Government of **Western Australia**
Department of **Housing and Works**

PERFORMANCE AND COMPLIANCE REPORT

INTRACTABLE WASTE DISPOSAL FACILITY
MT WALTON EAST

JULY 2024 – JUNE 2025

September 2025

Department of Housing and Works

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Prepared by Aurora Environmental

September 2025

Summary

This Performance and Compliance Report (PCR) summarises the compliance audits of the operation of the Intractable Waste Disposal Facility (IWDF), Mt Walton East, for the period 1 July 2024 to 30 June 2025, against the requirements of:

- *Ministerial Statement No. 562;*
- *Australian Safeguards and Non-Proliferation Office (ASNO) permit;*
- *Radiological Council (RC) registration;*
- *Department of Water and Environmental Regulation (DWER) licence;*
- *IWDF Environmental, Health and Safety and Quality Management Plans (EHSQMP); and*
- *IWDF Environmental, Health and Safety and Quality Management Systems (EHSQMS).*

This report demonstrates that the operation of the IWDF between 1 July 2024 and 30 June 2025 complied, where applicable, with the requirements of Ministerial Statement No. 562, ASNO Permit, DWER Licence, RC Registration and the IWDF EHSQMS and EHSQMP.

No disposal operations were undertaken during the reporting period. Ongoing management and monitoring activities including the following were undertaken during the reporting period:

- *Groundwater monitoring;*
- *Capping monitoring;*
- *Rehabilitation monitoring;*
- *Routine site inspections;*
- *Liaison with the community; and*
- *Continual review and update of the EHSQMS and EHSQMP for the IWDF.*

Reporting for all ongoing management and monitoring activities is also reported in this PCR.

Enquiries regarding this PCR should be emailed to IWDF-MountWalton@dohw.wa.gov.au.

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List of Acronyms, Initialisations and Glossary

ARPANSA	Australian Radiation Protection and Nuclear Safety Agency
ASNO	Australian Safeguards and Non-Proliferation Office (ASNO), located within the Federal Department of Foreign Affairs and Trade portfolio
CAR	Corrective Action Request
CEO	Chief Executive Officer
CLC	IWDF Community Liaison Committee
DFES	Department of Fire and Emergency Services
DHW	Department of Housing and Works – The Department of Housing and Works became the Government agency responsible for assisting the Minister for Works in the administration of the *Public Works Act 1902* (WA) on 1 July 2025
DWER	Department of Water and Environmental Regulation
EPA	Environmental Protection Authority (Western Australia)
EHSQMS	Environmental, Health and Safety, and Quality Management Systems
EHSRMP	Environmental, Health and Safety and Radiation Management Plans
ERT	Emergency Response Team
Finance	Department of Finance - The Department of Finance was the Government agency responsible for assisting the Minister for Works in the administration of the *Public Works Act 1902* (WA) during the reporting period of this PCR
FMC	Facility Management Contractor
FSC	Facility Safety Case

IACM	IWDF Annual Community Meeting
IAEA	International Atomic Energy Agency
ICP	Institutional Control Period
Intractable Waste	Waste that is a management problem by virtue of its toxicity or chemical or physical characteristics which make it difficult to dispose or treat safely (Landfill Waste Classifications and Waste Definitions 1996 (as amended December 2019, Western Australia: DWER, 2019)
IWDF	Intractable Waste Disposal Facility, located at Mt Walton East, Western Australia
JDF	Job Description Form
JSA	Job Safety Analysis
MANS	Management System
MDL	Minimum Detection Level
MP	Management Procedure
MRM	Management Review Meeting
MS	Ministerial Statement
MT	Management Team
OHSERP	Operation Health and Safety and Emergency Response Procedures
OSA	Operations Safety Assessment
OEWP	Operation Environmental and Waste Acceptance Procedures
PCR	Performance and Compliance Report
PCSA	Post-Closure Safety Assessment
PPE	Personal Protective Equipment

RC	Radiological Council
RSO	Radiation Safety Officer
SDS	Safety Data Sheet
TLD	Thermoluminescence Dosimeter

1. INTRODUCTION

1.1 IWDF Overview

The Intractable Waste Disposal Facility (IWDF) at Mt Walton East was established in the early 1990s and is owned by the Western Australian Government. The IWDF is Australia's first long-term disposal site for intractable waste and is only to be used for intractable waste generated in Western Australia, for which there is no other viable management option.

The IWDF has environmental approval for the disposal of a range of materials containing intractable chemical compounds or low-level radioactive waste.

1.2 Location of the IWDF

The IWDF is approximately 475 kilometres north-east of Perth and is located on 25 square kilometres of Crown Reserve Land, within the Shire of Coolgardie (Figure 1). Access to the site is by a 100-kilometre-long unsurfaced road that extends northward from Boorabbin siding on Great Eastern Highway.

1.3 Purpose of Document

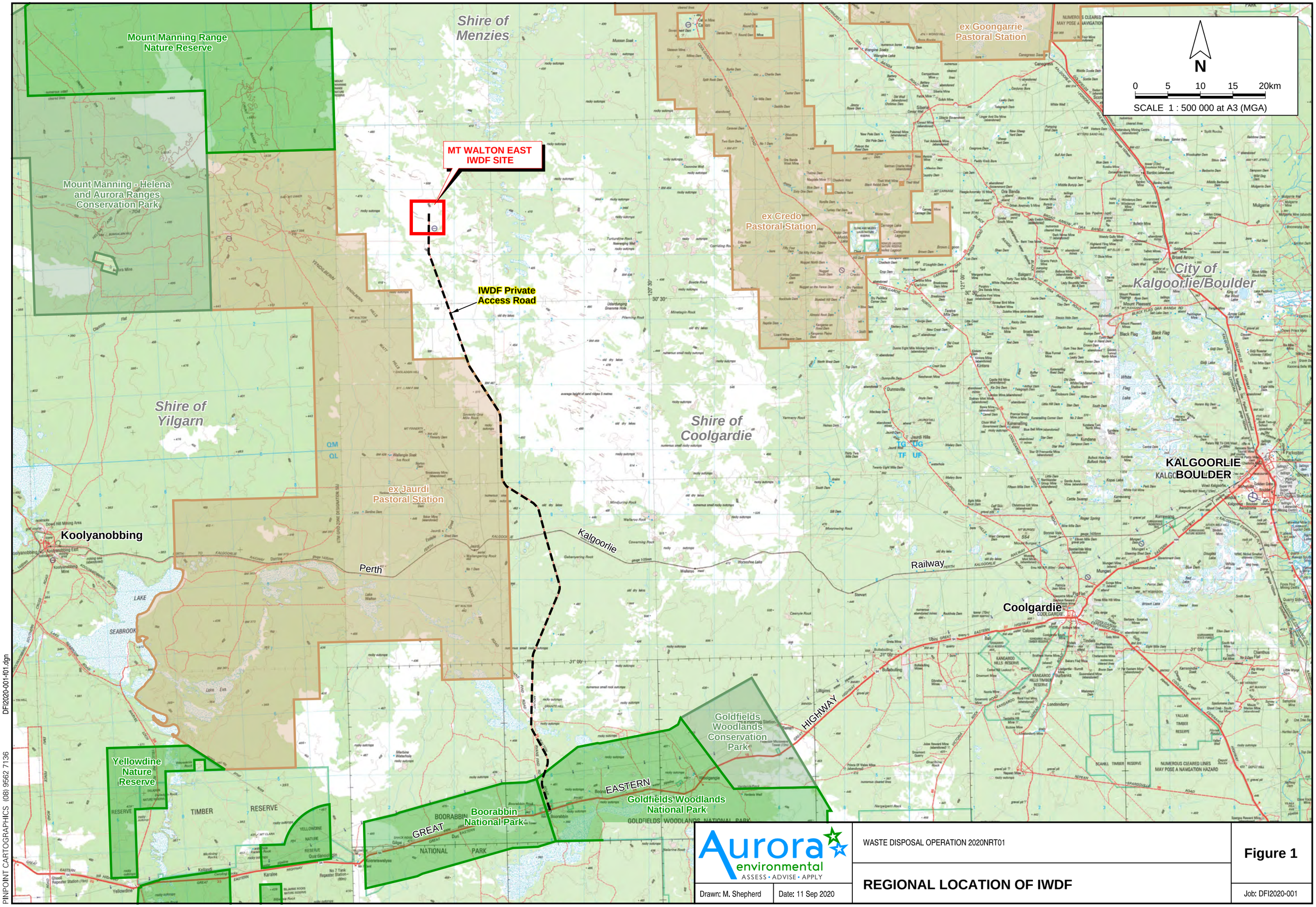
This Performance and Compliance Report (PCR) summarises the compliance of the operation of the IWDF against the requirements of:

- Ministerial Statement No. 562 (Appendix A).
- Radiological Council (RC) Registration RS 13/2011 20590 (Appendix B).
- Department of Water and Environmental Regulation (DWER) Licence L8190/2007/2 issued 16 August 2022 (Appendix C).
- Australian Safeguards and Non-proliferation Office (ASNO) Permit PN207 Version 4 (Appendix D).
- IWDF Management Plans (Appendix E).
- IWDF Environmental, Health and Safety and Quality Management System (EHSQMS) procedures and other documents.
- IWDF Environmental, Health and Safety and Radiation Management Plans (EHSRMP).

In particular, the PCR has been prepared to fulfil the requirements of the IWDF EHSQMS, which requires the preparation of an annual PCR.

1.4 Disposal Operations

No disposal operations were conducted during the reporting period.



DFI2020-001-f01.dgn

PINPOINT CARTOGRAPHICS (08) 9562 7136

Aurora environmental
ASSESS · ADVISE · APPLY

WASTE DISPOSAL OPERATION 2020NRT01

Figure 1

REGIONAL LOCATION OF IWDF

Drawn: M. Shepherd | Date: 11 Sep 2020 | Job: DFI2020-001

2. MANAGEMENT OF THE IWDF

2.1 Proponent

From 1 July 2024 to 30 June 2025, the proponent for the IWDF was the Minister for Works care of the Department of Finance (Finance). On 1 July 2025, the proponent for the IWDF became the Minister for Works care of the Department of Housing and Works (DHW).

Enquiries regarding this PCR should be emailed to IWDF-MountWalton@dohw.wa.gov.au.

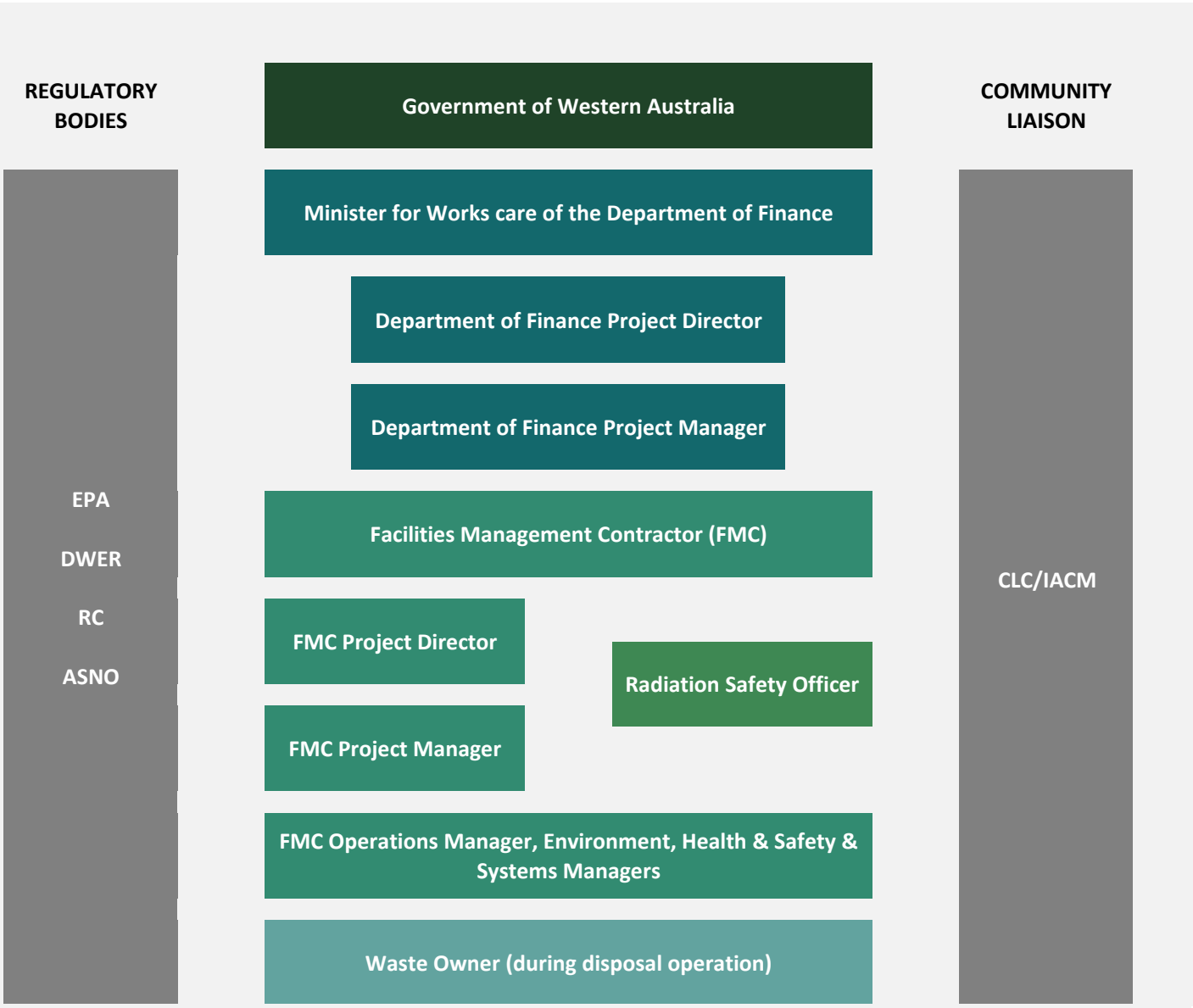
2.2 Facility Management Contractor

The Facility Management Contractor (FMC), with responsibility for the environmental and operational management of the IWDF, for the period 1 July 2024 to 30 June 2025 was Aurora Environmental.

2.3 IWDF Governance

The governance of the IWDF from 1 July 2024 to 30 June 2025 is illustrated in Figure 2 overleaf.

Figure 2
July 2024 – June 2025 IWDF Governance Structure



ACRONYMS
EPA - Environmental Protection Authority
DWER - Department of Water and Environmental Regulation
RC - Radiological Council
ASNO - Australian Safeguards and Non-proliferation Office
CLC - Community Liaison Committee (Note: CLC was prior to 20 October 2024)
IACM - IWDF Annual Community Meeting (Note: IACM was from 20 October 2024)

2.4 Visits to the IWDF during the 2024 – 2025 Reporting Period

Table 1 provides a summary of visits to the IWDF during the reporting period.

Table 1
Summary of Visits to the IWDF During 2024 – 2025 Reporting Period

Date of Visit	Purpose of Visit	Name and Role of Visitor
15 – 18 Oct 2024	Facility and IWDF Access Road inspection and rehabilitation, capping, and groundwater monitoring. Flora survey, spraying of firebreak and drains, servicing of the Genset, and a visit from Finance personnel.	Mark Shepherd (FMC Project Director and Operations Manager), John Shepherd (FMC Environmental Scientist), Shayne Pittaway (FMC Technician), Paul van der Moezel (Botanist), Rex McDermot (Hamptons – genset service), Kudzi Chigwanda (Finance Director), Erin Clinch (Finance), Eleanor Hopkins (Finance IWDF Project Director) and Tegan Gibson (Finance IWDF Contract Manager).
06 – 08 Nov 2024	Installing signs, flying drone, grading firebreak and supervising clean-up by Tellus.	Mark Shepherd (FMC Project Director and Operations Manager), John Shepherd (FMC Environmental Scientist), Ping Liu (FMC Radiation Specialist), Howard Low (Tellus), Bryce Coulter (Tellus), Chaise Parent (Tellus), Neville Milberry (Tellus), and David Szavyi (Westrac).
14 – 16 April 2025	Facility and IWDF Access Road inspection, groundwater monitoring, spraying of firebreak and drains, and replacing some fire extinguishers.	Mark Shepherd (FMC Project Director and Operations Manager) and John Shepherd (FMC Environmental Scientist).

3. REGULATORY INSTRUMENTS APPLIED TO THE IWDF

3.1 DWER Environmental Licence for Prescribed Premises

The IWDF is licensed by the Western Australian DWER, under Division 3 Part V of the *Environmental Protection Act 1986*, as a Prescribed Premises – Category 66 Class V intractable landfill site.

The DWER Licence L8190/2007/2 was issued on 16 August 2022 (Appendix C). The duration of the licence is from 18 August 2022 to 17 August 2042.

3.1.1 Compliance Statement

Table 2 below details proponent compliance with Licence L8190/2007/2 Conditions.

Table 2
Environmental Licence L8190/2007/2 2024 – 2025 Compliance Statement

<table>
<tr><th>No.</th><th>Condition</th><th>Compliance Status / Comment</th></tr>
<tr><td colspan="3">Infrastructure and equipment</td></tr>
<tr><td>1.</td><td>The licence holder must ensure that the site infrastructure and equipment listed in Table 1 and located at the corresponding infrastructure location is maintained and operated in accordance with the corresponding operational requirement set out in Table 1.

Environmental Licence L8190/2007/2 Table 1: Infrastructure and equipment requirements
<table>
<tr><th>Site infrastructure and equipment</th><th>Operational requirement</th><th>Infrastructure location</th></tr>
<tr><td>Groundwater monitoring bores</td><td>Maintain in operational condition.</td><td>Bores GM1 – GM9 as depicted in schedule 1, Bore location map and any future bores.</td></tr>
<tr><td>Surface water management system</td><td>Ensure excavated V drains are maintained around cells, to aid surface drainage away from the water shedding clay dome.</td><td>N/A</td></tr>
<tr><td>Security fencing</td><td>Ensure fencing for the demarcation of cells is maintained free of holes, breaks and other defects.</td><td>Around all disposal cells.</td></tr>
</table></td><td>In compliance – All monitoring bores were in operational condition and did not require maintenance during the reporting period. See Appendix F for groundwater monitoring reports.

In compliance – All V-drains around cells were routinely inspected during the site monitoring visits October 2024 and April 2025. See Appendix G to show monitoring of V-drains on IWDF-Form-52.

In compliance – Fences checked during each site visit. See Appendix G to show monitoring of fences on IWDF-Form-52.</td></tr>
</table>

<table>
<tr><th>No.</th><th>Condition</th><th>Compliance Status / Comment</th></tr>
<tr><td colspan="3">Waste acceptance and disposal</td></tr>
<tr><td>2.</td><td>The Licence Holder must only accept onto the premises waste of a waste type and waste description in accordance with the requirements of Ministerial Statement (MS) 562.</td><td>N/A – No disposal operation occurred during the reporting period therefore no waste was accepted onto the premises.</td></tr>
<tr><td>3.</td><td>The Licence Holder must immediately recover or remove and dispose of spills of intractable waste outside of the disposal cells.</td><td>N/A – No disposal operation occurred during the reporting period therefore no spills of intractable waste occurred.</td></tr>
<tr><td>4.</td><td>The Licence Holder must ensure that Emergency Response Equipment is located on the premises for the duration of a waste disposal operation.</td><td>N/A – No disposal operation occurred during the reporting period.</td></tr>
<tr><td colspan="3">Stormwater management</td></tr>
<tr><td>5.</td><td>The Licence Holder must ensure that bunding is constructed to ensure that stormwater is diverted from areas of the premises where waste is handled or stored.</td><td>N/A – No disposal operation occurred during the reporting period.</td></tr>
<tr><td colspan="3">Monitoring</td></tr>
<tr><td>6.</td><td>The Licence Holder must record the total amount of waste accepted onto the premises or removed from the premises for each waste type listed in Table 2, with the corresponding parameters listed in Table 2, and for each corresponding time period set out in Table 2.
Environmental Licence L8190/2007/2 Table 2: Waste accepted onto or removed from the premises
<table>
<tr><th>Waste Type</th><th>Parameter</th><th>Time Period</th></tr>
<tr><td>Intractable Wastes</td><td>(a) Time and date of delivery;
(b) Waste type;
(c) Total quantity of the waste package (in kilograms, tonnes, litres or cubic metres);</td><td>Each load arriving at the Premises.</td></tr>
</table></td><td>N/A – No disposal operation occurred therefore no intractable waste was accepted or removed from the premises during the reporting period.</td></tr>
</table>

No.	Condition	Compliance Status / Comment
	(d) The name of the waste generator; (e) The origin and source location of waste; (f) The physical, chemical, and/or radiological characteristics of the waste; (g) The name and contact details of the company transporting the waste to the Premises; and (h) The name of the driver and registration number of the delivery vehicle.	
Records and reporting		
7.	The Licensee shall notify the CEO (Chief Executive Officer) in writing at least 1-month prior[1] to the delivery of waste to the Intractable Waste Disposal Facility, Mt Walton East. The following information shall be included in the notification (where known): (a) Waste type(s) and quantities to be disposed; (b) Disposal dates; and (c) Status of approval under MS 562 and the *Radiological Safety Act 1975*. Note 1: In the case of an emergency disposal event, where notice of disposal is not able to be provided to the CEO within the timeframe outlined in Condition 7, the Licence Holder shall provide notification to the CEO as soon as possible (and no later than the end of the next working day) after becoming aware of the emergency disposal event.	N/A – No disposal operation occurred therefore no intractable waste was delivered during the reporting period.
8.	The Licence Holder must maintain accurate and auditable books including the following records, information, reports, and data required by this licence: (a) Any maintenance of infrastructure that is performed in the course of complying with Condition 1 of this licence; (b) Monitoring undertaken in accordance with Condition 6 of this licence; and (c) Complaints received under Condition 10 of this licence.	In compliance. (a) In compliance – Site Visit Checklist records any maintenance undertaken (Appendix G). (b) N/A – No disposal occurred. (c) In compliance – The complaints received during the annual period were recorded in the Complaints Register (Appendix H).

No.	Condition	Compliance Status / Comment
9.	The books specified under Condition 8 must: (a) Be legible; (b) If amended, be amended in such a way that the original version(s) and any subsequent amendments remain legible and are capable of retrieval; (c) Be retained by the Licence Holder for the duration of the licence; and (d) Be available to be produced to an inspector or the CEO as required.	In compliance – See Site Visit Checklist for maintenance records (Appendix G) and Complaints Register (Appendix H) for any complaints made. No disposal occurred during the reporting period so no monitoring in accordance with Condition 6 was required.
10.	The Licence Holder must record the following information in relation to complaints received by the Licence Holder (whether received directly from a complainant or forwarded to them by the Department [DWER] or another party) about any alleged emissions from the premises: (a) The name and contact details of the complainant (if provided); (b) The time and date of the complaint; (c) The complete details of the complaints and any other concerns or other issues raised; and (d) The complete details and dates of any action taken by the licence holder to investigate or respond to any complaint.	In compliance. There were no complaints related to alleged emissions from the premises. However, two complaints were received from the same complainant in one submission. The required details were recorded in the Complaints Register (Appendix H).
11.	The Licence Holder must: (a) Undertake an audit of their compliance with the conditions of this licence during the preceding annual period; and (b) Prepare and submit to the CEO by no later than 90 days after the end of that annual period an Annual Audit Compliance Report in the approved form.	In Compliance – This table (Table 2) is evidence of the audit required by Condition 11 (a). The Annual Audit Compliance Report was submitted on 19/08/2025 in the approved form.

<table>
<tr><th>No.</th><th>Condition</th><th>Compliance Status / Comment</th></tr>
<tr><td>12.</td><td>The Licence Holder must submit to the CEO by no later than 90 days after the end of each annual period, an Annual Environment Report for that annual period for the conditions listed in Table 3, and which provided the information in accordance with the corresponding requirement set out in Table 3.

Environmental Licence L8190/2007/2 Table 3: Annual Environment Report
<table>
<tr><th>Condition</th><th>Requirement</th></tr>
<tr><td>-</td><td>A summary of any failure or malfunction of any pollution control equipment or any incidents that have occurred during the previous annual period and any action taken.</td></tr>
<tr><td>N/A</td><td>Any Performance and Compliance Reports relating to the disposal of waste which were prepared during the previous annual period.</td></tr>
<tr><td>Table 1</td><td>An updated map showing monitoring bore locations and designations where changes to bore infrastructure has occurred during the previous annual period.</td></tr>
<tr><td>6</td><td>Monitoring reports.</td></tr>
<tr><td>10</td><td>A summary of complaints received during the previous annual period.</td></tr>
</table></td><td>In Compliance – With agreement from DWER, this PCR report meets the requirements of the Annual Environment Report. See Section 3.1.2 for further discussion.

No incidents and no disposal in the reporting period.

No disposal in the reporting period.

No changes to monitoring bores in the reporting period.

See Section 3.1.2.

See Section 3.1.2.</td></tr>
</table>

3.1.2 DWER Licence Annual Environment Report

3.1.2.1 Failure or Malfunction of Pollution Control Equipment

Requirement
A summary of any failure or malfunction of any pollution control equipment or any incidents that have occurred during the previous annual period and any action taken.

Response
No failure or malfunction of pollution control equipment or other incidents occurred during the reporting period.

3.1.2.2 Performance and Compliance Reports Relating to the Disposal of Waste

Requirement
Any Performance and Compliance Reports relating to the disposal of waste which were prepared during the previous annual period.

Response
Not required as there was no waste disposal during the reporting period. It should be noted that a Performance and Compliance Report is prepared annually by the proponent irrespective of whether a disposal operation has occurred.

3.1.2.3 Condition 1 Table 1 Infrastructure

Requirement
An updated map showing monitoring bore locations and designations where changes to bore infrastructure has occurred during the previous annual period.

Response
Not required as no changes to bore infrastructure occurred.

3.1.2.4 Condition 6

Requirement
Monitoring reports.

Response
No monitoring reports related to Condition 6 were required as there was no disposal operation in the reporting period. However, monitoring reports for groundwater and infrastructure are presented in Appendices F and G, respectively.

3.1.2.5 Condition 10 Summary of Complaints

Requirement
A summary of complaints received during the previous annual period in relation to any alleged emissions from the premises.

Response
No complaints were received during the reporting period in relation to any alleged emissions from the premises. Two complaints, however, were received during the reporting period. These complaints were recorded in the Complaints Register (Appendix H). These related to Community Liaison Committee (CLC) issues and were responded to on 27/11/2024.

3.2 Contaminated Sites Act 2003 IWDF Classification

As of June 2016, the IWDF has been classified as '*Contaminated – restricted use'* under the *Contaminated Sites Act 2003* and is listed on the Contaminated Sites Register.

The inclusion of the IWDF on the Contaminated Sites Register is essential for future generations as it will provide a permanent record about the purpose and location of the IWDF.

3.3 Management Orders

Management Orders issued under the *Land Administrations Act 1997* vest the Class C reserves associated with the IWDF (Crown Reserve 42001) and the IWDF Access Road (Crown Reserve 44102) with the Minister for Works.

3.4 Radiological Council Registration

The IWDF is required, under the *Radiation Safety Act 1975*, to be registered with the RC as premises in which radioactive substances are used, stored, or manufactured.

RC registration RS 13/2011 20590 (Standard Condition No: 203) for the registration period 13 July 2023 to 8 February 2026, names the registrant as Ms Jodi Cant, Director General, Department of Finance; and Stuart Parr as the RC approved Radiation Safety Officer (RSO) for the IWDF. The registration applied for all of the reporting period and is included as Appendix B. The compliance statement (refer 3.4.1 below) shows that the site is in compliance. However, this is complicated by the fact that reference to Special Condition 1 in the registration, states that the Code of Practice for the near surface disposal of radioactive waste in Australia (1992) (RHS 35) may be applied in the transition to compliance with the Australian Code for Disposal Facilities for Solid Radioactive Waste (2018) (RPS C-3), until the Safety Case referenced in 2.3 of Standard Condition 203 is approved. The Safety Case was not approved during the reporting period. As a result, the IWDF Management Team (MT) have ensured compliance with Standard Condition 114 (see Appendix I) and, where possible, with Standard Condition 203 as demonstrated below.

3.4.1 Compliance Statement

Table 3 details Finance's compliance, for the reporting period, with the conditions, restrictions and limitations as defined on the RC Registration RS 13/2011 20590 as issued 13 July 2023.

Table 3
RC Registration of Premises 2024 – 2025 Compliance Statement

Conditions, Restrictions and Limitations	Compliance Status / Comment
1. This Registration is for disposal at the IWDF of low-level radioactive waste.	General information.
2. The Registrant is directed to ensure that –	
2.1. Prior to radioactive waste being accepted for final disposal, a disposal permit must be granted by the Radiological Council in accordance with *Section 34 of the Act*;	No disposal of radioactive waste during the reporting period.
2.2. All radiation management and safety are in accordance with the *Radiation Safety (General) Regulations* (1983), and the *Australian Code for Radiation Protection in Planned Exposure Situations* (RPS C-1) and *Code for Disposal Facilities for Solid Radioactive Waste* (RPS C-3) published by the Australian Radiation Protection and Nuclear Safety Agency (ARPANSA);	No disposal of radioactive waste during the reporting period.
2.3. The Safety Case and, where relevant, the information in the supporting Safety Assessment required under RPS C-1 is reviewed at 2-yearly intervals and any revised documentation is submitted to the Radiological Council;	N/A, the Safety Case was not approved during the reporting period.
2.4. The approved Radiation Management Plan, which forms part of the Safety Case, is implemented and reviewed at 2-yearly intervals with any revisions submitted to the Radiological Council for approval;	N/A, the Safety Case was not approved during the reporting period.
2.5. All radioactive waste to be disposed of shall be conditioned and packaged in accordance with the approved Radiation Management Plan, with reference to the Australian *Safety Guide for the Predisposal Management of Radioactive Waste* (RPS 16), published by ARPANSA;	No disposal of radioactive waste during the reporting period.
2.6. Radiation safety management is undertaken by the approved *Radiation Safety Officer* (RSO), in accordance with the duties imposed under *Regulations 19(3)*;	In compliance – all radiation safety management was undertaken by the approved RSO.
2.7. Transport of radioactive substances shall be in accordance with the *Radiation Safety (Transport of Radioactive Substances) Regulations 2002* and the *Code of Practice for the Safe Transport of Radioactive Materials* as adopted;	No disposal of radioactive waste during the reporting period.

