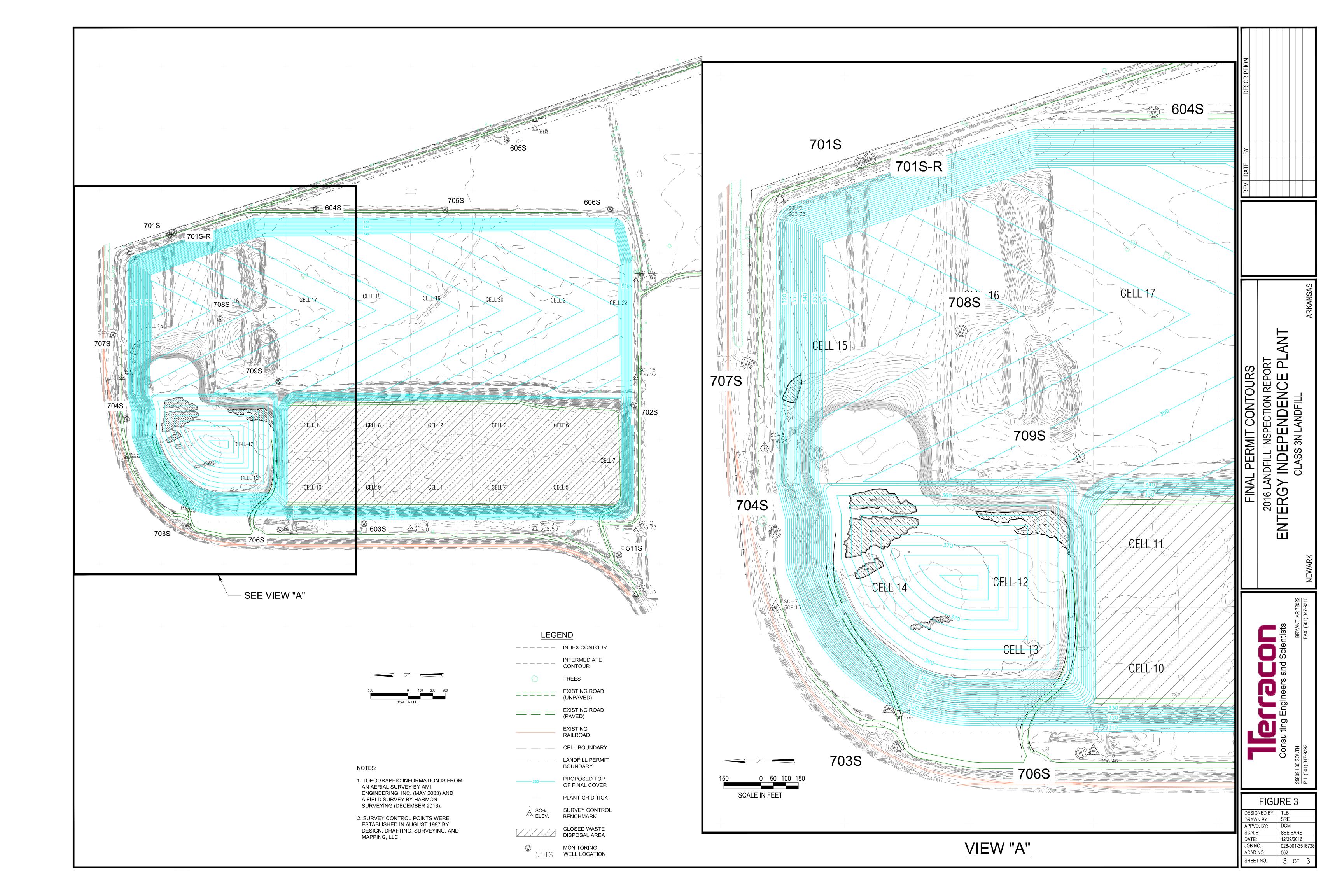


SITE MAP	
2016 LANDFILL INSPECTION REPORT	
ENTERGY INDEPENDENCE PLANT	
CLASS 3N LANDFILL	
NEWARK ARKANSA:	١S

FIG. No.

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APPENDIX B

Copies of Weekly Landfill Inspections

Entergy Facility:	Independence	
Control of the contro		

	tional sheets as necessary g inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and State Lead
nspected by:	Jereny Stantler
	[Must be performed by a qualified person per 257.84(a)(1)]
nspection Dat	e: \[\6\16\16\] [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	opearances of an actual or potential structural weakness of the CCR unit, in addition to any ag conditions that are disrupting or have the potential to disrupt the operation and safety
	CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
a.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required):
	Engineer Approval of Corrective Action (If required): [Sign and Date] Corrective Action Completed:
	[Sign and Date]
b.	[Sign and Date] Corrective Action Completed: [Sign and Date]

	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
c.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)?
	☑ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
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	Engineer Approval of Corrective Action (if required):
d.	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date]
d.	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] Any signs of burrowing or tunneling mammals that could lead to stability issues?
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Entergy Facility: _	Independence	Inspection Date: 1. 5. 16 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (i	f required):
		[Sign and Date]
	Corrective Action Completed:	
		[Sign and Date]
е	e. Any signs of damage or operational issue	s with the leachate collection and transmission
	system (i.e., check pump and control par	nel, walk transmission line to see if there are any
	leaks, assess outlet)?	
	⊠ No	
	 Yes (if yes, make photographs, descri 	the and recommend a corrective action)
		be and recommend a corrective action,
	-	
	Recommended Corrective Action and Re	sponsible Party:
		if required):
		[Sign and Date]
	Corrective Action Completed:	
		[Sign and Date]
f	f. If applicable, any signs of damage or ope	erational issues with the final cover system -
	erosion, ponded water, settlement, lead	hate seeps, and vegetation?
	⊠ No	
	☐ Yes (if yes, make photographs, descr	ibe and recommend a corrective action)
	Location/Comments:	
	Recommended Corrective Action and Re	sponsible Party:
	Engineer Approval of Corrective Action (if required):
	Compating Astics Compating	[Sign and Date]
	Corrective Action Completed:	[Sign and Date]
		[Signatio Date]

2.	Were there any issues or recommended corrective actions from the previous weekly inspection left to address?
	₿ No
	☐ Yes (if yes, follow-up on any corrective actions taken)
	Comments:

Entergy Facility:	Independence	

Instructions:

[Must be performed by a qualified person per 257.84(a)(1)]		n applies to CCR Rule affected CCR units or cells only
Following inspection, send electronic copy of inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead Inspected by: State State		
Inspection Date: Stauffic Inspection interval must not exceed 7 days per 257.84(a)(1)(1) 1. Any appearances of an actual or potential structural weakness of the CCR unit, in addition to any existing conditions that are disrupting or have the potential to disrupt the operation and safety of the CCR unit? [Inspection criteria per 257.84(a)(1)(i))] a. Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments: Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] b. Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action)	 Following 	inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and
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Inspection Date: 1.12.2015 Inspection interval must not exceed 7 days per 257.84(a)(1)(i)] 1. Any appearances of an actual or potential structural weakness of the CCR unit, in addition to any existing conditions that are disrupting or have the potential to disrupt the operation and safety of the CCR unit? [Inspection criteria per 257.84(a)(1)(i)] a. Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?	nspected by: _	Devemy Stanfer Stanfer
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Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] b. Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action)		Recommended Corrective Action/Responsible Party
Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] b. Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action)		Recommended corrective Action, responsible Fairty.
Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] b. Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action)		
Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] b. Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action)		
Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] b. Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action)		
Corrective Action Completed: [Sign and Date] [Sign and Date] b. Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action)		
b. Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action)		
b. Any signs of tension or other types of cracks or separation at the surface or slopes? 図 No □ Yes (if yes, make photographs, describe and recommend a corrective action)		
☒ No☐ Yes (if yes, make photographs, describe and recommend a corrective action)		
☒ No☐ Yes (if yes, make photographs, describe and recommend a corrective action)		
Yes (if yes, make photographs, describe and recommend a corrective action)	b.	Any signs of tension or other types of cracks or separation at the surface or slopes?
		X No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)

Entergy Facility:	Inspection Date: 1, 12, 2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed: [Sign and Date]
c.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)?
	No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues?
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:

[Sign and Date]

Entergy F	Facility: Independence	Inspection Date: 1.12.20 b [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]			
2.	Were there any issues or recommended corrective actions from the previous weekly inspection left to address? No Yes (if yes, follow-up on any corrective actions taken) Comments:				

Entergy Facility:	Independence	

Instructions:

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary

nspected by:	Jerena Stante
	[Must be performed by a qualified person per 257.84(a)(1)]
nspection Da	te: 1.19.701/
ispositori Bu	te:
1. Any a	ppearances of an actual or potential structural weakness of the CCR unit, in addition to any
	ng conditions that are disrupting or have the potential to disrupt the operation and safety
	CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
a.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a
	slope failure?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
Location/Comments:	
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Location/Comments.
	Location, Comments.
	Location Comments.

	Possers and ad Course time Aution 1. December 1.
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
c	 Any signs of erosion from storm water runoff or damage to stormwater control facilitie (e.g. ditches, culverts, berms, and letdowns)? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required): [Sign and Date]
	Engineer Approval of Corrective Action (if required):
d.	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] Any signs of burrowing or tunneling mammals that could lead to stability issues? No
d.	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] Any signs of burrowing or tunneling mammals that could lead to stability issues?
d.	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] Any signs of burrowing or tunneling mammals that could lead to stability issues? No Yes (if yes, make photographs, describe and recommend a corrective action)

Entergy Facility	Inspection Date: 19 2016
entergy ruemey.	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
	Any signs of damage or engrational issues with the leachets called the second to the s
e.	Any signs of damage or operational issues with the leachate collection and transmission
	system (i.e., check pump and control panel, walk transmission line to see if there are any
	leaks, assess outlet)?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
f.	If applicable, any signs of damage or operational issues with the final cover system -
	erosion, ponded water, settlement, leachate seeps, and vegetation?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	corrective Action completed,

[Sign and Date]

Entergy F	Inspection Date: 1/9. 7016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
2.	Were there any issues or recommended corrective actions from the previous weekly inspection left to address? ☑ No ☐ Yes (if yes, follow-up on any corrective actions taken) Comments:
	Confinencs.

Entergy Facility:	Inda	pendence	
	- Table	Track III	

Instructions:

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary

nspecte	ed by:	[Must be performed by a qualified person per 257.84(a)(1)]
nspectio	on Date	e: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
1.	Any ap	pearances of an actual or potential structural weakness of the CCR unit, in addition to any
		g conditions that are disrupting or have the potential to disrupt the operation and safety
(of the (CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
	a.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a
		slope failure?
		团 No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required):
		[Sign and Date]
		Corrective Action Completed:
		[Sign and Date]
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes?
	b.	
	b.	 No Yes (if yes, make photographs, describe and recommend a corrective action)

Entergy Facility:	Inspection Date: 1.26.2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	The state of the s
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
c.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)? No
	Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:

Entergy Facility:	Integerdence	Inspection Date: 1762016
		[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective	Action (if required):
	Corrective Action Commission	[Sign and Date]
	Corrective Action Completed:	[Sign and Date]
-		
e.	. Any signs of damage or operatio	nal issues with the leachate collection and transmission
	leaks, assess outlet)?	ntrol panel, walk transmission line to see if there are any
	No	
		or describe and assessment to the second
		ns, describe and recommend a corrective action)
	Estation Comments.	
	Recommended Corrective Action	and Responsible Party:
	Engineer Approval of Corrective	Action (if required):
		[Sign and Date]
	Corrective Action Completed:	
		[Sign and Date]
f.	If applicable, any signs of damage	e or operational issues with the final cover system -
	erosion, ponded water, settleme	nt, leachate seeps, and vegetation?
	No	
	And Are the Artist of the Arti	s, describe and recommend a corrective action)
	Location/Comments:	
	Recommended Corrective Action	and Responsible Party:
	Engineer Approval of Corrective A	ction (if required):
	Corrective Action Completed:	[Sign and Date]
	The state of the s	[Sign and Date]

2.	Were there any issues or recommended corrective actions from the previous weekly inspection		
	left to address?		
	⊠. No		
	Yes (if yes, follow-up on any corrective actions taken)		
	Comments:		

	man i	
Entergy Facility:	Independence	
And the second s		

Instructions:

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

Inspec	ted by:	Jereny Stanfer
		[Must be performed by a qualified person per 257.84(a)(1)]
Inspec	tion Date	e:2. Z. 2016
		[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1.	Any ap	pearances of an actual or potential structural weakness of the CCR unit, in addition to any
	existing	g conditions that are disrupting or have the potential to disrupt the operation and safety
		CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
	a.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
		☑ No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:
		December and ad Commercial Action / December 11-1-12
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required):
		[Sign and Date]
		Corrective Action Completed:
		[Sign and Date]
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes?
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:

Entergy Facility:	Inspection Date: 2.2.2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
c.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)?
	 No ☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:

Engineer Approval of Corrective Action (if required):

Corrective Action Completed: _____

[Sign and Date]

[Sign and Date]

Entergy F	Facility: Independence	Inspection Date: 2-2-2 01 6 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
2.	Were there any issues or recommended corrective actions from the previous weekly inspection left to address?	
	⊠ No	
	☐ Yes (if yes, follow-up on any corrective	ve actions taken)

Comments:

Entergy Facility:	Independence

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary

nspected by	Terema Stanter
are division and	[Must be performed by a qualified person per 257.84(a)(1)]
nspection Da	ate: 2/9/2016
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1. Any a	appearances of an actual or potential structural weakness of the CCR unit, in addition to any
existi	ng conditions that are disrupting or have the potential to disrupt the operation and safety
of the	e CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
а	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	zooddon, commencs.
	Recommended Corrective Action/Responsible Party:
	- Tarty.
	Engineer Annual J.F.C A tts
	Engineer Approval of Corrective Action (if required):
	Corrective Action Completed:
	[Sign and Date]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:

Entergy Facility:	Inspection Date: 2/9/2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Resembled corrective Action and Responsible Party.
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed: [Sign and Date]
c.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)? No
	Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:

Entergy Facility:	Independence	Inspection Date: 2/9/2016
		[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective A	Action (if required):
		[Sign and Date]
	Corrective Action Completed:	
		[Sign and Date]
e.	Any signs of damage or operation	nal issues with the leachate collection and transmission
		trol panel, walk transmission line to see if there are any
	leaks, assess outlet)?	
	No Co	
		s, describe and recommend a corrective action)
	Location/Comments:	
	-	
	Recommended Corrective Action	and Responsible Party:
	_	and nesponsible raity.
	Engineer Approval of Corrective A	ction (if required):
	Corrective Action Completed:	[Sign and Date]
	corrective Action completed.	[Sign and Date]
	40.1	
f.		or operational issues with the final cover system -
	erosion, ponded water, settlemen	t, leachate seeps, and vegetation?
	⊠ No	
	☐ Yes (If yes, make photographs,	describe and recommend a corrective action)
	Location/Comments:	
	Recommended Corrective Action a	and Responsible Party:
	Engineer Approval of Corrective Ac	ction (if required):
	Corrective Action Completed:	[Sign and Date]
	ostrective Action completed:	[Sign and Date]
		F. B. V. 100 F. 17074

ntergy F	acility:	:_	コ	-nd	112	00	000	2.2		-	-	-			ction D ection i						d 7 da	ays p	er 257	7.84(a)	(1)(i)]
2.				here			sue	s or	rec	:omn	nend	ed cor	rect	ive a	ction	s fr	ron	the	e pre	evic	us v	wee	kly ii	nspe	ctio
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	Con	nr	nm	ents	_										0.000.0										
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Entergy Facility:	Independence	
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- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

		[Must be performed by a qualified person per 257.84(a)(1)]
Inspect	ion Dat	e: 2.16.16
		[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1.	existin	ppearances of an actual or potential structural weakness of the CCR unit, in addition to any g conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
		Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
		⊠ No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required):
		[Sign and Date]
		Corrective Action Completed:
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
		The late of the second

Entergy Facility:	Inspection Date: 2.16 16 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	Corrective Action Completed:
	[Sign and Sacc]
c.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)? No
	Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No
	Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:

Entergy Facility:	Independence	Inspection Date: 2.16.16 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Act	ion (if required):
	Corrective Action Completed:	[Sign and Date]
		[Sign and Date]
e.	system (i.e., check pump and contro leaks, assess outlet)? No	issues with the leachate collection and transmission I panel, walk transmission line to see if there are any
		escribe and recommend a corrective action)
	Recommended Corrective Action and	d Responsible Party:
	Engineer Approval of Corrective Action	on (if required): [Sign and Date] (Sign and Date]
f.	erosion, ponded water, settlement, li 以 No 口 Yes (if yes, make photographs, de	operational issues with the final cover system -
	Recommended Corrective Action and	Responsible Party:
	Engineer Approval of Corrective Actio	on (if required):
	confective Action Completed:	[Sign and Date]