Conditions, Restrictions and Limitations	Compliance Status / Comment
2.8. The Radiation Safety Officer (RSO) reports annually in writing to the Radiological Council, the results of radiation monitoring and other factors relating to human health and the environment for the receipt, handling and near-surface disposal of the radioactive waste;	No disposal of radioactive waste during the reporting period.
2.9. The reporting under Section 38 of the Radiation Safety Act of material received to site and of material disposed may be conducted on a monthly campaign basis;	No disposal of radioactive waste during the reporting period. See also Special Condition 2.
2.10. Accurate records of all radioactive material disposed shall be maintained and archived in an approved manner; and	In compliance – The Finance R&D Schedule refers to the IWDF records that are to be retained permanently within the State Records Office of Western Australia. See Appendix J for extract of R&D Schedule.
2.11. An independent auditor with expertise in radioactive waste management shall be appointed to review all actions of the proponent required by these conditions and provide publicly available reports to the Council, one year into commencement of operations and thereafter at two-yearly intervals.	No disposal of radioactive waste during the reporting period. See also Special Condition 3.
SPECIAL CONDITIONS 1. The Code of practice for the near-surface disposal of radioactive waste in Australia (1992) (RHS 35) may be applied in the transition to compliance with the Australian Code for Disposal Facilities for Solid Radioactive Waste (2018) (RPS C-3) until the Safety Case referenced in 2.3 of Standard Condition 203 is approved.	In compliance – (RHS 35) continues to be adhered to as the Safety Case is yet to be approved.
2. The reporting of radioactive material received to the registered premises as required by Section 38 of the Radiation Safety Act may be made within 14 days of a campaign disposal, in place of the 'monthly' basis prescribed in 2.9 of Standard Condition 203.	No disposal of radioactive waste during the reporting period. Waste disposed of at the IWDF previously is recorded in the IWDF Waste Inventory Database maintained by the Registrant.
3. An independent auditor is required to be appointed by 2.11 of Standard Condition 203; however, due to the campaign disposal nature of the facility and in place of two-yearly intervals, the report will be required six months after each disposal campaign.	In compliance – No disposal of radioactive waste during the reporting period.

3.5 ASNO Permit to Possess Nuclear Material

Australia has enacted the *Nuclear Non-Proliferation (Safeguards) Act 1987* to ensure that international obligations are met under the Nuclear Non-Proliferation Treaty.

ASNO (Australian Safeguards and Non-Proliferation Office), the department with responsibility for implementing the requirements of the *Nuclear Non-Proliferation (Safeguards) Act 1987*, is located within the Federal Department of Foreign Affairs and Trade portfolio.

The *Nuclear Non-Proliferation (Safeguards) Act 1987* is concerned with nuclear materials such as uranium, thorium, and plutonium. As there are small quantities of thorium and uranium disposed of at the IWDF, the facility is required to have a current permit to possess nuclear material.

On 18 November 2024, pursuant to Section 13 of the *Nuclear Non-Proliferation (Safeguards) Act 1987*, the Director General of ASNO issued a variation to Permit Number PN207 (Version 4), Class L2, (including a Compliance Code) which took effect on 30 November 2024 and expires on 30 November 2029.

Permit PN207 (Appendix D) requires Finance to submit an ASO316 form to ASNO, that describes approved building(s)/location(s) and a brief description of nuclear material contents. On 13 February 2025, ASNO sent a reminder to complete form ASO316 by 15 March 2025, with a request to also provide PN207 – IAEA Access Guidance for the IWDF in the event of an inspection by the IAEA (International Atomic Energy Agency). The guidance is intended to prepare the IAEA inspectors for a visit, including how to get there, safety information, forms that need to be filled out in advance and any other information relevant to such a visit. Form ASO316 and the PN207 – IAEA Guidance on Access were sent to ASNO on 5 March 2025 (Appendix K).

Permit PN207 also requires reporting of an inventory listing of all nuclear materials with closure of the inventory period on June 30 each year, and reporting on form ASO310 to be submitted to ASNO by 5 July of the same year. The annual inventory listing is submitted online via the NUMBAT database portal. An email acknowledging submission via NUMBAT of the inventory listing of nuclear material as of 30 June 2025 for Department of Finance was received on 18 June 2025 (Appendix L).

3.5.1 Compliance Statement

Table 4 details compliance with the reporting requirements of permit PN207 for the reporting period.

Table 4
ASNO Permit PN207 2024 – 2025 Compliance Statement

Reporting Requirements	Compliance Status
ASO310 Inventory Listing The inventory period is to be closed on 30 June each year. This form is to be submitted to ASNO by 5 July of the same year.	In compliance – Annual Inventory Listing was submitted via NUMBAT on 18 June 2025 – see Appendix L for ASNO acknowledgement of submission.
ASO316 Description of each building This information is required to enable ASNO to meet Australia's reporting obligations under Articles 2a (iii) of the International Atomic Energy Agency's Additional Protocol (INFCIRC/540). The details provided must describe the most up to date situation – as of 31 December for the previous year – emphasising any changes that have taken place since the previous report. This information must be provided to ASNO by 15 March every year.	In compliance – ASO316 was submitted to ASNO on 5 March 2025. See Appendix K for a copy of the email acknowledging submission of form ASO316 to ASNO.
PN207 – IAEA Guidance on Access The details provided must encapsulate the most up to date conditions for access to the remote site in terms of travel options and clothing, as well as guidance on response to possible weather and emergency events. This information must be provided to ASNO by 15 March every year.	In compliance – PN207 – IAEA Guidance on Access was submitted to ASNO on 5 March 2025. See Appendix K for copy of the email acknowledging the submission of the PN207 – IAEA Guidance on Access form to ASNO.

3.6 Ministerial Statement 562

3.6.1 Compliance Statement

Table 5 provides an audit table detailing compliance status and comment for each of the conditions and proponent commitments contained within Ministerial Statement 562 (MS562).

The evidence presented in Table 5 demonstrates that for the reporting period, the management of the IWDF has been in compliance, where applicable, with the requirements of Ministerial Statement 562 (Appendix A).

The changes made to MS562 on 20 October 2024 as a result of the approval of the s.45C submitted to the DWER on 2 May 2023, under the *Environmental Protection Act 1986*, have been incorporated into the compliance statement (Table 5). The main changes are replacement of the Community Liaison Committee (CLC) with an IWDF Annual Community

Meeting (IACM), and removal of the requirement for Operational Transport Procedures. The Operational Transport Procedures have been replaced by two new Ministerial Conditions 6.1 and 6.2, which require the proponent to ensure that all third-party carriers of waste to the IWDF are appropriately licenced, or hold permits for the particular waste being transported. Additionally, any waste being transported under the direct control of the proponent must be appropriately managed to ensure the risks from spills are minimised. This requirement will be outlined in the relevant management plans required under the transport regulations appropriate to the waste type.

For this reporting period, two CLC meetings were held because they had either been held or planned prior to the approval of the s.45C.

Table 5
Statement 562 Ministerial Conditions and Proponent Commitments 2024 – 2025 Compliance Statement

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE-MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
MINISTERIAL CONDITIONS								
MC 1.1	Implementation	Subject to these conditions and procedures, the proponent shall implement the proposals as documented in schedule 1 of this statement [Appendix A of Statement 562].	Ongoing.	Chief Executive Officer, Department of Water and Environmental Regulation.	Chief Executive Officer, Department of Water and Environmental Regulation.	Approved PCR	**Satisfactory during this period**	Evidence is provided in this PCR – Section 5 and Tables 6, 7 and 8. Implementation of proposal is via approval of individual disposal operations and ongoing monitoring.
MC 1.2	Implementation	Where the proponent seeks to change any aspect of the proposal as documented in schedule 1 of this statement in any way that the Minister for the Environment determines, on advice of the EPA, is substantial, the proponent shall refer the matter to the EPA.	Upon any substantial operational change.	Chief Executive Officer, Department of Water and Environmental Regulation.	Chief Executive Officer, Department of Water and Environmental Regulation.	Proposal for change submitted to EPA	**In compliance**	The proponent did not seek to change any aspect of the proposal as documented in Schedule 1 during the reporting period.
MC 1.3	Implementation	Where the proponent seeks to change any aspect of the proposals as documented in schedule 1 of this statement in any way that the Minister for the Environment determines, on advice of the EPA, is not substantial, those changes may be effected.	Upon any operational change.	Chief Executive Officer, Department of Water and Environmental Regulation.	Chief Executive Officer, Department of Water and Environmental Regulation.	Approved proposal	**Refer MC 1.2**	See above.

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE-MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
MC 2.1	Proponent Commitments	The proponent shall implement the environmental management commitments of 25 October 2000, as documented in Schedule 2 of this statement and amended from time-to-time in accordance with the *Environmental Protection Act 1986*.	Ongoing.	Chief Executive Officer, Department of Water and Environmental Regulation.	Chief Executive Officer, Department of Water and Environmental Regulation.	Approved PCR	**Progress ongoing**	Evidence is provided in this PCR – Section 5 and Tables 6, 7 and 8. Implementation of proposal is via approval of individual disposal operations and ongoing monitoring.
MC 2.2	Proponent Commitments	The proponent shall implement subsequent environmental management commitments, which the proponent makes as part of the fulfilment of conditions and procedures in this statement.	Upon fulfilment of conditions and procedures.	Chief Executive Officer, Department of Water and Environmental Regulation.	Chief Executive Officer, Department of Water and Environmental Regulation.	Approved PCR	**Progress ongoing**	See Tables 6, 7 and 8 for implementation and compliance status of environmental management commitments.
MC 3.1	Proponent	The proponent for the time being nominated by the Minister for the Environment under Section 38 (6) or (7) of the *Environmental Protection Act 1986* is responsible for the implementation of the proposals until such time as the Minister for the Environment has exercised the Minister's power under Section 38 (7) of the Act to revoke the nomination of that proponent and nominate another person in respect of the proposals.	Upon Ministers direction/change of proponent.	Chief Executive Officer, Department of Water and Environmental Regulation.	Chief Executive Officer, Department of Water and Environmental Regulation.	Approved Proponent	**See MC 3.3**	

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE-MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
MC 3.2	Proponent	Any request for the exercise of that power of the Minister referred to in Condition 3.1 shall be accompanied by a copy of this statement endorsed with an undertaking by the proposed replacement proponent to carry out the proposals in accordance with the conditions and procedures set out in the statement.	Upon Ministers direction/ change of proponent.	Chief Executive Officer, Department of Water and Environmental Regulation.	Chief Executive Officer, Department of Water and Environmental Regulation.	Endorsed Statement	**See MC 3.3**	
MC 3.3	Proponent	The proponent must notify the Chief Executive Officer, Department of Water and Environmental Regulation of any change of its name, physical address or postal address for the serving of notices or other correspondence within twenty-eight (28) days of such change. Where the proponent is a corporation or an association of persons, whether incorporated or not, the postal address is that of the principal place of business or of the principal office in the State.	Within 28 days of such change.	Chief Executive Officer, Department of Water and Environmental Regulation.	Chief Executive Officer, Department of Water and Environmental Regulation.	Notification	**Not required**	The proponent did not change name or address during the reporting period.
MC 5.1	Compliance Auditing	The proponent shall submit periodic Compliance Reports, in accordance with an audit program prepared in consultation between the proponent and the Chief Executive Officer, Department of Water and Environmental Regulation.	Periodic.	Chief Executive Officer, Department of Water and Environmental Regulation.	Chief Executive Officer, Department of Water and Environmental Regulation.	Submitted PCR	**In compliance**	The 2024-2025 PCR will be submitted to the RC and the DWER and any changes required can be incorporated in the 2025-2026 PCR if requested.

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE-MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
MC 5.2	Compliance Auditing	Unless otherwise specified, the Chief Executive Officer, Department of Water and Environmental Regulation is responsible for assessing compliance with the conditions, procedures and commitments contained in this statement and for issuing formal written advice that the requirements have been met.		Chief Executive Officer, Department of Water and Environmental Regulation.	Chief Executive Officer, Department of Water and Environmental Regulation.	Submitted PCR	**N/A**	Noted.
MC 6.1	Transportation	The proponent must ensure that all third-party carriers, in direct control of hazardous and intractable waste which is being transported to the facility have the appropriate permits or licences required under the relevant national and state legislation, regulation and codes of practice for the transportation and management of chemical waste and management of low-level radioactive waste.	During all disposal operations.	Relevant national and state legislation, regulation and codes of practice for the transportation and management of chemical waste and management of low-level radioactive waste.	Radiological Council of Western Australia (RC) and Department of Energy, Mines, Industry Regulation and Safety (DEMIRS)	Submitted PCR	**Not required**	Noted.

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE-MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
MC 6.2	Transportation	Any hazardous and intractable waste being transported under the direct control of the proponent must be appropriately managed to ensure risks to human health and the environment from spills are minimised. This requirement shall be outlined in the relevant management plans required under the *Radiation Safety (Transport of Radioactive Substances) Regulations 2002* and *Dangerous Goods Safety (Road and Rail Transport of Non-explosives) Regulations 2007* as regulated by the Radiological Council of WA and Department of Energy, Mines, Industry Regulation and Safety.	During all disposal operations.	Relevant national and state legislation, regulation and codes of practice for the transportation and management of chemical waste and management of low-level radioactive waste.	Radiological Council of Western Australia (RC) and Department of Energy, Mines, Industry Regulation and Safety (DEMIRS)	Submitted PCR	**Not required**	Noted.
PROPONENT COMMITMENTS								
PC 1.2	Environmental Management System	Implement the Environmental Management System required by commitment 1.1 (see Appendix A).	Prior to the next disposal operation.	Chief Executive Officer, Department of Water and Environmental Regulation.		PCR	**In compliance**	See Tables 6 and 7 of this PCR for details of implementation status of the EHSQMS.

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE-MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
PC 2.3	Environmental Management Program	Implement the Environmental Management Program required by commitment 2.1 (see Appendix A).	During all disposal operations.	Chief Executive Officer, Department of Water and Environmental Regulation.		PCR	**Not required**	No disposal operation occurred during reporting period.
PC 3.8	Decommissioning and Rehabilitation Management Plan	Prepare a Decommissioning and Rehabilitation Management Plan to include but not be limited to: • removal or, if appropriate, retention of infrastructure; • rehabilitation of all disturbed areas to a standard suitable for agreed future land use/s; and • identification of disposal areas, including provision of evidence of notification to relevant statutory authorities.	At least six months before decommissioning.	Chief Executive Officer, Department of Water and Environmental Regulation.	Radiological Council of Western Australia (RC)	Approved Environmental Management Plan	**In progress**	A preliminary Operational Decommissioning and Rehabilitation Management Plan which addresses operation specific decommissioning and rehabilitation issues was approved on 23 April 2002.
PC 3.11	Environmental Management Plans	Implement the Environmental Management Plans required by commitments 3.1 to 3.8 (see Appendix A).	During each disposal operation. (Note: Commitment 3.8 requires implementation at least 6 months prior to decommissioning.)	Chief Executive Officer, Department of Water and Environmental Regulation.		PCR	**In compliance**	See Table 8 of this PCR.

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE-MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
PC 4.8	Operational Guidelines	Implement the approved Operational Guidelines required by commitments 4.1 to 4.5 (see Appendix A).	Prior to next disposal operation.	Chief Executive Officer, Department of Water and Environmental Regulation.		PCR	**Not required during reporting period**	No disposal operation occurred during reporting period.
PC 5.1	Operational Procedures - Environmental, Radiation, Health & Safety	Prepare the Environmental, Radiation, Health and Safety Operational Procedures in accordance with the Operational Guidelines. (The Operational Procedures will be the detailed working documents specific to each waste disposal operation).	Prior to each disposal operation.	Chief Executive Officer, Department of Water and Environmental Regulation.	Radiological Council of Western Australia (RC)	Approved Operational Procedures	**Not required during reporting period**	No disposal operation occurred during reporting period.
PC 5.3	Operational Procedures	Make the approved Operational Procedures required by commitment 5.1 publicly available.	Prior to each disposal operation.	Chief Executive Officer, Department of Water and Environmental Regulation.		PCR	**Not required during reporting period**	No disposal operation occurred during reporting period.

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE-MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
PC 5.4	Operational Procedures	Implement the Operational Procedures required by commitment 5.1.	During each particular waste disposal operation.	Chief Executive Officer, Department of Water and Environmental Regulation (Should any incident occur during each particular waste disposal operation it is to be reported immediately to the Chief Executive Officer, Department of Water and Environmental Regulation).		PCR	**Not required during reporting period**	No disposal operation occurred during reporting period.
PC 6.1	Performance and Compliance Report	Prepare the Performance and Compliance Report at the conclusion of each waste disposal operation.	Within three months following completion of each specific waste disposal operation.	Chief Executive Officer, Department of Water and Environmental Regulation.	Radiological Council (WA) in relation to radiation issues	Approved PCR	**Not required during reporting period**	No disposal operation occurred during reporting period, however, PCR completed annually in accordance with IWDF EHSQMS.

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE-MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
PC 6.2	Performance and Compliance Report	Make the approved Performance and Compliance Report required by commitment 6.1 publicly available.	Within 4 weeks of obtaining approval for the PCR.	Chief Executive Officer, Department of Water and Environmental Regulation.		Advertisement of approved PCR	**Not required during the reporting period**	No disposal operation occurred during reporting period, however, PCR completed annually in accordance with IWDF EHSQMS. PCR will be published on IWDF Government web page following approval by the delegate for the Minister for Works.
PC 7.1	Waste	Limit disposal of waste at the Intractable Waste Disposal Facility to waste generated in Western Australia (see commitment 4.1 in Appendix A).	Prior to each disposal operation.	Chief Executive Officer, Department of Water and Environmental Regulation.		Environmental, Radiation, Health and Safety Operational Procedures	**Not required during reporting period**	No disposal operation occurred during reporting period.
PC 7.2	Waste	Ensure that approval to dispose of any specific waste is conditional on a review of currently practicably available waste treatment, disposal, or management alternatives in Australia (see commitment 4.1 in Appendix A).	Prior to each disposal operation.	Chief Executive Officer, Department of Water and Environmental Regulation.		Environmental, Radiation, Health and Safety Operational Procedures	**Not required during reporting period**	No disposal operation occurred during reporting period.

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE-MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
PC 7.3	Waste	Prepare a waste register data base to be maintained, updated and made publicly available. The locations of radioactive wastes will not be made publicly available unless requested by the Chief Executive Officer, Department of Water and Environmental Regulation.	Prepare the waste register data base within six months of the issuing of the Minister's Statement that the proposal may be implemented and update the register within three months of completion of each disposal operation.	Chief Executive Officer, Department of Water and Environmental Regulation.		PCR/Waste Register Database	**Not required during reporting period**	No disposal operation occurred during reporting period.
PC 8	Community Liaison	A community meeting is to be convened annually and each time there is a disposal operation. These meetings can be combined where reasonable.	Following the Minister's Statement that the proposal may be implemented.	Chief Executive Officer, Department of Water and Environmental Regulation.		PCR	**In compliance**	An IWDF Annual Community Meeting (IACM) is scheduled for 16 October 2025, within the 12 month period of amended MS 562 approved 20 October 2024.

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE-MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
PC 9	Fencing and Signposting	Fence and signpost each discrete disposal cell.	Prior to demobilisation of each waste disposal operation following the Minister's Statement that the proposal may be implemented.	Chief Executive Officer, Department of Water and Environmental Regulation.		PCR	**In compliance**	Each disposal cell at the IWDF has been fenced and sign posted after each disposal operation. Fences, signs, and plinths for each disposal cell are inspected as part of each monitoring exercise and the results are recorded on IWDF-Form-52 (see Appendix G).
PC 10	Water	Demonstrate that there are at least 5 metres of clay between the base of any disposal cell and bedrock.	Prior to each disposal operation.	Chief Executive Officer, Department of Water and Environmental Regulation.		PCR	**Not required during reporting period**	No disposal operation occurred during reporting period. Disposal cell sites chosen based on clay thickness contours derived from drill hole data.
PC 11	Transport and Packaging	Where transport and packaging is to be undertaken by a party other than the proponent, the proponent will ensure that the packaging and transport requirements specified in the Operational Transport Guidelines and Waste Acceptance Guidelines are adhered to through the use of contracts and other controls as necessary (see commitments 4.1 and 4.4 in Appendix A).	Prior to the commencement of transportation activities during each disposal operation.	Chief Executive Officer, Department of Water and Environmental Regulation.		PCR	**Not required during reporting period**	No disposal operation occurred during reporting period.

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE-MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
PC 12	Decommissioning and Rehabilitation	Implement the requirements of the Decommissioning and Rehabilitation Management Plan until the Chief Executive Officer, Department of Water and Environmental Regulation determines that decommissioning and/or rehabilitation is/are complete.	During decommissioning and/or rehabilitation.	Minister for the Environment.		Determination by the Chief Executive Officer, Department of Water and Environmental Regulation that decommissioning and/or rehabilitation is/are complete.	**Not required at this stage**	The IWDF is operational. However, the progression of rehabilitation around each disposal cell is checked annually (Appendix N), along with the integrity of each disposal cell cap (Appendix O).

4. ENVIRONMENTAL, HEALTH AND SAFETY AND QUALITY MANAGEMENT SYSTEMS

4.1 Overview

The IWDF EHSQMS, as required by Ministerial Statement 562 Proponent Commitment No. 1, is designed to identify areas of actual or potential environmental risk resulting from activities at the IWDF, and to formulate procedures and objectives which minimise or eliminate these risks.

The IWDF EHSQMS consists of two separate but integrated management systems. The Finance Management System details the high-level management requirements for the IWDF, and the FMC Management System details the management, environment, and safety requirements for the IWDF site. Both systems consist of management manuals, procedures, work instructions and associated forms which provide guidance for all activities related to the management and the ongoing management and operational activities of the IWDF.

4.2 Management Manuals and Procedures

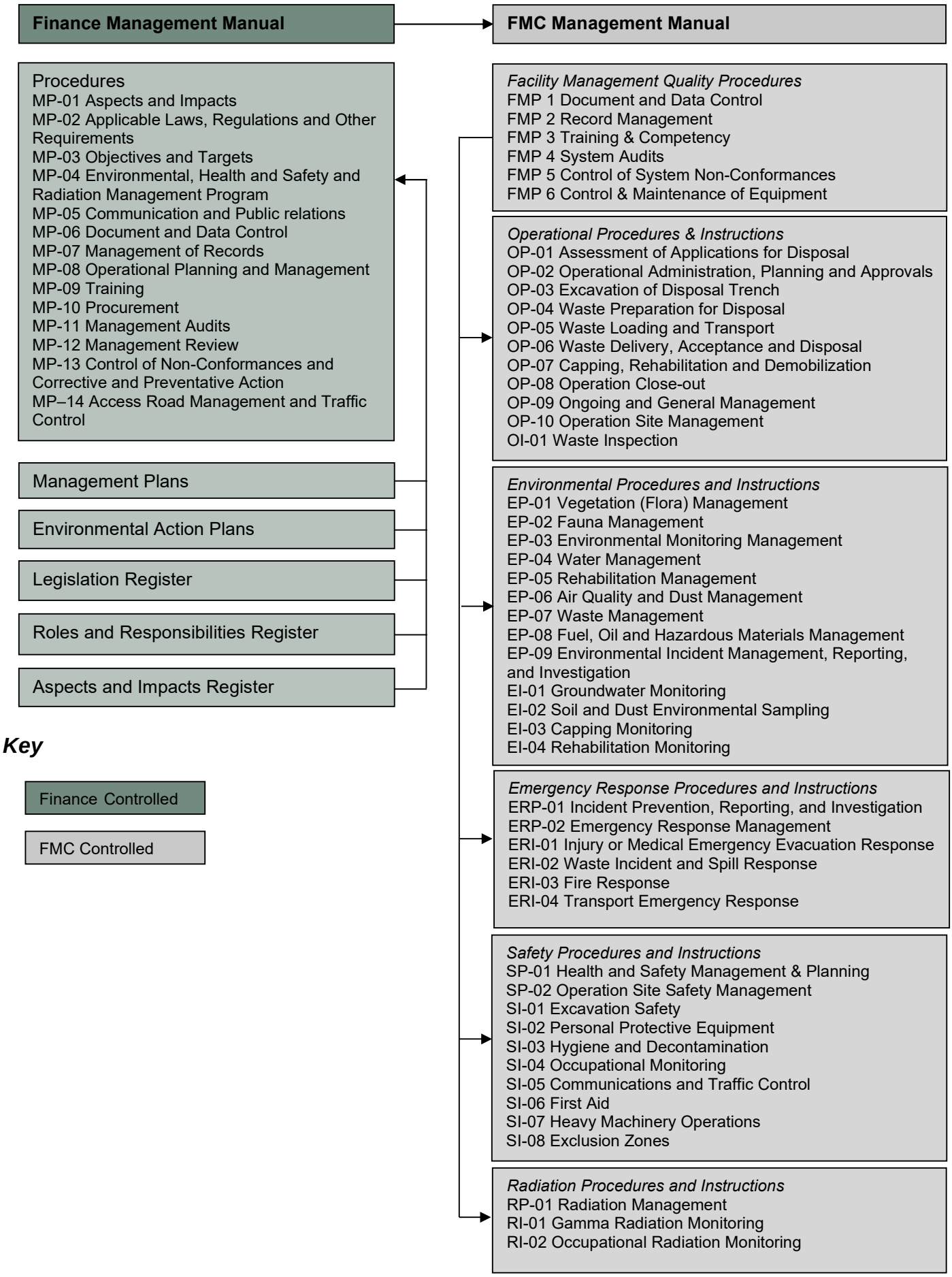
There are two management manuals which contain essential information about the management of the IWDF and provide an overview of the systems; these two manuals are provided as Appendix P and are described below.

Finance's Management and Policy Manual provides details on the IWDF site and an overview of the components of the management system and how they are integrated.

The FMC Management Manual highlights the FMC's status, details the structure of the FMC procedures, and their interaction with Finance's system.

Figure 3 below provides a diagrammatic explanation to the interrelationship between the Finance Management System and the FMC Management System.

FIGURE 3 IWDF EHSQMS MANUALS, PROCEDURES STRUCTURE AND RELATIONSHIP



4.2.1 Finance Management System Compliance Audit

Table 6 documents the results of an internal compliance audit of Finance's EHSQMS Procedures for the reporting period.

MP-14 Access Road Management and Traffic Control has not been audited as it primarily deals with the IWDF Access Road which is outside the scope of the IWDF.

No non-compliances were recorded for the reporting period.

As discussed previously in this PCR, a s.45C under the *Environmental Protection Act 1986* was submitted to the DWER on 2 May 2023, requesting changes to implementation conditions. These changes are reflected in Table 5 after approval of the s.45C by the Chairman of the EPA on 20 October 2024. As a result, the Community Liaison Committee (CLC), which originally had to meet a minimum of four times per year, has been replaced with an IWDF Annual Community Meeting (IACM). Up until this change there had been a requirement for four CLC meetings annually. For this reporting period two CLC meetings were held because they had either been held or planned, prior to the approval of the s.45C. An IACM is scheduled for 16 October 2025 to ensure that the annual meeting is held within one year of the approval.

Table 6
Finance Environmental, Health and Safety and Quality Management System 2024 – 2025 Internal Compliance Audit of Procedures

Section	Requirement	Status	Evidence / Comment
Procedure: MP-01 Aspects and Impacts			
4.2	Environmental, health and safety, socio-political and legal aspects from normal, abnormal, and emergency situations have been considered when identifying aspects and impacts.	In compliance	The Aspects and Impacts (Risk) Register addresses environmental, health and safety, socio-political and legal aspects. See Appendix Q for 2024 - 2025 register which was reviewed and modified in May 2025.
4.2	The Aspects and Impacts (Risk) Register has considered aspects from excavation, operational planning, transport, waste inspection and acceptance, monitoring, surface and groundwater management and emergency response activities.	In compliance	The Aspects and Impacts (Risk) Register addresses all required aspects. See Appendix Q.
4.3	Each aspect / impact has been assigned a likelihood and consequence value.	In compliance	Review of the Aspects and Impacts (Risk) Register demonstrated that each aspect and impact has been assigned a likelihood and consequence value. See Appendix Q.
4.3	A risk value has been established for each aspect and impact.	In compliance	Review of the Aspects and Impacts (Risk) Register confirmed that a risk value has been established for each aspect and impact. See Appendix Q.
4.3	The level of risk for each aspect and impact has been derived from the product of likelihood and consequence.	In compliance	Review of the Aspects and Impacts (Risk) Register demonstrated that the level of risk for each aspect and impact has been derived from the product of likelihood and consequence. See Appendix Q.

Section	Requirement	Status	Evidence / Comment
4.3	Significant aspects have been identified.	In compliance	The register was reviewed in May 2025 by the Management Team. It was verified that all significant aspects of the operation of the IWDF had been identified. See Appendix Q.
4.4	The Aspects and Impacts (Risk) Register has been reviewed annually and prior to an operation or following significant impact or change.	In compliance	Aspects and Impacts (Risk) Register was reviewed May 2025. See Appendix Q, Revision 3.
Procedure: MP-02 Applicable Laws, Regulations, and other Requirements			
4.1	In the identification of legislation, the relevant regulatory authorities, legal experts and site conditions and commitments have been consulted.	Partial compliance	The register was compiled in 2000. There is evidence that the relevant regulatory authorities, site conditions and commitments have been consulted but there is no evidence that legal experts were consulted.
4.2	Principal legislation has been divided into State and Commonwealth and other requirements such as relevant guidelines and codes of practice.	In compliance	Review of legislation register confirmed that principal legislation has been divided into State and Commonwealth. See Appendix R.
4.3	Legal registers have been reviewed annually and prior to each disposal operation and have considered new and amended legislation and changes to the IWDF's activities.	In compliance	The registers were reviewed in May 2025. See Appendix R, Revision 3.
4.3	The FMC Project Manager shall consult the following sources during this review: • Government Gazette • Australasian Legal Information Institute (Austlii) for • Commonwealth Legislation • Western Australian Legislation.	In compliance	Review of IWDF Document Library demonstrated that legislation updates were retrieved from all available sources.

Section	Requirement	Status	Evidence / Comment
4.3	A copy of relevant new or amended legislation has been downloaded and placed in the Legislation folder of the document library.	In compliance	A review of the folder demonstrated that new versions, where applicable, of legislation are downloaded to the document library legislation folder where necessary.
4.3	Obsolete copies of legislation are removed from the document library.	In compliance	A review of the legislation folder in the document library demonstrated that the superseded versions of legislation are deleted.
4.3	The implications of new or amended legislation have been determined and presented at a Management Review Meeting.	In compliance	The impact of the updated legislation was reported at the June 2025 Management Review Meeting. See Appendix S for Minutes of MRM.
4.4	Proposed changes to applicable requirements or the establishment of new legislation applicable to the management of the IWDF shall be tracked to ensure Finance: • Has an opportunity to provide input into proposed changes which may affect its operations; and • Can plan and implement any changes in a timely and cost-effective manner.	In compliance	Proposed changes to applicable requirements or the establishment of new legislation were tracked by the FMC Systems Manager who updated Finance at monthly management meetings and management review meetings. See Appendix S for Minutes of MRM.
Procedure: MP-03 Objectives and Targets			
4.2.1	The environmental and health and safety policy and significant aspects and impacts have been considered in the development of management objectives.	In compliance	Review of the management objectives as documented in the management plans confirmed that the environmental and health and safety policy and significant aspects and impacts have been considered in the development of management objectives. See Appendix E for Management Plans.

Section	Requirement	Status	Evidence / Comment
4.2.1	Management objectives have been placed in the relevant management plan.	In compliance	Review of the Management Plans (Appendix E) verified that where applicable, management objectives have been placed in the relevant Management Plan.
4.2.2	Targets are specific, realistic, achievable, practical and quantifiable.	In compliance	Review of the Management Plans confirmed that targets were specific, realistic, achievable, practical, and quantifiable. See Appendix E.
4.3.1	Improvement objectives have been based on deficiencies in management controls, new technologies and practices and changes to the IWDF's activities.	In compliance	Review confirmed that where appropriate, improvement objectives were based on outcomes of the internal audits, best practice technologies and any changes to IWDF activities.
4.3.2	Improvement targets are based on improvement objectives.	In compliance	Review of the Management Plans confirmed that where applicable, targets were based on improvement objectives. See Appendix E.
4.3.2	Improvement targets are specific, quantifiable, and achievable and have a start and completion date, personnel allocations and detail the required actions.	In compliance	See Appendix T for 2024 – 2025 Action Plans.
4.3.2	Improvement targets are detailed in the action plans.	In compliance	See Appendix T for 2024 – 2025 Action Plans.

Section	Requirement	Status	Evidence / Comment
Procedure: MP-04 Environmental, Health and Safety Management Program			
4.3	Each management plan details the relevant policy, management goal, management target, management program, improvement program, relevant documents and procedures, forms, performance monitoring, reporting and key responsibilities.	In compliance	Review of Management Plans confirmed that each Management Plan details the required elements. See Appendix E.
4.4	Action plans contain a policy aim, improvement target, improvement objective, action requirements, responsible personnel, completion date and records of achievement.	In compliance	Review of Action Plans confirmed that each plan details the required elements. See Appendix T for 2024 – 2025 Action Plans.
4.5.1	Management plans have been reviewed every 6 months and / or following significant changes to activities at the IWDF or the identification of new significant aspects.	In compliance	Management Plans were reviewed and updated December 2024, and June 2025. See Appendix E.
4.5.1	Changes to management plans have been reported at the Management Review Meetings (MRM).	In compliance	Changes to Management Plans were reported at the MRMs, held 5 December 2024 and 12 June 2025. See Appendix S.
4.5.2	Action plans have been reviewed monthly and progress towards achievement reported at a Management Review Meeting.	In compliance	Action Plans were reviewed monthly at the monthly ongoing management meetings. Progress towards achievement was reported at MRMs. See Appendix S.
Procedure: MP-05 Communications and Public Relations			
5.3	All quality critical communications are legible, verifiable, and correctly formatted.	In compliance	Review of critical communication confirmed that all quality critical communications meet Finance quality requirements and are approved or signed by the appropriate delegated signatory.

Section	Requirement	Status	Evidence / Comment
5.3.1	All written communications are recorded in a manner consistent with MP-06	In compliance	Review of critical communication confirmed that all written communications were recorded in a manner consistent with MP-06.
5.3.2	All verbal communication, whether meetings or telephone conversations, if deemed quality critical, shall be recorded in the minutes of the meeting or meeting notes or recorded on file note. These records shall then be filed, and appropriate action undertaken.	In compliance	Review confirmed that verbal communication, where quality critical, is recorded.
5.4	Complaints have been investigated, non-conformance recorded, and the complaint entered onto the complaints register.	In compliance	Complaints received during the reporting period were responded to and recorded on the Complaints Register. See Appendix H. Two complaints were received from the same complainant on 30 October 2024.
5.5	Large-scale external communications have been referred to the IWDF Project Director.	In compliance	No large-scale external communications were produced during the reporting period.
5.5	Media releases have been developed in consultation with public affairs.	In compliance	No significant media releases were developed during the reporting period, all advertisements during the reporting period were reviewed by Finance's Communication Unit.
Procedure: MP- 06 Document and Data Control			
4.2	Documents have been managed as specified in the document control matrix.	In compliance	Review confirmed that all Finance documents have been managed as specified in the Document Control Matrix.
4.3	Controlled documents have been registered on the Finance Records Management System.	In compliance	All controlled documents are registered on the Finance Records Management System.

Section	Requirement	Status	Evidence / Comment
4.4	Controlled documents have been distributed according to the Document Control Matrix.	In compliance	Review confirmed that controlled documents created during the reporting period have been added to the Document Control Matrix. See Appendix U for Document Control Matrix.
4.5	Revisions of documents have been distributed according to the Document Control Matrix.	In compliance	Revisions of controlled documents have been circulated by email and are saved in the appropriate folder on the FMC server.
4.5	The Document Control Matrix details the document preparer, reviewer, approver, controller, and location for each document.	In compliance	All required aspects are detailed. See Appendix U for the Document Control Matrix.
4.5	All documents have a revision number on cover page and in the header or footer	In compliance	Review confirmed that all documents include a revision number in the footer – there are too many documents to be included as evidence.
4.5	External documents have been reviewed during planning for each disposal operation to ensure they are up to date.	N/A	No disposal operation occurred during the reporting period. However, all external documents such as legislation, standards and codes of practice were reviewed during the review of the IWDF Legal Register.
4.8	Master copies of documents have been stored in the correct location, as outlined in Document Control Matrix	In compliance	Review confirmed that all master copies are stored in electronic format in the appropriate folder on the FMC or Finance server and are saved to Finance's Records Management System.

Section	Requirement	Status	Evidence / Comment
Procedure: MP-07 Management of Records			
4.2.1	**Incoming Correspondence** All incoming correspondence (including critical emails, letters, and other documents) shall be entered into the Finance corporate recordkeeping system. The following meta data will be captured within the electronic record: • Date; • Received by; and • File number.	In compliance	The Finance IWDF Project Director confirmed that critical correspondence is included in the Finance Records Management System.
4.2.2	All critical, outgoing correspondence (including letters, critical emails, faxes, and documents) shall be entered onto the Finance corporate recordkeeping system database. At a minimum, the following information shall be recorded in the Finance corporate recordkeeping system: • Recipient details; • File number; • Author; • Subject; and • Date sent. A unique Finance corporate recordkeeping system number will be allocated, and this number shall be referenced on the correspondence. A copy of all outgoing correspondence shall be placed on the appropriate file.	In compliance	See comment above.

Section	Requirement	Status	Evidence / Comment
4.3	All incoming and a copy of all outgoing communication, including letters, critical emails, faxes, reports, and where required, records of telephone conversations, will be filed on the appropriate Finance Records Management System IWDF file. All IWDF files will then be stored in accordance with the Department of Finance Record Keeping Policy.	In compliance	The Finance Project Director has verbally confirmed that communications are appropriately stored.
4.3.1	Electronic files are routinely backed up as part of the government department backup procedures	In compliance	Interview confirmed that all critical documents are backed up daily as part of the Finance backup routine.
4.4	**Archiving & Storage of Records**		
4.4.1	**Identifying Documents for Archiving** All records will be assessed for their importance in the following areas prior to being filed: • Legislative and regulatory requirements; • Compliance assessments; • Identification and management of environmental aspects and their associated impacts; • Training; • Audit and review records; • Monitoring data; • Details of non-conformances; and • Public information/record. The Finance IWDF Project Director, in consultation with the Senior Records Officer will determine if the document should be retained and the retention period, in accordance with 4.4.3.	In compliance	Auditor reviewed the Department of Finance Retention and Disposal Schedule (approved by State Records Commission March 2014) which includes all appropriate IWDF documents. See Appendix J for extract of IWDF records from R&D Schedule.

Section	Requirement	Status	Evidence / Comment
4.4.2	**Archiving Schedule** The Department of Finance Retention and Disposal Schedule has been developed based on 4.4.1 and details the types of documents which must be retained. This R&D schedule will be reviewed annually, and any new document types added. Any changes to the archiving schedule will be detailed at the Management Review Meeting and a copy of the new schedule sent to the Facility Management Contractor. All records on the archiving schedule will be managed as specified in the schedule.	In compliance	The Department of Finance Retention and Disposal Schedule (approved by State Records Commission March 2014) includes all appropriate IWDF documents. The Finance IWDF Project Director confirmed that the relevant IWDF content in the R&D schedule is reviewed annually. See Appendix J for extract detailing IWDF records from R&D Schedule. See Appendix S MRM Minutes December 2024 Section 4.8 and June 2025 Section 4.7 for evidence of annual R&D Schedule review.
4.4.3	**Establishing Retention Periods** The retention period of specific records is dependent upon: • Regulatory requirements; • Nature of the records; • Potential liability and insurance purposes; and • Physical nature of the record. The retention period of management records will be determined by the Finance IWDF Project Director and shall be in accordance with Finance procedures and documented in the State Records Commission approved Retention and Disposal Schedule.	In compliance	The Department of Finance Retention and Disposal Schedule (approved by State Records March 2014) contains appropriate retention periods. See Appendix J for extract detailing IWDF records from R&D Schedule.

Section	Requirement	Status	Evidence / Comment
4.4.4	**Storage of Records** Archived records shall be retained in a secure and easily accessible location, which prevents deterioration and damage, for a predetermined retention period. Details of all archived records and their storage shall be detailed in the Department of Finance Retention and Disposal Schedule which is kept on the relevant IWDF file, and a copy retained in the IWDF Electronic Document Library. For each record the following information shall be recorded: • Description or title; • Master record location (including file number if applicable); • Officer responsible for retention of that record; and • Retention period. All records shall be assessed by the responsible person for clarity and completeness prior to storage. If records are found to be inadequate, they shall be updated prior to storage.	N/A	All archived records are retained in the DHW records system which meets the requirements of the State Records Act Both the RC and Finance have legislated government archiving requirements under the *State Records Act 2000* which outlines the requirements of government for the keeping of State records by government. Under the current Act, electronic records designated as State archives are to remain in the custody of the agency that created or managed them. As almost all the IWDF records are now in electronic format they continue to be held by the RC and Finance.

Section	Requirement	Status	Evidence / Comment
4.4.5	**Legal Deposit** Finance is required to comply with the *Legal Deposit Act 2012* and deposit the following documents within the State Library of Western Australia: • Annual PCR • IWDF Handbook (as updated) • IWDF 2-page brochure (as updated). All relevant documents shall be assessed by the responsible person for clarity and completeness prior to submission to the State Library of Western Australia. Relevant documents should be provided to the State Library of Western Australia annually.	In compliance	The 2023-2024 PCR was submitted to the State Library on 19 November 2024.
4.5	The waste volume, type, owner, packaging, trench design and reports for each disposal operation have been entered into the IWDF's public access database.	In compliance	Review of the IWDF Waste Inventory Database demonstrated that all required information is available.
Procedure: MP-08 Operational Planning			
5.1	**Inquiry and Initiation** An information package containing waste acceptance guidelines, waste proforma and background information has been sent to all potential waste disposers.	In compliance	Review of waste enquiry folder managed by the FMC confirmed that there were no potential waste disposers, since all enquiries were only seeking to price check or ascertain if the IWDF was still operational.

Section	Requirement	Status	Evidence / Comment
5.1	A completed Waste Proforma has been provided by all waste disposers and forwarded to FMC and RSO.	N/A	Review of waste enquiry folder managed by the FMC confirmed no new Waste Acceptance Proformas were completed and submitted during reporting period.
5.1	A non-refundable deposit and signed waste disposal agreement has been received from all waste disposers.	N/A	No disposal operation occurred during the reporting period.
5.2	**Operational Administration, Planning and Approvals** Weekly project planning meetings have been held during disposal operations.	N/A	No disposal operation occurred during the reporting period.
5.2	Operational procedures and other documentation have been prepared by the FMC and forwarded to the EPA and Radiological Council for approval.	N/A	No disposal operation occurred during the reporting period.
5.3	**Excavation of Trench and Waste Preparation** The condition of the access road has been determined and maintenance organised.	N/A	No disposal operation occurred during the reporting period. However, see Appendix V for October 2024 and April 2025 Access Road condition reports required during ongoing management of the IWDF.
5.3	Inspections of waste packaging have been undertaken.	N/A	No disposal operation occurred during the reporting period.
5.3	If required, the surrounding community and emergency services have been informed of the planned operation including transport routes, dates, and waste consignments.	N/A	No disposal operation occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
5.4	**Waste Loading and Transport** An inspection of the waste loading process has been completed. Where, under the contract, Finance undertakes the transport of waste, then the FMC shall organise transporters, develop the transport procedures, and driver training, in accordance with Operational Procedure OP-05 Waste Loading and Transport.	N/A	No disposal operation occurred during the reporting period.
5.5	**Waste Placement and Acceptance** An audit of the operation's compliance with environmental, health and safety and emergency response operational procedures has been undertaken.	N/A	No disposal operation occurred during the reporting period.
5.5	Certificates of acceptance have been sent to waste disposers.	N/A	No disposal operation occurred during the reporting period.
5.6	**Capping and Rehabilitation** The FMC shall be responsible for ensuring the trench is capped, rehabilitated, and fenced in accordance with Operational Procedure OP-07 Capping, Rehabilitation and Demobilisation.	N/A	No disposal operation occurred during the reporting period.
5.7	**Project Close Out and Completion** A performance and compliance report has been submitted to the EPA.	N/A	No disposal operation occurred during the reporting period.
5.7	A copy of the approved Performance and Compliance report has been forwarded to the CLC and waste disposers.	N/A	No disposal operation occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
5.7	Certificates of disposal have been sent to each waste owner.	N/A	No disposal operation occurred during the reporting period.
5.7	A copy of the Performance and Compliance report has been retained for archiving.	In compliance	Although there was no disposal, as required by the Department of Finance Retention and Disposal Schedule (approved March 2014), a copy of the 2023 – 2024 PCR has been retained for archiving.
5.8.1	**Ongoing Management** The IWDF access road has been inspected every six months.	In compliance	Access road inspection occurred October 2024, and April 2025. See Appendix V for road inspection records.
5.8.2	Reports on the condition of the access road have been completed and forwarded to Finance.	In compliance	Access road inspection occurred October 2024, and April 2025 and were forwarded to Finance with the monitoring report. See Appendix V.
5.8.3	Ongoing groundwater and radiation monitoring have been undertaken.	In compliance	Groundwater monitoring was completed in October 2024 and April 2025. See Appendix F for groundwater monitoring records. Radiation monitoring was completed in October 2022 and is not required until October 2027 unless a radioactive waste disposal operation occurs in the interim.

Section	Requirement	Status	Evidence / Comment
5.8.4	An IWDF Annual Community Meeting has been held.	In compliance	An IACM is scheduled for 16 October 2025, which will mean that it has been held within one year of the approval date of the s.45C (20 October 2024) that requires an annual meeting to be held. In addition, two CLC Meetings were held in the reporting period. These meetings were advertised and open to members of the public, thus satisfying the annual requirement for a meeting to be held. CLC Meetings were held on 25 July 2024 and 8 November 2024. See Appendix M for CLC Meeting Minutes. Appendix M also includes the minutes from 29 February 2024, as they had not been finalised by the CLC in time for inclusion in the 2023-2024 PCR.
5.8.5	A representative of Finance shall attend the meeting and act as the Chairperson. A representative of the FMC shall attend the meeting.	In compliance	A Finance representative attended the CLC meetings and acted as chairperson. A representative of the FMC attended the CLC meetings. See Appendix M for CLC Meeting Minutes which include attendance information. The scheduled IACM will also include the required personnel as a minimum.

Section	Requirement	Status	Evidence / Comment
Procedure: MP-09 Training			
4.2	**New Employee Induction** All new Finance personnel involved with the management of the IWDF must attend IWDF specific training sessions. These shall include, but not be limited to; • Discussions on the IWDF; and • Briefings on the management system. The briefings on the management system shall provide details on; • The requirements of the management system; • The importance of complying with the management system; • The potential environmental impacts of their position; and • How to incorporate this knowledge into their daily work practices.	In compliance	Training for the new Finance IWDF Contract Manager (Michelle Spencer) was undertaken on 27 May 2025. The IWDF Training Register and IWDF-Form-48 for Michelle were sighted by the auditor.
4.3	**Identification of Training Requirements** A competency plan has been developed for each position	In compliance	Finance undertakes Professional Development Plan assessments with staff three times every twelve months, that reviews competency against the requirements and deliverables of the role. The IWDF Contract Manager role also has a distinct Job Description Form (JDF) that applicants are assessed against before being deemed suitable to undertake the role.
4.3	A training schedule has been developed based on the competency plans.	N/A	See above.

Section	Requirement	Status	Evidence / Comment
4.3	Prior to visiting the IWDF Finance personnel must complete the General Safety Induction as required by FMC Procedure FMP – 03.	In compliance	The auditor noted that four visitors to the site from Finance on 16 October 2024 had completed the General Safety Induction within the 3-year timespan allowed between visits.
4.4	**Review of Training Requirements** Annual training reviews have been completed for each staff member.	In compliance	Finance undertakes Professional Development Plan assessments with staff, three times every twelve months, that reviews competency against the requirements and deliverables of the role.
4.4	Where a job scope has been significantly altered, the employee has failed to meet requirements, a major accident has occurred or substantial changes to the management system have been undertaken, training needs have been re-evaluated.	N/A	Not required as no relevant events occurred during the reporting period.
4.5	**IWDF Contracted Employees Training Requirements** The qualifications of contractors to Finance shall be confirmed prior to appointment, as part of the tender selection process and in accordance with MP-10 Procurement. The specific qualifications and training requirements needed to undertake the work shall be detailed in the tender document.	N/A	No open tender process occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
4.5	Finance will provide the FMC and other contractors (as necessary) training on the IWDF Management Systems after major changes or revisions to the system. It is the responsibility of the contractors to ensure that their employees and sub-contractors are appropriately trained and qualified to undertake the requirements of the IWDF Management Systems.	In compliance	No major revisions to the IWDF Management System occurred and no Finance contractors (other than the FMC) required an understanding of the IWDF Management System during the reporting period. However, seven people attended the site with the FMC, one conducted a botanical survey, one serviced the generator, one graded the firebreak, and four assisted in removing rubbish and disused equipment from the site. These people were given a brief introduction to the site and were directly supervised by the FMC ensuring adherence to the requirements of the IWDF Management System where required.
4.6	**Training Records** All training has been recorded on a Training Record sheet and kept on file.	In compliance	Review of the IWDF Training Register confirmed that all training has been recorded for Michelle Spencer (IWDF Management System training and General Safety Induction training), for Erin Clinch, Kudzi Chigwanda, Eleanor Hopkins and Tegan Gibson from Finance (General Safety Induction training), and Ping Liu and Cameron Garside from the FMC (General Safety Induction training).

Section	Requirement	Status	Evidence / Comment
Procedure: MP-10 Procurement			
6.1	**Conflicts of Interest** All staff involved in a procurement for the IWDF must declare any conflicts of interest (whether actual, potential or perceived) to the Finance IWDF Project Director as soon as they become known. For procurements with an estimated value of $50,000 or more including GST, staff must complete a Declaration of Confidentiality and Interest Form prior to the commencement of a procurement process and submit the form to the Finance IWDF Project Director. For procurements valued less than $50,000 including GST, conflicts of interest must be declared, on presentation of quotes to the Finance IWDF Project Director. If there are any changes to conflicts of interest throughout the procurement process, this should be declared as soon as they are known.	N/A	The Finance IWDF Project Director confirmed there were no conflicts of interest declared for procurements valued at less than $50,000.00. There were no procurements valued at $50,000.00 or more.
6.2	**Recordkeeping** It is a requirement to maintain a level of documentation commensurate with the scale, scope, value and risk of the procurement, capturing evidence of agreements made with suppliers, including during contract management activities.	In compliance	Documentation has been sighted by the auditor showing that Finance and the FMC have maintained a level of documentation that is commensurate with the scale, value, and risk of the procurement, capturing evidence of agreements made with suppliers including during contract management activities.

<table>
<tr><th>Section</th><th>Requirement</th><th>Status</th><th>Evidence / Comment</th></tr>
<tr><td>7.1</td><td>Identifying Requirements

The following steps shall be used to identify goods and services requirements:

• Identify required outcome(s);
• Investigate potential options to achieve the required outcome(s);
• Establish goods or services required to achieve this outcome; and
• Determine if these goods and services are necessary.</td><td>In compliance</td><td>Documentation has been sighted by the auditor showing that Finance and the FMC have followed and documented the appropriate steps to identify goods and services requirements.</td></tr>
<tr><td>7.2</td><td>Minimum Competitive Requirements

The following table sets out the minimum competitive requirements that must be adhered to at different monetary values.

<table><tr><th>Monetary Value</th><th>Minimum Competitive Requirements</th></tr><tr><td>Up to $50,000</td><td>Direct sourcing</td></tr><tr><td>Between $50,000 and $250,000</td><td>Limited sourcing</td></tr><tr><td>Above $250,000</td><td>Open advertisement</td></tr></table>
The monetary value is based on Total Estimated Value of the procurement, which includes any extension options and GST.

When seeking written quotes, a sufficient number of suppliers should be asked to provide a quote. Generally, three to five suppliers should be asked to quote, however this number may be higher in markets with more competition.</td><td>In compliance</td><td>Documentation has been sighted by the auditor showing that Finance and the FMC have met the minimum competitive requirements and kept the appropriate documentation.</td></tr>
</table>

Section	Requirement	Status	Evidence / Comment
	The minimum competitive requirements do not apply when purchasing from a: • Common Use Arrangement or State agency led Standing Offer, in accordance with the Buying Rules; or • Registered Aboriginal Business or Australian Disability Enterprise.		
7.3	**Approval** Purchases are to be approved by an Authorised Officer from Finance in accordance with its Delegation and Authorisation Register. The request for approval must include the following information at a minimum: • Description of the purchase/specification; • Name of suppliers and their quoted prices; • Any relevant information including warranty details, service and support etc.; and • Recommendation and value for money justification.	In compliance	Documentation has been sighted by the auditor showing that all purchases are appropriately approved, and Finance has kept the appropriate documentation.
7.4	**Request Documentation** Purchases valued at $50,000 or greater will require documentation to clearly detail the items below. The format in the Request for Quote or Request for Tender templates should be followed. • Request specification; • Evaluation criteria; • Closing date and time; • Contract term; and • Contract terms and conditions.	N/A	No purchases at or above $50,000.00 occurred during reporting period.

Section	Requirement	Status	Evidence / Comment
7.5	**Evaluation of Responses** For purchases above $50,000, an evaluation panel, consisting of two or more members including the Finance IWDF Project Director, shall be formed. A procurement process facilitator will be nominated from the panel members to lead the evaluation process. Each member of the panel will be required to independently review the responses and score against the specified evaluation criteria. The panel shall then convene and make a joint decision regarding the preferred respondent based on these scores. An evaluation report is to be prepared, outlining the findings and recommendation of the evaluation panel. The report is to be submitted to the Authorised Officer who will provide their approval. A copy of the evaluation report shall be retained as a record. Non-conforming responses, including those received after the closing time, or those which do not meet the specified mandatory prequalification requirements will be excluded from consideration.	N/A	No purchases above $50,000.00 occurred during reporting period.
7.6	**Contract Award** Following approval of the recommendation in the evaluation report (for purchases $50,000 or more) by the Finance Authorised Officer in accordance with the Delegation and Authorisation Schedule, a letter of award will be sent to the successful respondent.	N/A	No purchases above $50,000.00 occurred during reporting period.

Section	Requirement	Status	Evidence / Comment
7.7	**Managing Contracts** Once a contract is in place, various measures shall be implemented to ensure that the contracted goods or services are being provided in accordance with the conditions of the contract. This will include: • Managing supplier relationships and resolving or escalating disputes as appropriate; • Monitoring and managing the budget and timeframes; • Confirming the quality and receipt of goods or services; • Validating and processing supplier invoices; • Reviewing variations for value for money; and • Keeping records of key documentation and correspondence. Approvals will be sought from the Authorised Officer from Finance as required by the Delegation and Authorisation Register. Where a procurement has a Total Estimated Value of $5 million and above, a Contract Management Plan must be developed, unless otherwise exempted through the relevant process.	In compliance	The FMC performance against Contract Management Plan is provided at the MRMs. See Appendix S Section 15.2 in MRMs 21 and 22. There was one short-term contract for PGV Environmental in October 2024 to undertake a flora and vegetation survey. A short-term contract was undertaken by Tellus Holdings to remove rubbish from site and to grade the firebreak. A mechanic from Hampton Transport serviced the genset on-site. The FMC confirmed that these services were delivered in accordance with the specifications, timeframes and prices stipulated in the quotes.
Procedure: MP-11 Management Audits			
4.1	**Audit Frequency** Annual audits have been undertaken.	In compliance	This audit table is evidence of internal audit for the reporting period.
4.1	An Internal Management Audit Schedule has been prepared in July of each year.	In compliance	The audit schedule was prepared by FMC System Manager in July 2024 and updated June 2025. See Appendix W.

Section	Requirement	Status	Evidence / Comment
4.3	**Audit Planning**		
4.3.1	**Defining the Scope** All audits on the Finance management system shall be undertaken in accordance with the following sequence: • Planning; • Execution; and • Reporting and follow up.	In compliance	The required sequence was followed and was reported at the MRMs. See Appendix S Section 6 of MRM minutes 21 and 22.
4.3.2	**Audit Team Members** Audits have been conducted by an audit team which contains a qualified auditor.	In compliance	Audit team included a qualified auditor. Leanne Morton, who has conducted all of the audits to date, has acted as the Audit Lead and provided input and direction.
4.3.3	**Preparing an Audit Protocol** An audit protocol has been prepared prior to the audit. Similar types of protocols shall be used for each audit to ensure consistency of approach.	In compliance	Audit protocol was prepared in the form of this audit table. The audit table format, updated as required, is used each year.
4.3.3	Staff have been notified at least 2 weeks prior to the audit.	In compliance	Relevant staff were notified more than two weeks prior to audits taking place. All IWDF personnel have access to the audit schedule. Notification also occurred at the monthly management meetings.
4.3.3	An audit report log has been completed.	In compliance	A completed Audit Register was sighted by the auditor.

Section	Requirement	Status	Evidence / Comment
4.3.3	Any non-conformances determined have been recorded in a Corrective Action Request (CAR).	In compliance	There have been no non-conformances in this audit. During this reporting period CAR 007 was closed-out on 12 June 2025 and CAR 009 was closed-out on 5 August 2024.
4.4	**Audit Reporting and Follow-up**		
4.4.1	**Management System Audits** Audit findings have been documented in an audit report and logged on the audit report register. The audit report shall contain the following: • Management system conformities and nonconformities; • Records of CARs resulting from the audit; • Follow-up of previous audit findings; • Conclusion and recommendations; and • Effectiveness of the management system in achieving objectives and targets.	In compliance	Audit findings have been documented in an audit report (this PCR Report) and logged in the Audit Register sighted by the auditor. The effectiveness of the Management System is addressed at Section 6 of the MRM 21 and 22. See Appendix S.
4.4.1	The audit report has been forwarded to the Finance Project Manager and distributed to personnel.	In compliance	Audit Reports are included in the draft PCR provided to DHW IWDF Project Director for review.

Section	Requirement	Status	Evidence / Comment
4.4.2	**FMC Audits** A qualified auditor shall supervise auditing of the FMC Procedures in accordance with FMP-04, Auditing and Compliance. Following the preparation of an audit report the IWDF Finance Project Director shall meet with the FMC and their audit team to discuss the findings of the audit report. Finance will also undertake a regular review of the FMC performance. Finance will monitor FMC performance on an ongoing basis and report the outcome at the monthly management meetings.	In compliance	A qualified auditor supervised an audit of the FMC procedures. See Table 7 of this PCR Report. The PCR is a standing agenda item at monthly management meetings including discussion of audit findings. Finance undertakes a review of the FMC Performance which is reported at the MRM. See Section 15 of MRM Minutes at Appendix S.
4.5	**Performance and Compliance Auditing and Reporting** A Performance and Compliance report was prepared and forwarded to the EPA within three months of the conclusion of a disposal operation.	N/A	No disposal operation occurred during the reporting period. This PCR will be forwarded to RC and DWER to fulfil compliance reporting requirements.
4.5	Internal performance and compliance audits were undertaken in accordance with the audit schedule each year.	In compliance	Tables 6, 7 and 8 of this PCR detail the results of the internal performance and compliance audits for the reporting period.
Procedure: MP-12 Management Review			
4.1	**Management Review Meetings** Management Review Meetings (MRM) have been held twice yearly.	In compliance	MRMs were held on 5 December 2024 and 12 June 2025. See Appendix S for MRM Meeting Minutes.

Section	Requirement	Status	Evidence / Comment
4.1	Personnel required to attend the meeting are: • IWDF Project Director – Finance; • IWDF Project Director – FMC; • IWDF Contract Manager – Finance; • IWDF Project Manager – FMC; and • IWDF Radiation Safety Officer.	In compliance	All roles were present at the December 2024 MRM except the RSO, who was substituted by the new Radiation Specialist. For the June 2025 MRM, all roles attended except the RSO who was unavailable. However, required topics were discussed between the IWDF Project Director, the FMC and the RSO prior to the meeting. See Appendix S for MRM Minutes detailing attendance.
4.2	**Review Preparation** The agenda and relevant background information has been provided to all personnel prior to the Management Review Meeting.	In compliance	Agendas were provided, via email, to the Management Team on 21 November 2024 and 1 June 2025. See Appendix X for Meeting Agendas.
4.3	**Issues to be Considered** Management review meetings have addressed the suitability of Finances policies, achievement of objectives and targets, EHSM program and corrective and preventative actions.	In compliance	MRMs addressed the required elements. See Appendix S.
4.3	Management Review Meeting agendas address the topics: • Suitability of the Policy; • Achievement of Objectives and Targets; • Compliance with the Environmental Management Program; • Effectiveness of the EMS in terms of: ▪ Environmental performance; ▪ Implementation and suitability; ▪ Adequacy;	In compliance	See Appendix X for MRM Meeting Agendas.

Section	Requirement	Status	Evidence / Comment
	▪ Continual improvement; • Corrective and preventative actions. The review shall include, but not be limited to the following agenda items: • Policies, objectives, targets, and management plans; • Changes in external drivers and situations; • Management manual updates, including polices, objectives and targets; • Audit results; • Management procedures updates/improvements; • Internal and external management audits results; • Non-conformance and Corrective and Preventive Actions; • Future goals and improvements to the management system; • Changes to aspects and impacts; • Performance against management plans; and • Staff training needs and training effectiveness.		
4.3	The responsibility for the implementation of changes or actions has been assigned during Management Review Meetings and is recorded in the minutes.	In compliance	See Appendix S.
4.3	Follow up on the achievement of these improvements and actions has been completed.	In compliance	Actions from the previous MRM meeting are addressed in Section 3 of the MRMs. See Appendix S.

Section	Requirement	Status	Evidence / Comment
4.3	Minutes of Management Review Meetings have been recorded and distributed.	In compliance	Draft MRM Minutes were sent via email to the Management Team for review/input. Final minutes were then distributed to the Management Team. See Appendix S.
Procedure: MP-13 Control of Non-conformances and Corrective and Preventative Action			
4.2	**Reporting non-conformances** Following the identification of a non-conformance a CAR has been completed and forwarded to the Finance IWDF Project Director.	N/A	There have been no new non-conformances in this reporting period. Although CAR 007 was closed-out on 12 June 2025, and CAR 009 was closed-out on 5 August 2024 (see Section 5.8.4 of MP-08 above).
4.3	**Reporting Non-conformances** Corrective actions and a program for their implementation have been developed for each CAR and reviewed regularly until the action is implemented.	N/A	There have been no new non-conformances in this reporting period.
4.3	Information regarding each CAR has been entered onto the CAR register.	N/A	There have been no new non-conformances in this reporting period.
4.3	The progress of each CAR has been presented at a Management Review Meeting.	In compliance	The close-out of CARs 007 and 009 were discussed at the MRM held 5 December 2024. CAR 007 was closed-out on 12 June 2025, and CAR 009 had already been closed-out on 5 August 2024 (see Section 5.8.4 of MP-08 above). See Appendix S for MRM Minutes.