Entergy Facility: Tralegending	Inspection Date: 7.16-16
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]

	[Inspection interval must not exceed 7 days per 2	257.84(a)(1)(i)]
2. We	ere there any issues or recommended corrective actions from the previous weekly ft to address?	/ inspection
	No	
	Yes (if yes, follow-up on any corrective actions taken)	
Cor	mments;	
_		
_		
_		

Entergy Facility: Independence

WEEKLY LANDFILL INSPECTION

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and

	ted by: _	[Must be performed by a qualified person per 257.84(a)(1)]
Inspec	tion Date	e: 2 23 201 b [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	A	
1.	existing	pearances of an actual or potential structural weakness of the CCR unit, in addition to any geonditions that are disrupting or have the potential to disrupt the operation and safety
		CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
		⊠ No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required):
		[Sign and Date]
		Corrective Action Completed: [Sign and Date]
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes?
		⊠ No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:

Entergy Facility:	Inspection Date: 2.23 16 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Recommended corrective Action and Responsible Farty.
	Engineer Approval of Corrective Action (if required): [Sign and Date]
	Corrective Action Completed:
С.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)?
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues?
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:

Entergy Facility:	Independence Inspection Date: 2.3:16					
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]					
	Engineer Approval of Corrective Action (if required):					
	[Sign and Date]					
	Corrective Action Completed:					
	[Sign and Date]					
e,	. Any signs of damage or operational issues with the leachate collection and transmission					
	system (i.e., check pump and control panel, walk transmission line to see if there are any					
	leaks, assess outlet)?					
	⊠ No					
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)					
	Location/Comments:					
	Eccutiony comments.					
	Recommended Corrective Action and Responsible Party:					
	Engineer Approval of Corrective Action (if required):					
	[Sign and Date] Corrective Action Completed:					
	[Sign and Date]					
Ţ.	If applicable, any signs of damage or operational issues with the final cover system -					
	erosion, ponded water, settlement, leachate seeps, and vegetation?					
	₩ No					
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)					
	Location/Comments:					
	Recommended Corrective Action and Responsible Party:					
	Engineer Approval of Corrective Action (if required):					
	[Sign and Date]					

[Sign and Date]

ergy Faci	lity: Independence	Inspection Date: 2.23.16 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1	Nere there any issues or recommended coreft to address? No Yes (if yes, follow-up on any corrective)	rective actions from the previous weekly inspection
-	Comments:	uctions takeny
-		
-		

Entergy Facility: Independence

Entergy Facility: _	Independence	
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- Inspection applies to CCR Rule affected CCR units or cells only 9
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues

Inspec	ted by:	[Must be performed by a qualified person per 257.84(a)(1)]
Inspec	tion Dat	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1.	existin of the	ppearances of an actual or potential structural weakness of the CCR unit, in addition to any g conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date]
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

[Sign and Date]

2.	Were there any issues or recommended corrective actions from the previous weekly inspection
	left to address?
	⋉ No
	☐ Yes (if yes, follow-up on any corrective actions taken)
	Comments:

Entergy Facility:	Independ	2002	
- 1	- 13 (3 2 4 2 2 3) (3	T.ICE	

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary

	cutergy :	State Lead
nspect	ed by:	Jeremy Stauffer
		[Must be performed by a qualified person per 257.84(a)(1)]
nspect	ion Dat	e:3/8/16
		[inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1.	Any ap	pearances of an actual or potential structural weakness of the CCR unit, in addition to any
	existin	g conditions that are disrupting or have the potential to disrupt the operation and safety
	of the	CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
	a.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
		⊠ No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required):
		[Sign and Date] Corrective Action Completed:
		[Sign and Date]
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes?
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:

	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
2.	Were there any issues or recommended corrective actions from the previous weekly inspection left to address?
	⊠ No
	Yes (if yes, follow-up on any corrective actions taken)
	Comments:
	\

Entergy Facility: Independence Inspection Date: 3. 8. 2016

Entergy Facility:	Independence	
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- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues

	Followin	itional sheets as necessary ig inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and State Lead
Inspect	ed by:	[Must be performed by a qualified person per 257.84(a)(1)]
Inspect	ion Dat	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1.	Any ap	ppearances of an actual or potential structural weakness of the CCR unit, in addition to any
	existin	g conditions that are disrupting or have the potential to disrupt the operation and safety
	of the	CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
	a.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
		☑ No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required):
		[Sign and Date]
		Corrective Action Completed:
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes? $\mbox{\center{$\mbox{$\mbox{$\mathcal{K}$}}$}}$ No
		Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

Recommended Corrective Action and Responsible Party: ____

Entergy Facility:	Independence ins	pection Date: 3.15.7016 spection interval must not exceed 7 days per 257.84(a)(1)(i)]				
	Ím	ispection interval must not exceed 7 days per 257.84(a)(1)(i))				
	Engineer Approval of Corrective Action (if	required):				
		[Sign and Date]				
	Corrective Action Completed:					
		[Sign and Date]				
e.		with the leachate collection and transmission I, walk transmission line to see if there are any				
	leaks, assess outlet)?	, want dansinission me to see it there are any				
	⊠ No					
	☐ Yes (if yes, make photographs, describe	and recommend a corrective action)				
	Location/Comments:					
	Education/ Comments.					
	Recommended Corrective Action and Resp	onsible Party:				
	and neop	onside rarey.				
	Engineer Approval of Corrective Action (if r	required):				
		[Sign and Date]				
	Corrective Action Completed:					
		[Sign and Date]				
f.	If applicable, any signs of damage or opera	tional issues with the final cover system -				
	erosion, ponded water, settlement, leachate seeps, and vegetation?					
	Ż No					
	☐ Yes (if yes, make photographs, describe	e and recommend a corrective action				
	Location/Comments:					
	Recommended Corrective Action and Response	onsible Party:				
	P. Carlotte					
	Engineer Approval of Corrective Action (if re	equired):				
		[Sign and Date]				
	Corrective Action Completed:					
		[Sign and Date]				

	acility: Independence Inspection Date: 3.15.2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
2.	Were there any issues or recommended corrective actions from the previous weekly inspection left to address? ☒ No ☐ Yes (if yes, follow-up on any corrective actions taken)
	Comments:

nderendence.

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary

a		g inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and State Lead
Inspec	ted by:	Jeremy Stanfer
erese		[Must be performed by a qualified person per 257.84(a)(1)]
Inspec	tion Dat	e: 3.22.2016
Перес		[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1.	Any ap	pearances of an actual or potential structural weakness of the CCR unit, in addition to any
		g conditions that are disrupting or have the potential to disrupt the operation and safety
	of the	CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
	а.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
		⊠ No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required):
		[Sign and Date]
		Corrective Action Completed:
		[Sign and Date]
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes?
		ì⊠ No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:

	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
С	 Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)? No
	Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	2.000
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required): [Sign and Date]
	Engineer Approval of Corrective Action (if required):
d	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed:
d	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] Any signs of burrowing or tunneling mammals that could lead to stability issues?
d	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] Any signs of burrowing or tunneling mammals that could lead to stability issues? No Yes (if yes, make photographs, describe and recommend a corrective action)

Entergy Facility:	Independence In	spection Date: 3 22.2016 nspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if	required):
	Corrective Action Completed:	[Sign and Date]
		(Sign and Date)
e.	system (i.e., check pump and control pane leaks, assess outlet)? No	with the leachate collection and transmissionel, walk transmission line to see if there are any
	10000	ponsible Party:
	Engineer Approval of Corrective Action (if	required):
	Corrective Action Completed:	[Sign and Date]
		[Sign and Date]
f.	If applicable, any signs of damage or opera erosion, ponded water, settlement, leacha	te seeps, and vegetation?
	Yes (if yes, make photographs, describe Location/Comments:	e and recommend a corrective action)
	Recommended Corrective Action and Response	onsible Party:
	Engineer Approval of Corrective Action (if re	[Sign and Date]
	Corrective Action Completed:	[Sign and Date]

Entergy F	acility: Independence	Inspection Date: 3.22.201 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]			
2.	Were there any issues or recommended corrective actions from the previous weekly inspection left to address? ☒ No ☐ Yes (if yes, follow-up on any corrective actions taken)				
	Comments:				

Entergy Facility:	Independence	
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- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary

Increasted him	Jeremy Stantler
inspected by:	[Must be performed by a qualified person per 257.84(a)(1)]
Inspection Da	te: 3 29 :2016
mspection Da	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
existir of the	ppearances of an actual or potential structural weakness of the CCR unit, in addition to any ng conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:

Entergy Facility:	Inspection Date: 3 - 29. 2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]		
	Recommended Corrective Action and Responsible Party:		
	Engineer Approval of Corrective Action (if required):		
	[Sign and Date] Corrective Action Completed:		
	[Sign and Date]		
c.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)? No		
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)		
	Location/Comments:		
	Recommended Corrective Action and Responsible Party:		
	Engineer Approval of Corrective Action (if required):		
	[Sign and Date] Corrective Action Completed:		
	[Sign and Date]		
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No		
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:		
	Recommended Corrective Action and Responsible Party:		

Entergy Facility:	Independence	Inspection Date: 3. 29. 2016
		[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective A	ction (if required):
		[Sign and Date]
	Corrective Action Completed:	
		[Sign and Date]
e.		al issues with the leachate collection and transmission
		rol panel, walk transmission line to see if there are any
	leaks, assess outlet)?	
	⊠ No	At-
		describe and recommend a corrective action)
	Location/Comments:	
	1010000	
	Recommended Corrective Action a	nd Responsible Party;
		ma nesponsible Fully,
	-	
	Engineer Approval of Corrective Ac	tion (if required):
	Corrective Action Completed:	[Sign and Date]
	corrective Action completed.	[Sign and Date]
f.		or operational issues with the final cover system -
	erosion, ponded water, settlement No	, leachate seeps, and vegetation?
		area weeks a second and a second area a
	Location/Comments:	describe and recommend a corrective action)
	Location Comments.	
		_
	Recommended Corrective Action as	nd Responsible Party:
	f	
	-	
		The state of the s
	Engineer Approval of Corrective Act	ion (if required):
	Corrective Action Completed:	[Sign and Date]
	The state of the s	[Sign and Date]

tergy F	gy Facility: Tadependence Inspection Date: 3.3	2	
2.	Were there any issues or recommended corrective actions from the previous weekly inspection left to address? ☒ No		
	☐ Yes (if yes, follow-up on any corrective actions taken)		
	Comments:		
		11-15-11-11-11-11-11-11-11-11-11-11-11-1	

Entergy Facility:	1	
Entergy Facility:	oradence	

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues

	Followin	tional sheets as necessary g inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and State Lead		
Inspect	ted by:	[Must be performed by a qualified person per 257.84(a)(1)]		
Inspect	tion Dat	e: 4/5/2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]		
1.		pearances of an actual or potential structural weakness of the CCR unit, in addition to any		
	existin	g conditions that are disrupting or have the potential to disrupt the operation and safety		
		CCR unit? [Inspection criteria per 257.84(a)(1)(i)]		
	a.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?		
		₩ No		
		☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:		
		Recommended Corrective Action/Responsible Party:		
		Engineer Approval of Corrective Action (if required): [Sign and Date]		
		Corrective Action Completed:		
		[Sign and Date]		
	ь.	Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action)		
		Location/Comments:		

Entergy Facility:	Inspection Date: 4/5/16 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
c.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	nedeminended confective Action and Responsible Party.
	Engineer Approval of Coursetting Activities 11
	Engineer Approval of Corrective Action (if required):
	Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues?
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:

Entergy Facility:	Independence	Inspection Date: 4/5/16		
		[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]		
	Engineer Approval of Corrective Action (if required):		
		[Sign and Date]		
	Corrective Action Completed:	[Sign and Date]		
1	A	W 960) 5160, 218009		
e.		es with the leachate collection and transmission		
	system (i.e., check pump and control panel, walk transmission line to see if there are any leaks, assess outlet)?			
	⊠ No			
	☐ Yes (if yes, make photographs, descri	ibe and recommend a corrective action)		
		3		
		- Manual Control of the Control of t		
				
	Recommended Corrective Action and Re	sponsible Party:		
		opensione rarry.		
	Engineer Assess -1 - 5 C - 1 · 2 · 2 · 2 · 2 · 2 · 2 · 2 · 2 · 2 ·			
	Engineer Approval of Corrective Action (if required): [Sign and Date]			
	Corrective Action Completed:	[eigh site butt]		
		[Sign and Date]		
f.	If applicable, any signs of damage or ope	rational issues with the final cover system -		
	erosion, ponded water, settlement, leach	nate seeps, and vegetation?		
	X No			
	Yes (if yes, make photographs, descri	be and recommend a corrective action)		
	Location/Comments:			
	100-00-00-00-00-00-00-00-00-00-00-00-00-	,		
	Recommended Corrective Action and Res	ponsible Party:		
	Engineer Approval of Corrective Action Life	required):		
		[Sign and Date]		
	Corrective Action Completed:	-3.00 mm -10		

[Sign and Date]

tergy F	Facility: Independence	Inspection Date: 4/5/16 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]			
2.	Were there any issues or recommended correleft to address?	ctive actions from the previous weekly inspection			
	Yes (if yes, follow-up on any corrective actions taken) Comments:				
	Comments.				
		702-004-00-00-00-00-00-00-00-00-00-00-00-00			

Entergy Facility:	Independence	
	The state of the s	

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary

Inspecte	d by:	Jereny Stanter
		[Must be performed by a qualified person per 257.84(a)(1)]
Inspectio	on Dat	e: _4/12/2016
		[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1. /	Any ap	pearances of an actual or potential structural weakness of the CCR unit, in addition to any
		g conditions that are disrupting or have the potential to disrupt the operation and safety
		CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
		Any signs of sliding or sloughing of the soil layer or waste material that might indicate a
		slope failure?
		X No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required):
		[Sign and Date] Corrective Action Completed:
		Corrective Action Completed:
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes?
		No No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:

Entergy Facility:	Inspection Date: 4)2. 2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	Corrective Action Completed:
C.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)? □ No
	X Yes (if yes, make photographs, describe and recommend a corrective action)
	road. Picture attached.
	Recommended Corrective Action and Responsible Party: Wishout refilled and top of landfill sloped to redirect runoff away from cived. Picture affacted.
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? ☑ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:

Entergy Facility:	Independence	Inspection Date: 412. 2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if required):
	E	[Sign and Date]
	Corrective Action Completed:	Alexander of the state of the s
		[Sign and Date]
e	. Any signs of damage or operational issue	es with the leachate collection and transmission
		nel, walk transmission line to see if there are any
	leaks, assess outlet)?	
	X No	
	☐ Yes (if yes, make photographs, descr	ibe and recommend a corrective action)
	Recommended Corrective Action and Re	sponsible Party:
	-	
		100015Cities - 1-11-1-1-11-1-11-11-11-11-11-11-11-11
	1	the state of the s
	Engineer Approval of Corrective Action /	if required):
	Engineer Approval of Corrective Action ([Sign and Date]
	Corrective Action Completed:	
		[Sign and Date]
f.	If applicable, any signs of damage or one	erational issues with the final cover system -
	erosion, ponded water, settlement, lead	
	X No	and scops, and vegetation,
	Yes lif ves, make photographs, descr	ibe and recommend a corrective action)
	1 10	ise and recommend a corrective action)
	Recommended Corrective Action and Re	sponsible Party:
	3	
	Action Control Control	
	-	141
	Engineer Approval of Corrective Action (i	f required):
	Corrective Action Completed:	[Sign and Date]
	confective Action completed.	[Sign and Date]

tergy Facili	ity: Independence	Inspection Date: 4.17.7016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
le D	eft to address? No	
-		
di	ontainment or sump erosion/seeps, leac scharge structures intact. I Yes	functioning, leachate levels in sump (overfilled), hate pump functioning, transmission piping leaks, and actions taken)
X	bollards, well casing surface grout and se No	e actions taken)

Entergy Facility:	Independence	
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- 6 Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- 0 Use additional sheets as necessary
- Following inspection, send electronic conv of Inspection Form and acceptable control of the Cont

[Must be performed by a qualified person per 257.84(a)(1)]
te: 4 19. 2016
[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
ppearances of an actual or potential structural weakness of the CCR unit, in addition to any ng conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
Recommended Corrective Action/Responsible Party:
Engineer Approval of Corrective Action (if required):
[Sign and Date] Corrective Action Completed:
[Sign and Date]
Any signs of tension or other types of cracks or separation at the surface or slopes? ☑ No ☐ Yes (if yes, make photographs, describe and recommend a corrective action)

ntergy Facility:	Inspection Date: 4 19 2016
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
	Any signs of arasian from storm water was ff and are a total and a late of the store of the stor
C.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Passancible Portu
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
d	Any signs of hurrowing or tunneling and half the state of hurrowing or hurrowing
u.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:

Entergy Facility:	Independence	Inspection Date: 4.19 Zol L [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action	on (if required):
	Engineer Approval of Confederate Nette	[Sign and Date]
	Corrective Action Completed:	
		[Sign and Date]
e.	. Any signs of damage or operational is	sues with the leachate collection and transmission
		panel, walk transmission line to see if there are any
	leaks, assess outlet)?	Partick and a service of a serv
	⊠ No	
		scribe and recommand a corrective action!
		escribe and recommend a corrective action)
	Recommended Corrective Action and	Responsible Party:
	Engineer Approval of Corrective Actio	on (if required):
	[Sign and Date] Corrective Action Completed:	
	corrective Action completed.	[Sign and Date]
f.	If applicable, any signs of damage or	operational issues with the final cover system -
	erosion, ponded water, settlement, le	에 가는 사람들이 있는 사람들이 있는 것이 되어 보면 가장 보면 하게 되었다. 그리고 있는 것이 없는 것이 없는 것이 없는 것이 없는 것이 없는 것이다. 나는 것이 없는 것이 없는 것이다. 나는 사
		escribe and recommend a corrective action)
	Logotion /Community	scribe and recommend a corrective action)
	Recommended Corrective Action and	Responsible Party:
	Engineer Approval of Corrective Action	if required).
	Engineer Approval of Corrective Actio	(If required):
	Corrective Action Completed:	
	And the first of the second second	[Sign and Date]

ergy F	acility: Tadapendance Inspection Date: 4.19. 2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
2.	Were there any issues or recommended corrective actions from the previous weekly inspection left to address? No Yes (if yes, follow-up on any corrective actions taken) Comments:
3.	Is Leachate Collection System functioning properly? Potential issues to note — system controls functioning, leachate levels in sump (overfilled), containment or sump erosion/seeps, leachate pump functioning, transmission piping leaks, and discharge structures intact. Yes No (if no, follow-up on any corrective actions taken)
	Comments:
4.	Any Groundwater Monitoring System problems noted, such as damage to above ground fixtures – bollards, well casing, well pad areas and access roads)?
	№ NoYes (if yes, follow-up on any corrective actions taken)

Entergy Facility:	Indegendence	

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

inspected by:	Must be performed by a qualified person per 257.84(a)(1)]
	The state of the s
Inspection Date	e: 4\26\16 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	[inspection interval must not exceed 7 days per 257.64(a)(1)(1)]
	pearances of an actual or potential structural weakness of the CCR unit, in addition to any geonditions that are disrupting or have the potential to disrupt the operation and safety
of the	CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
a.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:

	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed: [Sign and Date]
c.	Any signs of erosion from storm water runoff or damage to stormwater control facilit (e.g. ditches, culverts, berms, and letdowns)?
	☒ No☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required): [Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:

[Sign and Date]

Corrective Action Completed:

	re there any issues or recommended corrective actions from the previous weekly inspection to address?
X	No
	Yes (if yes, follow-up on any corrective actions taken)
Con	nments:
_	
_	
_	
_	
	eachate Collection System functioning properly?
	ential issues to note – system controls functioning, leachate levels in sump (overfilled),
	tainment or sump erosion/seeps, leachate pump functioning, transmission piping leaks, and
	harge structures intact.
X	Yes
	No (if no, follow-up on any corrective actions taken)
Con	nments:
_	
Any	Groundwater Monitoring System problems noted, such as damage to above ground fixtures
	llards, well casing, well pad areas and access roads)?
	No .
	Yes (if yes, follow-up on any corrective actions taken)
Com	ments:
_	

Entergy Facility:	Independence
Entergy Facility:	Independence

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

[Must be performed by a qualified person per 257.84(a)(1)]
te:5 3 16
[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
opearances of an actual or potential structural weakness of the CCR unit, in addition to any g conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No
☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
Recommended Corrective Action/Responsible Party:
Engineer Approval of Corrective Action (if required):
Corrective Action Completed:
[Sign and Date]
Any signs of tension or other types of cracks or separation at the surface or slopes? No
Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

Entergy Facility:	Inspection Date: 5/3/16 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
c.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)?
	X Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments: Northwest hand road has washed again.
	Pictures attached.
	Recommended Corrective Action and Responsible Party: Fixed with out
	and further reshaped slope as well as sloped top
	further away from direction of problem area.
	Engineer Approval of Corrective Action (if required):
	Corrective Action Completed: 5/5/16 [Sign and Date]
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:

Entergy Facility: Independence	Inspection Date: 5/3/16 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
Engineer Approval of Corre	ective Action (if required):
	[Sign and Date]
Corrective Action Complete	
	[Sign and Date]
system (i.e., check pump ar leaks, assess outlet)?	erational issues with the leachate collection and transmission nd control panel, walk transmission line to see if there are any
IX No	
	graphs, describe and recommend a corrective action)
Recommended Corrective	Action and Responsible Party:
Engineer Approval of Corre Corrective Action Complete	
	[Sign and Date]
	amage or operational issues with the final cover system - tlement, leachate seeps, and vegetation?
	graphs, describe and recommend a corrective action)
Recommended Corrective A	Action and Responsible Party:
Engineer Approval of Corre	ctive Action (if required):
Full lies who can of colle	[Sign and Date]
Corrective Action Complete	ed:
complete	[Sign and Date]

	to address?
×	No
	Yes (if yes, follow-up on any corrective actions taken)
Com	ments:
=	
Is Le	achate Collection System functioning properly?
	ntial issues to note – system controls functioning, leachate levels in sump (overfilled),
cont	ainment or sump erosion/seeps, leachate pump functioning, transmission piping leaks, an
	narge structures intact.
X	Yes
	No (if no, follow-up on any corrective actions taken)
	ments:
_	
=	
Any C	Groundwater Monitoring System problems noted, such as damage to above ground fixture
	lards, well casing, well pad areas and access roads)? No
	Yes (if yes, follow-up on any corrective actions taken) ments:
-	
_	

Entergy Facility:	Independence	

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary

	Entergy	ng inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and State Lead
Inspect	ed by:	Jeremy Stauffer
		[Must be performed by a qualified person per 257.84(a)(1)]
Inspect	ion Da	te: _5/10/2016
		[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1.	Any a	ppearances of an actual or potential structural weakness of the CCR unit, in addition to any
	existir	ng conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
		Any signs of sliding or sloughing of the soil layer or waste material that might indicate a
		slope failure?
		™ No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required):
		[Sign and Date] Corrective Action Completed:
		[Sign and Date]
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

Entergy Facility:	Inspection Date: 5 10.2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]		
	Recommended Corrective Action and Responsible Party:		
	Engineer Approval of Corrective Action (if required):		
	Corrective Action Completed:		
	[Sign and Sate]		
c.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)? No		
	Yes (if yes, make photographs, describe and recommend a corrective action)		
	Location/Comments:		
	Recommended Corrective Action and Responsible Party:		
	Engineer Approval of Corrective Action (if required):		
	[Sign and Date]		
	Corrective Action Completed:		
	[Sign and Date]		
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No		
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)		
	Location/Comments:		
	Recommended Corrective Action and Responsible Party:		

Entergy Facility:	Independence	Inspection Date: 5 10.2016
		[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective As-	ion (if required):
	Engineer Approval of Corrective Act	ion (if required):
	Corrective Action Completed:	[organistics]
		[Sign and Date]
e.	. Any signs of damage or operational	issues with the leachate collection and transmission
		l panel, walk transmission line to see if there are any
	leaks, assess outlet)?	
	ĭ No	
	☐ Yes (if yes, make photographs, a	escribe and recommend a corrective action)
	Location/Comments:	
	Recommended Corrective Action an	d Responsible Party:
	-	
	Engineer Approval of Corrective Act	on (if required):
	and the state of t	[Sign and Date]
	Corrective Action Completed:	
		[Sign and Date]
f,	If applicable, any signs of damage or	operational issues with the final cover system -
	erosion, ponded water, settlement,	
	🖾 No	
	☐ Yes (if yes, make photographs, d	escribe and recommend a corrective action)
	Location/Comments:	
	_	
	-	
	Recommended Corrective Action and	d Responsible Party:
	Engineer Approval of Corrective Acti	on (if required):
	ALLE	[Sign and Date]
	Corrective Action Completed:	September 1
		[Sign and Date]

ENGLISH SENTENDER	T 1 Acces
Entergy Facility:	Independence

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary

 Following Entergy S 	inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and tate Lead
Inspected by:	Jereny Stanfler
	[Must be performed by a qualified person per 257.84(a)(1)]
Inspection Date	e: 5/17/16
mopoulon but	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	pearances of an actual or potential structural weakness of the CCR unit, in addition to any grounding conditions that are disrupting or have the potential to disrupt the operation and safety
	CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
a.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
	X No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Education, definitions.
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes?
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:

nend a corrective action) ashout: Small amount affached.
Date] e to stormwater control facility mend a corrective action) pashout: Small amount affached.
Date] e to stormwater control facility mend a corrective action) oashout: Small amount affached.
attached.
attached.
attached.
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Date]
Date]
d lead to stability issues?
nend a corrective action)
·

	Inspection Date: 5/17/16 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
e.	Any signs of damage or operational issues with the leachate collection and transmission
	system (i.e., check pump and control panel, walk transmission line to see if there are any
	leaks, assess outlet)?
	No No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	되는 사람이 되었다면 되었다. 그리고 하는 사람이 하고 있어요? 이 그리고 하고 있는 사람이 되었다면 하지만 하지만 하는데 보다 없다. 그는 사람이 없는 사람에 없는 사람이 없는 사람에 없는 사람이 없는 사람에 없는
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
	If applicable, any signs of damage or operational issues with the final cover system -
f.	
f.	그렇게 취소하는 어로 보다면 하다는 생각하다는 생각으로 가득하는 것이 생각하다면 살아서 살아 보다 사람들이 되었다면 하는데 그렇게 되었다면 하는데
f.	erosion, ponded water, settlement, leachate seeps, and vegetation?
f.	그렇게 취소하는 어로 보다면 하다는 생각하다는 생각으로 가득하는 것이 생각하다면 살아서 살아 보다 사람들이 되었다면 하는데 그렇게 되었다면 하는데

Recommended Corrective Action and Responsible Party:

[Sign and Date]

[Sign and Date]

Engineer Approval of Corrective Action (if required): _

Corrective Action Completed:

Entergy Facility: Inspection Date: 5/17/16
[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]

2,	Were there any issues or recommended corrective actions from the previous weekly inspection
	left to address?
	⊠ No
	☐ Yes (if yes, follow-up on any corrective actions taken)
	Comments:
3.	Is Leachate Collection System functioning properly?
	Potential issues to note – system controls functioning, leachate levels in sump (overfilled), containment or sump erosion/seeps, leachate pump functioning, transmission piping leaks, and discharge structures intact.
	X Yes
	☐ No (if no, follow-up on any corrective actions taken) Comments:
4.	Any Groundwater Monitoring System problems noted, such as damage to above ground fixtures – bollards, well casing, well pad areas and access roads)?
	⊠ No
	☐ Yes (if yes, follow-up on any corrective actions taken)
	Comments:

	-	
Entergy Facility:	Indapendence	

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

Inspec	ted by:	Must be performed by a qualified person per 257.84(a)(1)]
		e: 5/24/16
		[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1.	existin	pearances of an actual or potential structural weakness of the CCR unit, in addition to any g conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
	a.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
		⊠ No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required):
		[Sign and Date]
		Corrective Action Completed:
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes? M No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

Entergy Facility: _	Independence

Inspection Date:	5	241	116
[Inspection interv	al mus	t not exc	ceed 7 days per 257.84(a)(1)(i)]

,===		
Engine	er Approval of Corrective	ve Action (if required):
Correct	iva Action Completed	[Sign and Date]
Correct	ive Action Completed.	[Sign and Date]
Any sig	ns of erosion from stor	m water runoff or damage to stormwater control facil
	ches, culverts, berms,	두 시민이 맛이들은 어느, 하나 가는 보이면 나가 무섭했다면 있어. 이 모드트 어디에 보다 하게 되었다.
	(if ves. make photoard	aphs, describe and recommend a corrective action)
		west hand road washout Small
		hed into ditch.
<u> </u>		
Recomm	nended Corrective Act	ion and Responsible Party:
Recomm		ion and Responsible Party:
Recomm		
Recomi		
Recomm		
		ve Action (if required):
Enginee	r Approval of Correctiv	ve Action (if required):
Enginee	r Approval of Correctiv	ve Action (if required):
Enginee	r Approval of Correctiv	ve Action (if required):
Enginee	r Approval of Correctiv	ve Action (if required):
Enginee Correct Any sign	r Approval of Correctiv	ve Action (if required):
Enginee	r Approval of Correctiv	ve Action (if required):
Enginee Correct Any sign	r Approval of Corrective Action Completed:	ve Action (if required):
Enginee Correct Any sign No Yes	r Approval of Corrective ve Action Completed: as of burrowing or tunral (if yes, make photogra	ve Action (if required):
Enginee Correct Any sign No Yes	r Approval of Corrective ve Action Completed: as of burrowing or tunral (if yes, make photogra	ve Action (if required):
Enginee Correct Any sign No Yes	r Approval of Corrective ve Action Completed: as of burrowing or tunral (if yes, make photogra	ve Action (if required):
Enginee Correct Any sign No Yes	r Approval of Corrective ve Action Completed: as of burrowing or tunral (if yes, make photogra	ve Action (if required):
Enginee Correct Any sign No Yes	r Approval of Corrective ve Action Completed: as of burrowing or tunral (if yes, make photogra	ve Action (if required):
Enginee Correct Any sign No Yes	r Approval of Corrective ve Action Completed: as of burrowing or tunral (if yes, make photogra	ve Action (if required):
Enginee Correct Any sign No Yes Location	r Approval of Corrective ve Action Completed: ns of burrowing or tunr (if yes, make photogra	ve Action (if required):

Entergy Facility:	Inspection Date: 5/24/16 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
e.	system (i.e., check pump and control panel, walk transmission line to see if there are any
	leaks, assess outlet)?
	M No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
f.	If applicable, any signs of damage or operational issues with the final cover system - erosion, ponded water, settlement, leachate seeps, and vegetation? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if action 1)
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:

[Sign and Date]

rgy Facility:	Independence	Inspection Date: 5/24/16 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
left ⊠ □	re there any issues or recommended correto address? No Yes (if yes, follow-up on any corrective a mments:	
Pote conf disc 🖾		nctioning, leachate levels in sump (overfilled), te pump functioning, transmission piping leaks, and etions taken)
	r Groundwater Monitoring System problem ollards, well casing, well pad areas and acc	ms noted, such as damage to above ground fixtures
	Yes (if yes, follow-up on any corrective a	

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

Inspected by:	Jones Cuninghan
	[Must be performed by a qualified person per 257.84(a)(1)]
Inspection Dat	e: 5,31,2014
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
0.00	ppearances of an actual or potential structural weakness of the CCR unit, in addition to any
	g conditions that are disrupting or have the potential to disrupt the operation and safety
	CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
a.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a
	slope failure?
	₩ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:

	pproval of Corrective Action (if required):
	[Sign and Date]
Corrective	Action Completed:
	[vigit and pate]
Any signs o	f erosion from storm water runoff or damage to stormwater control fac
e.g. ditche	s, culverts, berms, and letdowns)?
□ No	
Yes (if)	yes, make photographs, describe and recommend a corrective action)
Location/Co	omments: forcess Road to laudill has vashouts due
to exce	Sire raid
Recommen	nded Corrective Action and Responsible Party:
Engineer A	pproval of Corrective Action (if required):
riigiiieei A	[Sign and Date]
Corrective .	Action Completed:
	[Sign and Date]
Any signs o	f burrowing or tunneling mammals that could lead to stability issues?
™ No	
☐ Yes (if)	yes, make photographs, describe and recommend a corrective action)
l acation /C	omments:
Location/C	
Location/Ci	
Location/Co	
Location/Co	
LocationyCo	
	ided Corrective Action and Responsible Party
	nded Corrective Action and Responsible Party:

ineer Approval of Corrective Action (if	required):
roctive Action Completed	[Sign and Date]
rective Action Completed:	[Sign and Date]
	with the leachate collection and transmissionel, walk transmission line to see if there are an
	e and recommend a corrective action)
ommended Corrective Action and Resp	oonsible Party:
	required):
	[Sign and Date]
ective Action Completed:	
	[Sign and Date]
plicable, any signs of damage or opera ion, ponded water, settlement, leacha No	ational issues with the final cover system - ate seeps, and vegetation?
Yes (if yes, make photographs, describe tion/Comments:	
ommended Corrective Action and Resp	onsible Party:
neer Approval of Corrective Action (if r	required):
active Action Completed	[Sign and Date]
conversation completed:	[Sign and Date]
	signs of damage or operational issues em (i.e., check pump and control panels, assess outlet)? No Yes (if yes, make photographs, describition/Comments: meer Approval of Corrective Action and Response on ponded water, settlement, leachable (if yes, make photographs, describition/Comments: plicable, any signs of damage or operation, ponded water, settlement, leachable (if yes, make photographs, describition/Comments: memended Corrective Action and Response (if yes, make photographs, describition/Comments: memended Corrective Action and Response (if yes, make photographs, describition/Comments)

ac	Yes (if yes, follow-up on any corrective actions taken) mments: North of Continue on Access coad due to rain ading must be done with Jry roaditions to provide gate ork environment for excipment.
Por cor dis	eachate Collection System functioning properly? tential issues to note — system controls functioning, leachate levels in sump (overfilled), ntainment or sump erosion/seeps, leachate pump functioning, transmission piping leaks, and charge structures intact. Yes
Co	No (if no, follow-up on any corrective actions taken) mments:
-1	pollards, well casing, well pad areas and access roads)?
-1	oollards, well casing, well pad areas and access roads)? No
-1	No Yes (if yes, follow-up on any corrective actions taken)
-1	No Yes (if yes, follow-up on any corrective actions taken)