Section	Requirement	Status	Evidence / Comment
4.4	**Identification of Potential Non-conformances** The discovery of inefficiencies and potential non-conformance by staff have been recorded on suggestion sheets and forwarded to the Finance IWDF Project Director.	N/A	No suggestion sheets were forwarded to the Finance IWDF Project Director.
4.4	Suggestion sheets have been reviewed and valid changes implemented.	N/A	No suggestion sheets were forwarded to the Finance IWDF Project Director.
4.4	Where a suggestion has not been accepted a written response has been provided to the author detailing why.	N/A	No suggestion sheets were forwarded to the Finance IWDF Project Director.
4.4	All suggestions and their outcomes have been documented at a Management Review Meeting.	N/A	No formal suggestions have been received during reporting period.
5	**Records** All CARs and suggestion forms have been retained on the appropriate file.	In compliance	No suggestions forms have been received. Review confirmed that all previous CARs have been retained in the appropriate file.
6	**Reporting** All CARs and suggestions and their actions, implementations and responses shall be detailed at Management Review Meetings.	In compliance	See Appendix S for MRM Minutes.

4.2.2 FMC IWDF Management System Compliance Audit

Table 7 presents the results of the July 2024 to June 2025 internal audit of the FMC implementation of the requirements of the FMC EHSQMS.

As no disposal operation occurred during the reporting period, procedures related to specific disposal activities (trench excavation, preparation of waste for transport, transport of waste, waste delivery, trench capping, and disposal close-out) were not audited.

FMC compliance with the FMC EHSQMS was good with no non-compliances recorded.

Table 7
FMC Environmental, Health and Safety and Quality Management System 2024 – 2025 Internal Compliance Audit of Procedures

FMC Operational Procedures

Section	Requirement	Status	Evidence / Comment
OP-01 Assessment of Application for Disposal			
Purpose: Addresses the management of environmental and safety impacts associated with the initial application of waste owners to dispose of wastes at the IWDF and assessment of these applications.			
5.1	**Preliminary discussion of inquiries** Finance shall notify the FMC Project Manager and Operations Manager of initial inquiries by waste owners. The following shall be discussed with the waste owner by the FMC: • Nature of waste (chemical composition and physical form); • Packaging of the waste; • Approximate quantities of waste; • Approximate schedule for disposal; • Requirements for application to dispose (information to be provided to the waste owner, such as Acceptance Criteria); and • Indicative costs.	In compliance	Review of the FMC Waste Enquiries electronic folder demonstrated that where Finance notified the FMC of an initial enquiry, a preliminary phone conversation was held with the waste owner to provide an overview of disposal at the IWDF. Due to waste owner 'commercial-in-confidence' evidence cannot be provided.
5.2	**Provision of waste acceptance guidelines and proforma** The FMC Project Manager shall ensure that the Guidelines for disposal at the IWDF are provided to waste owners enquiring about disposal. The FMC Project Manager or Systems Manager must provide the most up-to-date version of the Guidelines to waste owners.	In compliance	Review and interview confirmed that all waste owner enquiries were forwarded to the FMC by Finance. However, no enquiries progressed beyond being provided with a rough price guide and verbal information.

Section	Requirement	Status	Evidence / Comment
5.3	**Assessment of applications to dispose** Finance, the FMC Project Manager, the Operations Manager, and the RSO (if radioactive waste) shall assess all applications to dispose of waste at the IWDF. Applications shall be received in the form of a completed *Waste Acceptance Proforma and Packaging & Transport Proforma* as provided in the Guideline documents. Assessment shall include the following: • Comparison of details provided by the waste owner on the nature, packaging, and quantity of the waste, as well as alternatives to disposal, with Waste Acceptance Criteria. • Inspection of the waste (where considered to be necessary, in accordance with Operational Instruction OI-01 *Waste Inspection*).	N/A	No applications to dispose of waste were received during the reporting period.
5.4	**Provision of project cost information** Upon request, the FMC Project Manager and Operations Manager shall provide cost information to Finance. Cost information shall include: • Trench excavation costs (based on likely waste quantity or a range of quantity scenarios); • FMC management and supervision costs (based on waste quantity and field schedule); and • Other costs as requested by Finance.	In compliance	Where applicable, after discussion with Finance, preliminary waste disposal costs have been provided by the FMC. Due to waste owner 'commercial-in-confidence', evidence was sighted but has not been included.

Section	Requirement	Status	Evidence / Comment
6	**Reporting** The results of assessment activities shall be documented by the FMC Project Manager (or delegate) and placed on file (as per FMC Management Procedure FMP-02 *Record Management*.) Assessment results shall be provided to Finance upon request. These may be incorporated into the *Operation Environmental and Waste Acceptance Procedures*.	N/A	Review of the FMC Waste Enquiries folder demonstrated that no assessments were undertaken during the reporting period.
OP-02 Operational Administration, Planning and Approvals			
Purpose: Addresses the management of environmental and safety impacts and documentation associated with the planning and operational phases.			
Not required as no disposal operation occurred during reporting period.			
OP-03 Excavation of Disposal Trench			
Purpose: Addresses the management of environmental and safety impacts associated with the excavation of a disposal trench at the IWDF.			
Not required as no disposal operation occurred during reporting period.			
OP-04 Waste Preparation for Disposal			
Purpose: Addresses the management of environmental and safety impacts associated with the preparation of waste for transport to, and disposal at the IWDF.			
Not required as no disposal operation occurred during reporting period.			
OP–05 Waste Loading and Transport			
Purpose: Addresses the management of environmental and safety impacts associated with the loading and transport of waste to the IWDF.			
Not required as no disposal operation occurred during reporting period.			

Section	Requirement	Status	Evidence / Comment
OP–06 Waste Delivery, Acceptance and Disposal			
Purpose: Addresses the management of environmental and safety impacts associated with the delivery, acceptance, and placement of waste at the IWDF.			
Not required as no disposal operation occurred during reporting period.			
OP-07 Capping, Rehabilitation and Demobilisation			
Purpose: Addresses the management of environmental and safety impacts associated with the capping of the disposal trench at the IWDF and subsequent demobilisation from site.			
Not required as no disposal operation occurred during the reporting period.			
OP–08 Operation Close-out			
Purpose: Addresses the management of environmental and safety impacts associated with the close-out of the disposal operation at the IWDF.			
Not required as no disposal operation occurred during the reporting period.			
OP–09 Ongoing and General Management			
Purpose: Addresses the management of environmental and safety impacts associated with the ongoing operation of the IWDF. Management occurs irrespective of whether specific waste disposal activities are being undertaken at the site.			
5.1	**Project Administration** The FMC Project Manager shall manage the finances of the project and invoice Finance in accordance with the Finance cost codes. The FMC PM shall inform relevant subcontractors of the cost codes required by Finance.	In compliance	IWDF FMC task summary and cost projection, against agreed cost codes, for July 2025 – June 2026, was provided to Finance on 15 May 2025 and approved on 17 June 2025.

Section	Requirement	Status	Evidence / Comment
5.2	**Tendering** Upon request by Finance, the FMC Operations Manager, or the FMC Project Manager shall assist in the engagement of a Contractor to undertake activities at the site.	N/A	No tenders were required during the reporting period.
5.3	**Infrastructure Development** Upon request by Finance, the FMC Project Manager or Operations Manager shall aid in the development of infrastructure at the IWDF. Reference should be made to existing infrastructure plans, where applicable.	In compliance	The water purification system was replaced in October 2024. A new lock box was installed for the gate key, plastic plumbing to the shower was replaced and a protective shade cloth installed. The posts for the two Stop signs at the intersection of the access road and the road to the camp were cemented into position and the actual signs were replaced in November 2024. The remaining cement plinths were removed and replaced by stainless steel plinths in October. Four new fire extinguishers replaced existing extinguishers that were obsolete in October. A new “T” junction sign was installed in November. The disused 1000L overhead diesel tank was removed together with some other rubbish in November 2024, and the firebreak was regraded at the same time.

Section	Requirement	Status	Evidence / Comment
5.4	**Community Liaison** A**n** IWDF Annual Community Meeting (IACM) shall be held once a year. A representative of Finance shall attend the meeting and act as the Chairperson. A representative of the FMC shall also attend the meeting.	In compliance	An IACM is scheduled for 16 October 2025 which will mean that it has been held within one year of the approval date of the s.45C (20 October 2024) that requires an annual meeting to be held. In addition, two CLC Meetings were held in the reporting period. These meetings were advertised and open to members of the public, thus satisfying the annual requirement for a meeting to be held. CLC Meetings were held on 25 July 2024 and 8 November 2024. See Appendix M for CLC Meeting Minutes. Appendix M also includes the minutes from 29 February 2024, as they had not been finalised by the CLC in time for inclusion in the 2023-2024 PCR.
5.5	**Update of Legislation** The FMC Project Manager shall ensure that necessary legislative updates are incorporated into subsequent IWDF documentation, in accordance with Finance MP-02 *Applicable Laws, Regulations and Other Requirements*.	In compliance	The IWDF Legal Register was reviewed and updated in December 2024 and May 2025. Where applicable, updates were incorporated into IWDF system documentation. See Appendix R.

Section	Requirement	Status	Evidence / Comment
5.6	**Review of Good Practice** The FMC Project Manager shall aid Finance in undertaking regular good practice reviews. They will then ensure that necessary changes are incorporated into project planning and documentation. Review of good practice may include review of national and international developments in the following: landfill capping, hazardous waste management, radioactive waste management, alternative treatment technologies and landfill management.	In compliance	Formal review of good practice was undertaken in December 2024 and June 2025. A review of the IWDF Document Library provided evidence that relevant new or updated state, national and international documents were included.
5.7	**Site Visits** During periods when disposal operations are not being undertaken, regular site visits shall be undertaken by FMC personnel. These will be done at the direction of Finance. Site visits shall coincide with monitoring and maintenance requirements (see below), as a minimum. Site visits shall be recorded using a *Site Visit Checklist*, (IWDF Form 52).	In compliance	See Appendix G for Site Visit Checklists recorded on IWDF-Form-52.

Section	Requirement	Status	Evidence / Comment
5.8	**Site start-up procedure** Start-up procedure for the camp is described below: 1. Turn on water at base of plastic water tank (handle on north side closest to kitchen). 2. Open panel of genset on west side (facing seatainer) and place key in ignition. 3. Turn battery isolator on and turn the key to start genset. 4. Allow generator 30 seconds to settle into idle, then switch power to buildings on. 5. If power does not go through to the buildings, check the free-standing power board to ensure power to the appropriate zones is on. 6. Turn on the gas bottle which provides gas to the stove and oven. Note – turn off genset before turning off the water and isolating the battery. Turn off gas before leaving site. Lock all doors.	In compliance	FMC Operations Manager confirmed this procedure was followed for each visit in the reporting period.
5.9	**On-going Monitoring** Monitoring shall be undertaken in accordance with the agreed *monitoring schedule*. Monitoring (generally six-monthly) may include: • Groundwater monitoring (Environmental Procedure *EP-03 Environmental Monitoring Management* and Instruction *EI-01 Groundwater Monitoring*); • Radiological monitoring (Radiation Procedure *RP-01 Radiation Management* and Instruction *RI-01 Gamma Radiation Monitoring*); • Trench capping monitoring (Environmental Instruction *EI-03 Capping Monitoring*); and • Rehabilitation monitoring (Environmental Procedure *EP-05 Rehabilitation Management* and Instruction *EI-04 Rehabilitation Monitoring*).	In compliance	Ongoing monitoring was completed, and records were reviewed by the auditor. See Appendix F for groundwater monitoring results, Appendix N for rehabilitation monitoring records, and Appendix O for capping monitoring records. Radiation monitoring was not required during the reporting period.

Section	Requirement	Status	Evidence / Comment
5.10	**Site Investigations** The FMC Project Manager shall ensure that sufficient data is available to provide support for the management of the IWDF. Such data may include: • Geological drilling data (geological unit thicknesses and depth to bedrock); • Surface topographical data (aerial photography and contour data); • Climate data; • Groundwater monitoring data (from groundwater monitoring bores); and • Radiation monitoring data. If it is deemed that insufficient data are available to provide support for the management of the site (e.g., too few monitoring bores to adequately monitor potential groundwater impacts due to expansion of the disposal area), the FMC Project Manager shall make recommendations to Finance for further investigation.	In compliance	Review of available data and interview with the FMC Operations Manager confirmed that data were considered adequate for the management of the IWDF during the reporting period. All available data are stored and controlled in the IWDF Document Library.
5.11	**Infrastructure and Equipment Maintenance** The Operations Manager shall ensure that equipment and facilities (listed on IWDF-Forms-41 and 42) at the IWDF undergo regular maintenance, in accordance with FMC Management Procedure *FMP-06 – Control and Maintenance of Equipment*. Equipment maintenance shall be recorded using IWDF-Forms 40, 41 and 42. The Operations Manager shall ensure that sufficient water, fuel, and food supplies are maintained at the site. The Operations Manager shall maintain a *Dangerous Goods Storage Record* for fuels and other hazardous materials stored at the site (IWDF-Form-51).	In compliance	As no disposal operation occurred during the reporting period, equipment and facilities maintenance was recorded on the Site Visit Checklist. See Appendix G for Site Visit Checklists and see Appendix Y for *Dangerous Goods Storage Records* for October 2024 and April 2025 (IWDF-Form-51).

Section	Requirement	Status	Evidence / Comment
5.12	**Access Road Maintenance** The access road shall be inspected regularly (e.g., every 6 months during monitoring visits). Road inspection shall be recorded using the Access Road Condition Report Form (IWDF-Form-44).	In compliance	See Appendix V for Access Road Condition Reports.
6	**Records and Reporting** The results of on-going activities shall be documented by the FMC Project Manager and/or Operations Manager and placed on file (as per FMC Management Procedure *FMP-02 – Record Management*). The FMC Project Manager shall ensure that results of all environmental and other monitoring are forwarded to Finance within one month of the monitoring event. All results are also included in the annual PCR. Letters or records shall be submitted to Finance detailing recommendations for additional investigations or site activities.	In compliance	Monitoring records were provided to Finance with the monthly report post the site visit. All records are kept in the IWDF Document Library. Site visit and monitoring records are also included in the annual PCR. See Section 5 of this PCR.
OP-10 Operation Site Management			
Purpose: Must be followed for general management at the IWDF site during disposal operations.			
Not required as no disposal operation occurred during the reporting period.			
OI–01 Waste Inspection			
Purpose – Must be followed during inspections of waste proposed for disposal at the IWDF.			
Not required as no inspections of waste were completed during the reporting period.			

FMC Management Procedures

Section	Requirement	Status	Evidence / Comment
FMP- 01 Document and Data Control			
Purpose – This procedure addresses document and data control at the IWDF and at the Facility Management Contractor (FMC) office(s), in accordance with the Department of Finance policies for the IWDF and Finance Management Procedure *MP-06 Document & Data Control*.			
5.1	**Finance Document Control Requirements** Finance document control requirements are outlined in *Finance-MP-06 – Document and Data Control*. The FMC Systems Manager shall ensure that all Finance controlled documents, as defined in the IWDF *Document Control Matrix* (see MP-06) are controlled in accordance with the matrix. Other FMC-controlled documents shall be controlled in accordance with the procedures outlined below.	In compliance	Review confirmed controlled documents were stored on the Finance Records Management System, FMC server in the IWDF Document Library or appropriate IWDF project folder. See Appendix U for the IWDF Document Control Matrix.
5.2	**FMC Controlled Documents** Documents defined as Controlled Documents are given in the FMC IWDF Document Control Matrix. The following are examples of internally generated controlled documents: guidelines, procedures, manuals, and construction specifications (designs). The following are examples of externally generated controlled documents: Australian Standards and Codes of Practice. Controlled documents shall be prepared, reviewed, revised, approved, controlled, stored, and distributed as outlined in the *FMC IWDF Document Control Matrix*. The person responsible for the control (storage and distribution) of documents is referred to as the Document Controller.	In compliance	Review confirmed that controlled documents were prepared, reviewed, revised, approved, controlled, stored, and distributed as outlined in the IWDF Document Control Matrix. See Appendix U. Where documents are prepared by the FMC, emails from Finance approving the document were sighted by the auditor.

Section	Requirement	Status	Evidence / Comment
5.3	**Document Registration** FMC-controlled project documents shall be registered by the preparer with the Systems Manager. The System Manager shall use the *FMC IWDF Document Register* (IWDF-Form-16) to reflect the status of all controlled documents. An FMC identifier shall be used for FMC controlled documents (e.g., FMC procedures). Separate registers may be produced for each disposal operation and for ongoing general management. Separate registers may also be produced for different types of documents, such as: • FMC Procedures • FMC QA Forms • Manuals • Radiation Reports.	In compliance	Review confirmed all FMC prepared documents have been allocated a unique document number, e.g. DFI2020-001-0PCR Revision 1. Where necessary, a document number was obtained from Finance. This is demonstrated in Appendix M CLC Minutes. It should be noted that the FMC, uses Project Document Control Registers for all projects. These Document Control Registers contain similar elements as IWDF-Form-16 therefore the substitute was considered suitable.
5.4	**Distribution of Controlled Documents** Documents produced by the FMC on behalf of Finance shall be distributed as outlined in the *IWDF Document Control Matrix*.	In compliance	Review of controlled documents produced in the reporting period indicate that they were distributed as described in the IWDF Document Control Matrix.

Section	Requirement	Status	Evidence / Comment
5.5	**Document Revision** Changes to internally generated controlled documents shall be prepared, reviewed, revised, approved, controlled, stored, and distributed as outlined in the *IWDF Document Control Matrix*. Controlled documents shall use numerical revision codes. For all documents issued as drafts, the revision should include a point e.g., 1.1. The next whole number should then be used for approved documents. Electronic documents shall, as a minimum, be dated, with reference to the fact that any printed copy is uncontrolled. A request for a change to a document shall be made in writing to the Systems Manager/Document Controller (e.g., via email or using *a System Corrective Action Request*, IWDF-Form-10).	In compliance	A review of the controlled documents prepared during the reporting period verified that all documents were prepared, reviewed, revised, approved, controlled, stored, and distributed, where required, as outlined in the IWDF Document Control Matrix.
5.6	**Document Review and Approval** All controlled documents produced by the FMC shall be reviewed by the FMC Project Manager and other appropriate technical managers. This must always be done prior to the document being released to Finance, as shown in the *IWDF Document Control Matrix.* Document approval shall be indicated by email, or signature (if hardcopy). Electronic documents shall be updated to show the initials of the reviewer.	In compliance	A random sample of documents and associated folders were reviewed which verified that documents have been reviewed by the FMC IWDF Project Manager or Finance IWDF Project Director before they are provided to Finance. Where electronic documents have been reviewed/approved via email, the email is saved in the appropriate FMC Management System email folder.

Section	Requirement	Status	Evidence / Comment
5.7	**Obsolete Documents** When documents are no longer required, or have been superseded by subsequent versions, they shall be made obsolete. Upon instruction of the document controller, the document will be moved to the System archive folder. Superseded documents shall be retained in accordance with Management Procedure *FMP-02 Record Management*.	In compliance	Random review confirmed that superseded electronic system documents are archived in an archive folder on the FMC MANS server.
5.8	**Location of Documents** The master copies of documents shall be stored as outlined in the FMC Document Control Matrix. External reference documents (such as Codes of Practice, Australian Standards, etc.) shall be reviewed, as a minimum, during the planning phase of a disposal operation. This ensures up-to-date versions are referenced in project documentation and that up-to-date copies are distributed.	In compliance	Random review confirmed master copies of controlled documents are stored in the appropriate electronic folder or for external documents in the IWDF Document Library on the FMC server.
FMP- 02 Records Management			
Purpose - This procedure addresses the control of all records at the IWDF and at the Facility Management Contractor (FMC) office(s). These documents are controlled in accordance with the Department of Finance policies for the IWDF and the Finance Management Procedure MP-07 Management of Records. This procedure aims to ensure that records associated with the management of the IWDF are legible, accessible, traceable, and protected against loss or damage.			

Section	Requirement	Status	Evidence / Comment
5.1	**Finance Record Control Requirements** Finance record management requirements are outlined in *Finance-MP-07 – Management of Records*. Procedures for identifying records for retention, and their storage requirements, shall be adhered to, as defined in *Finance-MP-07 – Management of Records*. The Systems Manager shall ensure that all appropriate records are forwarded to Finance, as defined in the Finance *Archiving Schedule* (see MP-07).	In compliance	Review of monthly reports confirmed that all critical documents such as monitoring reports etc. were provided to Finance with the monthly reports. These reports were then recorded on the Finance Records Management System. All monitoring reports for the reporting period are also included in this PCR, which will be stored according to the Finance Retention and Disposal Schedule.
5.2	**IWDF Site Record Management** The following procedures relate to record management at the IWDF Site office during disposal operations or other extended periods of site occupation. **5.2.1 General** Forms (proforma templates) shall be used in the recording of correspondence, field data, meetings/briefings, and other activities relating to management of the IWDF. The Systems Manager shall ensure that the most-up-to-date revisions of forms are available and listed on a *Document Register* (IWDF-Form-16). Paper copies of forms may be kept, where necessary (e.g., if electronic access is not possible for a limited period). However, it is the responsibility of the user to ensure that it is the latest version of the form.	N/A	No disposal operation occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
	5.2.2 Correspondence Control Correspondence includes hand-delivered correspondence and emails. All project-related incoming correspondence shall be registered on an *Incoming Document Register* (IWDF-Form-23) and filed in a Project Correspondence File. All project-related outgoing correspondence shall be recorded on an *Outgoing Document Register* (IWDF-Form-24) and filed in the Project Correspondence File. **5.2.3 Chain of Custody** A *Chain of Custody Record* (IWDF-Form-01) shall accompany all samples taken from the site for receipt by an analytical laboratory. Chain of Custody Records shall be registered on a *Chain of Custody Register* (IWDF-Form-02) and filed in the appropriate Project File. **5.2.4 Filing and Storage** All site records (correspondence, memos, telephone records, field notes, etc.) shall be filed in the appropriate project file, as outlined in the appropriate *IWDF Filing Index* (IWDF-Form-04). These will be located in the site office or trench office for the duration of project site activities. At the end of a field project, all site records must be returned to the FMC contractor's office(s) in Perth. They will then be stored under the office record management system(s) (see below).		

Section	Requirement	Status	Evidence / Comment
5.3	**FMC Office Record Management** The following procedures relate to record management at the FMC offices during ongoing management or operational planning of IWDF activities. **5.3.1 General** Record keeping and management outside the IWDF (i.e., in the FMC offices) shall be undertaken in accordance with the procedures outlined in Section 5.2 for the IWDF site. However, different forms and registers (e.g., from the FMC company's quality system) may be used if they are deemed to be equivalent by the Systems Manager. They must provide the same level of quality control. **5.3.2 Filing and Storage** All site and office records (correspondence, memos, telephone records, field notes, etc.) shall be filed in the appropriate project file, as outlined in the applicable *IWDF Filing Index* (IWDF-Form-04 or equivalent), located in the FMC office. All site records that are not requested by the Systems Manager for forwarding to Finance for archiving, as defined in the Finance *Archiving Schedule* (see MP-07), shall be stored in accordance with FMC company procedures.	In compliance	Random review confirmed FMC IWDF records were contained within the appropriate IWDF project folder. All records not forwarded to Finance were stored in accordance with the FMC company Quality Management System requirements.
FMP-03 Training and Competency			
Purpose - This procedure addresses the training of personnel involved with all operational activities at, or associated with, the Intractable Waste Disposal Facility (IWDF). Training is to be done in accordance with the Finance Policy statement for the IWDF. Thus, the purpose of the procedure is to ensure that all FMC staff involved with operations at, or associated with, the IWDF, are appropriately trained and qualified. This includes: • Increasing awareness of potential environmental and safety impacts of each position/role; and • Understanding the requirements of the FMC procedures and management system.			

Section	Requirement	Status	Evidence / Comment
5.1	**IWDF Management System Training/Induction** **5.1.1 Responsibilities** Finance (or delegate) is responsible for training FMC personnel involved in IWDF activities in the implementation of the Finance Policy, Manual and relevant Finance Management Procedures. The FMC Systems Manager is responsible for training all FMC personnel (and the Earthworks Contractor Supervisor) in the implementation of the FMC Operational, Environmental, Safety, Emergency Response and Management Procedures. **5.1.2 Scope** Roll-out training/new employee induction on the FMC management system shall provide details on: • The requirements of the system; • The importance of complying with the system; • The potential environmental and safety impacts of each position; and • How to incorporate this knowledge into daily work practices. **5.1.3 Identification of training requirements** The Systems Manager and Project Manager shall be responsible for identifying the training needs of FMC personnel. The identification of training needs shall be based on: • Tasks the employee or contractor is required to undertake or is responsible for; and • The necessary level of performance.	In compliance	Review of the IWDF Training Register confirmed appropriate training was completed for all FMC-controlled visitors to the IWDF and FMC personnel with a specific task at the IWDF.

Section	Requirement	Status	Evidence / Comment
	A *Competency Matrix* will identify the training requirements for all FMC personnel. This matrix will be used to undertake analysis of ongoing training needs. A *training schedule* will be developed by the Systems Manager and Project Manager for all FMC employees. **5.1.4 Review of Training requirements** Training reviews will be undertaken at least once a year, or under the following circumstances: • When the job scope of an employee changes significantly; • If an employee continually fails to meet requirements; • After a major accident or incident; and • Following changes to the management system. FMC personnel visiting the IWDF site shall complete the General Safety Induction (*General Safety Induction, IWDF-Form-32*) prior to their site visit. This applies to personnel if they have not visited the IWDF site for three years or more. **5.1.5 Training Records** FMC training shall be recorded using the *Management System Induction Form* (*IWDF-Form-48*), and if necessary (e.g., for large numbers of attendees), an *Attendance Sheet (IWDF-Form-25*). The Systems Manager shall ensure that all FMC personnel are appropriately qualified and trained for their activities. Qualifications shall be recorded on a *Competency Plan for each FMC employee (IWDF-Form-12a).*		Review of the IWDF Training Register showed there had been one new starter for the FMC (Ping Liu). He completed the general site induction prior to visiting the site.

Section	Requirement	Status	Evidence / Comment
5.2	**On-site Operation-Specific Training** **5.2.1 Responsibilities** The FMC Systems Manager and FMC Operations Manager shall be responsible for identifying and reviewing all operation-specific training needs for all FMC personnel. The FMC Operations Manager and FMC Safety Manager (and Radiation Safety Officer for radioactive waste activities) are responsible for undertaking all operation-specific site inductions. **5.2.2 Scope** The following inductions shall be undertaken: • General IWDF site activities (*General Safety Induction Form, IWDF-Form-32*) • Waste preparation, packaging, and handling activities (*Waste Handling Safety Induction Form, IWDF-Form-33*) • Transport of waste to the IWDF (*Transport Induction Form, IWDF-Form-37*). Site inductions shall provide details on: • General rules and background information to activities • Health and Safety issues - hazards and controls (based on the IWDF Health and Safety Aspects Register) • Emergency Response Procedures • Environmental issues (based on the IWDF Environmental Aspects Register) • Operation-specific procedures and tasks. Generic training materials will be available on the electronic system *(IWDF Induction Handbooks)* to accompany this procedure (FMP-03). They will also be updated on an operation-specific basis and stored on Operation project files.	N/A	No disposal operation occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
	Visitors and short-term personnel (such as maintenance contractors) shall undergo specifically tailored training (*IWDF-Form-32*). **5.2.3 Identification of training requirements** The FMC Systems Manager and FMC Operations Manager shall be responsible for identifying operation-specific induction and training needs. The identification of training needs shall be based on: • Tasks the employee or contractor is required to undertake or is responsible for; and • The necessary level of performance. A *Competency Matrix* will be developed to identify the training requirements for all FMC personnel and contractors. An *Operation Training Schedule* will be developed by the FMC Systems Manager and FMC Operations Manager for all FMC employees. **5.2.4 Review of Training/Competency Requirements** Training reviews will be undertaken at the commencement of an operation, or under the following circumstances: • When the job scope of an employee changes significantly; • If an employee continually fails to meet requirements; • After a major accident or incident; or • Following changes to the scope of an operation.		

Section	Requirement	Status	Evidence / Comment
	5.2.5 Training/Competency Records FMC induction training shall be recorded using the forms specified in 5.2.2, and if necessary (for large numbers of attendees), an *Attendance Record (IWDF-Form-25*). Competency tests shall be undertaken as part of all inductions to ensure that the induction has been effective. The FMC Operations Manager shall ensure that all FMC personnel are appropriately trained for their activities on site. Training qualifications shall be recorded on the *Operational Training Register (IWDF-Form-12b)*. **5.2.6 Review of Training Effectiveness** The effectiveness of training shall be reviewed through site audits and inspections, as outlined in FMC Management Procedure FMP-04 *System Audits*, and Safety Procedure SP-02 *Operation Site Safety Management*.		
FMP- 04 System Audits			
Purpose - This procedure addresses the internal auditing of Facility Management Contractor (FMC) activities at, or associated with, the Intractable Waste Disposal Facility (IWDF). Internal auditing ensures compliance with the requirements of the Finance Management System and FMC procedures for the IWDF.			
5.1	**General** Audits of the FMC Procedures (Operational Procedures, Environmental Procedures, Emergency Response Procedures, FMC Management Procedures, Safety Procedures, and Radiation Procedures), as well as disposal-specific Operation Procedures, shall be undertaken to assess the following, as required by Finance:	In compliance	All applicable elements of the IWDF Management System were audited during this reporting period. See Appendix W for audit schedule.

Section	Requirement	Status	Evidence / Comment
	• Level of implementation of the procedures • Effectiveness of the procedures • Maintenance of the procedures • Conformance with the requirements of the Finance Management System • Performance & compliance against Ministerial Conditions and Commitments.		
5.2	**Audit Frequency/Schedule** The scheduling of audits shall be determined by the FMC Project Manager and the FMC Systems Manager. This may be done using an *Audit Schedule* IWDF-Form-50. FMC Operational, Environmental, Safety and Quality Procedures shall be audited annually. Disposal-specific Operation Procedures (and associated Environmental, Safety and Quality Procedures) shall be audited at least once during a disposal operation. Finance shall be informed of the audit schedule. Personnel to be audited shall be notified of a pending audit at least two weeks before it commences.	In compliance	See Appendix W for audit schedule.
5.3	**Audit Scope** The basic scope of system audits shall be defined in a *System Audit Checklist*. It shall include: • Activities to be audited (based on the significance of the activity and previous audit results); • Documentation and records to be reviewed; • Personnel to be interviewed and/or involved in the audit; and • Methods of evidence collection and reporting.	In compliance	All applicable elements of the IWDF Management System were audited during the reporting period.