Entergy Facility:	Independence

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

	Date:
inspection	Date:
exi	appearances of an actual or potential structural weakness of the CCR unit, in addition to any ting conditions that are disrupting or have the potential to disrupt the operation and safety ne CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
	 a. Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No
	Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Parameters and ad Course still Astin / Parameters (Parameters (Par
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
	 b. Any signs of tension or other types of cracks or separation at the surface or slopes? ☒ No
	 Yes (if yes, make photographs, describe and recommend a corrective action)

Entergy Facility: <u>T</u>	Inspection Date: 6/7/16 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
c.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Pacammandad Corrective Action and Borne 11. But
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:

Entergy Facility:	Inde pendence. Inspe	ection Date: 6.7.16 ection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if re	quired):
		[Sign and Date]
	Corrective Action Completed:	
		[Sign and Date]
e.	leaks, assess outlet)?	with the leachate collection and transmission walk transmission line to see if there are any
	□ No	
	Yes (if yes, make photographs, describe	and recommend a corrective action)
	Location/Comments: Leachale college	ction pump cycling
	on lost working one	perly.
	Recommended Corrective Action and Respo	ensible Party: FTN watified
	scheduled to troubleshoot	and fix pump issues.
	Engineer Approval of Corrective Action (if re	
		[Sign and Date]
	Corrective Action Completed:	
		[Sign and Date]
f.	If applicable, any signs of damage or operaterosion, ponded water, settlement, leachater	
	☐ Yes (if yes, make photographs, describe Location/Comments:	and recommend a corrective action)
	Recommended Corrective Action and Response	onsible Party:
	Engineer Approval of Corrective Action (if re	
	Community Antique Committee I	[Sign and Date]
	Corrective Action Completed:	[Sign and Date]
		[Sign and Date]

	Inspection Date: 6.7.16 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)
2.	Were there any issues or recommended corrective actions from the previous weekly inspection left to address? □ No □ Yes (if yes, follow-up on any corrective actions taken) Comments: Northwest har road and slope next to road
	have been repaired where washouts had occured. CCK removed from ditch below road. Top of landfill dithche to divert water from slope.
3.	Is Leachate Collection System functioning properly? Potential issues to note — system controls functioning, leachate levels in sump (overfilled),
	containment or sump erosion/seeps, leachate pump functioning, transmission piping leaks, and discharge structures intact. Yes No (if no, follow-up on any corrective actions taken) Comments: Leachale callection pump not operating properly. FTM notified and have been scheduled to translished.
	discharge structures intact. ☐ Yes ☑ No (if no, follow-up on any corrective actions taken)

Entergy Facility: Indadendence	Entergy Facility:	Indertadence	
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- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

	[Must be performed by a qualified person per 257.84(a)(1)]
spection Da	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
existir	opearances of an actual or potential structural weakness of the CCR unit, in addition to any ng conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
	₩ No
	Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No
	Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

Recommended Corrective Action and Responsible Party:

rgy Facility:	Inspection Date: 6 14 2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
e	Any signs of damage or operational issues with the leachate collection and transmission
	system (i.e., check pump and control panel, walk transmission line to see if there are an leaks, assess outlet)? No
	🔀 Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments: Leachar pump not working. FTN and
	Advanced Flid Technologies are working to replace
	burg
	- Harris - Control - Contr
	D
	Recommended Corrective Action and Responsible Party: FTN recommende
	vacuumny out pump casing and pressure washing sump
	Recommended Corrective Action and Responsible Party: FTN reconnected vacuumna out pump casing and pressure washing sump reex to clear accumulated silt.
	recomming out pump casing and pressure washing sump
	rock to clear accumulated sitts
	rack to clear accumulated sitt. Engineer Approval of Corrective Action (if required):
	rack to clear accumulated sitt. Engineer Approval of Corrective Action (if required): [Sign and Date]
	rack to clear accumulated sitt. Engineer Approval of Corrective Action (if required):
	Engineer Approval of Corrective Action (if required): [Sign and Date] [Sign and Date]
f.	Engineer Approval of Corrective Action (if required): [Sign and Date] [Sign and Date] If applicable, any signs of damage or operational issues with the final cover system -
f.	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] If applicable, any signs of damage or operational issues with the final cover system - erosion, ponded water, settlement, leachate seeps, and vegetation?
f.	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] If applicable, any signs of damage or operational issues with the final cover system erosion, ponded water, settlement, leachate seeps, and vegetation? No
f.	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] If applicable, any signs of damage or operational issues with the final cover system - erosion, ponded water, settlement, leachate seeps, and vegetation? No Yes (if yes, make photographs, describe and recommend a corrective action)
f.	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] If applicable, any signs of damage or operational issues with the final cover system erosion, ponded water, settlement, leachate seeps, and vegetation? No
f.	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] If applicable, any signs of damage or operational issues with the final cover system - erosion, ponded water, settlement, leachate seeps, and vegetation? No Yes (if yes, make photographs, describe and recommend a corrective action)
f.	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] If applicable, any signs of damage or operational issues with the final cover system - erosion, ponded water, settlement, leachate seeps, and vegetation? No Yes (if yes, make photographs, describe and recommend a corrective action)
f.	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] If applicable, any signs of damage or operational issues with the final cover system - erosion, ponded water, settlement, leachate seeps, and vegetation? No Yes (if yes, make photographs, describe and recommend a corrective action)
f.	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] If applicable, any signs of damage or operational issues with the final cover system - erosion, ponded water, settlement, leachate seeps, and vegetation? No Yes (if yes, make photographs, describe and recommend a corrective action)

Engineer Approval of Corrective Action (if required):

Corrective Action Completed: _

[Sign and Date]

[Sign and Date]

itergy	Facility: Tade genderica Inspection Date: 6.14.2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
2.	Were there any issues or recommended corrective actions from the previous weekly inspection left to address? No Yes (if yes, follow-up on any corrective actions taken) Comments: Leachale pump being replaced by FTN and Advanced Flood Technologies.
3.	Is Leachate Collection System functioning properly? Potential issues to note – system controls functioning, leachate levels in sump (overfilled), containment or sump erosion/seeps, leachate pump functioning, transmission piping leaks, and discharge structures intact. Yes No (if no, follow-up on any corrective actions taken)
	Comments: Leachabe pump out of serves Pamp is convertly being replaced.

Revision 2 - 4/18/2016

Comments:

Entergy Facility:	Independence	
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- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

rspected by:	[Must be performed by a qualified person per 257.84(a)(1)]
spection Da	ate: 6.21,2016
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1. Any a	ppearances of an actual or potential structural weakness of the CCR unit, in addition to any
of the	ng conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
а	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
b.	[Sign and Date]
	Any signs of tension or other types of cracks or separation at the surface or slopes?
	Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

Entergy Facility:	Inspection Date: 6.21.2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
c.	Any signs of erosion from storm water runoff or damage to stormwater control facilities
	(e.g. ditches, culverts, berms, and letdowns)?
	Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No
	Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Possonsible Ports:
	Recommended Corrective Action and Responsible Party:

cility:	Inspection Date: 6.21.2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed: [Sign and Date]
	[Sign and Date]
e.	system (i.e., check pump and control panel, walk transmission line to see if there are ar leaks, assess outlet)?
	□ No
	Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments: Leachate pump not operating correctly.
	Recommended Corrective Action and Responsible Party: Advanced Fluid Technol.
	installed new 80 gpm pump offer laks Industrial Abshed and vacc
	on loft indicating possible blockage of sump rock andlow fabric
	by silt makerial. Awaiting recommendations from FTN.
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
f.	If applicable, any signs of damage or operational issues with the final cover system -
	erosion, ponded water, settlement, leachate seeps, and vegetation? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	esponsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:

[Sign and Date]

Entergy Facility:	Independence
cintergy racinty.	In dependence

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

Inspected by:	
	[Must be performed by a qualified person per 257.84(a)(1)]
Inspection Dat	e: June 28 2016
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
existin of the	ppearances of an actual or potential structural weakness of the CCR unit, in addition to any g conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No Vos (if yes, make photographs described)
	Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

Entergy Facility:	Inspection Date: 6.2.8.2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
c.	Any signs of erosion from storm water runoff or damage to stormwater control facilities
С.	(e.g. ditches, culverts, berms, and letdowns)?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues?
	⊠ No
	Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party
	Recommended Corrective Action and Responsible Party:

[Sign and Date]

Corrective Action Completed:

Were there any issues or recommended corrective actions from the previous week left to address? No Yes (if yes, follow-up on any corrective actions taken)	hate levels in sump (overfilled), oning, transmission piping leaks, and a properly. Leachate flow transmission recommendations from	Facility: Independence	Inspection Date: 6.28.16 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
Potential issues to note — system controls functioning, leachate levels in sump (over containment or sump erosion/seeps, leachate pump functioning, transmission pipil discharge structures intact. Yes No (if no, follow-up on any corrective actions taken) Comments: Pump and controls are functioning propelly. Leachy into sump area appears restricted Auniting recommendate. ETN Any Groundwater Monitoring System problems noted, such as damage to above grupollards, well casing, well pad areas and access roads)?	oning, transmission piping leaks, and g proposely. Leachate flow ting recommendations from	left to address? No Yes (if yes, follow-up on any corrective Comments: Awaitag Corrective	e actions taken) action recommendations from FTN
Potential issues to note — system controls functioning, leachate levels in sump (over containment or sump erosion/seeps, leachate pump functioning, transmission pipil discharge structures intact. Yes No (if no, follow-up on any corrective actions taken) Comments: Pump and controls are functioning propelly. Leachy into sump area appears restricted Auniting recommendate. ETN Any Groundwater Monitoring System problems noted, such as damage to above grupollards, well casing, well pad areas and access roads)?	oning, transmission piping leaks, and g proposely. Leachate flow ting recommendations from		
bollards, well casing, well pad areas and access roads)?No	n as damage to above ground fixture:	Potential issues to note — system controls for containment or sump erosion/seeps, leach discharge structures intact. Yes No (if no, follow-up on any corrective of Comments: Pump and controls as into sump and controls as sump area appears reserved.	functioning, leachate levels in sump (overfilled), nate pump functioning, transmission piping leaks, and actions taken)
⊠ No			
☐ Yes (if yes, follow-up on any corrective actions taken)			access roads) :
		☐ Yes (if yes, follow-up on any corrective	actions taken)
Comments:		Comments:	

Entergy Facility: Independence

Entergy Facility: Twde peudence

WEEKLY LANDFILL INSPECTION

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

Inspec	ted by:	[Must be performed by a qualified person per 257.84(a)(1)]
Inspec	tion Dat	te:
1.	existin of the	opearances of an actual or potential structural weakness of the CCR unit, in addition to any ag conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed:
		[Sign and Date]
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:

Recommended Corrective Action and Responsible Party:

Entergy Facility: Interpretere

Inspection Date: July 5, 2016
[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]

	Engineer Approval of Corrective Action (if required):				
	[Sign and Date]				
	Corrective Action Completed:				
	[Sign and Date]				
e.	Any signs of damage or operational issues with the leachate collection and transmission				
	system (i.e., check pump and control panel, walk transmission line to see if there are any				
	leaks, assess outlet)?				
	□ No				
	Yes (if yes, make photographs, describe and recommend a corrective action)				
	Location/Comments:				
	Properly Surges on and off				
	propringes on and ort				
	Recommended Corrective Action and Responsible Party: Awating corrective				
	actions from FTV				
	Engineer Approval of Corrective Action (if required):				
	[Sign and Date]				
	Corrective Action Completed:				
	[Sign and Date]				
f.	If applicable, any signs of damage or operational issues with the final cover system -				
	erosion, ponded water, settlement, leachate seeps, and vegetation?				
	™ No				
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)				
	Location/Comments:				
	Recommended Corrective Action and Responsible Party:				
	Engineer Approval of Corrective Action (if required):				
	[Sign and Date]				
	Corrective Action Completed:				
	[Sign and Date]				

acility:
Were there any issues or recommended corrective actions from the previous weekly inspection left to address? No Yes (if yes, follow-up on any corrective actions taken) Comments: Auniting Corrective actions from FTW (eganding beachate purp.
Is Leachate Collection System functioning properly? Potential issues to note — system controls functioning, leachate levels in sump (overfilled), containment or sump erosion/seeps, leachate pump functioning, transmission piping leaks, and discharge structures intact. Yes No (if no, follow-up on any corrective actions taken) Comments: Pump + contlok function properly leachate Four into sump area apears restorted musiting From FTV
Any Groundwater Monitoring System problems noted, such as damage to above ground fixture: – bollards, well casing, well pad areas and access roads)? No Yes (if yes, follow-up on any corrective actions taken) Comments:

Entergy Facility: _	Ind-pandonce
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- Inspection applies to CCR Rule affected CCR units or cells only
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- Use additional sheets as necessary
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[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
pearances of an actual or potential structural weakness of the CCR unit, in addition to any conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No
☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
Recommended Corrective Action/Responsible Party:
Engineer Approval of Corrective Action (if required):
Corrective Action Completed:
[Sign and Date]
Any signs of tension or other types of cracks or separation at the surface or slopes? No
Yes (if yes, make photographs, describe and recommend a corrective action)

Inspection Date: 0.12 16 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
Recommended Corrective Action and Responsible Party:
Engineer Approval of Corrective Action (if required):
[Sign and Date] Corrective Action Completed:
[Sign and Date]
Any signs of erosion from storm water runoff or damage to stormwater control facilitie (e.g. ditches, culverts, berms, and letdowns)?
 No ☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
Recommended Corrective Action and Responsible Party:
Engineer Approval of Corrective Action (if required):
[Sign and Date] Corrective Action Completed:
[Sign and Date]
Any signs of burrowing or tunneling mammals that could lead to stability issues? No
☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
•

Corrective Action Completed:

[Sign and Date]

[Sign and Date]

Wei	1		Inspection Date: 7 12 16
			[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
left	re there any i to address? No	issues or recomm	nended corrective actions from the previous weekly inspection
		follow-up on any	corrective actions taken)
CON	chan com	cure sump	refill rate. FTW working on convective
	10,011	- Consuma Et 1374	
Is Le	achate Collec	ction System fun	ctioning properly?
			controls functioning, leachate levels in sump (overfilled),
			eps, leachate pump functioning, transmission piping leaks, and
	harge structu		, , , , , , , , , , , , , , , , , , ,
_	Yes		
X	No (if no. for	llow-up on any co	orrective actions taken)
Corr			
COII	michts. Tue	WA CONJUDA	, piping and discharge the are twactions
Over	andre 1.		
pro	parly L	ecchate sun	of retil note is still low Fin
Pro	parly L	corrective	a etan recommendations.
-pvo	parly L	corrective	a etal versumedations.
200	parly L	corrective	a etan recommedations.
540	perly L	corrective	o etan recommedations.
Pro	party C	corrective	a etan recommedations:
- Tre	perly L	corrective	a etan recommedations.
Any	Groundwater	r Monitoring Syst	em problems noted, such as damage to above ground fixture
Any – bo	Groundwater llards, well ca	r Monitoring Syst	
Any - bo	Groundwater llards, well ca No	r Monitoring Syst asing, well pad ar	tem problems noted, such as damage to above ground fixture. Teas and access roads)?
Any - bo	Groundwater llards, well ca No Yes (if yes, fo	r Monitoring Syst asing, well pad ar ollow-up on any c	em problems noted, such as damage to above ground fixture eas and access roads)?
Any - bo	Groundwater llards, well ca No Yes (if yes, fo	r Monitoring Syst asing, well pad ar ollow-up on any c	tem problems noted, such as damage to above ground fixture. Teas and access roads)?
Any - bo	Groundwater llards, well ca No Yes (if yes, fo	r Monitoring Syst asing, well pad ar ollow-up on any c	em problems noted, such as damage to above ground fixture eas and access roads)?
Any - bo	Groundwater llards, well ca No Yes (if yes, fo	r Monitoring Syst asing, well pad ar ollow-up on any c	em problems noted, such as damage to above ground fixture eas and access roads)?
Any - bo	Groundwater llards, well ca No Yes (if yes, fo	r Monitoring Syst asing, well pad ar ollow-up on any c	em problems noted, such as damage to above ground fixture eas and access roads)?
Any - bo	Groundwater llards, well ca No Yes (if yes, fo	r Monitoring Syst asing, well pad ar ollow-up on any c	em problems noted, such as damage to above ground fixtureseas and access roads)?
Any - bo	Groundwater llards, well ca No Yes (if yes, fo	r Monitoring Syst asing, well pad ar ollow-up on any c	em problems noted, such as damage to above ground fixtures eas and access roads)?
Any - bo	Groundwater llards, well ca No Yes (if yes, fo	r Monitoring Syst asing, well pad ar ollow-up on any c	corrective actions taken)

Entergy Facility: Independence

Entergy Facility: Independence

WEEKLY LANDFILL INSPECTION

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

[Must be performed by a qualified person per 257.84(a)(1)]
te: 19.16
[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
ppearances of an actual or potential structural weakness of the CCR unit, in addition to any conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
Recommended Corrective Action/Responsible Party:
Engineer Approval of Corrective Action (if required):
[Sign and Date] Corrective Action Completed:
[Sign and Date]
Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action)

Entergy Facility:	Inspection Date: 1.19.2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
c.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)?
	Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No

Recommended Corrective Action and Responsible Party:

	Inspection Date: 7.19 2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
e.	Any signs of damage or operational issues with the leachate collection and transmission system (i.e., check pump and control panel, walk transmission line to see if there are any leaks, assess outlet)? No
	Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments: Leachale pump operating correctly
	hower sump refull rate is still slower than normal
	Then Market
	Recommended Corrective Action and Responsible Party:
	Aciding recommendations from FTN
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
f.	If applicable, any signs of damage or operational issues with the final cover system -
	erosion, ponded water, settlement, leachate seeps, and vegetation?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:

Recommended Corrective Action and Responsible Party: _____

[Sign and Date]

[Sign and Date]

Engineer Approval of Corrective Action (if required):

Corrective Action Completed:

ergy l	Facility: Independence	Inspection Date: 7.19 2016
		[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
2.	. Were there any issues or recommended co	rrective actions from the previous weekly inspection
	left to address?	
	□ No	
	Yes (if yes, follow-up on any corrective	actions taken)
	Comments: Continue to account	correctus action recommendations
	tor low sump relil rate	of leschak pump.
3.	Is Leachate Collection System functioning p	roporty?
		unctioning, leachate levels in sump (overfilled),
	containment or sump erosion/seeps leacha	ite pump functioning, transmission piping leaks, and
	discharge structures intact.	the partip rationology, transmission piping leaks, and
	□ Yes	
	No (if no, follow-up on any corrective a	ctions taken
	Comments: Summer of All Dale	terioris takerij
	Acaitas carretas atas	inner to be slower than normal.
) Later and a control of	economisationi trois FTW.
	Any Groundwater Monitoring System proble	ms noted, such as damage to above ground fixtures
	- bollards, well casing, well pad areas and ac	cess roads)?
	■ No	
	☐ Yes (if yes, follow-up on any corrective of	actions taken)
	Comments:	
	1	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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0		

Entergy Facility:	Independence	

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

Inspected by:	Must be performed by a qualified person per 257.84(a)(1)]
Inspection Dat	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
existin of the	ppearances of an actual or potential structural weakness of the CCR unit, in addition to any ag conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No Yes (if yes, make photographs, describe and recommend a corrective action)
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

Entergy Facility:	Independence Inspection Date: 1.26.16
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
C	c. Any signs of erosion from storm water runoff or damage to stormwater control facilities
	(e.g. ditches, culverts, berms, and letdowns)?
	Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required)
	Engineer Approval of Corrective Action (if required):
	Corrective Action Completed:
	[Sign and Date]
d	, c
	No No Vos (if you are less to
	 Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:

7	
Entergy Facility: Inde	pendence

Inspection Date: 7. 26. 16
[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]

E	ngineer Approval of Corrective Action (if required):
	[Sign and Date]
(forrective Action Completed:
	[Sign and Date]
A	ny signs of damage or operational issues with the leachate collection and transmissio
	ystem (i.e., check pump and control panel, walk transmission line to see if there are a
	eaks, assess outlet)?
	□ No
3	Yes (if yes, make photographs, describe and recommend a corrective action)
	ocation/Comments: Rump still suffering from slow sump
	refill rate.
	· Chini Tale
_	
-	
- D	
K	ecommended Corrective Action and Responsible Party: FTN weeking on
-	corrective action recommendations
_	
-	
-	
E	ngineer Approval of Corrective Action (if required):
	[Sign and Date]
C	prrective Action Completed:
	[Sign and Date]
lf	applicable, any signs of damage or operational issues with the final cover system -
	rosion, ponded water, settlement, leachate seeps, and vegetation?
	No
	Yes (if yes, make photographs, describe and recommend a corrective action)
L	ocation/Comments:
-	
_	
_	
R	ecommended Corrective Action and Responsible Party:
_	
-	
E	gineer Approval of Corrective Action (if required):
C	[Sign and Date] prrective Action Completed:
-	
	[Sign and Date]

Yes (if yes, follow-up on any corrective actions taken)			
	mments: <u>Leachate pump sump slow refill rate. Pump</u> sumetioning normally. FTW working up corrective actions.		
-			
=			
	eachate Collection System functioning properly? tential issues to note – system controls functioning, leachate levels in sump (overfilled),		
	ntainment or sump erosion/seeps, leachate pump functioning, transmission piping leaks, a		
-	charge structures intact.		
N	Yes		
CO	No (if no, follow-up on any corrective actions taken)		
COI	nments: Slow sump refill rate at leachate pump. FTN		
) up corrective actions.		
Any	Groundwater Monitoring System problems noted, such as damage to above ground fixtu		
- b	Groundwater Monitoring System problems noted, such as damage to above ground fixturollards, well casing, well pad areas and access roads)?		
Any - bo	ollards, well casing, well pad areas and access roads)? No		
- b	ollards, well casing, well pad areas and access roads)?		
- b ₁	ollards, well casing, well pad areas and access roads)? No		
- b ₁	ollards, well casing, well pad areas and access roads)? No Yes (if yes, follow-up on any corrective actions taken)		
- b ₁	ollards, well casing, well pad areas and access roads)? No Yes (if yes, follow-up on any corrective actions taken)		
- b ₁	ollards, well casing, well pad areas and access roads)? No Yes (if yes, follow-up on any corrective actions taken)		
- b ₁	ollards, well casing, well pad areas and access roads)? No Yes (if yes, follow-up on any corrective actions taken)		

Entergy Facility:	Independence
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- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

tions that are disrupting or have the potential to disrupt the operation and safety it? [Inspection criteria per 257.84(a)(1)(i)] gns of sliding or sloughing of the soil layer or waste material that might indicate a failure?
ces of an actual or potential structural weakness of the CCR unit, in addition to any tions that are disrupting or have the potential to disrupt the operation and safety it? [Inspection criteria per 257.84(a)(1)(i)] gns of sliding or sloughing of the soil layer or waste material that might indicate a failure?
it? [Inspection criteria per 257.84(a)(1)(i)] Igns of sliding or sloughing of the soil layer or waste material that might indicate a failure? O
es (if yes, make photographs, describe and recommend a corrective action) on/Comments:
nmended Corrective Action/Responsible Party:
eer Approval of Corrective Action (if required):
ctive Action Completed:
gns of tension or other types of cracks or separation at the surface or slopes? Is (if yes, make photographs, describe and recommend a corrective action) on/Comments:

ntergy Facility:	Inspection Date: 8. 2. 2011 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed: [Sign and Date]
C.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)?
	 ☒ No ☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required): [Sign and Date]
	Corrective Action Completed:[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:

Entergy Facility:	Tradependence Inspection Date: [Inspection inter	8. 7. 2016 val must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if required):	
		and Date]
	Corrective Action Completed:	
	[Sign a	and Date]
e.	 Any signs of damage or operational issues with the lessystem (i.e., check pump and control panel, walk transleaks, assess outlet)? No 	
	Yes (if yes, make photographs, describe and reco	mmend a corrective action)
	Location/Comments: <u>Leachate</u> sump	
	working up corrective action v	
	Recommended Corrective Action and Responsible Pa	rty: FTW
	Engineer Approval of Corrective Action (if required):	
		ind Date]
	Corrective Action Completed:	
	[Sign a	and Date]
f.	 If applicable, any signs of damage or operational issue erosion, ponded water, settlement, leachate seeps, a No 	
	☐ Yes (if yes, make photographs, describe and recor Location/Comments:	mmend a corrective action)
	Recommended Corrective Action and Responsible Pa	rty:
	Engineer Approval of Corrective Action (if required):	
	(Sign a Corrective Action Completed:	nd Date]

[Sign and Date]

rgy Facility: Independence	Inspection Date: 8. 2. 2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
left to address? ☐ No ☑ Yes (if yes, follow-up on any correctiv	slow refill rate FTN working
containment or sump erosion/seeps, leach discharge structures intact. Yes No (if no, follow-up on any corrective	functioning, leachate levels in sump (overfilled), nate pump functioning, transmission piping leaks, and
4. Any Groundwater Monitoring System prob – bollards, well casing, well pad areas and	e actions taken)

Entergy Facility: Independence

Entergy Facility:	Independence	
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- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

Inspected by:	Jeveny Stauffer
inspected by.	[Must be performed by a qualified person per 257.84(a)(1)]
Inspection Dat	e: 8/9/2016
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
existin	pearances of an actual or potential structural weakness of the CCR unit, in addition to any g conditions that are disrupting or have the potential to disrupt the operation and safety
	CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
	 ☒ No ☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed: [Sign and Date]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

Entergy Facility:	Inspection Date: 8/9/20/6 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed: [Sign and Date]
c,	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)? No
	Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed;
	[Sign and Date]
d,	Any signs of burrowing or tunneling mammals that could lead to stability issues? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:

[Sign and Date]

[Sign and Date]

Corrective Action Completed:

ergy F	Facility: Independence	Inspection Date: 8.9 2016	
		[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]	
2.	Were there any issues or recommended corrective actions from the previous weekly inspection left to address? □ No		
	∀es (if yes, follow-up on any corrective)	actions taken	
	Comments: Slow sump ref. 11 rate.		
	Comments 21000 xmp 121.1	(rate	
			
3.	Is Leachate Collection System functioning p	roperly?	
٠.		unctioning, leachate levels in sump (overfilled),	
		ate pump functioning, transmission piping leaks, and	
	discharge structures intact.		
	☐ Yes		
	■ No (if no, follow-up on any corrective of the contraction)		
	Comments: Pump system function	FTW weaking corrective action	
		. Fto weaking corrective action	
	recommendations		
	· · · · · · · · · · · · · · · · · · ·		
Λ	Any Cray durate Manitaria Cutana and I		
4.	- bollards, well casing, well pad areas and a	ems noted, such as damage to above ground fixtures	
	M No	ccess roads):	
	☐ Yes (if yes, follow-up on any corrective	actions taken	
	Comments:		
	· 		
	1	H 100 100 100 100 100 100 100 100 100 10	
	Production of the Control of the Con		

WEEKLY LANDFILL INSPECTION

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

		[Must be performed by a qualified person per 257.84(a)(1)]
nspect	ion Dat	e: 8,16,2016
		[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1.	existin of the	ppearances of an actual or potential structural weakness of the CCR unit, in addition to any g conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required):
		Corrective Action Completed:
		[Sign and Date]
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes?
		☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

Entergy Facility:	Independence Inspection Date: 8.16.2016
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Percommanded Corrective Action and Beaucasible Besture
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
c.	Any signs of erosion from storm water runoff or damage to stormwater control facilities
	(e.g. ditches, culverts, berms, and letdowns)?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	n vivo
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues?
	No No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:

ntergy F	Facility: Independence	Inspection Date: 8.16.2018 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
2.	left to address? ☐ No ☑ Yes (if yes, follow-up on any correct	d corrective actions from the previous weekly inspection ctive actions taken)
3.	Is Leachate Collection System function:	
٥.	Potential issues to note – system contro	ols functioning, leachate levels in sump (overfilled), achate pump functioning, transmission piping leaks, and
	Comments: Low sump refill	rate. FTN working corrective actions.
4.	Any Groundwater Monitoring System pr – bollards, well casing, well pad areas ar 図 No	roblems noted, such as damage to above ground fixtures nd access roads)?
	☐ Yes (if yes, follow-up on any correct	tive actions taken)

WEEKLY LANDFILL INSPECTION

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

Inspected	by:	Must be performed by a qualified person per 257.84(a)(1)]
		[Must be perforined by a qualified person per 257.84(a)(1)]
Inspection	Date	8. 23. 2016
		[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
		pearances of an actual or potential structural weakness of the CCR unit, in addition to any
		g conditions that are disrupting or have the potential to disrupt the operation and safety
of		CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
	a.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
		No No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required):
		[Sign and Date] Corrective Action Completed:
		[Sign and Date]
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes?
		⊠ No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:

Entergy Facility: _	I	Inspection Date: 8 23 2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
		Recommended Corrective Action and Responsible Party:
		Engineer Approval of Corrective Action (if required):
		Corrective Action Completed:
	c.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)?
		 ✓ No ☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
		Location/Comments:
		Recommended Corrective Action and Responsible Party:
		Engineer Approval of Corrective Action (if required):
		[Sign and Date] Corrective Action Completed:
		[Sign and Date]
	d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
		Recommended Corrective Action and Responsible Party:

Entergy Facility:	Inspection Date: 23 2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	[III3] Ection interval industries choose in delib per annual industries
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
e.	Any signs of damage or operational issues with the leachate collection and transmission system (i.e., check pump and control panel, walk transmission line to see if there are any
	leaks, assess outlet)?
	□ No
	Location/Comments: Low leacheste sump ref. 11 rate.
	Recommended Corrective Action and Responsible Party: PMI and FTN
	will perform cleanant of leachate supp.
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
f.	If applicable, any signs of damage or operational issues with the final cover system - erosion, ponded water, settlement, leachate seeps, and vegetation?
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Fundamental of Compositive Assistant life and the state of the state o
	Engineer Approval of Corrective Action (if required): [Sign and Date]
	Corrective Action Completed:
	[Sign and Date]

	Yes (if yes	s, follow	-up on a	ny corre	ective ac	tions takei	n)		· C- 1
Com	nments: 👤	(WC)	leacho	te	Sump	ref.11	rate.	Contra	ctops (PMI/FT
<u>r</u> 2	e faired	for	clean	iont	of-	sump	area.		
_									
-									
Is Le	eachate Co	llection	System f	unction	ning pro	perly?			
									(overfilled),
				seeps,	leachate	pump fur	ctioning, tr	ansmissior	n piping leaks, ar
disc	harge stru	ctures i	ntact.						
	Yes								
X						ions taken			
Com		1 .			0 11	1	Λ	1 1	
COII	nments: _	600	5 mm	6 2	54111	rale.	brub	and tro	nsmiss on
<u> </u>	nments: _ skms f	function	5 mm	prope	rly.	rale.	krub	and are	100 S (1 m (2)
_ <u>5</u>	nments: _	rimetio	nng	Grobe	rly.	rate.	Prub	and the	(A) M.) S &A
	nments: _	runctio	rum	bushs	rly.	rale.	krub	and tra	103m1) 3 PO
	nments: _	functio	5 m	brobs	rly.	vale.	srub	avg and	103m1) 3 00
	nments: _	runetio	innej	bushs	rly.	vale.	trub	and the	103 M1) 3 PO
	nments: _	runetio	Enm Inna	biobs	rly.	7A LS .	trub	and and	103 M1) 3 PO
	nments: _	runetio	inne	Crops	rly.	7 LE .	trub	and the	103 M.) S O
	nments: _	runetio	Enm On-Nej	bushs	14.	77.12	trub	and and	103 M.) S O
	stems f	runetio	· · · · · · · · · · · · · · · · · · ·	prope	rly.				ove ground fixtu
Any	stems f	ater Mo	onitoring	System	rام .	ns noted, s	such as dam		
Any – bo	ske ms 1	ater Mo	onitoring	System	rام .	ns noted, s	such as dam		
Any – bo	Groundwoollards, we	ater Mo	onitoring s	System d areas	problen	ns noted, s ess roads)	such as dam ?		
Any	Groundwoollards, we No	ater Mo	onitoring s	System d areas	problen	ns noted, s	such as dam ?		
Any bo	Groundwoollards, we	ater Mo	onitoring s	System d areas	problen	ns noted, s ess roads)	such as dam ?		
Any - bo	Groundwoollards, we No	ater Mo	onitoring s	System d areas	problen	ns noted, s ess roads)	such as dam ?		
Any bo	Groundwoollards, we No	ater Mo	onitoring s	System d areas	problen	ns noted, s ess roads)	such as dam ?		
Any - bo	Groundwoollards, we No	ater Mo	onitoring s	System d areas	problen	ns noted, s ess roads)	such as dam ?		