Section	Requirement	Status	Evidence / Comment
5.4	**Audit Team** Each audit shall be undertaken by an audit team, comprising the FMC Systems Manager and at least one other suitably qualified auditor. This will ensure that the auditor of a particular section of the system is external to the implementation of that section.	In compliance	Internal audits were supervised by Leanne Morton who is a qualified auditor and had completed all previous audits. Leanne received assistance from the FMC IWDF Project Director and another qualified auditor at the FMC's office.
5.5	**Audit Reporting and Follow-up** Audits shall be recorded on the *Audit Register (IWDF-Form-49)*. Non-conformances shall be recorded using System *Corrective Action Requests (CAR)* (IWDF-Form-10). Audit findings shall be documented in an *Audit Report* and used to determine the level of conformance achieved. The audit report shall contain the following: • Conformities and nonconformities • Records of CARs resulting from the audit (as generated by auditees) • Follow-up of previous audit findings • Conclusions and recommendations for changes to the system (for consideration at Management Review Meetings) • Effectiveness of the system in achieving Finance objectives and targets. A draft of the report shall be forwarded to the FMC Project Manager for review, prior to submission to Finance. A meeting shall then be held between the Finance Project Manager, Systems Manager, FMC Project Manager, and auditor to discuss the findings of the audit. A plan will then be developed to implement and assess the effectiveness of the necessary corrective actions.	In compliance	The Audit Register was sighted to verify that it included all annual audits from 2008 to 2025. This audit table comprises report results for this reporting period. Audit findings were provided to Finance as part of the draft PCR for the reporting period.

Section	Requirement	Status	Evidence / Comment
5.6	**Management Review** All CARs and their implementation shall be reported at IWDF Management Review Meetings.	N/A	No CARs were submitted during the reporting period.
6.	**Records** The FMC Systems Manager and auditor shall ensure that all system audit records are filed in accordance with FMP-02 *Record Management*.	In compliance	Random review by the auditor confirmed that all system records were filed appropriately on the FMC MANS server.
7.	**Reporting** The FMC Systems Manager shall ensure that appropriate records are made available to Finance upon request.	In compliance	Finance confirmed that all requested records were provided in a timeframe agreed upon with the FMC.
FMP- 05 Control of Non-Conformances			
Purpose: This procedure addresses the reporting, recording, investigating and implementation of system non-conformances and corrective actions associated with the management of the IWDF. This procedure provides guidance on how to ensure that any FMC system deficiencies are prevented or corrected.			
5.1	**Identification of Non-Conformances** Non-conformances (or potential non-conformances) may be identified through the following: • Accident/incident • Audit • Inspection • General activities.	N/A	No new non-conformances were identified during the reporting period.

Section	Requirement	Status	Evidence / Comment
	Non-conformances can be system non-conformances (e.g., system procedure is not implemented) or operational non-conformances (e.g., failure of waste package, or other incident or accident). System non-conformances are addressed in the following sections. Operational non-conformances are addressed in Emergency Response Procedure *ERP-01 Incident Prevention, Reporting and Investigation.*		
5.2	**Reporting of System Non-Conformances** When a system non-conformance is identified a System *Corrective Action Request* (CAR) form (IWDF-Form-10) shall be completed by the identifier. The completed form will then be forwarded to the FMC Systems Manager for action. The CAR shall be registered on a *System CAR Register* (IWDF-Form-11) by the receiver. Potential non-conformances and suggestions for improvement may also be reported using a CAR.	N/A	No IWDF FMC system non-compliances were identified during the reporting period.
5.3	**Development and Implementation of Corrective/Preventive Actions** The FMC Systems Manager shall assess the CAR, in conjunction with the Project Manager (for off-site issues) or the FMC Operations Manager (for on-site issues). Corrective/preventive actions to address the non-conformance shall be formulated and detailed on the CAR. A program for the implementation of the corrective/preventive actions shall be developed. This program will be reviewed regularly until the action is implemented, found to be effective, and closed out. All procedures or other documentation shall be updated and redistributed accordingly, in accordance with FMP-01 *Document and Data Control*.	N/A	No IWDF FMC system non-compliances were identified during reporting period.

Section	Requirement	Status	Evidence / Comment
5.4	**Management Review** All CARs and their implementation shall be reported at IWDF Management Review Meetings, in accordance with Finance Management Procedure MP-12 *Management Review*.	In compliance	No new non-compliances were identified during the reporting period. However, during this reporting period CAR 007 was closed-out (12 June 2025) and CAR 009 was closed-out (5 August 2024).
6.	**Records** The FMC Systems Manager shall ensure that all records are filed in accordance FMP-02 *Record Management*.	In compliance	Random review of IWDF FMC project folders confirmed records were filed in the appropriate folder.
7.	**Reporting** The FMC Systems Manager shall ensure that appropriate records are made available to Finance upon request and are discussed at IWDF Management Review meetings.	In compliance	The finalisation of CAR 007 occurred during the June 2025 MRM. The finalisation of CAR 009 was discussed at the December 2024 MRM. See Appendix S for MRM Minutes.
FMP- 06 Control and Maintenance of Equipment			
Purpose: This procedure addresses the control, calibration and maintenance of quality-critical inspection, measuring and test equipment associated with the operational management of the IWDF.			
5.1	**Identification and Registration of Monitoring, Measuring and Test Equipment** The FMC Operations Manager and the user (or supervisor) of a piece of equipment shall be responsible for ensuring that the equipment is calibrated or checked against the manufacturers recommendations. The FMC Operations Manager shall ensure that all FMC monitoring, measuring, and test equipment is recorded on *Equipment Maintenance and Calibration List*	In compliance	Equipment Maintenance and Calibration List (IWDF-Form-40) were completed prior to the use of water monitoring equipment during October 2024 and April 2025 water monitoring events.

Section	Requirement	Status	Evidence / Comment
	(IWDF-Form-40). The record will also need to be stored in the Operation Manager's office files. Separate lists may be produced on an operation-specific basis. Operation lists shall be stored at the IWDF site during site activities. The user and FMC Operations Manager shall ensure that all equipment has a precision and sensitivity appropriate with the requirements of the monitoring, measurements, or test activity.		
5.2	**Calibration and Checking of Monitoring, Measuring and Test Equipment** All equipment requiring calibration shall be calibrated in accordance with manufacturer's instructions. Hired equipment, or equipment used by a subcontractor, shall be provided with calibration documents by the supplier. These shall be checked by the user. Equipment owned by Finance, or FMC, shall be calibrated by the user of the equipment. The calibration method and history of each piece of equipment shall be recorded using a *Maintenance and Calibration Register* (IWDF-Form-41). Records provided by the supplier of a piece of equipment should be attached to this checklist.	In compliance	Equipment Maintenance and Calibration List (IWDF-Form-40) were completed prior to the use of water monitoring equipment during October 2024 and April 2025 water monitoring events.
5.3	**Non-Conformances** Items of equipment that do not pass their calibration or maintenance checks shall be clearly tagged to identify them as non-operational. They will then be removed from use. Such equipment shall only be reused upon positive results from re-calibration or maintenance. If equipment is faulty, a corrective action request (CAR) shall be raised. Corrective actions will then be undertaken in accordance with FMP-05 *Control of System Non-Conformances.*	N/A	Interview with Operations Manager and a review of documentation confirmed that no equipment failed calibration/checking.

Section	Requirement	Status	Evidence / Comment
5.4	**Other Equipment Maintenance** All equipment shall be maintained to ensure a safe working environment. The Operations Manager shall ensure that Finance- or FMC-owned equipment used in IWDF activities, and that requires maintenance, is recorded on the *Equipment Maintenance and Calibration List* (IWDF-Form-40). Separate lists may be produced on an operation-specific basis. The user and Operations Manager shall ensure that all equipment is suitable for its intended use. The maintenance method and history of each piece of equipment shall be recorded using a *Maintenance and Calibration Register (IWDF-Form-41)*. Records provided by a maintenance contractor should be attached to this checklist. The maintenance of contractor-owned equipment shall be the responsibility of the contractor.	In compliance	Equipment Maintenance and Calibration List (IWDF-Form-40) were completed prior to the use of water monitoring equipment during October 2024 and April 2025 water monitoring events. As the equipment is owned by the FMC and is used by other projects, the master maintenance and calibration records are maintained within the FMC's internal Management System.
6.	**Records** The Operations Manager shall ensure that all records are filed in accordance with FMP-02 *Record Management*.	In compliance	Random review of IWDF FMC project folders confirmed records were filed in the appropriate folder.
7.	**Reporting** The user of a piece of equipment shall ensure that calibration records are reported to the Operations Manager, along with associated monitoring or testing results. The Operations Manager shall ensure that appropriate records are made available to Finance upon request.	In compliance	The Operations Manager was the primary user of the monitoring equipment during the reporting period. Finance confirmed that all requested records were provided in a timeframe agreed upon with the FMC.

FMC Environmental Procedures

Section	Requirement	Status	Evidence / Comment
EP-01 Vegetation (Flora) Management			
Purpose: Addresses the management of vegetation at the IWDF.			
5.1	**Flora Surveys** Previous floristic assessments of the site reserve and the access road reserve have not identified any Declared Rare Flora (DRF) to be present. One priority species was identified previously and confirmed to still occupy five locations on the site (Appendix N). These locations shall be reviewed prior to any clearing activities. Clearing in areas identified as containing rare or priority species shall be avoided. The DWER Florabase is updated annually. Prior to any clearing (e.g., prior to the commencement of an operation), the list current at the time of development should be searched to determine the conservation status of rare and priority flora species and to check if species have been added or removed from the list. If significant changes occur in the conservation status of flora that is likely to be found at the IWDF, or as otherwise directed by Finance, a floristic reassessment of the site may be undertaken.	In compliance	The location of any priority species is recorded on the monitoring locations figure provided at Figure 4 of this PCR. No clearing occurred during the reporting period. However, the firebreak was graded to clear some emergent low shrubs in November 2024.
5.2	**Clearance of Vegetation** Unnecessary clearance or disturbance of native flora shall always be avoided. Clearance of vegetation shall only be undertaken under the direction of the Operations Manager, with advice from the Environment Manager or Botanist. The following clearing shall be permitted following approval by the Operations Manager:	N/A	No clearing occurred during the reporting period. However, the firebreak was graded to clear some emergent low shrubs in November 2024.

Section	Requirement	Status	Evidence / Comment
	• Firebreaks – these are exempt under the *Environmental Protection (Clearing of Native Vegetation) Regulations 2004 as they are required by another law, the Bush Fires Act 1954* • New disposal trenches and surrounding areas required for vehicle access • Other areas of development as approved by the Operations Manager. If an area is to be cleared that lies close to, or at, an area where a priority species has been identified, the priority species plant(s) shall be identified, marked in the field, and avoided if possible. Off-road (track) vehicle usage is strictly prohibited without prior consent by the Operations Manager. The identification of rare flora or priority species shall be aided wherever possible using flora identification kits (see below).		
5.3	**Flora Identification** The IWDF flora identification kits shall be maintained (and updated as necessary) for priority species (and any rare flora that may be identified in the future) known to occur at the IWDF. Where possible, the flora identification kits shall be referred to prior to clearing activities on the site to identify rare flora or priority species which may be impacted by proposed clearing. If there is uncertainty in the identification of flora in an area designated for clearing, a botanist may be brought up to site prior to significant clearing activities. This is especially important where priority species may be in, or close to, the area to be cleared. If rare flora or priority species are identified, efforts will be made to clear in alternative areas.	In compliance	The Flora Identification Kit was reviewed prior to the October monitoring event. It was reviewed and updated again in June 2025 as part of the continual Management System Review. No clearing occurred during the reporting period. However, the firebreak was graded to clear some emergent low shrubs in November 2024.

Section	Requirement	Status	Evidence / Comment
5.4	**Weed Identification** The weed identification kit shall be maintained for weeds (non-native plants, which may have a detrimental impact on local flora) that are known, or likely to occur, at the IWDF. Where possible, the weed identification kit shall be referred to during activities at the IWDF. If weeds are identified, they shall be removed at the direction of the Operations Manager (and botanist, if required).	In compliance	Weed Identification Kit was reviewed October 2024. It was reviewed again in June 2025 as part of the on-going Management System Review.
5.5	**Rehabilitation** Management of rehabilitation of cleared areas is detailed in Environmental Procedure *EP-05 Rehabilitation Management*.	In compliance	See Appendix N for October rehabilitation monitoring and the flora survey.
5.6	**Dust Suppression** Dust suppression techniques shall be used during construction and disposal activities to reduce the impacts of excess, or contaminated, dust on adjacent vegetation. Management of dust generation is detailed in Environmental Procedure *EP-06 Air Quality and Dust Management*.	N/A	No disposal operation occurred during the reporting period.
6	**Records and Reporting** The results of activities shall be documented and placed on the appropriate file (see *FMC Management Procedure FMP-02 Record Management*).	N/A	Random review of IWDF FMC project folders confirmed that monitoring results were filed in the appropriate folder.

Section	Requirement	Status	Evidence / Comment
6.1	**Internal Reporting** Any actual or potential impacts on priority species shall be reported to the Environment Manager or Operations Manager. All unplanned impacts on priority species shall be treated as an environmental incident and reported in accordance with Environmental Procedure *EP-09 Environmental Incident Management.* The Environment Manager and Operations Manager shall be notified of any identified impacts on priority species because of operational activities.	N/A	No priority species were adversely impacted during the reporting period.
6.2	**External Reporting** Vegetation management shall be reported to Finance, upon their request.	In compliance	Finance confirmed that all requested vegetation management reports were provided in a timeframe agreed upon with the FMC.
EP– 02 Fauna Management			
Purpose: Addresses the management of native fauna at the IWDF.			
5.1	**Fauna Surveys** A survey of terrestrial vertebrates was undertaken at the IWDF site in 2009 (Coffey Environments, 2009). Birds were not included in the survey due to their high mobility, which places them at little risk of disturbance by site activities. The survey concluded the following: • The site is characterised by a reasonably diverse community of terrestrial vertebrates; • All the recorded species have extensive distributions outside the site; • None of the recorded species can be considered rare or endangered; and • The impact of the facility will be small in relation to the total area of the sandplain and to the community of vertebrate species.	N/A	General information.

Section	Requirement	Status	Evidence / Comment
5.2	**Native Fauna** Native fauna is protected by law. Unauthorised killing or interference with native fauna is prohibited. All site personnel shall notify the Environment Manager or Operations Manager of potential or actual impacts on native fauna and habitat areas.	In compliance	Review of the incident records confirmed that no Incident Reports related to native fauna were made during the reporting period.
5.3	**Clearance of Vegetation** Unnecessary clearance or disturbance of vegetation (the natural habitats for native fauna) shall be avoided at all times. Off-road vehicle usage is strictly prohibited, unless authorised by the Operations Manager. Clearance of vegetation shall only be undertaken under the direction of the Operations Manager and Environment Manager.	N/A	No clearing occurred during the reporting period.
5.4	**Fauna Injuries or Deaths** Fauna injuries or deaths shall be treated as environmental incidents and reported to the Environment Manager or Operations Manager. Management of environmental incidents is detailed in Environmental Procedure *EP-09 Environmental Incident Management*	N/A	No fauna death or injuries were reported during the reporting period.
5.5	**Road Kills** Drivers of vehicles within the IWDF site shall be aware of native fauna when driving on all tracks and roads. Where possible, roadkill shall be removed from the road, to prevent animals feeding on the carcass also being run down.	N/A	Review of the incident records confirmed that no Incident Reports related to roadkill were made during the reporting period.

Section	Requirement	Status	Evidence / Comment
5.6	**Open Excavations and Boreholes** Open trenches or excavations shall have an egress to allow trapped animals to exit the trench. (All disposal trenches have a ramp as part of the current trench design). Any drillhole, borehole or monitoring bore shall be filled, plugged, or capped, subsequent to completion, to avoid unnecessary trapping of animals in the open hole.	In compliance	The Operations Manager confirmed that all monitoring bores were capped.
5.7	**Feral Animals and Pets** Feral animals shall be discouraged from the camp area, wherever possible, by the careful management of camp waste (to avoid odours, which may attract feral animals). Management of camp waste is detailed in Environmental Procedure *EP-07 Waste Management*. Pets (domestic animals) are not permitted on-site.	N/A	Verbal communication with the Operations Manager and other IWDF personnel confirmed that no feral animals were sighted at the camp during the reporting period.
5.8	**Firearms** Unauthorised killing or interference with native fauna is prohibited. Firearms are prohibited at the site.	In compliance	Operations Manager confirmed that no firearms were brought to site.
5.9	**Rehabilitation** Management of rehabilitation of cleared areas is detailed in Environmental Procedure *EP-05 Rehabilitation Management*.	In compliance	See Appendix N for October rehabilitation monitoring and the flora survey.

Section	Requirement	Status	Evidence / Comment
5.10	**Dust Suppression** Dust suppression techniques shall be used during construction and disposal activities to reduce impact to adjacent vegetation (and hence fauna habitats) from excess, or contaminated, dust. Management of dust generation is detailed in Environmental Procedure *EP-06 Air Quality and Dust Management*.	N/A	No disposal operation occurred during the reporting period.
6.	**Records and Reporting** Records of site activities shall be documented by the Operations Manager and Environment Manager, and placed on file (as per *FMC Management Procedure FMP-02 Record Management*).	In compliance	Random review of IWDF FMC project folders confirmed that monitoring results were filed in the appropriate folder.
6.1	**Internal Reporting** Any actual or potential impacts on native fauna shall be reported to the Environment Manager or Operations Manager. All injury or deaths of native fauna shall be treated as an environmental incident and reported in accordance with Environmental Procedure *EP-09 Environmental Incident Management.* The Environment Manager and Operations Manager shall be notified of any identified impacts on priority species because of operational activities.	N/A	No native fauna was adversely impacted during the reporting period.
6.2	**External Reporting** Fauna management shall be reported to Finance upon their request.	In compliance	Finance confirmed that all requested management reports were provided in a timeframe agreed upon with the FMC.

Section	Requirement	Status	Evidence / Comment
EP–03 Environmental Monitoring Management			
Purpose: Addresses the monitoring of the impact of waste disposal activities at the IWDF on the environment.			
5.1	**Scheduling and Management of Monitoring Programs** The FMC Project Manager shall coordinate all IWDF ongoing monitoring programs, through yearly monitoring *schedules*. The FMC Project Manager and Environment Manager shall ensure that monitoring undertaken by the FMC is undertaken in accordance with the Finance schedules. The FMC Environment Manager shall ensure that monitoring records are appropriately registered, distributed and filed in accordance with the specific instruction for the monitoring. **5.2.1 Groundwater Monitoring** Procedures for ongoing groundwater monitoring are given in *Environmental Instruction EI-01*. **5.2.2 Radiation Monitoring** Procedures for ongoing radiation monitoring are given in *Radiation Instruction RI-01*. Ongoing environmental gamma radiation monitoring will be undertaken every 5 years.	In compliance	Monitoring records verify that all monitoring required during the reporting period was undertaken according to the schedule. See Appendix N for rehabilitation monitoring records, Appendix F for groundwater monitoring results, and Appendix O for capping monitoring records. No radiation monitoring was undertaken during the reporting period.

5.3	**Operation-Specific Monitoring** **5.3.1 Groundwater Monitoring** Groundwater monitoring shall be undertaken prior to the onset of waste disposal activities and following waste disposal activities, for any waste disposal operation. This may coincide with the ongoing groundwater monitoring. Procedures for groundwater monitoring are given in *Environmental Instruction EI-01*. **5.3.2 Radiation Monitoring** Radiation monitoring shall be undertaken prior to the onset of waste disposal activities and following waste disposal activities, for any waste disposal operation involving the disposal of radioactive wastes. Procedures for radiation monitoring are given in *Radiation Instruction RI-01*. **5.3.3 Soil Sampling** Pre-disposal and post-disposal soil samples shall be collected from locations around each disposal trench. Procedures for soil sampling are given in *Environmental Instruction EI-02* with reference to the *Operation Environmental and Waste Acceptance Procedures (OEWP)* for the specific waste disposal operation. **5.3.4 Dust Sampling** Pre-disposal and syn-disposal dust monitoring shall be undertaken at locations around each disposal trench. Procedures for dust monitoring are given in *Environmental Instruction EI-02* with reference to the *Operation Environmental and Waste Acceptance Procedures (OEWP)* for the specific waste disposal operation.	N/A	As a disposal operation did not occur during the reporting period, no operation-specific sampling or monitoring was required.

Section	Requirement	Status	Evidence / Comment
5.4	**Specific/Validation Sampling** In the event of a spill, or suspected spill of waste material, additional validation sampling shall be undertaken as outlined in *Environmental Instructions EI-01, 02 and Radiation Instruction RI-01* with reference to the *Operation Environmental and Waste Acceptance Procedures (OEWP)* for the specific waste disposal operation.	N/A	Review of incident reporting confirmed no spills occurred during the reporting period.
5.5	**Maintenance and Calibration of Monitoring Equipment** The Operations Manager shall ensure that all monitoring equipment used at the site undergoes regular maintenance and calibration in accordance with *FMC Management Procedure FMP-06 Control and Maintenance of Equipment.*	In compliance	Equipment Maintenance and Calibration List (IWDF-40) were completed prior to the use of water monitoring equipment during October 2024 and April 2025 water monitoring events.
5.6	**Review of Monitoring Program** The monitoring program shall be reviewed twice yearly, as part of the Finance Management Review Meetings (Finance MP-12). Review may include the details of the program (such as appropriate numbers of monitoring bores and locations of radiation surveys).	In compliance	The monitoring program was reviewed by the FMC and presented at the Management Review Meetings. See Appendix S for Management Review Meeting Minutes.
6	**Records and Reporting** The results of FMC monitoring activities shall be documented and placed on the appropriate file (as per *FMC Management Procedure FMP-02 Record Management*). The RSO and the Environment Manager shall report all results of FMC monitoring to the FMC Project Manager. The Project Manager shall forward results of all FMC environmental monitoring to the Finance Project Manager within 14 days of monitoring (or within 14 days of receipt of monitoring results). If abnormalities or exceedances are identified, the Finance Project Manager shall be informed as soon as practicable. Monitoring results shall be reported in the *Performance & Compliance Report*.	In compliance	All monitoring results were provided to Finance after the monitoring was completed. Monitoring results are reported in this PCR. See monitoring results in Section 5 of this PCR Report.

Section	Requirement	Status	Evidence / Comment
EP–04 Water Management			
Purpose: Addresses surface water management at the IWDF.			
5.1	**Project Planning in Relation to Seasonal Conditions** The Operations Manager and FMC Project Manager shall liaise with Finance in relation to an appropriate time for field operations to take place at the IWDF, given weather (rainfall) data available for the site. Possible delays in field activities due to seasonal (and unseasonal) rainfall shall be considered when developing project schedules and budgets.	N/A	No disposal occurred during the reporting period. However, a review of the project schedule and estimated budget confirmed that contingency had been included for possible delays due to unseasonal rainfall during non-disposal site inspection/monitoring events.
5.2	**Surface Topography Management and Drainage Design** Surface topographic contour maps and aerial photographs for the site shall be referenced by the Operations Manager during positioning of future disposal trenches and the development of site drainage systems. Each disposal trench shall be constructed with an elevated clay dome, which acts to shed water away from the disposal location, in accordance with the construction specification for the trench. V-drains shall be constructed to divert surface water runoff away from trench areas. Each completed (capped) disposal trench shall be surrounded by a V-drain as outlined in the construction specification (CS) for the trench. V-drains shall be maintained (re-cut) as required to ensure adequate capacity, particularly during winter months and after periods of high rainfall.	In compliance	No disposal operation occurred during the reporting period. However, each completed disposal cell is surrounded by a V-drain as outlined in the construction specification for the cell. Existing V-drains were inspected during each monitoring visit to the IWDF in the reporting period. Inspection indicated that all drains were clear of vegetation and any material that could prevent effective run-off.

Section	Requirement	Status	Evidence / Comment
5.3	**Operation Weather Reporting and Surface Water Management** During excavation and filling of disposal trenches, the Operations Manager shall assess weather conditions daily (or as otherwise required). This will include Bureau of Meteorology online weather reports. During excavation and filling of disposal trenches, sand & gravel windrows shall be present around the perimeter of the trench, except for the ramp end of the trench. If heavy rainfall is expected, or possible, the Operations Manager shall ensure that: temporary soil (ideally clay) berms are constructed at the top of the ramp, to prevent surface water runoff down the ramp into the trench. temporary v-drains may also be constructed to aid local drainage. If waste is present within the disposal trench, sand and gravel shall be placed above the waste to a thickness of at least 250mm and shall be compacted as far as practicable. Clay berms may also be placed to surround the waste. Waste unloading and placement activities shall be suspended if heavy rain threatens or is falling, at the direction of the Operations Manager (or Earthworks Contractor Supervisor).	N/A	No disposal operation occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
5.4	**Management of Accumulated Water in Trench** If a significant amount of water collects in an open disposal trench (e.g., because of unforeseen rainfall), the water may be managed in one of the following ways: • The water shall be allowed to dry out in situ; • The water shall be soaked up by the introduction of sand and gravel or clay material into the trench, which would then be removed from the trench to a nearby area to dry. The dried material shall be placed back into the trench as part of the fill/capping material. • The water shall be pumped out to a designated evaporation area (evaporation pond). If waste is present within the trench (even if it is buried beneath sand cover), or if contamination of the water with waste material is suspected, sampling and analysis of the pumped water may be undertaken for waste constituents.	N/A	No disposal operation occurred during the reporting period.
6.	**Records and Reporting** Records of site activities shall be documented by the Operations Manager, and Environment Manager, and placed on file (as per *FMC Management Procedure FMP-02 Record Management).* The results of operation-specific surface water management shall be reported, where appropriate, by the Systems Manager in the Performance and Compliance Report.	In compliance	Random review of IWDF FMC project folders confirmed that records of ongoing management site activities were filed in the appropriate folder. No disposal operation occurred during the reporting period.
EP–05 Rehabilitation Management			
Purpose: Addresses rehabilitation management at the IWDF.			

Section	Requirement	Status	Evidence / Comment
5.1	**Rehabilitation of Disposal Trench Surrounds** The Operations Manager and Environment Manager shall ensure that vegetation and topsoil cleared from the site of a proposed disposal trench are stockpiled in a position close to the trench. Stockpiles shall be windrowed where possible. The maximum height of topsoil stockpiles shall be 2m. On completion of a disposal trench (i.e., following completion of the water shedding clay dome), cleared areas surrounding the trench shall be rehabilitated by spreading the stockpiled vegetation and soil stockpiles evenly across the areas. The areas to be rehabilitated shall be tyned/ripped to facilitate the infiltration of rainwater and aid revegetation, in accordance with Operation *Construction Specifications (CS).*	N/A	No disposal operation occurred during the reporting period.
5.2	**Rehabilitation of Tracks** Tracks used for access to the disposal compounds currently in use shall be kept clear of vegetation by vehicle use and re-grading where necessary. Tracks used for access to drill hole locations or other locations which are no longer used shall be allowed to revegetate naturally. Temporary tracks shall be constructed in a manner to preserve the topsoil and younger plants *in situ* to assist natural revegetation (i.e., avoiding grubbing or soil removal).	In compliance	Interview with the Operations Manager confirmed that tracks used to access disposal compounds have been kept clear of vegetation by vehicle use. No re-grading was required during the reporting period (apart from the firebreak in November 2024). Tracks to unused locations have been allowed to revegetate naturally. No new tracks were constructed during this reporting period.

Section	Requirement	Status	Evidence / Comment
5.3	**Rehabilitation of Oversize Silcrete Disposal Area** The Operations Manager shall ensure that all oversize silcrete material generated during the excavation of silcrete for a disposal trench is removed to a dedicated oversize silcrete disposal area. The Operations Manager shall ensure that vegetation and soil cleared from the site of an oversize silcrete disposal pit are stockpiled in a position close to the pit. Stockpiles shall be windrowed where possible. The maximum height of topsoil stockpiles shall be 2 m. On completion of a disposal pit, the silcrete shall be covered with the stockpiled sand and gravel to form a low mound (a maximum height of 1 m above ground level). The mound, as well as cleared areas adjacent to the pit, shall be rehabilitated by spreading the stockpiled vegetation and soil evenly across the areas. The rehabilitated areas shall be ripped to aid revegetation, in accordance with Operation *Construction Specifications (CS).*	N/A	No disposal operation occurred during the reporting period.
5.4	**Rehabilitation of Borrow Pits** Borrow pits are located at several locations along the access road to the IWDF. If borrow pits continue to be used during the operational period of the IWDF, their rehabilitation shall be addressed as part of the decommissioning rehabilitation plan (see below). Decommissioned/completed borrow pits shall be contoured, topsoil replaced and ripped to aid rehabilitation.	N/A	No borrow pits have been decommissioned by the FMC to date.

Section	Requirement	Status	Evidence / Comment
5.5	**Monitoring of Rehabilitation** The Operations Manager and Environment Manager shall ensure that areas undergoing rehabilitation are monitored on a regular (yearly) basis, to determine progress and effectiveness of revegetation, in accordance with *Environmental Instruction EI-04, Rehabilitation Monitoring*.	In compliance	See Appendix N for records of October 2024 rehabilitation monitoring and botanist flora survey.
5.6	**Seed Collection** There are currently no plans to undertake local native seed collection or to use available regional seed stocks. However, if rehabilitation monitoring indicates that unassisted (unseeded) rehabilitation is not achieving targets (as defined in the IWDF Decommissioning and Rehabilitation Plan), a seed collection strategy will be put in place.	N/A	Not required as all revegetated areas have been achieving targets.
5.7	**Post-Decommissioning Rehabilitation of the Site** There are currently no plans to decommission the site. A decommissioning and rehabilitation plan shall be produced upon direction by Finance.	N/A	There are currently no plans to decommission the site.
6.	**Records and Reporting** Records of site activities shall be documented by the Operations Manager and Environment Manager, and placed on file (as per *FMC Management Procedure FMP-02 Record Management*). The Operations Manager and Environment Manager shall report rehabilitation activities to the Systems Manager.	In compliance	Random review of IWDF FMC project folders confirmed that records of ongoing rehabilitation monitoring were filed in the appropriate folder.

Section	Requirement	Status	Evidence / Comment
EP–06 Air Quality and Dust Management			
Purpose: Addresses air quality and dust management at the IWDF.			
Not required as no disposal operation occurred during the reporting period.			
EP–07 Waste Management			
Purpose: Addresses the management of non-intractable waste at the IWDF.			
5.1	**Camp Waste** The Operations Manager shall ensure that all food waste, litter, and other domestic waste materials are crushed, wherever possible. This is done to reduce their volume prior to being placed in rubbish bags and stored in a rubbish trailer on site. The burying of camp waste on site is not permitted. The burning of camp waste is not permitted. The waste shall be collected and transported off-site by site personnel and disposed of at the Southern Cross or Coolgardie municipal landfills. When site personnel are transporting the rubbish trailer, loads must be secured appropriately so that no waste leaves the vehicle during transit. Camp waste shall be transported off site as regularly as possible to minimise odour, flies, and maggots (ideally once per week, particularly during summer months).	In compliance	Interview with Operations Manager and other monitoring personnel confirmed that all domestic waste was placed in bags and removed from site at the completion of monitoring events and other non-disposal site visits.