Inspection Date: 23.2016
[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]

WEEKLY LANDFILL INSPECTION

Instructions:

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

Inspected by:	Jeremy Stauffer
	[Must be performed by a qualified person per 257.84(a)(1)]
Inspection Da	te:8,30,2016
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	opearances of an actual or potential structural weakness of the CCR unit, in addition to any ng conditions that are disrupting or have the potential to disrupt the operation and safety
	CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
a.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
	⊠ No
	 Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required): [Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes? $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

Revision 2 - 4/18/2016

	[Inspection interval must not exceed 7 days per 257.84
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
C.	Any signs of erosion from storm water runoff or damage to stormwater control fa (e.g. ditches, culverts, berms, and letdowns)?
	M No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues?
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:

Recommended Corrective Action and Responsible Party:

[Sign and Date]

[Sign and Date]

Engineer Approval of Corrective Action (if required): _____

Corrective Action Completed: _____

ntergy I	Facility: Independence Inspection Date: 8.30.2016
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
2.	Were there any issues or recommended corrective actions from the previous weekly inspection left to address? □ No
	∀es (if yes, follow-up on any corrective actions taken)
	comments: Low sump refill rate. FTN/PMT will be responsible for cleanout.
3.	Is Leachate Collection System functioning properly?
	Potential issues to note – system controls functioning, leachate levels in sump (overfilled), containment or sump erosion/seeps, leachate pump functioning, transmission piping leaks, and discharge structures intact.
	is any confective actions takeny
	Comments: Low sump yet: 11 vate.
	Any Groundwater Monitoring System problems noted, such as damage to above ground fixtures – bollards, well casing, well pad areas and access roads)?
	⊠ No
	☐ Yes (if yes, follow-up on any corrective actions taken)
	Comments:

Entergy Facility: Independence	
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- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

and the second second second		0.1.2-11
Inspect	ion Date	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1.	existing of the (pearances of an actual or potential structural weakness of the CCR unit, in addition to any conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required):
		[Sign and Date]
		Corrective Action Completed:
		Corrective Action Completed:

	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Coursetive Astiss (if we arrived)
	Engineer Approval of Corrective Action (if required):
	Corrective Action Completed:
	[Sign and Date]
c.	Any signs of erosion from storm water runoff or damage to stormwater control faciliti
	(e.g. ditches, culverts, berms, and letdowns)?
	No No
	Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

Entergy Facility:	Independence In	spection Date: (1, 6, 2016 Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if	
	Corrective Action Completed:	[Sign and Date]
	Corrective Action Completed.	[Sign and Date]
e.	system (i.e., check pump and control paneleaks, assess outlet)? No See Yes (if yes, make photographs, describe Location/Comments:	with the leachate collection and transmission el, walk transmission line to see if there are any see and recommend a corrective action)
	Recommended Corrective Action and Res	ponsible Party:
	Engineer Approval of Corrective Action (if Corrective Action Completed:	required):
f.	erosion, ponded water, settlement, leached No Yes (if yes, make photographs, describe)	ational issues with the final cover system - ate seeps, and vegetation?
	Recommended Corrective Action and Res	ponsible Party:
	Engineer Approval of Corrective Action (if Corrective Action Completed:	required):

[Sign and Date]

Inspection Date: (1.6.2016

Entergy Facility:	Inde	pendence	

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

Inspected by:	[Must be performed by a qualified person per 257.84(a)(1)]
Inspection Dat	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
existin of the	opearances of an actual or potential structural weakness of the CCR unit, in addition to any ag conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

Entergy Facility:	Inspection Date: (9.13.2016) [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
e.	Any signs of damage or operational issues with the leachate collection and transmission
	system (i.e., check pump and control panel, walk transmission line to see if there are any leaks, assess outlet)?
	□ No
	▼ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments: Leachate sump refill rate law Pump
	function OK
	Recommended Corrective Action and Responsible Party: FTN and PMI
	well hardle cleanout of sump area.
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
f.	2 - F. F. 1 - C - C - C - C - C - C - C - C - C -
	erosion, ponded water, settlement, leachate seeps, and vegetation?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]

left	re there any issues or recommended corrective actions from the previous weekly inspection to address?
	No
X	Yes (if yes, follow-up on any corrective actions taken)
Con	nments: Leachale sump refill rate, law.
_	
	eachate Collection System functioning properly?
disc	ential issues to note — system controls functioning, leachate levels in sump (overfilled), itainment or sump erosion/seeps, leachate pump functioning, transmission piping leaks, and charge structures intact.
	Yes No (if no, follow-up on any corrective actions taken)
⊠ Co.	mments: Leachate sump refill rate low
-	and the state of t
	y Groundwater Monitoring System problems noted, such as damage to above ground fixtures pollards, well casing, well pad areas and access roads)?
X	No
Co	Yes (if yes, follow-up on any corrective actions taken) mments:
-	
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-	
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-	

Inspection Date: (2, 13, 2016)
[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]

Entergy Facility:	Independence	
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- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

	[Must be performed by a qualified person per 257.84(a)(1)]
nspection Da	te: 9 20. 2016
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
existi	ppearances of an actual or potential structural weakness of the CCR unit, in addition to and ng conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
	 No ☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No
	Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

Corrective Action Completed: [Sign and Date] c. Any signs of erosion from storm water runoff or damage to stormwater control facili (e.g. ditches, culverts, berms, and letdowns)? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments: Recommended Corrective Action and Responsible Party: [Sign and Date] Corrective Action Completed: [Sign and Date] d. Any signs of burrowing or tunneling mammals that could lead to stability issues? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:		
Corrective Action Completed:		Recommended Corrective Action and Responsible Party:
Corrective Action Completed:		
Corrective Action Completed:		Engineer Approval of Corrective Action (if required):
C. Any signs of erosion from storm water runoff or damage to stormwater control facili (e.g. ditches, culverts, berms, and letdowns)? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments: Engineer Approval of Corrective Action and Responsible Party: [Sign and Date] Corrective Action Completed: [Sign and Date] d. Any signs of burrowing or tunneling mammals that could lead to stability issues? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:		
(e.g. ditches, culverts, berms, and letdowns)? ✓ No ☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments: ☐ Recommended Corrective Action and Responsible Party: ☐ [Sign and Date] Corrective Action Completed: ☐ [Sign and Date] d. Any signs of burrowing or tunneling mammals that could lead to stability issues? ☑ No ☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments: ☐ Recommended Corrective Action and Responsible Party: ☐ Recommended Corrective Action and Responsible Party:		[Sign and Date]
☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:		and the state of t
Location/Comments:		
Recommended Corrective Action and Responsible Party: Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] d. Any signs of burrowing or tunneling mammals that could lead to stability issues? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments: Recommended Corrective Action and Responsible Party:		
Recommended Corrective Action and Responsible Party:		
Recommended Corrective Action and Responsible Party: Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date] d. Any signs of burrowing or tunneling mammals that could lead to stability issues? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments: Recommended Corrective Action and Responsible Party:		
Corrective Action Completed: [Sign and Date] d. Any signs of burrowing or tunneling mammals that could lead to stability issues? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments: Recommended Corrective Action and Responsible Party:		Recommended Corrective Action and Responsible Party:
Corrective Action Completed: [Sign and Date] d. Any signs of burrowing or tunneling mammals that could lead to stability issues? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments: Recommended Corrective Action and Responsible Party:		
Corrective Action Completed: [Sign and Date] d. Any signs of burrowing or tunneling mammals that could lead to stability issues? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments: Recommended Corrective Action and Responsible Party:		
Corrective Action Completed: [Sign and Date] d. Any signs of burrowing or tunneling mammals that could lead to stability issues? No □ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments: Recommended Corrective Action and Responsible Party:		
d. Any signs of burrowing or tunneling mammals that could lead to stability issues? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments: Recommended Corrective Action and Responsible Party:		
Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments: Recommended Corrective Action and Responsible Party:		[Sign and Date]
Location/Comments: Recommended Corrective Action and Responsible Party:	C	
Recommended Corrective Action and Responsible Party:		
Recommended Corrective Action and Responsible Party:		
Recommended Corrective Action and Responsible Party:		
		Recommended Corrective Action and Responsible Party:

Entergy Facility:	Independence	Inspection Date: 9.20.2016
		[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Acti	on (if required):
		[Sign and Date]
	Corrective Action Completed:	
		[Sign and Date]
e.	system (i.e., check pump and control leaks, assess outlet)? No	ssues with the leachate collection and transmission panel, walk transmission line to see if there are any
	Yes (if yes, make photographs, de	escribe and recommend a corrective action)
	Location/Comments: Pump sp	erating normally however
	leachate sump suffering	from slow refill rate.
	Recommended Corrective Action and	Responsible Party: FTN and PMI
	retained to perform sum	no aleanout.
	·	
	Engineer Approval of Corrective Action	on (if required):
	and an approved of confective netter	[Sign and Date]
	Corrective Action Completed:	pog. site sately
		[Sign and Date]
f.	If applicable, any signs of damage or derosion, ponded water, settlement, le	operational issues with the final cover system - eachate seeps, and vegetation?
	Lacation/Comments	scribe and recommend a corrective action)
	Recommended Corrective Action and	Responsible Party:
	E-state and a state and a stat	
	Engineer Approval of Corrective Action	The state of the s
	Corrective Action Completed:	[Sign and Date]
		[Sign and Date]

ntergy	Facility: Independence	Inspection Date: 9,20,2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
2.	Were there any issues or recommended colleft to address? ☐ No ☑ Yes (if yes, follow-up on any corrective Comments:	7 T 1 S 10 C 10 C 10 C 1 A A A A A A A A A A A A A A A A A A
3.	containment or sump erosion/seeps, leached discharge structures intact. ☐ Yes ☑ No (if no, follow-up on any corrective of the contained of	unctioning, leachate levels in sump (overfilled), ate pump functioning, transmission piping leaks, and actions taken)
4.	Any Groundwater Monitoring System proble—bollards, well casing, well pad areas and a No Yes (if yes, follow-up on any corrective Comments:	actions taken)

Entergy Facility: _	Indige Have
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- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
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	ica by.	[Must be performed by a qualified person per 257.84(a)(1)]
Inspec	tion Dat	(Inspection interval must not exceed 7 days per 257.84(a)(1)(i)
		(Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1.	existin	opearances of an actual or potential structural weakness of the CCR unit, in addition to any ag conditions that are disrupting or have the potential to disrupt the operation and safety
		CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
	a.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
		■ No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required):
		[Sign and Date] Corrective Action Completed:
		[Sign and Date]
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:

Entergy Facility:	Independence Inspection Date: 9.20, 2016
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	Corrective Action Completed:
	[Sign and Date]
c.	- Single State of the state of
	(e.g. ditches, culverts, berms, and letdowns)?
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues?
	No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	- The state of the

ntergy Facility:	Inspection Date: 1726, 2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
e.	system (i.e., check pump and control panel, walk transmission line to see if there are any leaks, assess outlet)? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments: Stopp (24:1) role.
	Recommended Corrective Action and Responsible Party: FTO / PMT +3
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
f.	If applicable, any signs of damage or operational issues with the final cover system - erosion, ponded water, settlement, leachate seeps, and vegetation? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required): [Sign and Date]
	Corrective Action Completed:

[Sign and Date]

Entergy F	Facility: Independence	Inspection Date: (1, 27 20) 6 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]	
2.	Were there any issues or recommended correleft to address? ☐ No ☑ Yes (if yes, follow-up on any corrective of Comments: Slow Sump (2.4:1)		
3,	Is Leachate Collection System functioning properly? Potential issues to note — system controls functioning, leachate levels in sump (overfilled), containment or sump erosion/seeps, leachate pump functioning, transmission piping leaks, and discharge structures intact. Yes No (if no, follow-up on any corrective actions taken) Comments: Parap functioning properly? No containment or sump (overfilled), containment or sump erosion/seeps, leachate pump functioning, transmission piping leaks, and discharge structures intact. Comments: 10		
4.	Any Groundwater Monitoring System problem — bollards, well casing, well pad areas and acc		
	Comments:	2 0 1 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2	

Entergy Facility:	Independence	
chiefly racinty.	THEFT	

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Inspected by: _	Tereng Stanter [Must be performed by a qualified person per 257.84(a)(1)]
Inspection Date	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
existing of the (pearances of an actual or potential structural weakness of the CCR unit, in addition to any g conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes? ☑ No ☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

itergy Facility:	Inspection Date: 10, 416 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required): [Sign and Date]
	[Sign and Date] Corrective Action Completed: [Sign and Date]
c.	Any signs of erosion from storm water runoff or damage to stormwater control facilities
	(e.g. ditches, culverts, berms, and letdowns)? ☑ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	Corrective Action Completed:
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No
	Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:

Entergy Facility:	Independence	Inspection Date: 10.4.2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action	(if required):
		[Sign and Date]
	Corrective Action Completed:	[Sign and Date]
		[Sign and Date]
e.		es with the leachate collection and transmission
		nel, walk transmission line to see if there are any
	leaks, assess outlet)?	
	□ No	
		ribe and recommend a corrective action)
	Location/Comments: Slow lead	nate sump refill rate.
		esponsible Party: FTN and PMI
	to Gean out sump area	
	Engineer Approval of Corrective Action (if required):
	Corrective Action Completed:	[Sign and Date]
	Corrective Action Completed.	[Sign and Date]
e.	16 15 1.1	and the state of t
f.	erosion, ponded water, settlement, lead	erational issues with the final cover system -
	No	mate seeps, and vegetation:
		ribe and recommend a corrective action)
	Location/Comments:	AND THE PROPERTY WITH A PROPERTY OF THE PROPERTY.
	Recommended Corrective Action and Re	esponsible Party:
	9	
	Engineer Approval of Corrective Action ((if required):
	Corrective Action Completed:	[Sign and Date]
	Confective Action Completed.	[Sign and Date]

gy Fa	cility: _	Independence	Inspection Date: 10, 4, 2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
2.		e there any issues or recon to address? No	nmended corrective actions from the previous weekly inspection
	[X]		ny corrective actions taken)
	-		FTN to clean out leachate sump
	Com	iments: VIVI G-d	FIN to clean out recent samp
	_ Gv	rea.	
	_		
	_		
3.	Pote	eachate Collection System f ential issues to note – syste tainment or sump erosion/	functioning properly? em controls functioning, leachate levels in sump (overfilled), seeps, leachate pump functioning, transmission piping leaks, and
	disc	harge structures intact.	
		Yes	
	区	No lif no. follow-up on an	y corrective actions taken)
	-	nments: Leadale	pump functioning correctly however
	Con	() sufficient	ing from slow refill rate.
	lead	chate sump surter	119 12010 5100
	-		
	-		
	-		
	-		
	-		
4.	-		System problems noted, such as damage to above ground fixtures and access roads)?
0	X	No	
		Yes lif ves. follow-up on o	any corrective actions taken)
	Cor		
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Entergy Facility:	Independence

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
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	[Must be performed by a qualified person per 257.84(a)(1)]
Inspection Dat	e: 10.11.2016
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
existin of the	ppearances of an actual or potential structural weakness of the CCR unit, in addition to any g conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:[Sign and Date]
	[og. one otta]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action)

intergy Facility: _	Inspection Date: 10.11.2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required): [Sign and Date]
	Corrective Action Completed:
c	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)?
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:

Entergy Facility:	Independence Inspection Date: 10.11.2016		
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]		
	Engineer Approval of Corrective Action (if required):		
	[Sign and Date]		
	Corrective Action Completed:		
	[Sign and Date]		
e.	Any signs of damage or operational issues with the leachate collection and transmission		
	system (i.e., check pump and control panel, walk transmission line to see if there are		
	leaks, assess outlet)?		
	□ No		
	☑ Yes (if yes, make photographs, describe and recommend a corrective action)		
	Location/Comments: Siow leachate sump refill rate.		
	Recommended Corrective Action and Responsible Party: FTN KOL PMT to		
	Clean out sump avea.		
	Engineer Approval of Corrective Action (if required):		
	[Sign and Date]		
	Corrective Action Completed:		
f.	If applicable, any signs of damage or operational issues with the final cover system -		
	erosion, ponded water, settlement, leachate seeps, and vegetation?		
	⊠ No		
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)		
	Location/Comments:		
	Recommended Corrective Action and Responsible Party:		
	Engineer Approval of Corrective Action (if required):		
	[Sign and Date]		
	Corrective Action Completed:		

tergy F	acility: Independence	Inspection Date: 10.11 ZOLL [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
2.	left to address? ☐ No ☑ Yes (if yes, follow-up on any correction Comments:	orrective actions from the previous weekly inspection re actions taken) sump refill rate, FTN and PMI to
3.	containment or sump erosion/seeps, lead discharge structures intact. ☐ Yes ☑ No (if no, follow-up on any corrective)	functioning, leachate levels in sump (overfilled), hate pump functioning, transmission piping leaks, and
4.	Any Groundwater Monitoring System pro – bollards, well casing, well pad areas and ☑ No ☐ Yes (if yes, follow-up on any correcting comments:	ve actions taken)

Entergy Facility:	ndependence
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inspect	ted by:	Must be performed by a qualified person per 257.84(a)(1)]
Inchact	tion Date	o: Wid zan
mspect	tion Date	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1.	existing of the	pearances of an actual or potential structural weakness of the CCR unit, in addition to any g conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required):
		[Sign and Date] Corrective Action Completed:
		[Sign and Date]
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

Intergy Facility: _	Independence	Inspection Date: VO.18. Zolb [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Re	esponsible Party:
	Engineer Approval of Corrective Action	(if required):
	Corrective Action Completed:	[Sign and Date]
		[Sign and Date]
C	 c. Any signs of erosion from storm water r (e.g. ditches, culverts, berms, and letdo No 	unoff or damage to stormwater control facilities wns)?
	Yes (if yes, make photographs, desc	ribe and recommend a corrective action)
		esponsible Party:
		,
	· · · · · · · · · · · · · · · · · · ·	
	Engineer Approval of Corrective Action	(if required):
	Corrective Action Completed:	[Sign and Date]
		[Sign and Date]
d	d. Any signs of burrowing or tunneling ma 図 No	mmals that could lead to stability issues?
	☐ Yes (if yes, make photographs, desc Location/Comments:	ribe and recommend a corrective action)
	Recommended Corrective Action and R	esponsible Party:
	4	

Entergy Facility:	Inspection Date: 10.18.2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
e.	Any signs of damage or operational issues with the leachate collection and transmissio system (i.e., check pump and control panel, walk transmission line to see if there are all leaks, assess outlet)? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date]
	Digit and Date)
f.	erosion, ponded water, settlement, leachate seeps, and vegetation? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed:

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Entergy Facility: _	Independence	

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary

 Use additiona Following inst Entergy State 	sheets as necessary section, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Lead
	Jereny Starffer Must be performed by a qualified person per 257.84(a)(1)]
nspection Date:	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
Any appe existing (carances of an actual or potential structural weakness of the CCR unit, in addition to any conditions that are disrupting or have the potential to disrupt the operation and safety
of the CC	R unit? (Inspection criteria per 257.84(a)(1)(i)) Any signs of sliding or sloughing of the soil layer or waste material that might indicate a
	slope failure? No Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required): [Sign and Date]
	Corrective Action Completed:[Sign and Date]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes?
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

intergy Facility:	Inspection Date: 10, 25, 2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required): [Sign and Date]
	Corrective Action Completed: [Sign and Date]
	[Sign and Date]
C.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)?
	 ⋈ No ☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Location/ comments.
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues?
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:

Entergy Facility:	Independence Inspectio	on Date: 10, 25, 2016 fon interval must not exceed 7 days per 257.84(a)(1)(i)	
	Engineer Approval of Corrective Action (if required):		
	LIIBING Approval of Servers (1997)	[Sign and Date]	
	Corrective Action Completed:		
		(Sign and Date)	
e.	Any signs of damage or operational issues with	the leachate collection and transmission	
	system (i.e., check pump and control panel, wa	alk transmission line to see if there are any	
	leaks, assess outlet)?		
	□ No		
	Yes (if yes, make photographs, describe an	d recommend a corrective action)	
	Location/Comments: Sump hole cl	leanout has been completed	
	however sump area appeals	to be continuing to hold	
	water		
	Recommended Corrective Action and Respons	sible Party:	
	Engineer Approval of Corrective Action (if requ		
	Corrective Action Completed:		
		[Sign and Date]	
f.	 If applicable, any signs of damage or operational issues with the final cover erosion, ponded water, settlement, leachate seeps, and vegetation? No 		
	☐ Yes (if yes, make photographs, describe an Location/Comments:		
	Recommended Corrective Action and Respon	sible Party:	
	Engineer Approval of Corrective Action (if rec	quired):	
	- Durage Charles	[Sign and Date]	
	Corrective Action Completed:		
		[Sign and Date]	

Entergy Facility: _	Ladel	pendence	

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

526 2 2 2 3 Y C 4 7 3	[Must be performed by a qualified person per 257.84(a)(1)]
aspastion Date	e:
ізресцоп рац	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
existing of the	pearances of an actual or potential structural weakness of the CCR unit, in addition to any geonditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a
	slope failure?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action/Responsible Party:
	•
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:[Sign and Date]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes?
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

intergy Facility:	Inspection Date: 1\.\. ZO1 6 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
e.	Any signs of damage or operational issues with the leachate collection and transmission system (i.e., check pump and control panel, walk transmission line to see if there are any leaks, assess outlet)? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments: Leachate Sump Continues to hold water as well as ditch leading to Sump
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed: [Sign and Date]
f.	If applicable, any signs of damage or operational issues with the final cover system - erosion, ponded water, settlement, leachate seeps, and vegetation? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required): [Sign and Date] Corrective Action Completed:

	t to address?	
Com	Yes (if yes, follow-up on any corrective mments: Leachale sump hol	e actions taken) Iding water after cleanout.
=		
Pote	ntainment or sump erosion/seeps, leach	properly? functioning, leachate levels in sump (overfilled), nate pump functioning, transmission piping leaks, ar
	Yes No (if no, follow-up on any corrective or a	actions taken)
3	ackup in central drainings	e ditch. flomp level indicating
	y Groundwater Monitoring System prob pollards, well casing, well pad areas and a	plems noted, such as damage to above ground fixtu
	No Yes (if yes, follow-up on any corrective mments:	e actions taken)
_		
_		
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Entergy Facility:	Inde	underce

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

[Must be performed by a qualified person per 257.84(a)(1)]
[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
pearances of an actual or potential structural weakness of the CCR unit, in addition to any conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
Recommended Corrective Action/Responsible Party:
Engineer Approval of Corrective Action (if required):
[Sign and Date] Corrective Action Completed:
[Sign and Date]
Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action)

Entergy Facility: 🔽	Inspection Date: 11 8 2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	Corrective Action Completed: [Sign and Date]
c.	Any signs of erosion from storm water runoff or damage to stormwater control facilities (e.g. ditches, culverts, berms, and letdowns)? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	# # # # # # # # # # # # # # # # # # #

Entergy Facility: 工	Inspection Date: 11.8.2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
e.	Any signs of damage or operational issues with the leachate collection and transmission system (i.e., check pump and control panel, walk transmission line to see if there are any leaks, assess outlet)? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments: Sump area holding water with backup into central drainage ditch. Pump level abserved at 32" with no pump cycle observed. Pump apraled normally when switched to "Hand" position Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
f.	If applicable, any signs of damage or operational issues with the final cover system - erosion, ponded water, settlement, leachate seeps, and vegetation? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):

left to address?	Were there any issues or recommended corrective actions from the previous weekly inspection				
□ No					
✓ Yes (if yes, follow-up on any corrective actions taken)					
Comments: Leachate Sump continues to	hold water. Kump				
level 32"					
Is Leachate Collection System functioning properly?					
Potential issues to note – system controls functioning, leachate containment or sump erosion/seeps, leachate pump functionin					
discharge structures intact.	is, transmission piping leaks, and				
Yes					
- 11- 15 11-57 Julius alp on any consecute actions takeny					
comments: Sump area continues to hold well as back up central drainage	water as				
wer as back up central drainage	d-tch.				
Any Groundwater Monitoring System problems noted, such as	damage to above ground fixture				
g - / p	damage to above ground fixture				
Any Groundwater Monitoring System problems noted, such as a — bollards, well casing, well pad areas and access roads)? ☑ No	damage to above ground fixture				
bollards, well casing, well pad areas and access roads)?No	damage to above ground fixture				
 bollards, well casing, well pad areas and access roads)? No Yes (if yes, follow-up on any corrective actions taken) 	damage to above ground fixture				
bollards, well casing, well pad areas and access roads)?No	damage to above ground fixture				
 bollards, well casing, well pad areas and access roads)? No Yes (if yes, follow-up on any corrective actions taken) 	damage to above ground fixture				
 bollards, well casing, well pad areas and access roads)? No Yes (if yes, follow-up on any corrective actions taken) 	damage to above ground fixture				
 bollards, well casing, well pad areas and access roads)? No Yes (if yes, follow-up on any corrective actions taken) 	damage to above ground fixture				
 bollards, well casing, well pad areas and access roads)? No Yes (if yes, follow-up on any corrective actions taken) 	damage to above ground fixture				
 bollards, well casing, well pad areas and access roads)? No Yes (if yes, follow-up on any corrective actions taken) 	damage to above ground fixture				
 bollards, well casing, well pad areas and access roads)? No Yes (if yes, follow-up on any corrective actions taken) 	damage to above ground fixture				
 bollards, well casing, well pad areas and access roads)? No Yes (if yes, follow-up on any corrective actions taken) 	damage to above ground fixture				

Entergy Facility: Independence

WEEKLY LANDFILL INSPECTION

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary

•	Following Entergy St	inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Fate Lead
	2,114-167	_ 1
Inchas	ted by:	Janes Comment
mspec	ted by	[Must be performed by a qualified person per 257.84(a)(1)]
		1.1 15 0016
Inspec	tion Date	e: / VOVENDET 15, JOTE
		[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1.	Any ap	pearances of an actual or potential structural weakness of the CCR unit, in addition to any
	existing	g conditions that are disrupting or have the potential to disrupt the operation and safety
		CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
	a.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a
		slope failure?
		ĭ× No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:
		A STATE OF THE STA
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required):
		[Sign and Date]
		Corrective Action Completed:
		[Sign and Date]
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes?
		⊠ No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:

	[Inspection interval must not exceed 7 days per 257.84(a)
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required): [Sign and Date]
	Corrective Action Completed:[Sign and Date]
c.	Any signs of erosion from storm water runoff or damage to stormwater control faci (e.g. ditches, culverts, berms, and letdowns)?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues? No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	The state of the s

Entergy Facility:	Inspection Date: NOV. 13, 2014
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if required):
	(Sign and Date) Corrective Action Completed:
	[Sign and Date]
e.	Any signs of damage or operational issues with the leachate collection and transmission system (i.e., check pump and control panel, walk transmission line to see if there are any
	leaks, assess outlet)?
	Yes (if yes, make photographs, describe and recommend a corrective action)
	Water in sock agen asound pump. On auto pump was
	Not operating when switched to mad operation sump
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
f.	If applicable, any signs of damage or operational issues with the final cover system - erosion, ponded water, settlement, leachate seeps, and vegetation?
	No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:

ntergy F	acility: Two pendence Inspection Date: 15, 2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
2.	Were there any issues or recommended corrective actions from the previous weekly inspection left to address? No Yes (if yes, follow-up on any corrective actions taken) Comments: Sump pump still holding water at 29" With pump in auto operations
3.	Is Leachate Collection System functioning properly? Potential issues to note — system controls functioning, leachate levels in sump (overfilled), containment or sump erosion/seeps, leachate pump functioning, transmission piping leaks, and discharge structures intact. Yes No (if no, follow-up on any corrective actions taken) Comments:
4.	Any Groundwater Monitoring System problems noted, such as damage to above ground fixtures – bollards, well casing, well pad areas and access roads)? No
	☐ Yes (if yes, follow-up on any corrective actions taken) Comments:

Entergy Facility: _	Independence	

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

[Must be performed by a qualified person per 257.84(a)(1)]
[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
ppearances of an actual or potential structural weakness of the CCR unit, in addition to an g conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
Recommended Corrective Action/Responsible Party:
Engineer Approval of Corrective Action (if required):
[Sign and Date] Corrective Action Completed:
Any signs of tension or other types of cracks or separation at the surface or slopes? ☑ No ☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

Entergy Facility:	Inspection Date: 12.22.2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date] Corrective Action Completed:
	[Sign and Date]
ć.	Any signs of erosion from storm water runoff or damage to stormwater control facilities
	(e.g. ditches, culverts, berms, and letdowns)?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	Corrective Action Completed:
	[Sign and Date]
d.	Any signs of burrowing or tunneling mammals that could lead to stability issues?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:

Entergy Facility:		Date:\\ . ZZ. ZO\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Engineer Approval of Corrective Action (if require	
	Carractive Action Completed	[Sign and Date]
	Corrective Action Completed:	[Sign and Date]
Δ.	e. Any signs of damage or operational issues with	the leachate collection and transmission
ę.	system (i.e., check pump and control panel, wal leaks, assess outlet)?	
	□ No	
	Yes (if yes, make photographs, describe and	recommend a corrective action
		그리 작으로 이 사람이 어느 아니는 것이 모든 것이 되었다. 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
	Location/Comments: Leachate sum	
	Recommended Corrective Action and Responsib	ole Party:
	Engineer Approval of Corrective Action (if requi	red):
	7.3	[Sign and Date]
	Corrective Action Completed:	
		[Sign and Date]
f.	f. If applicable, any signs of damage or operationa	l issues with the final cover system -
	erosion, ponded water, settlement, leachate see	eps, and vegetation?
	☐ Yes (if yes, make photographs, describe and	racommand a corrective action)
	Location/Comments:	recommend a corrective action)
	Recommended Corrective Action and Responsib	le Party:
	Engineer Approval of Corrective Action (if require	
	Corrective Action Completed	[Sign and Date]
	Corrective Action Completed:	

ergy Fa	Inspection Date: 11. 22. 2011 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
2.	Were there any issues or recommended corrective actions from the previous weekly inspection left to address? □ No □ Yes (if yes, follow-up on any corrective actions taken) Comments:
	Is Leachate Collection System functioning properly? Potential issues to note — system controls functioning, leachate levels in sump (overfilled), containment or sump erosion/seeps, leachate pump functioning, transmission piping leaks, and discharge structures intact. Yes No (if no, follow-up on any corrective actions taken) Comments: Operating (acceptly bourses sup continues to be hold and actions)
4. /	Any Groundwater Monitoring System problems noted, such as damage to above ground fixtures – bollards, well casing, well pad areas and access roads)?
]	No Yes (if yes, follow-up on any corrective actions taken) Comments:
-	

Entergy Facility:	Independence	

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and

Inspected by:	[Must be performed by a qualified person per 257.84(a)(1)]
	[Must be performed by a qualified person per 257.84(a)(1)]
Inspection Date	e: [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1. Any ap	pearances of an actual or potential structural weakness of the CCR unit, in addition to any
existing	g conditions that are disrupting or have the potential to disrupt the operation and safety
of the	CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
a.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Ecounity comments.
	Recommended Corrective Action/Responsible Party:
	neconimended confective nectory nesponsible Farty.
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes?
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:

Recommended Corrective Action and Responsible Party:

[Sign and Date]

[Sign and Date]

Engineer Approval of Corrective Action (if required):

Corrective Action Completed:

Revision 2 - 4/18/2016

ergy F	Inspection Date: 11. 25, 2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
2.	Were there any issues or recommended corrective actions from the previous weekly inspection left to address? No Yes (if yes, follow-up on any corrective actions taken) Comments: Sump area halding water after rain event
3.	Is Leachate Collection System functioning properly? Potential issues to note – system controls functioning, leachate levels in sump (overfilled), containment or sump erosion/seeps, leachate pump functioning, transmission piping leaks, and discharge structures intact. Yes No (if no, follow-up on any corrective actions taken) Comments:
4.	Any Groundwater Monitoring System problems noted, such as damage to above ground fixtures — bollards, well casing, well pad areas and access roads)? No Yes (if yes, follow-up on any corrective actions taken) Comments:

Entergy Facility: Independence

WEEKLY LANDFILL INSPECTION

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

	[Must be performed by a qualified person per 257.84(a)(1)]
nanaction Da	te: 12 6 2016
rispection Da	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1 Anv. a	ppearances of an actual or potential structural weakness of the CCR unit, in addition to an
	ng conditions that are disrupting or have the potential to disrupt the operation and safety
	CCR unit? [Inspection criteria per 257.84(a)(1)(i)]
a.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
	Education y Comments.
	1
	Recommended Corrective Action/Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
b.	Any signs of tension or other types of cracks or separation at the surface or slopes?
	⊠ No
	 Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Location/Comments:

Entergy Facility:	Inspection Date:	NZ. 6. 2016 must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if required):	
	(Sign and Corrective Action Completed:	d Date]
	[Sign and	d Date]
e.	 e. Any signs of damage or operational issues with the leasy system (i.e., check pump and control panel, walk trans leaks, assess outlet)? No Yes (if yes, make photographs, describe and recom 	mission line to see if there are any
	Location/Comments: <u>Leachete sump area</u>	
	Recommended Corrective Action and Responsible Part	
	[Sign an	d Date]
	Corrective Action Completed:	
	[Sign an	d Date]
f.	f. If applicable, any signs of damage or operational issue erosion, ponded water, settlement, leachate seeps, an 凶 No	
	☐ Yes (if yes, make photographs, describe and recom Location/Comments:	
	Recommended Corrective Action and Responsible Part	Ty;
	Engineer Approval of Corrective Action (if required):	
	[Sign an	
	Corrective Action Completed:	
	[Sign an	d Date]

4. Any Groundwater Monitoring System problems noted, such as damage to above ground fixtures – bollards, well casing, well pad areas and access roads)?