Section	Requirement	Status	Evidence / Comment
5.2	**Sewerage** Septic tanks and leach drains have been installed for the existing accommodation and messing facilities. Temporary facilities (e.g., contractor kitchen and ablution blocks) shall be connected to the septic system by a qualified plumber at commencement of disposal operations. The status of the septic system should be checked by a qualified plumber every 5 years.	In compliance	Status of the septic system was last checked April 2022 and was found to be satisfactory.
5.3	**Storage and Disposal of Fuel and Waste Oil** Management of hydrocarbons (fuels and oils) is detailed in Environmental Procedure *EP-08 Fuel, Oil & Hazardous Materials Management*.	In compliance	See Appendix Y for the October 2024 and April 2025 Dangerous Goods Storage Inventory Records.
5.4	**Recycling** Recycling facilities are not available in Coolgardie, but Yilgarn does provide a recycling service in Southern Cross and Marvel Loch – recycling also available in Kalgoorlie The generation of camp waste shall be minimised, where practicable, to reduce the amount of waste requiring disposal to landfill by: • Ordering in bulk, where practicable; and • Compacting waste (such as cans, cartons, and boxes).	N/A	Interview with the FMC Operations Manager confirmed that cans, cartons, and boxes were compacted before being removed from site for disposal.
6.	**Records and Reporting** Records of site activities shall be documented by the Operations Manager and Environment Manager, and placed on file (as per *FMC Management Procedure FMP-02 Record Management).* Waste management shall be reported to Finance, upon their request.	In compliance	See Appendix Y for the October 2024 and April 2025 Dangerous Goods Storage Inventory Records.

Section	Requirement	Status	Evidence / Comment
EP–08 Fuel, Oil and Hazardous Materials Management			
Purpose: Addresses the management of fuels, oils, and other hazardous materials, at the IWDF			
5.1	**Transport of Fuels** The Earthworks Contractor shall ensure that the requirements of the Australian Dangerous Goods Code and the *Dangerous Goods Safety (Storage and Handling of Non-explosives) Regulations 2007* are always followed. These requirements include the following: • The vehicle shall be appropriately licensed. • Any fuel drums must be secured against vertical and horizontal movement. • The vehicle must carry the appropriate type and size of fire extinguisher (e.g., 9 litre foam). • Appropriate shipping documents must be carried. • The vehicle must have the appropriate signage for the substances carried (i.e., Flammable Liquid Class 3).	N/A	No fuel was delivered during the reporting period.
5.2	**Storage of Fuels, Oils, and other Hazardous Materials** Fuels and other hazardous materials shall be stored in accordance with the Dangerous Goods Safety (Storage and Handling of non-explosives) Regulations 2007 and AS 1940:2017. Fuels shall be stored within the bunded fuel storage area at the site camp, in accordance with the *Dangerous Goods Safety (Storage and Handling of non-explosives) Regulations 2007 and AS 1940:2017*.	In compliance	The FMC Operations Manager verified that all fuels were stored in a double-skinned storage tank in the appropriately bunded fuel storage area. See Appendix Y for Dangerous Goods Storage records. No drums of fuel were left on site during periods of ongoing management.

Section	Requirement	Status	Evidence / Comment
	An inventory of dangerous goods stored at the site shall be maintained, using *IWDF-Form-51 Dangerous Goods Storage Record*. This record shall be updated upon delivery of fuels and oils, and at the beginning and end of each disposal operation. Diesel shall be stored in the 2,000 litre self-bunded diesel storage tank located within the bunded area. Other fuel, such as unleaded petrol (a maximum of 300L), or oils, shall be stored in drums within the bunded area. Drums shall always remain upright. Temporary storage of small volumes of diesel fuel or oil (e.g., up to 500L) shall be permitted at the trench location if temporary bunding is established (e.g., a containment pallet). The oil is required for maintenance purposes during excavation, waste disposal and capping activities. Safety precautions shall be implemented at the storage locations to minimise the risk of fire, including the following: • Storage area shall be kept free of flammable vegetation. • Fire extinguishers shall be positioned in proximity. • Smoking shall not be permitted within 10 m of the storage area. The Safety Manager shall ensure that *Safety Data Sheets (SDS*) for all fuels, oils and other hazardous materials are available at the site office.		The FMC Operations Manager verified that Safety Data Sheets (SDSs) were available for all fuels, oils and hazardous materials on site (currently only diesel). Site visits confirmed that the fuel storage area was free of flammable vegetation, and a current fire extinguisher was present.

Section	Requirement	Status	Evidence / Comment
5.3	**Use of Fuels and Oils** The use of fuel and oils shall be minimised wherever possible, whilst still allowing sufficient maintenance of equipment and machinery. Refuelling activities, vehicle and generator servicing, and fuel storage shall be managed to minimise both the risk of spillages occurring, and the damage to the environment should the spillage occur. Management controls shall include: • Bunding storage areas (e.g., using spill trays/portable bunds). • Clean-up of spillages, including capture of further leaks/spills in drums or other approved storage containers. • Removal of soil affected by the spillage (see below). Hydrocarbons shall be handled in accordance with safety instructions in the *Safety Data Sheets (SDS)* available at the site office.	In compliance	Interview with site personnel confirmed that refuelling tasks such as refuelling the generator were undertaken using spill trays. Review of incident records demonstrated that no reportable spills occurred.
5.4	**Emergency Spill Response** Procedures for Emergency Spill Response are outlined in Emergency Response Procedure *ERP-01 Incident Prevention, Reporting and Investigation* and ERI-02 *Waste/Spill Incident Response Procedures*. All spillages of fuels, oils or other hazardous materials shall be reported, as soon as practicable, to the Operations Manager. All spillages shall be cleaned up, as soon as practicable, under direction of the Operations Manager. Further leaks or spills shall be captured in drums or other approved storage containers until the cause of the leak can be rectified. Fuels, oils and other hazardous materials shall be handled in accordance with safety instructions in the *Safety Data Sheets (SDS)* available at the site office.	In compliance	Review of incident reporting confirmed no spills were reported during the reporting period. As the IWDF is unmanned during non-disposal periods, spill kits are stored in the sea container at the IWDF. The Operations Manager confirmed that a hardcopy SDS file is located in the site office. SDSs are also available on the electronic IWDF MANS server.

Section	Requirement	Status	Evidence / Comment
5.5	**Disposal of Contaminated Soil** Contaminated soil shall be managed in one of the following ways: • Contaminated soil shall be placed in the trench as part of the waste fill or backfill. • Hydrocarbon-contaminated soil shall be spread thinly over a cleared area to allow for natural remediation, prior to stockpiling and placement in the trench.	N/A	No reportable spills occurred during the reporting period.
5.6	**Storage and Disposal of Waste Fuels and Oils** At the camp site or the disposal trench, drums or containers labelled “Waste Oil” shall be used for the disposal/storage of any waste oils which have been generated during the servicing of equipment, vehicles, and generators. Funnels shall be used to prevent any spillage while transferring waste oil into the drums. Drums shall be kept closed when not being filled. Oil filters shall also be emptied into the waste oil drums. When nearly full, the drums shall be disposed of at an approved waste oil disposal site (e.g., in Kalgoorlie) by site personnel.	N/A	As no waste disposal operation occurred during the reporting period, no waste oil drums were stored at the IWDF.
5.7	**Disposal of Empty Drums/Containers** All emptied fuel and oil drums shall be taken off site to be re-filled, re-used, or delivered to an authorised landfill for disposal.	N/A	As no waste disposal operation occurred during the reporting period, no waste oil drums were stored at the IWDF.

Section	Requirement	Status	Evidence / Comment
6.	**Records and Reporting** Records of site activities shall be documented by the Operations Manager and Environment Manager and placed on file (as per *FMC Management Procedure FMP-02 Record Management*). Fuel and oil management shall be reported to Finance, upon their request. Spills shall be reported in accordance with Environmental Procedure *ERP-01 Incident Prevention, Reporting and Investigation*	In compliance	See Appendix Y for the October 2024 and April 2025 Dangerous Goods Storage Inventory Records. No spills were reported during the reporting period.
EI–01 Groundwater Monitoring			
Purpose: Must be followed for the ongoing monitoring of groundwater at the IWDF site. Monitoring for the presence of groundwater and of groundwater quality (should groundwater be found) is required to assess the potential impact of buried waste on groundwater.			
5.1	**Nomenclature and Recording** Monitoring locations are to be recorded using standard nomenclature, such as 2008-GM1-01. Where: • The first set of numbers relates to the year; • The second set of numbers refers to the monitoring location which should be referenced on the monitoring location Figure; and • The last two numbers identify the sample number at that location. Each monitoring event is to be recorded using the *Sampling/Groundwater Monitoring Record Form* (IWDF-Form-03b).	In compliance	See Figure 4 of this PCR for appropriately named monitoring locations and Appendix F for groundwater monitoring records.

Section	Requirement	Status	Evidence / Comment
5.2	**Monitoring Locations** The monitoring bore locations are recorded on a *Monitoring Location Figure*, which shall be updated as new locations are added.	In compliance	See Figure 4 of this PCR.
5.3	**Monitoring Schedule** The FMC Project Manager shall coordinate all groundwater monitoring through yearly monitoring *schedules*. The FMC Project Manager and Environment Manager shall ensure that monitoring undertaken by the FMC is undertaken in accordance with the monitoring schedules. Groundwater monitoring shall be undertaken every 6 months (if no groundwater is encountered) or every 3 months (if groundwater is encountered). Successive monitoring events are to be recorded on *Monitoring Register IWDF-Form-39*.	In compliance	Monitoring events have been recorded on a Monitoring Register IWDF-Form-39. See Appendix F for groundwater monitoring records.
5.4	**Maintenance and Calibration of Monitoring Equipment** The Environment Manager shall ensure that the monitoring equipment (i.e., the groundwater monitoring probe) used at the site undergoes regular maintenance and calibration in accordance with *FMC Management Procedure FMP-06 Control and Maintenance of Equipment*. The groundwater monitoring probe shall be located at the FMC offices (during periods when no site activities are underway) or in the site office or store (during disposal activities). Site personnel undertaking groundwater monitoring shall ensure that the groundwater monitoring probe is calibrated prior to each monitoring event by dipping the probe in water and checking for the signal. The results of the calibration test shall be recorded on the *Sampling/Groundwater Monitoring Record Form* (IWDF-Form-03b).	In compliance	Monitoring personnel confirmed that groundwater monitoring equipment was tested prior to each monitoring site visit.

Section	Requirement	Status	Evidence / Comment
5.5	**Monitoring Method** At each prescribed monitoring location, the following shall be undertaken: • The bore shall be dipped to determine if water is present; and • Results shall be recorded on the *Sampling/Groundwater Monitoring Record Form* (IWDF-Form-03b). If water is present: ▪ The water level shall be measured and reported on *the Sampling/Groundwater Monitoring Record Form* (IWDF-Form-03b); ▪ A water sample shall be taken (see below) and recorded on IWDF-Form-03a; ▪ The bore shall be purged prior to sampling (using a bailer or pump) comprising the removal of a minimum of three bore volumes ▪ A water sample shall be taken using a disposable bailer or a bailer which has been decontaminated (using detergent and water prior to use and then rinsed in fresh ideally distilled water). If a non-disposable bailer is used, equipment blank shall be taken (by sampling the distilled water passed through the cleaned bailer); ▪ The water sample(s) shall be placed in sample bottles appropriate for the proposed analyses (see below); and ▪ At least one duplicate sample shall be taken and analysed.	In compliance	Bores were dipped but water was not present. Results were recorded on the appropriate form (IWDF-Form-39). See Appendix F for groundwater monitoring records.
5.6	**Health and Safety** The appropriate PPE shall be worn while collecting any sample. This depends on the type of sample, type of potential contaminant, potential exposure pathways and location. The Safety Manager will indicate the appropriate PPE required, as referred to in the Operation Health and Safety and Emergency Response Procedures (if relevant). Any PPE that comes into contact, or is suspected to have come into contact, with contaminated samples, must be thrown away or decontaminated by washing with soapy water and rinsing in fresh water.	N/A	No disposal operation occurred during the reporting period. However, interview confirmed that appropriate Personnel Protection Equipment (PPE) was worn during monitoring activities at the IWDF.

Section	Requirement	Status	Evidence / Comment
5.7	**Sample Storage and Transport** Samples should be stored appropriately, dependent on their type and proposed analysis. Water samples should be stored in a chilled esky and packaged for transport. Transport to the receiving laboratory should be arranged as soon as possible.	N/A	No water was detected therefore no samples required storage or transportation.
5.8	**Sample Analysis and Chain of Custody** All samples shall be analysed by a laboratory that is NATA certified for the analyses required. A *Chain of Custody Record* (IWDF-Form-01), signed by the Environment Manager or delegate, will accompany the samples from the IWDF to the laboratory (probably in Perth). This is to be signed on receipt by laboratory personnel. Analysis must be undertaken within permitted holding times for the parameter being analysed (liaise with the laboratory to ensure these holding times are known).	N/A	No samples collected.
5.9	**Water Sample Analysis** The water samples shall be analysed for the component(s) specific to all wastes currently buried at the site, as summarised in *IWDF-Form-21 Groundwater Analysis Register* which is held by the FMC Environment Manager. The water analyses shall be interpreted using the relevant values from the *Department of Water and Environmental Regulation Contaminated Site Assessment Criteria* or as otherwise determined by the Environment Manager or Radiation Safety Officer, or in the *Operation Environmental and Waste Acceptance Procedures*. If any components are detected above recognised background (or previous monitoring) concentrations, Finance shall be notified. The appropriate remedial actions will then be taken, as directed by the FMC Environment Manager.	N/A	No groundwater water was detected therefore no analysis was required.

Section	Requirement	Status	Evidence / Comment
6.	**Records** The Environment Manager shall ensure that all FMC monitoring records are filed in the Operation Environmental Monitoring File at the IWDF site office (during disposal operations) or in the Environmental Monitoring File at the FMC head office. These records will be filed in accordance with *FMC Management Procedure FMP-02 Record Management*. Copies of all Sampling/Groundwater Monitoring Record Forms shall be provided to the Finance Project Manager.	In compliance	Random review of IWDF FMC project folders confirmed that records of ongoing monitoring were filed in the appropriate folder. All monitoring results were provided to Finance after the monitoring was completed. Monitoring results are reported in this PCR. See monitoring results in Section 5 of this PCR Report.
7.	**Reporting** The Environment Manager shall report all results to the FMC Project Manager. The FMC Project Manager shall forward results of all FMC environmental monitoring to the Finance Project Manager within 14 days of monitoring (or within 14 days of receipt of monitoring results). If abnormalities or exceedances are identified, the Finance Project Manager shall be informed as soon as practicable. Monitoring results shall be reported in the *Performance and Compliance Report*.	In compliance	See above.
EI–02 Soil and Dust Environmental Sampling			
Purpose: Must be followed for the sampling of soil and dust at the IWDF site.			
Not required as no disposal operation occurred during the reporting period.			

Section	Requirement	Status	Evidence / Comment
EI-03 Capping Monitoring			
Purpose: Must be followed for the ongoing monitoring of capping at the IWDF.			
5.1	**Nomenclature and Recording** Monitoring locations are to be recorded using standard nomenclature, such as: **2008RT01-L01-01** Where: • The first set of numbers relate to the trench number or the activity. • The second set of numbers refers to the monitoring location which should be referenced on the Monitoring Location Figure. • The last two numbers identify the photo or record number at that location. Monitoring records are to be recorded using the *Capping Monitoring Record Form* (IWDF-Form-38b).	In compliance	See Appendix O for Capping Monitoring Records.
5.2	**Monitoring Locations** For every waste disposal trench, at least one location shall be identified around the trench. The precise location will depend on the size and nature of the capping. The locations will be selected and marked so that the same locations can be used for repeated monitoring. The locations shall be recorded on a *Monitoring Location Figure*, which shall be updated as new locations are added.	In compliance	See monitoring locations in Figure 4 of this PCR.

Section	Requirement	Status	Evidence / Comment
5.3	**Monitoring Schedule** Monitoring shall be undertaken at least once per year, or more often if required in accordance with FMC monitoring schedule(s). The FMC Project Manager and Environment Manager shall ensure that monitoring undertaken by the FMC is undertaken in accordance with the FMC monitoring schedules.	In compliance	See Appendix O for Capping Monitoring Records.
5.3.1	**Monitoring Method** At each prescribed monitoring location, the following shall be undertaken: • **Photographs** – to be taken from the same location, in the same direction, and of the same feature; • **Written notes** – visual observations of the integrity of the trench dome surface, to include the presence of: ▪ Erosion channels ▪ Subsidence. • **Measurements** – depths of channel erosion or subsidence features, if feasible. The exact location of measurements should be recorded in photographs or sketches to allow comparison with subsequent measurements.	In compliance	See Appendix O for Capping Monitoring Records.
5.3.2	**Monitoring Analysis and Actions** Monitoring results and observations shall be compared with previous results to identify potential changes in the integrity of the capping. If erosion or subsidence of the capping is identified, the Operations Manager (having discussed the issue with the Engineering/Geotechnical Manager) shall undertake repair works on the cap, as soon as practicable.	In compliance	Review of capping monitoring results demonstrated that only very minor erosion has been detected and does not require any repair work. See Appendix O for Capping Monitoring Records.

Section	Requirement	Status	Evidence / Comment
6.	**Records and Reporting** Records of monitoring activities shall be documented by the Inspector and placed on file (as per *FMC Management Procedure FMP-02 Record Management*). The Inspector shall report all results to the Environmental Manager. The Environment Manager shall forward results of all monitoring (copies of Monitoring Records Forms and photos) to the FMC Project Manager within 14 days of monitoring (or within 14 days of receipt of monitoring results). If abnormalities or exceedances are identified, the Finance Project Manager shall be informed as soon as practicable. Monitoring results shall be reported annually in the *Performance and Compliance Report*.	In compliance	Random review of IWDF FMC project folders confirmed that records of ongoing monitoring were filed in the appropriate folder. All monitoring results were provided to Finance after the monitoring was completed. See monitoring results in Section 5 of this PCR Report.
EI-04 Rehabilitation Monitoring			
Purpose: Must be followed for the ongoing monitoring of rehabilitation at the IWDF.			
5.1	**Nomenclature and Recording** Monitoring locations are to be recorded using standard nomenclature, such as: **2008RT01-L01-01**. Where the: • First set of numbers relate to the trench number or the activity; • Second set of numbers refers to the monitoring location which should be referenced on a map or diagram; and • Last two numbers identify the photo or record number at that location. Monitoring records are to be recorded using the *Rehabilitation Monitoring Record Form* (IWDF-Form-38a).	In compliance	See Appendix N for rehabilitation monitoring records.

Section	Requirement	Status	Evidence / Comment
5.2	**Monitoring Locations** For every waste disposal trench, at least two locations shall be identified around the trench, one on each side of the trench. The precise location will depend on the size and nature of the trench and the extent of rehabilitated area. The locations will be selected so that the same locations can be used for repeated monitoring. The locations shall be recorded on a Monitoring Location Figure, which shall be updated as new locations are added.	In compliance	See monitoring locations in Figure 4 of this PCR.
5.3	**Monitoring Schedule** Monitoring shall be undertaken annually, ideally during spring months, in accordance with monitoring schedule(s). The FMC Project Manager and Environment Manager shall ensure that monitoring is undertaken in accordance with the monitoring schedules. A botanist shall inspect the rehabilitation at least every 10 years.	In compliance	See Appendix N for rehabilitation monitoring records. Last completed October 2024. Botanist deemed the revegetation/rehabilitation of all pre-2008 cells to be complete and no longer requiring monitoring.
5.3.1	**Monitoring Method** At each prescribed monitoring location, the following shall be undertaken: • **Photographs** – to be taken from the same location, in the same direction, and of the same feature. • **Written notes** – visual observations of the extent of revegetation, such as: ▪ Density of vegetation (% ground coverage). ▪ Maximum height of vegetation. ▪ Average height of vegetation. ▪ Species diversity. ▪ Presence of weeds.	In compliance	See Appendix N for rehabilitation monitoring records.

Section	Requirement	Status	Evidence / Comment
	The existing, fenced, disposal compounds shall remain clear of vegetation for the operational life of the IWDF. This allows for monitoring of the integrity of the water shedding clay dome. Any vegetation found to be growing on the water shedding clay dome shall be removed.		
5.3.2	**Monitoring Analysis and Actions** Monitoring results and observations shall be compared with previous results to track the development of revegetation. Care should be taken to compare monitoring results with those of similar seasons (or bear in mind seasonal changes). If revegetation does not appear to be progressing, the following should be undertaken: • Inspection of the rehabilitated areas by a botanist to identify potential issues and management strategies. • A management strategy shall be implemented, such as reseeding.	In compliance	Rehabilitation monitoring results for 2024 have been reviewed and compared with previous results. It was concluded that the rehabilitation is progressing well. The vegetation in the 2020NRT01 disposal cell rehabilitated areas is showing signs of achieving the same structure as the native vegetation, according to the botanist who undertook the flora and vegetation survey of the rehabilitation monitoring areas (Appendix N).
6.	**Records and Reporting** Records of monitoring activities shall be documented and placed on file (as per *FMC Management Procedure FMP-02 Record Management*). The Environment Manager shall report all results to the Project Manager. The Project Manager shall forward results of all FMC monitoring (copies of Monitoring Records Forms and photos) to the Finance Project Manager within 14 days of receipt of monitoring results. If abnormalities or exceedances are identified Finance shall be informed as soon as practicable. Monitoring results shall be reported annually in the *Performance and Compliance Report*.	In compliance	Random review of IWDF FMC project folders confirmed that records of ongoing monitoring were filed in the appropriate folder. All monitoring results were provided to Finance after the monitoring was completed. See monitoring results in Section 5 of this PCR Report.

FMC Radiation Management Procedures

Section	Requirement	Status	Evidence / Comment
RP-01 Radiation Management			
Purpose: Addresses the management of radioactive waste at the IWDF.			
As no radioactive disposal operation occurred during the reporting period, only the following sections of this procedure were audited.			
5.2	**Assessment of Radioactive Waste** 5.2.1 The acceptance of radioactive waste at the IWDF shall be undertaken in accordance with the flowchart provided in the Radioactive Waste Acceptance Guidelines (which includes a Proforma), and the Operational Procedure OP-01 *Assessment of Applications for Disposal.* 5.2.2 On receipt of a general query, Finance shall forward initial information to the FMC Project Manager. The FMC Project Manager will then provide the waste owner with a copy of the Radioactive Waste Acceptance Guidelines. 5.2.3 On receipt of an application for disposal of radioactive waste, (information must be detailed on radioactive waste acceptance proforma) Finance/FMC shall forward information to the RSO for technical assessment. 5.2.4 FMC shall prepare a preliminary indicative cost for disposal at the IWDF and provide this to Finance. This indicative cost will then be discussed with the waste owner. 5.2.5 Predisposal storage solutions for the proposed radioactive waste will be discussed with the waste owner.	In compliance	No enquires regarding the disposal of radioactive waste proceeded beyond an initial phone conversation with the FMC Project Manager.

Section	Requirement	Status	Evidence / Comment
5.12	**On-going Radiation Monitoring** Gamma radiation levels are to be measured at the same discrete GPS locations above and around the cell compound at the completion of all construction. This is to be done in accordance with Radiation Instruction RI-01 *Gamma Radiation Monitoring.* Gamma radiation levels must be measured every five years, or with each disposal operation involving radioactive items, whichever is the shortest interval. Additional radiation monitoring may be specified by the RC.	N/A	Gamma radiation monitoring was completed in October 2022 and is not required until October 2027 unless a radioactive waste disposal operation occurs in the interim.
5.13	**Occupational Radiation Monitoring** Personal monitoring devices must be used in accordance with Regulation 25 of the Regulations. All personnel who may potentially be exposed to radioactive material must wear a personal radiation dosimeter, e.g., TLD and/or PED. For personnel working in locations containing radiation-bearing airborne dusts, personal air monitoring of inhalable dust may be undertaken. This monitoring will be in accordance with AS3640-2009. Additional personal radiation monitoring may be required by the RC, as specified in the approval for the disposal operation.	In compliance	Public dose constraint monitoring that was undertaken during the reporting period is reported in Section 5.4 of this PCR. This PCR will be provided to the RC. No disposal operation occurred during the reporting period.
6.	**Records and Reporting** Records of radioactive waste activities shall be documented by the RSO, and placed on file (as per FMC Management Procedure FMP-02 *Record Management*). Radiation management issues shall be reported to the FMC Project Manager & Finance, upon their request.		No disposal operation occurred during the reporting period. However, random review of IWDF FMC project folders confirmed that records of public dose constraint monitoring were filed in the appropriate folder.

Section	Requirement	Status	Evidence / Comment
	The results of operation-specific activities shall be reported by the FMC Project Manager in the PCR and close-out report. The following reports are to be included in the close-out report for each burial operation involving radioactive waste: • Pre-burial gamma radiation monitoring • Post-burial gamma radiation monitoring. • On-going gamma radiation monitoring. • Occupational radiation monitoring. The PCR and close out report must be submitted to DWER and the RC within three months of formally completing the disposal operation.		Public dose constraint monitoring that was undertaken during the reporting period is reported in Section 5.4 of this PCR. This PCR will be provided to DWER and the RC.
RI-01 Gamma Radiation Monitoring			
Purpose: Must be followed for the measurement of gamma radiation levels at the IWDF.			
5.1	**Monitoring Equipment & Calibration** Gamma radiation levels are to be measured using an appropriately calibrated Environmental Monitor, equipped with a Geiger-Muller scintillator probe, which enables the aggregate count in one minute to be recorded. The RSO shall ensure that appropriate calibration records are obtained in accordance with FMC Management Procedure FMP-06 *Control and Maintenance of Equipment*. A copy of the current calibration certificate or letter of authorisation is to be included with all reports.	N/A	No radiation monitoring undertaken during the reporting period.

Section	Requirement	Status	Evidence / Comment
5.2	**Monitoring Method** The detector is to be fixed horizontally one metre above the ground level at each location point, 3 (three) one-minute counts are taken, and the aggregate counts recorded.	N/A	No radiation monitoring undertaken during the reporting period.
5.3	**Pre-Disposal Monitoring** A one-off gamma radiation survey is to be conducted prior to the commencement of any earthworks associated with a disposal operation. Measurements are to be made on a grid over the proposed disposal area. The size of the grid should be such that a minimum of 25 location points is measured within the area. The location of each point measured is to be established by GPS, or equivalent. All the data are to be recorded within a table, or equivalent, showing both the locations and the aggregate counts. The mean aggregate counts in one minute are to be converted to micrograys per hour (µGy/h) using the approved calibration factor for the radiation monitor. The report should specify the number of measurements, the range of gamma radiation levels (or more strictly the absorbed dose rates in air expressed as µGy/h), the mean, and the standard deviation from the mean.	N/A	No disposal of radioactive waste occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
5.4	**Post-Disposal Monitoring** A one-off gamma radiation survey is to be conducted after the completion of all earthworks associated with a radioactive waste disposal operation. Measurements are to be made at a representative number of location points within, and at the perimeter of, the disposal compound. The location of each point measured is to be established by GPS, or equivalent. Results shall be recorded on the *Gamma Radiation Monitoring Form*. The mean of 3 (three) one-minute counts are to be recorded at each location. All the data are to be shown in a table, or equivalent, showing both the locations and the mean aggregate counts. The mean aggregate counts in one minute are to be converted to µGy/h using the approved calibration factor for the radiation monitor. The report should specify the number of measurements, the range of gamma radiation levels (or more strictly the absorbed dose rates in air expressed as µGy/h), the mean, and the standard deviation from the mean.	N/A	No disposal of radioactive waste occurred during the reporting period.
5.5	**On-going Monitoring** Gamma radiation surveys are to be conducted every five years, or associated with a burial operation involving radioactive waste, whichever is the shortest interval. Measurements are to be made at a representative number of location points within, and at the perimeter of, the disposal compound. The location of each point measured is to be established by GPS, or equivalent.	In compliance	Gamma radiation monitoring was completed in the 2022 reporting period and will be undertaken again in 2027.

Section	Requirement	Status	Evidence / Comment
	Results shall be recorded on the *Gamma Radiation Monitoring Form*. The means of 3 (three) one-minute counts are to be recorded at each location. All the data are to be shown in a table, or equivalent, showing both the locations and the mean aggregate counts. The mean aggregate counts in one minute are to be converted to µGy/h using the approved calibration factor for the radiation monitor. The report should specify the number of measurements, the range of gamma radiation levels (or more strictly the absorbed dose rates in air expressed as µGy/h), the mean, and the standard deviation from the mean.		
6.	**Records** The RSO shall ensure that all monitoring records are filed in the IWDF Radiation Monitoring File maintained in their office as per FMC Management Procedure *FMP-02 Record Management.*	In compliance	Review confirmed that all past radiation monitoring reports are stored in the radiation monitoring folder of the IWDF Document Library.
7.	**Reporting** The RSO shall submit reports on the various monitoring programs to the FMC Project Manager and Finance Project Manager. The RSO on behalf of the Department of Finance shall forward a copy of each radiation monitoring report to the Radiological Council.	In compliance	The public dose constraint monitoring undertaken during the reporting period is reported in Section 5.4 of this PCR. This PCR will be provided to the RC.

Section	Requirement	Status	Evidence / Comment
RI–02 Occupational Radiation Monitoring			
Purpose: Addresses personal radiation monitoring of workers involved in disposal operations for radioactive material at the IWDF. Personal radiation monitoring is applicable to the delivery, acceptance, packaging, transportation, and disposal (burial) phases of each operation. This work instruction also addresses the measurement of dose exposure during non-disposal periods to demonstrate that the public dose constraint would not be exceeded if a member of the public was to attend the site.			
As no radioactive disposal operation occurred during the reporting period only Section 5.4 of RI-02 was audited.			
5.4	**Public Radiation Monitoring (dose constraint)** Public dose exposures under normal operations (i.e., care and maintenance) need to be measured to demonstrate that the public dose constraint is achievable. Each time the FMC visits the IWDF, a thermoluminescent dosimeter (TLD) badge will be assigned to a person involved in the site activities. The TLD badge should be worn at waist height. The TLD badge shall be worn prior to the beginning of the site activities and for the duration of the site activities. A control TLD badge will also be assigned as a control at a location that will not be impacted upon by any radioactive material. TLD badges should be provided from an approved radiation monitoring service provider. When operations finish, all TLD badges and the control TLD badge should be returned to the RSO as soon as practicable. The RSO will be responsible for sending the TLD badges to the monitoring service provider. On return of badges from the monitoring service provider, record TLD dose of each person on the *Personal (Worker) Radiation Monitoring Form – PRM5, and Personal (Public) Radiation Monitoring Form – PRM6*. Additional details to note include issue date, worker name, date of birth, work activity, and work duration.	In compliance	See discussion and results at Section 5.4 of this PCR. Completed Form – PRM6 was sighted.

Section	Requirement	Status	Evidence / Comment
	Where the indicated dose is close to or exceeding the IWDF dose constraint, as discussed in Section 5.3, the RSO must investigate the cause of the dose constraint breach. If appropriate, they will then put in place further dose control measures to minimise worker exposures.		