X No

☐ Yes (if yes, follow-up on any corrective actions taken)

Comments:

Entergy Facility:	Independence

- Inspection applies to CCR Rule affected CCR units or cells only
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		[Must be performed by a qualified person per 257.84(a)(1)]
Inspection	n Date	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
e	xisting f the C	pearances of an actual or potential structural weakness of the CCR unit, in addition to any g conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required): [Sign and Date]
		Corrective Action Completed:
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

Eng	ngineer Approval of Corrective Action (if required):	
	[Sign and Date	
Co	orrective Action Completed:	e]
Δn	any signs of erosion from storm water runoff or damage to	o stormwater control facil
(e.	e.g. ditches, culverts, berms, and letdowns)?	
	Yes (if yes, make photographs, describe and recomment	nd a corrective action)
	ocation/Comments: <u>Erosian Areas on no</u>	
_		
_		
Re	Recommended Corrective Action and Responsible Party:	Headushes wil
	Recommended Corrective Action and Responsible Party: _ beg n requir / re grading areas this	
\b.		affirnan,
En	Engineer Approval of Corrective Action (if required):	afkrnωn. te]
En	Engineer Approval of Corrective Action (if required): [Sign and Date Corrective Action Completed:	afkrnon.
En	Engineer Approval of Corrective Action (if required):	afkrnon.
En Co	Engineer Approval of Corrective Action (if required): [Sign and Date of Corrective Action (if required): [Sign and Date of Corrective Action (if required): [Sign and Date of Corrective Action (if required):	afternoon. te]
En Co	Engineer Approval of Corrective Action (if required): [Sign and Date of Corrective Action (if required): [Sign and Date of Corrective Action Completed: [Sign and Date of Corrective Action Completed: [Sign and Date of Corrective Action Completed:	afternan. te]
En Co	Engineer Approval of Corrective Action (if required): [Sign and Date	te] lead to stability issues?
En Co	Engineer Approval of Corrective Action (if required): [Sign and Date Corrective Action Completed: [Sign and Date Corrective Action (if required): [Sign and Date Corrective Action Completed: [Sign action Correct	te] lead to stability issues?
En Co	Engineer Approval of Corrective Action (if required): [Sign and Date	te] lead to stability issues?
En Co	Engineer Approval of Corrective Action (if required): [Sign and Date Corrective Action Completed: [Sign and Date Corrective Action (if required): [Sign and Date Corrective Action Completed: [Sign action Correct	te] lead to stability issues?
En Co	Engineer Approval of Corrective Action (if required): [Sign and Date Corrective Action Completed: [Sign and Date Corrective Action (if required): [Sign and Date Corrective Action Completed: [Sign action Correct	te] lead to stability issues?
En Co	Engineer Approval of Corrective Action (if required): [Sign and Date Corrective Action Completed: [Sign and Date Corrective Action (if required): [Sign and Date Corrective Action Completed: [Sign action Correct	te] lead to stability issues?
En Co	Engineer Approval of Corrective Action (if required): [Sign and Date Corrective Action Completed: [Sign and Date Corrective Action (if required): [Sign and Date Corrective Action Completed: [Sign action Correct	te] lead to stability issues? Ind a corrective action)

Corrective Action Completed:

[Sign and Date]

☐ Yes (if yes, follow-up on any corrective actions taken)

Comments:

Entergy Facility:	Independence

WEEKLY LANDFILL INSPECTION

Instructions:

- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and

nspec	ted by:	[Must be performed by a qualified person per 257.84(a)(1)]
rspec	tion Date	e: 12. Zo Zo L [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
		[inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1.	Any ap	pearances of an actual or potential structural weakness of the CCR unit, in addition to an
	existing	g conditions that are disrupting or have the potential to disrupt the operation and safety
	of the CCR unit? [Inspection criteria per 257.84(a)(1)(i)]	
	a.	Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
		⊠ No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required):
		[Sign and Date]
		Corrective Action Completed:
		[Sign and Date]
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action)
		Location/Comments:
		Location, Comments.

-	
_ En	gineer Approval of Corrective Action (if required):
	[Sign and Date]
Co	rrective Action Completed:[Sign and Date]
A =	y signs of erosion from storm water runoff or damage to stormwater control facilit
	g. ditches, culverts, berms, and letdowns)?
	No Yes (if yes, make photographs, describe and recommend a corrective action)
	cation/Comments:
_	
-	
Re	commended Corrective Action and Responsible Party:
Re	commended Corrective Action and Responsible Party:
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Re	
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- - Er	gineer Approval of Corrective Action (if required):
- - Er	gineer Approval of Corrective Action (if required):
Err Ccc	gineer Approval of Corrective Action (if required):
Er Cc	gineer Approval of Corrective Action (if required):
Err Ccc	gineer Approval of Corrective Action (if required):
Err Co	gineer Approval of Corrective Action (if required):
Err Co	gineer Approval of Corrective Action (if required): [Sign and Date] [Sign and Date] [Sign and Date] by signs of burrowing or tunneling mammals that could lead to stability issues? No Yes (if yes, make photographs, describe and recommend a corrective action)
Err Co	gineer Approval of Corrective Action (if required):
Err Co	gineer Approval of Corrective Action (if required):
Ar Co	gineer Approval of Corrective Action (if required):

Entergy Facility:	Fadegardence Inspection Date: 12. 20 2016 [Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
e.	, ,
	system (i.e., check pump and control panel, walk transmission line to see if there are any
	leaks, assess outlet)?
	⊠ No
	\square Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments: Leachate sump area continues to
	hold water above rock
	December and ad Compatitive Astissa and Bernandikla Bertan
	Recommended Corrective Action and Responsible Party:
	Engineer Approval of Corrective Action (if required):
	[Sign and Date]
	Corrective Action Completed:
	[Sign and Date]
f.	If applicable, any signs of damage or operational issues with the final cover system -
	erosion, ponded water, settlement, leachate seeps, and vegetation?
	⊠ No
	☐ Yes (if yes, make photographs, describe and recommend a corrective action)
	Location/Comments:
	Recommended Corrective Action and Responsible Party:
	
	Engineer Approval of Corrective Action (if required):
	Engineer Approval of Corrective Action (if required):
	Corrective Action Completed:

[Sign and Date]

	re there any issues or recommended corrective actions from the previous weekly inspection to address?			
X	No			
	Yes (if yes, follow-up on any corrective actions taken)			
Con	nments:			
_				
Is L	eachate Collection System functioning properly?			
con	ential issues to note – system controls functioning, leachate levels in sump (overfilled), stainment or sump erosion/seeps, leachate pump functioning, transmission piping leaks, and charge structures intact. Yes			
П	No (if no, follow-up on any corrective actions taken)			
Cor	nments:			
_				
- b	Groundwater Monitoring System problems noted, such as damage to above ground fixture ollards, well casing, well pad areas and access roads)?			
	No Yes (if yes, follow-up on any corrective actions taken) mments:			
-	milents.			
_				
_				
-				

Inspection Date: 12 20 20 6
[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]

Entergy Facility: Independence

Entergy Facility: Independence

WEEKLY LANDFILL INSPECTION

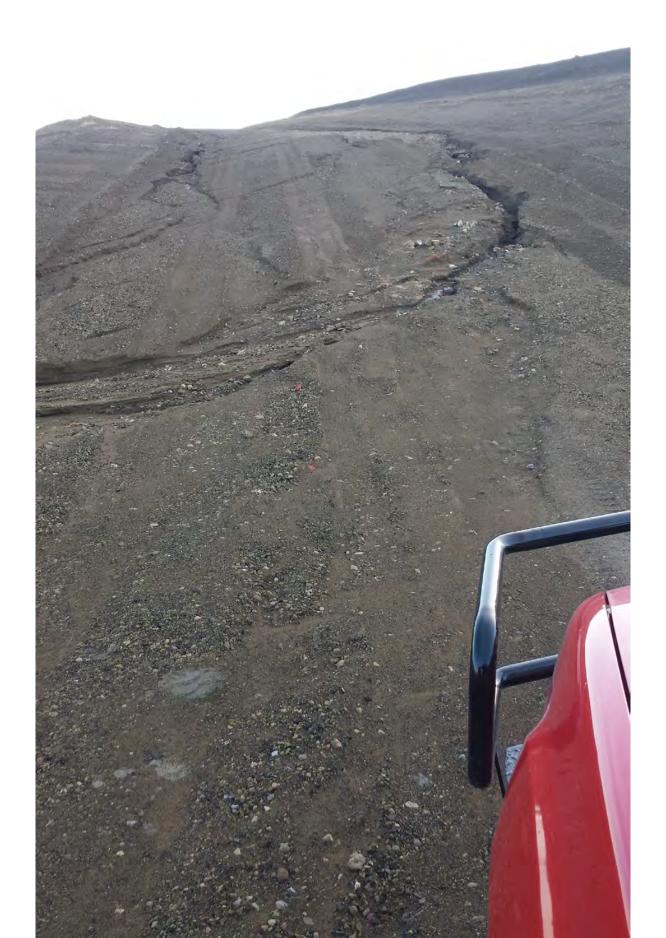
Instructions:

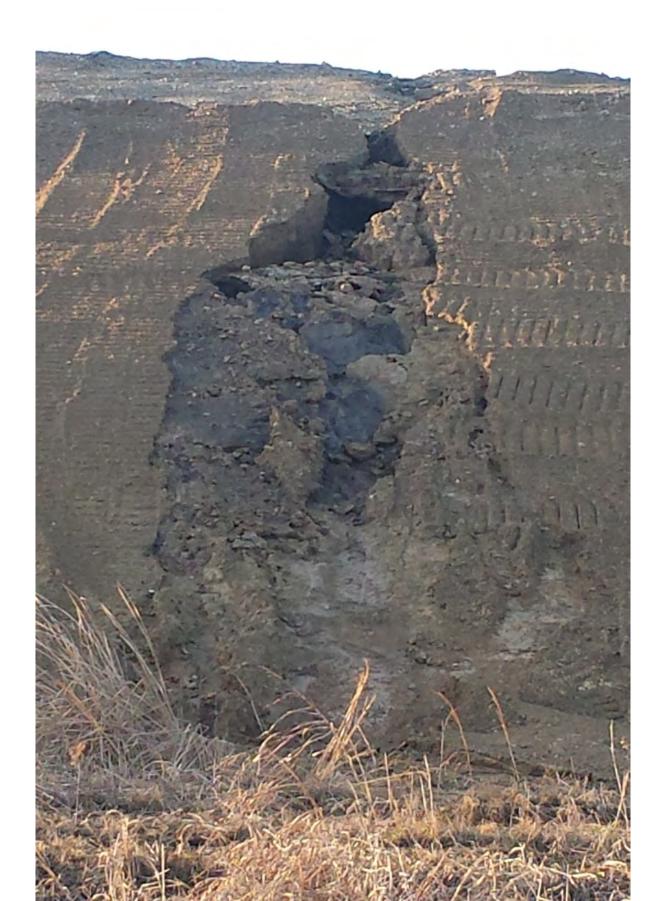
- Inspection applies to CCR Rule affected CCR units or cells only
- Provide detailed description of location, site sketches, and pictures of any noted deficiencies or issues
- Use additional sheets as necessary
- Following inspection, send electronic copy of Inspection Form and any attachments to Entergy facility Environmental Analyst and Entergy State Lead

	ed by: _	T. Stanffer [Must be performed by a qualified person per 257.84(a)(1)]
· · · · · · · · · · · · · · · · · · ·		
Inspect	ion Date	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
1.	existing of the	pearances of an actual or potential structural weakness of the CCR unit, in addition to any g conditions that are disrupting or have the potential to disrupt the operation and safety CCR unit? [Inspection criteria per 257.84(a)(1)(i)] Any signs of sliding or sloughing of the soil layer or waste material that might indicate a slope failure?
		 ✓ No ☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:
		Recommended Corrective Action/Responsible Party:
		Engineer Approval of Corrective Action (if required): [Sign and Date]
		Corrective Action Completed: [Sign and Date]
	b.	Any signs of tension or other types of cracks or separation at the surface or slopes? No
		☐ Yes (if yes, make photographs, describe and recommend a corrective action) Location/Comments:

Entergy Facility:		ection Date: 12 27. 2016 ection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Linsp	ection interval must not exceed 7 days per 257.84(a)(1)(i)]
	Engineer Approval of Corrective Action (if re-	quired):
		[Sign and Date]
	Corrective Action Completed:	[Sign and Date]
		[Sign and Date]
е	e. Any signs of damage or operational issues w	ith the leachate collection and transmission
	system (i.e., check pump and control panel,	walk transmission line to see if there are any
	leaks, assess outlet)?	
	⊠ No	
	Yes (if yes, make photographs, describe of the control of the c	
	Location/Comments:	
	Recommended Corrective Action and Respo	nsible Party:
		nsione ruity.
	Engineer Approval of Corrective Action (if re	quired):
		[Sign and Date]
	Corrective Action Completed:	[Sign and Date]
		[Sign and Date]
f	f. If applicable, any signs of damage or operati	
	erosion, ponded water, settlement, leachate	e seeps, and vegetation?
	⊠ No	-1.
	☐ Yes (if yes, make photographs, describe	
	Location/Comments:	
	100000000000000000000000000000000000000	
	-	
	Pacammanded Corrective Action and Respo	onsible Party:
	Recommended Corrective Action and Respo	misible Faity.
	Engineer Approval of Corrective Action (if re	equired):
		[Sign and Date]
	Corrective Action Completed:	[Sign and Date]
		1-0"

Facility	1. Independence	[Inspection interval must not exceed 7 days per 257.84(a)(1)(i)]
	ere there any issues or recommended co	prrective actions from the previous weekly inspection
\boxtimes	No	
	Yes (if yes, follow-up on any corrective	e actions taken)
Co		
	Leachate Collection System functioning	
со	ntainment or sump erosion/seeps, leach scharge structures intact.	functioning, leachate levels in sump (overfilled), nate pump functioning, transmission piping leaks, and
		actions taken)
Co	of rock	tiones to hold water on top
-		
-		
Ξ		
_	1	
	ny Groundwater Monitoring System prob bollards, well casing, well pad areas and	blems noted, such as damage to above ground fixture access roads)?
X		
Co	omments:	
-		
-		
-		
-		
-		





APPENDIX C

Photos of Annual Engineering Inspection



1. Cell 15 sump area. Headwaters is performing general maintenance by the Cell 15 Sump.



2. Cell 1 north dike looking to the west. The ash is kept away from the north dike to assist with leachate management.



3. Cell 15 East berm facing south.



4. Cell 1 east dike looking to the south. This slope drains to the east and into the storm water runoff pond.



5. Cells 12, 13, and 14 looking northeast.



6. West side of Phase 1 looking southeast.



7. South side of Phase 1 looking east.



8. East of Phase 1 looking north.