FMC Safety Management Procedures

Section	Requirement	Status	Evidence / Comment
SP–01 Health and Safety Management and Planning			
Purpose: Addresses the management and planning of health and safety at the IWDF.			
5.1	**Identification of Hazards (Aspects and Impacts)** An Environmental & Health & Safety Aspects and Impacts Register shall be maintained and updated for general and waste-specific activities at the IWDF. This may comprise part of the general IWDF Aspects and Impacts Register. The register shall be developed using a risk assessment method developed for the IWDF, as outlined in Finance Management Procedure MP-01 Aspects and Impacts. The register shall be updated prior to each new disposal operation, to include waste-specific aspects and impacts. The register shall be updated to include additional activities that may be planned as part of the ongoing management of the site.	N/A	No disposal operation occurred during the reporting period. Aspects and Impacts (Risk) Register was reviewed and updated in May 2025 by the IWDF Management Team.

Section	Requirement	Status	Evidence / Comment
5.2	**Operational Health & Safety Documentation** The Health and Safety Aspects and Impacts Register shall be used to identify (and if necessary, update), health and safety management procedures, as outlined in the IWDF Safety Procedures (SPs) and associated Safety Instructions (SIs). A document summarising the Operation Health and Safety and Emergency Response Procedures (OHSERP) for the proposed disposal project shall be compiled by the FMC Systems Manager. Input will be provided by the Safety Manager and the RSO (if necessary). The scope of the OHSERP shall be in accordance with the Health & Safety and Emergency Response (Reporting) Guidelines.	N/A	No disposal operation occurred during the reporting period. Aspects and Impacts (Risk) Register was reviewed May 2025 by the IWDF Management Team.
5.3	**Operational Health & Safety Planning** The following health and safety planning activities shall be completed prior to commencement of site operation activities: • Selection and purchase of applicable PPE (see Safety Instruction SI-02 *Personal Protective Equipment*). • Engagement of a site nurse/paramedic or senior first aid officer (see Safety Instruction SI-06 *First Aid*). The following health and safety planning activities shall be completed prior to commencement of any waste handling activities: • Development and approval of operation specific health and safety and emergency response procedures (see above). • Appointment of and liaison with medical practitioner (in accordance with WorkSafe requirements) regarding health surveillance and medical clearance for respirator use (see Safety Instruction SI-04 *Occupational Monitoring*).	N/A	No disposal operation occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
	• Liaison with Radiation Safety Officer (if necessary) to determine radiation safety requirements (see Radiation Procedure RP-*01 Radiation Management*). • Selection and purchase of applicable PPE (see Safety Instruction SI-*02 Personal Protective Equipment*).		
6	**Records and Reporting** The results of health and safety planning activities shall be documented by relevant personnel and placed on file (as per FMC Management Procedure *FMP-02 Record Management)*. Operation documents shall be compiled, reviewed, and reported as outlined in Section 5.2 of FMC Management Procedure *FMP-01 Document and Data Control*. Health and safety management issues shall be reported to Finance upon their request, or as deemed appropriate by the Safety Manager.		No health and safety issues occurred during the reporting period.
SP–02 Operation Site Safety Management			
Purpose: Must be followed for safety management at the IWDF site during disposal operations.			
Not required as no disposal operation occurred during the reporting period.			
SI-01 Excavation Safety			
Purpose: Addresses the management of excavation safety at the IWDF.			
Not required as no disposal operation occurred during the reporting period.			

Section	Requirement	Status	Evidence / Comment
SI-02 Personal Protective Equipment			
Purpose: Addresses the requirements for personal protective equipment at the IWDF.			
Not required as no disposal operation occurred during the reporting period.			
SI-03 Hygiene and Decontamination			
Purpose: Addresses the requirements for decontamination at the IWDF.			
Not required as no disposal operation occurred during the reporting period.			
SI-04 Occupational Monitoring			
Purpose: Addresses the requirements for occupational monitoring and medical surveillance at the IWDF.			
Not required as no disposal operation occurred during the reporting period.			
SI-05 Communications and Traffic Control			
Purpose: Addresses the requirements for communications and traffic control at the IWDF.			
5.1	**General Communications** The IWDF 4WD vehicle is equipped with a portable satellite telephone and CB/UHF/VHF radio. Other communication on-site is by CB/UHF/VHF and portable radio. The portable radios must be capable of operating between the trench areas and the site accommodation area. Wherever possible, more than one person will be present at the site at any one time, and more than one person will undertake any isolated activity at the site.	In compliance	The FMC Operations Manager confirmed that: • Portable satellite telephones and CB/UHF/VHF radios were in use. • The list of emergency contacts was displayed in the office and available in the site vehicles.

Section	Requirement	Status	Evidence / Comment
	However, if an employee is isolated from other persons for a particular task, communication will be available in the form of a portable satellite telephone, CB/UHF radio or portable radio to enable the employee to call for help in the event of an emergency. Regular contact will be made between an isolated employee and either the Operations Manager or Safety Manager. An appropriate procedure (such as regular radio communication) will be established on a case-by-case basis by the Operations Manager or the Safety Manager and the isolated worker. This routine will consider the proposed activity, proximity of the worker to the site, and availability of communication systems. Site operations personnel will be in contact using portable radios. All persons expected to use the portable satellite telephone, CB/UHF/VHF radio and the portable radios will be trained in their use by the Operations Manager or Safety Manager. The list of *Operation Emergency Contact numbers* will be displayed in the office and next to the portable satellite telephone in the IWDF 4WD vehicle. The IWDF 4WD vehicle must be present on the site during general activities and at the operating trench during all waste disposal activities to enable emergency contacts to be alerted.		Starlink was also trialled during the reporting period and was found to be very useful in terms of data connection. Review of Site Visit Records confirmed that there was always more than one person at the IWDF during monitoring events. See Appendix G for Site Visit Checklists.
5.2	**Communication Protocol – Arrival** All personnel (including visitors and contractors) are required to call the IWDF before departing the Great Eastern Highway turnoff to the site. They are to advise on the anticipated time of arrival.	N/A	No disposal operation occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
	Upon arrival, all persons must sign in using the State Personnel and Visitor Logbook. Upon Departure, all persons must sign out in the State Personnel and Visitor Logbook. The Operations Manager or the Safety Manager will instigate a search if personnel fail to arrive within one hour of the anticipated time.		
5.4	**Access Road – Waste Trucks** Personnel involved in the dispatch of trucks from the waste producer's storage location shall advise the Operations Manager at the site of the approximate arrival time of each convoy. The Operations Manager will notify other road users (permit/agreement) approximately 30 days in advance that waste will be transported on the road. The Operations Manager will specify approximate dates and length of time. Truck drivers will be informed not to use the road in wet conditions. A large truck bay has been constructed at the southern end of the access road to allow up to five trucks to safely wait off the road. Trucks will remain there until weather and road conditions improve. Trucks carrying waste shall only travel on the access road during daylight hours (or as directed by the Operations Manager).	N/A	No disposal operation occurred during the reporting period.
5.5	**Speed Limits for Access Road and Exclusion Zone** A maximum speed limit of 40 km/h is set for the exclusion zone for all vehicles, including heavy machinery. A maximum speed limit of 80 km/h is set for all other areas. Normal caution is appropriate at the site, especially near turn-offs and around buildings (where there are pedestrians).	In compliance	No disposal operation occurred during the reporting period. However, speed limits were observed during routine monitoring visits.

Section	Requirement	Status	Evidence / Comment
	The speed limit for the site access road is 80 km/h. Road and weather conditions should be considered in establishing a safe speed, which may be specified by the Operations Manager.		
5.6	**Side-tracks** There are numerous narrow tracks in a network around the site that are not maintained. Driving on these tracks, while not prohibited, is discouraged. It is easy to get lost in the network and these tracks often contain stakes, which could puncture tyres. There is generally no requirement to use these tracks to operate at the site. The use of these tracks should only be following specific permission of the Operations Manager.	In compliance	No vehicles were operated on unmaintained tracks.
5.7	**Excavation Traffic Control** Specific traffic control procedures may be required in the vicinity of the trench excavation area. They must be developed and communicated on an operation-specific basis. It is likely that visibility around the trench area may be impaired due to the presence of stockpiles of material. In such cases, a communication protocol shall be developed. For example, using radio contact to announce the entry of every vehicle into the trench area. Visitors shall not be allowed to drive in the trench area, without the specific permission of the Operations Manager.	N/A	No disposal operation occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
6.	**Records and Reporting** The Safety Manager shall ensure that all records are filed in the Safety Management File at the IWDF site office (during disposal operations) or in the Safety Management file at the FMC office, in accordance with FMC Management Procedure *FMP-02 Record Management*. The Safety Manager shall report all site safety issues to the FMC Operations Manager and the FMC Project Manager.	In compliance	Random review of IWDF FMC project folders confirmed that records of access road conditions were filed in the appropriate folder. See Appendix V for Access Road Condition Reports.
SI-06 First Aid			
Purpose: Addresses the requirements for first aid management at the IWDF.			
Not required as no disposal operation occurred during the reporting period.			
SI-07 Heavy Machinery Operations			
Purpose: Addresses the requirements for heavy machinery operations at the IWDF.			
Not required as no disposal operation occurred during the reporting period.			
SI-08 Exclusion Zones			
Purpose: Addresses the requirements for Exclusion Zones at the IWDF.			
Not required as no disposal operation occurred during the reporting period.			

FMC Operation Emergency Response Procedures

Section	Requirement	Status	Evidence / Comment
ERP-01 Incident Prevention Reporting and Investigation			
Purpose: Addresses the management of incidents at the IWDF.			
5.1	**Identification of Incidents** An **Incident** is a system failure resulting in loss of containment, uncontrolled discharge, and damage to the surrounding environment, public complaint, or non-conformance with environmental regulatory requirements. Examples of incidents include: • Chemical spillage resulting in environmental pollution or injury/exposure. • Vehicle accident resulting in injury or spill. • Bush fire. • Unplanned/unauthorised damage to/clearing of vegetation. Incidents may be defined as being: • **minor** – very limited, or no, material damage, environmental damage, or personal injury (e.g., requiring only basic first aid). • **major** – significant personal injury (e.g., requiring hospitalisation or medical treatment) or environmental damage. A **Near Miss (or hazard)** is an event or situation that has the potential to result in an incident. Examples of a near miss are: • Vehicle accident without property damage or personal injury. • Lifting of a damaged waste container. • Lack of dust suppression during heavy machinery use on a hot and dry day. An **Accident** is an incident that involves personal injury.	N/A	General information.

Section	Requirement	Status	Evidence / Comment
5.2	**Avoidance of Incidents** All site personnel shall endeavour to avoid the occurrence of incidents by: • Identifying, reporting, investigating, and recording all hazards and near misses; and • Following relevant operational, environmental, and safety procedures (*OPs, EPs, SPs, ERPs*).		General information.
5.3	**Emergency Response** Emergency Response Procedures shall be implemented for major incidents in accordance with *ERP-02 Emergency Response Management*.	N/A	No major incidents occurred at the IWDF during the reporting period.
5.4	**Reporting & Notification of Near Misses, Accidents, and Incidents** All near misses, accidents, and incidents shall be reported by the identifier **immediately** (or as soon as practicable) to the Operations Manager or Safety Manager. All near misses, incidents or accidents shall be reported using a *Near Miss/Accident/Incident/Exposure Report (IWDF-Form-06)* which shall be completed and registered *(IWDF Form-07)*. Copies of all incident/accident reports shall be forwarded to the FMC and Finance Project Managers within 24 hours (and as soon as practicable for major incidents). Appropriate authorities shall be notified in the event of major incidents (see specific ERI's). The Operations Manager shall contact relatives of any injured personnel, as required (using contact details given in the Medical Advice Form completed for the individual, if completed). The Operations Manager or any other FMC personnel shall not speak to the media regarding the incident without the express permission of the **Finance Project Director**.	N/A	No near misses, accidents, or incidents occurred during the reporting period. It should be noted that personnel were only present at the IWDF for several days during the reporting period.

Section	Requirement	Status	Evidence / Comment
5.5	**Investigation** All near misses and incidents shall be investigated by the Operations Manager and Safety Manager, as a minimum. Environmental incidents shall also be investigated by the Environment Manager (EP-09). The objectives of the investigation will be to: • Determine the existence of unforeseen hazards or contributing factors; • Make recommendations for managing such hazards; • Determine if any unsafe practices or conditions were involved; • Evaluate the adequacy of the existing safety management practices; • Evaluate the effectiveness of the response implemented during the emergency; and • Make recommendations for managing or eliminating unsafe conditions and for changes to procedures if warranted. **Major incidents** shall be investigated by the Investigations Team. This includes the FMC Project Manager, Operations Manager, Safety Manager, Environment Manager (if required), and waste owner health & safety personnel, (as appropriate). The investigation procedure for a major incident shall be as follows: 1. Those members of the Investigation Team present on site at the time of the incident or just after (e.g., the Operations Manager, Safety Manager) will seek to obtain facts about the incident quickly and accurately (but without detriment to the emergency response procedure); 2. The Operations Manager / Safety Manager will assess the hazards to others at the scene and, as appropriate, evacuate the area and/or seek professional assistance (e.g., fire brigade) to secure the premises and prevent further such occurrences;	N/A	No major incidents occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
	3. Those members of the Investigation Team who are not at the site at the time of the incident, but are required on site, will arrive at the scene as soon as possible. Arriving members will be briefed by those members of the team already present; 4. Evidence at the scene of the incident will be preserved, except to the extent necessary to protect personnel and the environment, until the investigation is completed; 5. Statements will be recorded from all witnesses; 6. The injured person(s) will be interviewed as soon as possible; 7. Physical evidence of the incident will be taken in the form of photographs and measurements of the scene; 8. All other evidence relating to the incident will be recorded; 9. Recommendations will be made for: • The management and / or elimination of hazards / impacts relating to the incident; • Changes in standard operating procedures; and • Revision of training. An accident investigation report will be compiled by the Safety Manager and will be submitted to Finance within 7 days of the emergency, or as agreed with Finance. The FMC Safety Manager shall also supply copies of the report to: • Any personnel directly involved/injured in the incident; and • FMC Project Manager and Operations Manager. The Finance IWDF Project Director shall provide a copy to WorkSafe Western Australia if notifiable injuries had been incurred, under the *Work Health and Safety Act 2020* and associated Regulations.		

Section	Requirement	Status	Evidence / Comment
5.6	**Corrective and Preventative Actions** Corrective actions shall be identified and implemented to prevent recurrence of the incident. Corrective and Preventative actions shall be documented on the *Near Miss/Incident/Accident/Exposure Report (IWDF-Form-06)*, and on a CAR (for system or procedural actions, IWDF-Form-10).	In compliance	No new non-conformances were identified during the reporting period.
6.	**Records and Reporting** Incident reports shall be placed on file (as per *FMP-02 Record Management*). Incidents shall be reported in the *Annual Performance and Compliance Report*.	N/A	No incidents were reported during the reporting period.
ERP-02 Emergency Response Management			
Purpose: Addresses the management of emergency response at the IWDF.			
5.2	**IWDF 4WD Vehicle and Emergency Stretcher** The IWDF 4 Wheel Drive (4WD) vehicle shall be equipped with a satellite phone (or a portable satellite phone) and a UHF/VHF radio, a first aid kit, and emergency contact details and procedures. This vehicle shall be maintained and kept on-site during all operations, and in the vicinity of the active trench during all disposal operations. An emergency stretcher will be stored in the trench office during all disposal operations or in the storage shipping container at other times. In the event of absence or failure of the IWDF 4WD vehicle, an alternative vehicle will be used. This substitute vehicle will be equipped with at least a portable satellite phone, portable radio (preferably a UHF/VHF radio), first aid kit, and emergency contact details. Preference should be given for a long-wheel base vehicle which is capable of transporting a stretcher if necessary. Communications must be maintained with the site office such that the alarm can be raised, and emergency services	In compliance	Observation confirmed that the 4WD vehicle used to visit the IWDF was equipped with a satellite phone, VHF radio, first aid kit, emergency contact details and procedures and could, if required, carry a stretcher.

Section	Requirement	Status	Evidence / Comment
	contacted from the portable satellite phone. The limitations of the vehicle should be considered in relation to emergency procedures requiring evacuation of injured personnel. The First Aid Officer will assess whether a victim may be transported in a vehicle for evacuation.		
5.3	**Emergency Contact Details** General (ongoing) Emergency Contact Details for the IWDF are provided in *IWDF Emergency Contact List* document. Operation-specific contact details are compiled as part of the *Operation Transport Procedures* (OTP). The Department of Fire and Emergency Services (DFES) is designated as the Hazard Management Agency for hazardous materials emergencies in Western Australia. **The DFES will be the first point of contact in the event of an emergency (e.g., fire) involving waste at the IWDF.** The DFES is responsible for ensuring that all emergency management activities pertaining to the prevention of, preparedness for, response to, and recovery from, hazardous materials emergencies are undertaken. The HAZMAT Coordinating Committee comprises many agencies, both government and private (e.g., DFES, Police, Department of Water and Environmental Regulation, and Ambulance services) and assists the DFES to coordinate the State's resources in the management of hazardous materials emergencies.	General information	Observation confirmed a copy of the Emergency Contact Details document is at the IWDF site office and is included in the Job Safety Analysis (JSA) and the site-specific Health and Safety Plan.

Section	Requirement	Status	Evidence / Comment
5.4	**Emergency Response Team** An IWDF (Disposal Operation ERT) shall respond to all incidents or emergencies at the IWDF site. The ERT shall comprise the Site Manager, Safety Manager, First Aid Officer, Environment Manager, and the Contractor Supervisor, under the management of the Operations Manager (or the Safety Manager if the Operations Manager is unavailable). The Operations Manager shall ensure that: • ERT members have received appropriate training. • ERT members have appropriate PPE (see SI-02 Personal Protective Equipment and OHSERP) and emergency equipment (IWDF-Form-42) on standby. If an incident occurs during transport of waste to the IWDF, members of the ERT may be required to travel to the incident site. Movements will occur under the direction of the Operations Manager, in accordance with ERI-04 *Transport Emergency Response*.	N/A	No disposal operation occurred during the reporting period.
5.5	**Muster Points and Accounting for Personnel** Muster Points shall be defined and communicated to all site personnel during inductions, and during safety briefings (e.g., if the muster points change during operations). The *Site Plan* shall specify all muster locations. Upon mustering of personnel, the Operations Manager, Site Manager or Safety Manager, shall ensure that all personnel are accounted for by checking the latest entries in the *State Personnel and Visitor Logbook*.	In compliance	Review of the Site Plan included in the General Site Induction confirmed that the muster points were defined. Accounting for personnel was not required during the reporting period as no disposal operation occurred and mustering was not required.

Section	Requirement	Status	Evidence / Comment
5.6	**General Emergency Response Procedure** A general Emergency Response Procedure shall be communicated to all personnel at the site, as outlined in the IWDF *Emergency Response Procedure Information Sheet*. This procedure must be posted around the site. Personnel are required to familiarise themselves with these procedures.	In compliance	Observation and review confirmed that the general Emergency Response Procedure was included in the General Safety Induction package and was posted in the site office.
5.7	**Specific Emergency Response Procedures** There are three main types of specific emergency response procedures defined for the IWDF: • Injury or medical emergency evacuation procedure; • Waste incident and spill response procedure; and • Fire response procedure. Sheets summarising these procedures shall be posted around the site and shall be given to site personnel during their site inductions (*Emergency Procedure Information Sheets*). These emergency procedures are outlined in more detail in Emergency Response Instructions ERI-01, *Injury or Medical Emergency Evacuation Response*, ERI-02 *Waste Incident and Spill Response*, and ERI-03 *Fire Response*. The Operations Manager, Safety Manager and Contractor Safety Supervisor shall be familiar with these procedures.	In compliance	The General Safety Induction package contained the required specific emergency response procedures. Observation confirms that these procedures were also posted in the site office.

Section	Requirement	Status	Evidence / Comment
5.8	**Communications & Notification** Other members of the Project Team, family members (in the event of an accident) and authorities, shall be contacted in accordance with ERP-01 *Incident Prevention, Reporting, and Investigation*.	N/A	No emergency incidents occurred during the reporting period.
5.9	**Emergency Debriefing** After every emergency incident, a de-briefing session is to be held as soon as practicable and prior to recommencement of operations. The events leading to the incident, the impacts of the incident and the corrective/preventive actions are to be discussed (as identified during the emergency investigation). The Operations Manager shall ensure that a record of the debriefing session is taken and filed.	N/A	No emergency incidents occurred during the reporting period.
5.10	**Resumption of Operations** Site operations shall only resume when the Operations Manager is satisfied that: • The incident has been investigated and documented. • The cause of the incident has been rectified and that no residual risk remains in the incident area. • Further activity can proceed safely. • Approval has been given by the FMC Project Manager and the Finance Project Manager. • Approval has been given by WorkSafe (WA) if notifiable injuries have been incurred.	N/A	No emergency incidents occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
6.	**Records and Reporting** Emergencies shall be reported and recorded in accordance with ERP-01 *Incident Prevention, Reporting, and Investigation*.	N/A	No emergency incidents occurred during the reporting period.
ERI-01 Injury or Medical Emergency Evacuation Response			
Purpose: Must be followed in the event of a serious medical emergency, which may require evacuation, at the IWDF.			
As there was no serious injury which required evacuation from the IWDF, this emergency response instruction was not audited.			
ERI-02 Waste Incident and Spill Response			
Purpose: This instruction must be followed in the event of any incident relating to chemical waste, radioactive waste, or other hazardous material, at the IWDF.			
As there was no incident relating to chemical waste or other hazardous material during the reporting period, compliance with this emergency response instruction was not audited.			
ERI-03 Fire Response			
Purpose: This instruction must be followed in the event of fire at the IWDF.			
As there was no fire at the IWDF during the reporting period, compliance with this emergency response instruction was not audited.			
ERI-04 Transport Emergency Response			
Purpose: Must be followed in the event of an incident occurring during transport of waste to the IWDF.			
As no incident occurred during transport of waste to the IWDF, compliance with this emergency response instruction was not audited.			

4.3 IWDF Environmental, Health and Safety Management Program

4.3.1 Overview

The IWDF Environmental, Health and Safety Management Program provides the basis for the establishment and maintenance of effective management programs to achieve the standards, objectives, and targets for the IWDF, and to enable continual improvement in performance. The IWDF Environmental, Health and Safety Management Program is comprised of Management Plans and Action Plans.

4.3.2 Management Plans

These Management Plans are summary documents which have been developed to provide high level management goals, objectives, and targets for the following aspects of the IWDF's activities:

- Flora and fauna;
- Water;
- Air quality;
- Decommissioning and rehabilitation;
- Health and safety;
- Emergency response;
- Radiation;
- Transport:
- Waste acceptance;
- Community liaison; and
- Management review.

The Management Plans summarise the methods (i.e., procedures and operational controls) that are in place and must be maintained to achieve the on-going management goals, objectives, and targets, and hence sustain best practice operational performance.

4.3.3 Compliance Assessment

Table 8 documents the level of compliance with the management program requirements of each of the IWDF Management Plans for the reporting period. Management of the IWDF was compliant with the applicable requirements of the Management Plans during the reporting period.

Table 8
IWDF Management Plans Compliance Statement for July 2024 to June 2025

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
1	**Air Quality**	FMC will undertake inspections to ensure that waste is appropriately packaged, transported, and unloaded to prevent spillage or rupture. FMC will inspect packages to ensure they are free from waste on outer surfaces prior to unloading.	N/A	No waste disposal occurred during the reporting period.
		If a waste package ruptures, the waste material will be covered as soon as possible. Any spillage will be immediately contained and recovered.	N/A	No waste disposal occurred during the reporting period.
		Appropriate personal protective equipment and safety measures will be utilised when necessary.	N/A	No waste disposal occurred during the reporting period.
		Dust suppression techniques will be employed during earthworks.	N/A	No waste disposal occurred during the reporting period.
		Dust monitoring shall be undertaken.	N/A	No waste disposal occurred during the reporting period.
		Vehicles and machinery will be serviced regularly to ensure optimal efficiency.	N/A	No waste disposal occurred during the reporting period.
		If required, hazardous atmospheres in disposal cells will be managed.	N/A	No waste disposal occurred during the reporting period.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
2a	**Decommissioning and Rehabilitation- A Operation Specific and Ongoing**	Vegetation and topsoil cleared during operations shall be stockpiled nearby.	N/A	No waste disposal occurred during the reporting period.
		Cleared areas shall be rehabilitated using the stockpiled vegetation and topsoil following completion of their use (except for fenced disposal compounds and tracks used for access).	N/A	No waste disposal occurred during the reporting period.
		Areas undergoing rehabilitation will be monitored annually by the FMC and assessed by a botanist every ten years. Assessment by a botanist should be next undertaken in October 2034.	In compliance	See Appendix N for Rehabilitation Inspection Records. Assessment by botanist was completed in October 2024 and is next due in October 2034. See also Appendix N for botanical report.
		Temporary infrastructure shall be removed upon completion of site works.	N/A	No temporary infrastructure on site during the reporting period.
		Disused tracks and road shall be allowed to revegetate naturally.	In compliance	Site Inspection Reports and aerial photography show that all disused tracks have revegetated naturally.
2b	**Decommissioning & Rehabilitation- B Long Term and Site Closure**	A decommissioning statement will be prepared six months prior to decommissioning. Aurora Environmental (2023) Final Cover Concept for Waste Disposal Cells at the Intractable Waste Disposal Facility, Mt Walton East and Associated Costings. Prepared for Department of Finance, 13 December 2023. Review of	N/A N/A	Not yet required as the IWDF remains operational. Not yet required as the IWDF remains operational.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
		rehabilitation scenarios process and costs every 5 years. Latest review December 2023. The decommissioning statement will include a zone of restricted occupancy outside the site perimeter as a region in which there is public access. However, permanent occupancy is prohibited for the institutional control period.	N/A	Not yet required as the IWDF remains operational.
3	**Emergency Response**	Implement effective and appropriate emergency response procedures.	In compliance	See page 39 of this PCR for list of Emergency Response Procedures and Work Instructions.
		Report thoroughly on all emergency or potential emergency incidents.	N/A	No emergency or potential emergency incidents occurred during reporting period.
		Investigate all incidents, accidents and near misses. Implement corrective actions to prevent their recurrence.	N/A	No emergency or potential emergency incidents occurred during reporting period.
		Provide all personnel with the appropriate equipment and training.	In compliance	As shown in JSA's for site visits and Training Register, sighted by auditor.
4	**Flora and Fauna**	Flora and fauna surveys shall be undertaken to identify species at the site.	In compliance	Fauna Assessment was completed in 2009 by Coffey Environments. See 2009 PCR for report. Botanical Assessment was completed in 2014. See 2014 – 2015 PCR for report. A Botanical Assessment was undertaken in October 2024 and is next due in October 2034. See Appendix N for botanical report

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
		The conservation status of plants in the proposed clearing area will be determined. Clearing will be avoided in areas containing priority species.	N/A	Not required during reporting period as no clearing occurred.
		Where necessary, a botanist shall be brought to site prior to significant clearing.	N/A	Not required during the reporting period as no clearing occurred.
		Unnecessary clearance or disturbance of vegetation shall be avoided.	N/A	Not required during the reporting period as no clearing occurred.
		Fauna injuries and deaths will be treated as environmental incidents.	N/A	No environmental incidents were reported during the reporting period.
		Drivers within the IWDF shall be aware of native fauna.	In compliance	Native fauna awareness was included in the general safety induction for all personnel visiting the IWDF during the reporting period.
		Trenches and boreholes shall be designed to prevent the trapping of fauna.	In compliance	FMC Operations Manager confirmed that all boreholes and trenches remain capped to prevent fauna ingress.
		Dust suppression techniques shall be used during operations.	N/A	No waste disposal occurred during reporting period.
		Priority flora identification kit to be regularly updated (to be reviewed October 2025).	In compliance	Priority flora identification kit was reviewed prior to the October 2024 monitoring event. However, no changes were required. Last reviewed June 2025.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
		Weed identification kit to be regularly reviewed (to be reviewed October 2025).	In compliance	The Weed Management Plan and identification kit was reviewed in October 2024. However, no changes were required.
5	**Health and Safety**	Comply with Operation Health and Safety and Emergency Response Procedures (OHSERP).	In compliance	Where applicable – during site inspection visits.
		IWDF Health and Safety processes and procedures comply with the *Work Health and Safety Act, 2020* (WHS Act), and accompanying regulations.	In compliance	The *Work Health and Safety Act 2020* (WHS Act) and accompanying regulations were implemented 31 March 2022. The IWDF processes, procedures, and instructions have been updated with consideration to this legislation.
		Maintain an Aspects and Impacts (Risk) Register.	In compliance	The Aspects and Impacts (Risk) Register, addressing environmental, socio-political, legal and health and safety risks, was reviewed and updated May 2025.
		Ensure Safety Data Sheets are readily available.	In compliance	SDS are available in hardcopy at the IWDF site office and electronically in the IWDF Document Library.
		Report all incidents and near misses and implement corrective actions.	In compliance	No incidents or near misses were reported for the reporting period. The FMC Project Director was on-site during all visits.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
		Ensure appropriate safety equipment is worn and maintained.	In compliance	All personnel visiting the IWDF completed the general site safety induction. The FMC Project Director confirmed that appropriate equipment was checked and worn during site visits during the reporting period.
		Ensure all personnel are adequately trained.	In compliance	All personnel visiting the IWDF completed the required training. The IWDF Training Register and completed IWDF-Form-48s and IWDF-Form-32s were sighted by the auditor.
		Hold safety management briefings, as appropriate to activities.	N/A	No disposal operation occurred during the reporting period.
		Undertake regular site safety inspections and operation safety audits.	N/A	No disposal operation occurred during the reporting period.
		Replace fire extinguishers every five years.	In compliance	All fire extinguishers were replaced in either October 2024 or April 2025 during the ongoing monitoring site visits. See Appendix S for MRM minutes.
6	**Radiation**	All radioactive wastes will be assessed against the Radioactive Waste Acceptance Guidelines and will be packaged and transported in the approved manner.	N/A	No radioactive waste was assessed during the reporting period.
		The Radiological Council shall approve the design of the disposal trench.	N/A	Not required as a radioactive disposal operation did not occur during the reporting period.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
		Radioactive waste will be placed in the trench in accordance with the Radiological Council Approval.	N/A	A radioactive disposal operation did not occur during the reporting period.
		The position and activity of each drum shall be recorded.	N/A	Not required as a radioactive disposal operation did not occur during the reporting period.
		A permanent marker shall be placed above all trenches containing radioactive waste.	In compliance	Inspection has confirmed that a permanent marker remains in place at each disposal cell. See Appendix Z for photographs of each permanent above ground marker.
		All personnel who come into proximity with radioactive waste shall attend an induction and wear personal radiation monitors and badges.	N/A	A radioactive disposal operation did not occur during reporting period.
		Pre-disposal and post-disposal occupational radiation monitoring shall be undertaken.	In compliance	A radioactive disposal operation did not occur so no monitoring in addition to the personal monitoring was required.
		Pre-disposal and post-disposal environmental radiation monitoring shall be undertaken.	N/A	Not required as a radioactive disposal operation did not occur during reporting period.
		A monitoring program for compliance with the public dose constraint shall be undertaken.	In compliance	See Section 5.4 of this PCR for the results of the monitoring for the reporting period.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
		Gamma radiation surveys are to be conducted every five years, or following a burial operation involving radioactive waste, whichever is the shortest interval.	In compliance	The 5-yearly environmental gamma radiation survey was last completed in October 2022. The survey is next due in 2027.
		If a radioactive waste disposal occurs, a Radiological Council approved independent auditor shall review all actions of the proponent required by the conditions of the Radiological Council Registration RS 13/2011 20590. This will include a compliance audit against the requirements of the *Radiation Safety (General) Regulations (1983)*, *Australian Code for Radiation Protection in Planned Exposure Situations* (ARPANSA RPS C-1 Rev. 1), *Code for Disposal Facilities for Solid Radioactive Waste* (ARPANSA RPS C-3), Radiological Council approved IWDF Safety Case, and where relevant the IWDF Safety Assessments.	N/A	Not required as a radioactive disposal operation did not occur during the reporting period. The IWDF Safety Case and associated Safety Assessments are yet to be approved.
		If waste is transported by the proponent, then compliance with the *Radiation Safety (Transport of Radioactive Substances) Regulations (2002), Code for the Safe Transport of Radioactive Material (ARPANSA RPS C-2 Rev.1 2019),* and the *Code of Practice for the Safe Transport of Radioactive Material (ARPANSA RPS 2),* shall be audited.	N/A	Not required as a radioactive disposal operation did not occur during the reporting period.
		An independent auditor shall be appointed to report on compliance during a radioactive waste disposal campaign, with the report required within 6 months of the disposal campaign.	N/A	Not required as a radioactive disposal operation did not occur during the reporting period.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
7	**Transport**	Operation Transport Procedures (OTP) shall be developed for each operation. OTPs provide details of transport and packaging, emergency preparedness, contractor responsibilities, procedures, communications, and emergency response recovery. These are then submitted to DWER.	N/A	No disposal operation occurred during the reporting period.
		Procedures for communications with the emergency response team, local community, and emergency services shall be prepared and included in the OTP.	N/A	No disposal operation occurred during the reporting period.
		Waste shall be packaged, labelled, and transported in accordance with the OTP, as well as applicable dangerous goods and radioactive legislation. A Finance delegate will inspect the waste prior to transport to ensure compliance.	N/A	No disposal operation occurred during the reporting period.
		Personnel involved in loading and transport of waste (including contractors) shall be briefed on the potential risks, emergency response, and communication procedures.	N/A	No disposal operation occurred during the reporting period.
		Appropriate protective clothing and equipment shall be used.	N/A	No disposal operation occurred during the reporting period.
		Emergency Response Team (ERT) members shall be appropriately trained and equipped.	N/A	No disposal operation occurred during the reporting period.
		Shipping documentation, OTPs, and emergency information shall be kept in the transport vehicle.	N/A	No disposal operation occurred during the reporting period.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
		If required, the Department of Fire and Emergency Services (DFES), Department of Energy, Mines, Industry Regulation & Safety (DEMIRS), and local government authorities shall be informed of transport routes and schedules.	N/A	No disposal operation occurred during the reporting period.
8	Water	Operations will not be planned for the wet season.	N/A	No disposal operation occurred during the reporting period.
		Regular weather reports will be obtained during waste disposal periods. Site activities will be scheduled to avoid waste acceptance and burial activities during rainfall.	N/A	No disposal operation occurred during the reporting period.
		The trench and drainage systems will be designed and positioned to avoid the infiltration of surface water and potential groundwater effects.	In compliance	To date, the trench and drainage systems have been designed to avoid the infiltration of surface water and potential groundwater effects.
		When heavy rainfall is expected, temporary berms and V drains will be constructed. Any waste in the open trench will be covered with compacted sand and gravel.	N/A	No disposal operation occurred during the reporting period.
		Groundwater monitoring shall be undertaken.	In compliance	Groundwater monitoring was completed in October 2024, and April 2025. Refer to Appendix F for groundwater monitoring records.
		Water which accumulates in the trench will be allowed to dry in situ if contaminant free. However, water will be removed and analysed if contamination is suspected.	N/A	No disposal operation occurred during the reporting period.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
9	**Waste Acceptance**	Ensure all waste owners wishing to dispose of waste at the IWDF provide adequate details of the wastes, in accordance with Waste Acceptance Guidelines.	N/A	No waste acceptance applications were received during the reporting period.
		Assess waste details against the Waste Acceptance Criteria.	N/A	No waste acceptance applications were received during the reporting period.
		Provide details of the wastes in the Operation Environmental and Waste Acceptance Procedures submitted to DWER.	N/A	No waste acceptance applications were received during the reporting period.
		Undertake inspections of the waste.	N/A	No waste acceptance applications were received during the reporting period.
10	**Community Liaison**	Maintain a public database which provides details of all waste disposed at the IWDF. Publicly available register (spreadsheet) will be accessible through the Government web page for the IWDF.	In compliance	The IWDF Waste Inventory Database contains the information required to be made publicly available. The publicly available information is accessible through the Finance office in Perth.
		Respond efficiently to complaints and undertake appropriate corrective actions.	In compliance	Two complaints were received during the 2024 – 2025 reporting period. A response to these was sent by Finance on 27 November 2024.
		An archiving schedule and record retention table are maintained to ensure that documents are archived to allow future generations access to the information.	In compliance	Finance has in place a Retention and Disposal schedule which includes all appropriate IWDF records. This R&D schedule was approved by the State Records Commission in March 2014. See Appendix J.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
		An annual community meeting will be held so that members of the community can raise community concerns, review important documents, and provide input into operational decision making.	In compliance	Before the CLC was replaced by the IWDF Annual Community Meeting (IACM), the CLC met twice during the reporting period on 25 July 2024 and 8 November 2024. See Appendix M for Minutes of the CLC meetings. The first IACM is scheduled for 16 October 2025.
		Ensure information regarding the IWDF on the Government web page is kept up to date.	In compliance	Review confirmed that the latest version of the IWDF handbook and brochure were available on the Government web page for the IWDF.
11	**Review of Management**	Undertake regular audits of the management system.	In compliance	The Management System was audited during reporting period – see Tables 6 and 7 of this PCR for audit tables.
		Hold management review meetings every 6 months.	In compliance	MRMs were held 5 December 2024 and 12 June 2025. See Appendix S for Minutes.
		Undertake regular audits of operation-specific and ongoing management procedures.	In compliance	No disposal operation occurred during the reporting period, so no operation-specific procedures were audited. Ongoing management procedures were audited during the reporting period – See Tables 6 and 7 of this PCR.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
		Produce an annual performance and compliance report and provide to the Department of Water and Environmental Regulation and Radiological Council.	In compliance	This PCR. The 2023–2024 PCR was made available to the RC and the DWER (and the EPA through DWER) on 19 September 2024. It should be noted that due to the size of the PCR it could not be emailed and therefore the RC and EPA/DWER were notified that it could be downloaded from https://www.wa.gov.au/organisation/department-of-finance/intractable-waste-disposal-facility-mt-walton-east-iwdf
		Correct non-conformances as soon as possible and ensure that appropriate corrective or preventative actions are in place.	In compliance	CAR 007 and 009 were both closed out during the reporting period. No new CARs were raised during the reporting period. Note: CAR 008 was resolved in 2023.
		Regularly review current disposal practices and developments in international best practices for the disposal of intractable waste.	In compliance	Review was completed during the reporting period and the results reported at the MRMs. See Appendix S for MRM Minutes.
		Liaise regularly with national and international waste management regulators.	In compliance	Liaison with the International Atomic Energy Agency as well as facilities and regulators across the world occurred during reporting period. Results are reported at the MRMs. See Appendix S for MRM Minutes.

4.3.4 Ongoing Suitability of Management Plans and System Documents

The IWDF has in place a set of high-level Management Plans and two comprehensive Management Systems (Finance and FMC) that were developed to meet the functional requirements of the following International Standards:

- ISO 9001 – Quality;
- ISO 14001 Environmental; and
- ISO 45001 Safety.

All three standards have the following principles as their basis:

a. Process and system methodology;
b. Integration of quality, safety and environmental requirements into the functions and processes;
c. Direction established through planning, policy, objectives and targets;
d. Commitment and involvement by all and especially senior management;
e. Provision of "fit for purpose" resources and competent staff;
f. Identification of risk and elimination or minimisation of these risks;
g. Compliance and risk management;
h. Communication and consultation;
i. Documented system;
j. Monitor, measure, audit, review;
k. Responsibilities and accountabilities;
l. Intervention when things go wrong and implementation of corrective and preventative action; and
m. Continuous Improvement.

The approach, structure, and content of the IWDF Management Plans and Management Systems were approved by the EPA, and where relevant, the RC prior to implementation.

Continuous improvement in the management of the IWDF is achieved by implementing processes as follows:

- Regular current awareness monitoring and review of international advances in technology and current best practices for near surface disposal of hazardous and low-level radioactive wastes. This information is regularly discussed at project meetings, Management Team meetings and is included, where applicable, in operational documentation such as Management Plans, the IWDF Aspects and Impacts (Risk) Register, Operational and Ongoing Management Procedures.
- Monitoring and review of legislation, regulations, standards, and guidelines applicable to or that may impact near surface disposal of hazardous and low-level radioactive wastes. This information is regularly discussed at project meetings, Management Team meetings and is included, where applicable, in operational documentation such as Management

Plans, IWDF Aspects and Impacts (Risk) Register, Operational and Ongoing Management Procedures.
- Regular review, update, and modification of all IWDF processes and documentation informed by the knowledge obtained from the above activities and compliance auditing of such requirements ensures that all IWDF processes and documentation such as Management Plans and Procedures continue to meet the objectives for the IWDF.

The ongoing suitability of the IWDF Management Plans and other system documents is discussed at the MRMs. See Appendix S for MRM Minutes.

4.3.5 Action Plans

The Action Plans describe Finance's specific improvement objectives, both long and short term, which demonstrate continual improvement in performance and provide quantitative targets, timeframes, and personnel for achieving these objectives. Progress against each action in the Actions Plans is updated monthly and is a standing agenda item at the monthly management meetings. The Action Plans for the 2024 - 2025 reporting period are included as Appendix T.

4.4 IWDF Safety Assessments and Safety Case

A draft Safety Assessment and draft Operations Safety Case were submitted to the ARPANSA in December 2016 for third party review. ARPANSA provided feedback on the draft Safety Assessment on the 15 October 2020.

A high-level response to the feedback was prepared and provided to the RC, on 8 December 2020, for comment. On the 20 September 2021, RC agreed with the proposed approach, as outlined in the high-level response, to updating the draft Operation and Post Closure Safety Assessment and the Facility Safety Case.

Three draft documents have been prepared:

- Post-Closure Safety Assessment (PCSA) based on agreed postulated external accident events during the Institutional Control Period (ICP) and agreed future limits on radioactive inventories for disposal (based on database records).
- Operations Safety Assessment (OSA) based on previous draft OSA and incorporating requirements of RPSC-3 Disposal Code and ARPANSA recommendations (this part applies to PCSA too).
- Facility Safety Case (FSC) which will refer to OSA, PCSA, supporting deterministic and probabilistic assessments and historical safety assessments for siting, design, and construction of the IWDF.

The PCSA was submitted to RC in late January 2023, the OSA was submitted to RC in late February 2023 and the FSC was submitted to the RC in early March 2023. Feedback on these documents was received on the 31 October 2023 and a response to RC was provided on 15

November 2023. That response agreed to providing the additional information and clarifications required by the RC. The updated and re-written documents including significantly expanded supporting information (mostly as appendices) were provided to the RC on 15 June 2024. To date there has been no further feedback from RC.

5. ENVIRONMENTAL MONITORING RESULTS

Environmental monitoring is a fundamental component of both waste disposal operations and ongoing management at the IWDF. Groundwater, capping, radiation, and rehabilitation monitoring is undertaken irrespective of whether disposal operations are planned or undertaken, whereas other environmental monitoring such as some radiation monitoring, dust monitoring and soil sampling are undertaken on an operation-specific basis. The groundwater, trench capping and rehabilitation monitoring locations are shown on Figure 4.

5.1 Rehabilitation Monitoring

Rehabilitation monitoring occurs annually and involves recording the percentage coverage of vegetation in the rehabilitated areas around each disposal cell, maximum and average height of the plants, and the number of plant types. Photographs are taken at specific locations during each monitoring event for comparison and review. See Figure 4 for the photo locations.

The October 2024 rehabilitation monitoring showed good vegetation growth with areas around the 2020NRT01 disposal cell growing well and providing substantially improved cover. Other areas are growing well to moderately well. See Appendix N for rehabilitation monitoring records.

The latest vegetation survey undertaken in October 2024, verified that the rehabilitated vegetation around the pre 2008 disposal cells was virtually indistinguishable from the surrounding vegetation. It was therefore determined that no further annual monitoring of the vegetation around the pre 2008 disposal cells would occur, but that the next vegetation survey in 2034 would cover the same areas as previous surveys.

5.2 Disposal Dome (Capping) Monitoring

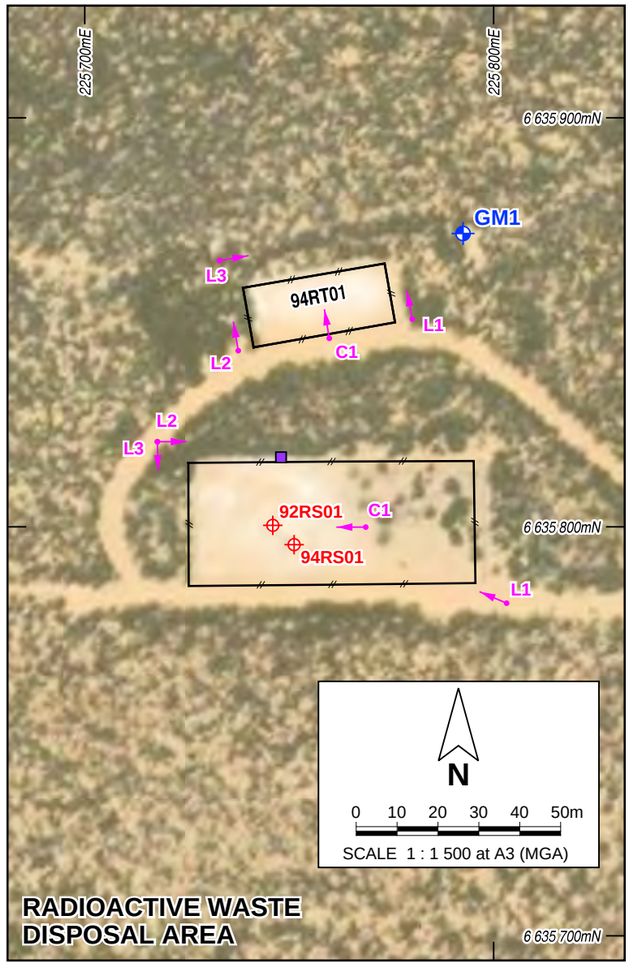
Monitoring of the disposal domes (the water shedding clay caps which overlie each disposal cell) occurs annually and involves the recording of any erosion channels on the domes (number and depth) and any subsidence features (number and depth).

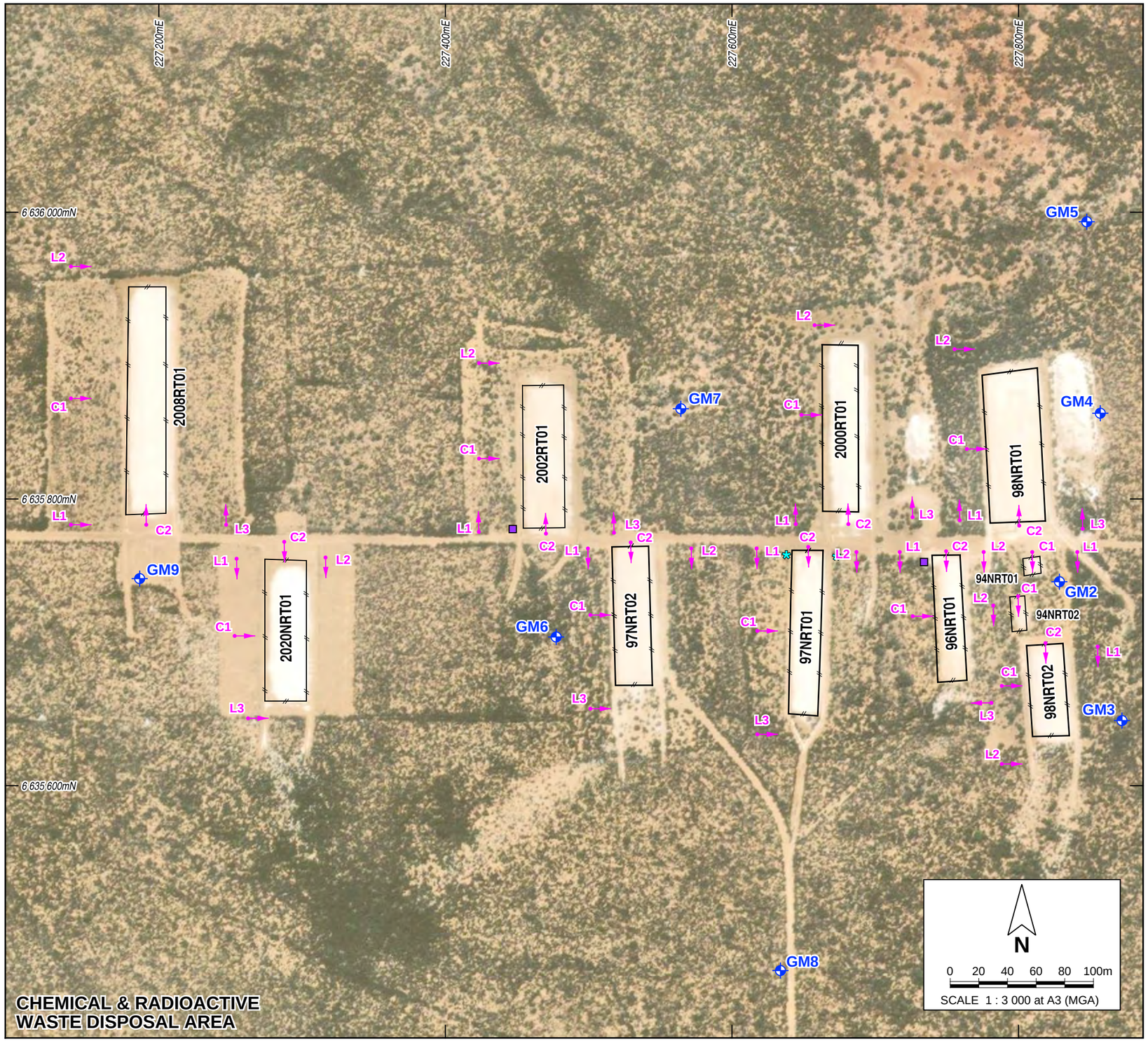
The most recent capping monitoring was completed in October 2024. No significant capping issues were reported. See Appendix O for Capping Monitoring Report.

5.3 Groundwater Monitoring

Groundwater monitoring was completed in October 2024 and April 2025. There has been no groundwater detected on the site since the first bore was installed and as a result water quality cannot be tested. Ongoing six-monthly groundwater monitoring, undertaken since 2000, has shown that no groundwater has been found in any of the monitoring bores present at the site.

The October 2024, and April 2025 groundwater monitoring records are provided as Appendix F.





Legend

—//—	Fence
2008RT01	Trench or Shaft ID
⊕	Location of Groundwater Monitoring Bore
⊕	Location of Radioactive Waste Shaft
→•	Photograph Location and Direction
C2	Trench Capping Photograph Location ID
L3	Rehabilitation Photograph Location ID
■	Location of Calytrix creswellii P3
✿	Location of Lepidosperma sp

NOTE: Photograph Location IDs are used in conjunction with Trench IDs.

BASE SOURCE: Dames & Moore, 04-07-00.
AERIAL PHOTOGRAPH SOURCE: ESRI, flown October 2023.

Government of **Western Australia**
Department of **Finance**

INTRACTABLE WASTE DISPOSAL FACILITY
MT WALTON EAST, WESTERN AUSTRALIA

GROUNDWATER, TRENCH CAPPING & REHABILITATION MONITORING LOCATIONS

Figure 4

Drawn: L. Morton | Date: 23 Feb 2023 | Job: DFI2020-001

PINPOINT CARTOGRAPHICS (08) 9562 7136 DFI2020-001_PROM-006.dgn

5.4 Public Dose Constraint Monitoring

Measurement of public dose exposures under normal operations (care and maintenance), to demonstrate that the public dose constraint is achievable, was implemented at the IWDF in March 2021. Thermo-Luminescent Dosimeter (TLD) badges provided by Landauer Australia are used to monitor whole body dose exposures.

A TLD badge is issued to an FMC staff member to wear and one control TLD is placed at the IWDF site office to monitor whole-body dose exposures when visiting the IWDF.

Table 9 below shows the dose exposure results between 30 March 2021 and 16 April 2025. It should be noted that the TLD badge dose accumulation has only been recorded for the quarterly periods that encompass the dates of the site visits and therefore the potential public dose exposures.

Table 9
Dose Exposure Results for March 2021 to April 2025

Period of Site Visit	Dose Exposure (mSv)
30/03/21 to 01/04/21	0.01
31/08/21 to 02/09/21	0.01
22/09/21 to 23/09/21	0.01
11/11/21 to 14/11/21	*M
04/04/22 to 06/04/22	*M
17/10/22 to 20/10/22	*M
17/05/23 to 19/05/23	0.09
16/10/23 to 19/10/23	*M
16/04/24 to 18/04/24	*M
15/10/24 to 18/10/24	*M
06/11/24 to 08/11/24	*M
14/04/25 to 16/04/25	*M

*M: dose exposure below the minimum measurable quantity for the monitoring period.

Results have returned a dose exposure that was below the Minimum Detection Level (MDL) of 0.01 mSv for each quarter. The total accumulated dose for the 2024 - 2025 reporting year was below the minimum measurable quantity. A public dose constraint has been set for the IWDF

of 0.3 mSv/year in line with International Atomic Energy Agency (IAEA) and ARPANSA guidance. Dose exposures were well below the dose constraint.

5.5 Five Yearly Environmental Gamma Radiation Survey

The 5-yearly gamma survey was undertaken during the scheduled site monitoring visit in October 2022. The report was issued to the RC on the 9 January 2023. The next gamma survey is due in October 2027.

APPENDICES

APPENDIX A

Ministerial Statement 562

Statement No.

000562

MINISTER FOR THE ENVIRONMENT;
LABOUR RELATIONS

STATEMENT TO AMEND CONDITIONS APPLYING TO PROPOSALS (PURSUANT TO THE PROVISIONS OF SECTION 46 OF THE ENVIRONMENTAL PROTECTION ACT 1986)

INTRACTABLE WASTE DISPOSAL FACILITY
MT WALTON EAST, SHIRE OF COOLGARDIE

Proposals: (1) Integrated Waste Disposal Facility, Eastern Goldfields, (Assessment No. 168); and

(2) Disposal by Shaft Entombment or Trench Burial of a Range of Intractable Wastes at the Intractable Waste Disposal Facility, Mt Walton East, Shire of Coolgardie (Assessment No. 823).

Proponent: Waste Management (WA)

Proponent Address: Level 8, 141 St George's Terrace, PERTH WA 6000

Assessment Number: 1286

Previous Assessment Numbers: 168, 168-1, 823, 1127

Previous Statement Numbers:
Statement No. 044 published on 26 October 1988
Statement No. 205 published on 8 January 1992
Statement No. 353 published on 28 April 1994
Statement No. 533 published on 19 January 2000

Report of the Environmental Protection Authority: Bulletin 1005

Previous Reports of the Environmental Protection Authority: Bulletins 353, 572, 726 and 954

The implementation of the proposals to which the above reports of the Environmental Protection Authority relate is now subject to the following consolidated environmental conditions and procedures which replace all previous conditions and procedures:

1 Implementation

1-1 Subject to these conditions and procedures, the proponent shall implement the proposals as documented in schedule 1 of this statement.

Published on

01 FEB 2001

29th FLOOR, ALLENDALE SQUARE, 77 ST. GEORGE'S TERRACE, PERTH 6000 TELEPHONE: (08) 9421 7777 FACSIMILE: (08) 9221 4665/8

1-2 Where the proponent seeks to change any aspect of the proposals as documented in schedule 1 of this statement in any way that the Minister for the Environment determines, on advice of the Environmental Protection Authority, is substantial, the proponent shall refer the matter to the Environmental Protection Authority.

1-3 Where the proponent seeks to change any aspect of the proposals as documented in schedule 1 of this statement in any way that the Minister for the Environment determines, on advice of the Environmental Protection Authority, is not substantial, those changes may be effected.

2 Proponent Commitments

2-1 The proponent shall implement the environmental management commitments of 25 October 2000 as documented in schedule 2 of this statement.

2-2 The proponent shall implement subsequent environmental management commitments which the proponent makes as part of the fulfillment of conditions and procedures in this statement.

3 Proponent

3-1 The proponent for the time being nominated by the Minister for the Environment under section 38(6) or (7) of the Environmental Protection Act 1986 is responsible for the implementation of the proposals until such time as the Minister for the Environment has exercised the Minister's power under section 38(7) of the Act to revoke the nomination of that proponent and nominate another person in respect of the proposals.

3-2 Any request for the exercise of that power of the Minister referred to in condition 3-1 shall be accompanied by a copy of this statement endorsed with an undertaking by the proposed replacement proponent to carry out the proposals in accordance with the conditions and procedures set out in the statement.

3-3 The proponent shall notify the Environmental Protection Authority of any change of proponent contact name and address within 30 days of such change.

4 Commencement

4-1 The proponent shall provide evidence to the Minister for the Environment within five years of the date of this statement that the proposals have been substantially commenced.

4-2 Where the proposals have not been substantially commenced within five years of the date of this statement, the approvals to implement the proposals as granted in this statement shall lapse and be void. The Minister for the Environment will determine any question as to whether the proposals have been substantially commenced.

4-3 The proponent shall make application to the Minister for the Environment for any extension of approval for the substantial commencement of the proposals beyond five years from the date of this statement at least six months prior to the expiration of the five year period referred to in conditions 4-1 and 4-2.

4-4 Where the proponent demonstrates to the requirements of the Minister for the Environment on advice of the Environmental Protection Authority that the environmental parameters of the proposals have not changed significantly, then the Minister may grant an extension not exceeding five years for the substantial commencement of the proposals.

5 Compliance Auditing

5-1 The proponent shall submit periodic Compliance Reports, in accordance with an audit program prepared in consultation between the proponent and the Environmental Protection Authority.

5-2 Unless otherwise specified, the Environmental Protection Authority is responsible for assessing compliance with the conditions, procedures and commitments contained in this statement and for issuing formal written advice that the requirements have been met.

5-3 Where compliance with any condition, procedure or commitment is in dispute, the matter will be determined by the Minister for the Environment.

CHERYL EDWARDES (Mrs) MLA
MINISTER FOR THE ENVIRONMENT

01 FEB 2001

Schedule 1

Summary of key proposal characteristics (1286) .

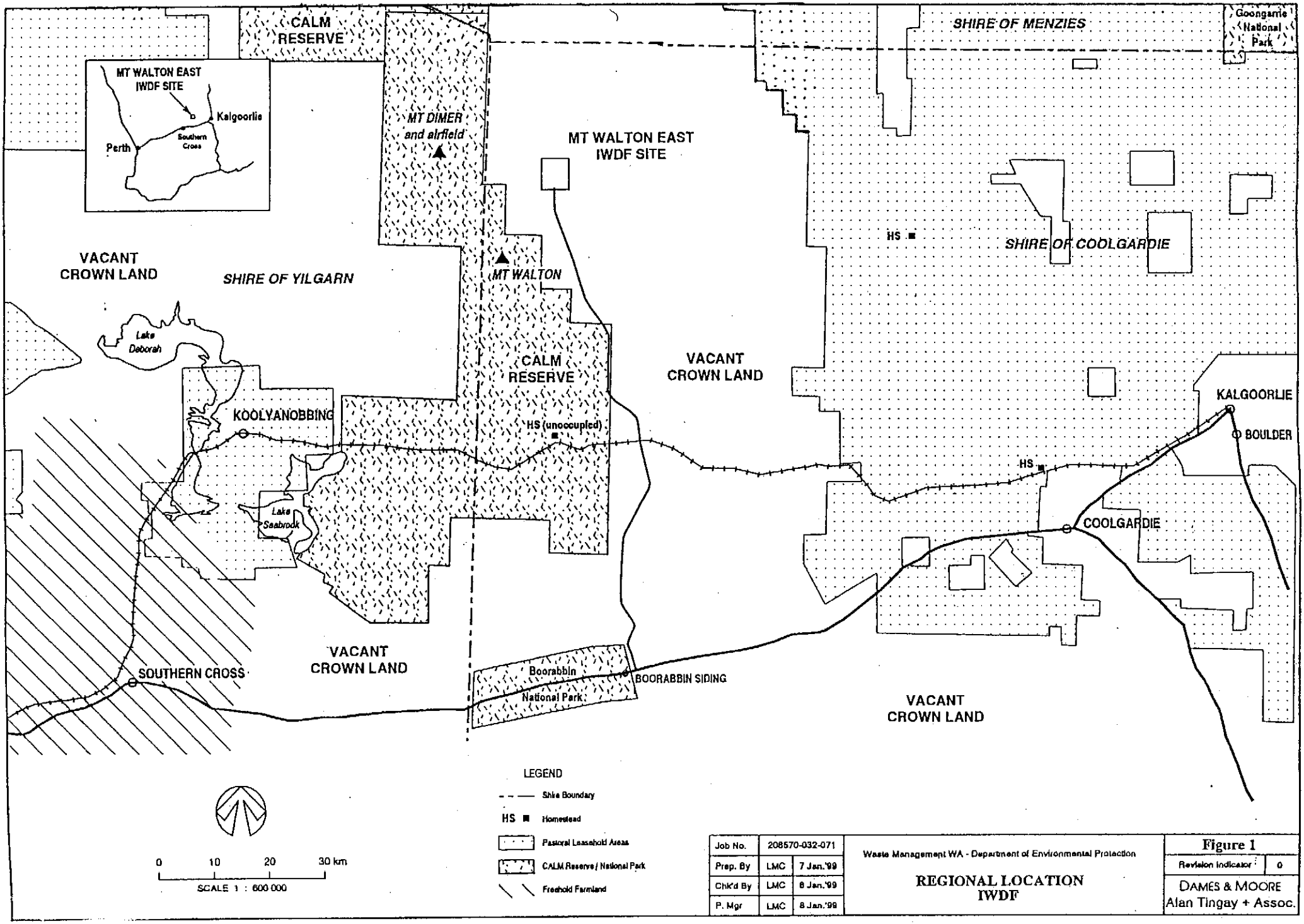
Element	Description
Location	Approximately 125 km north-west of Kalgoorlie-Boulder in the Shire of Coolgardie
Area	25 square kilometres
Purpose	For the disposal of intractable wastes for which there is no other practical method of disposal.
Potential waste	Restricted to those that meet the waste acceptance criteria
Disposal method	Burial by shaft entombment or trench, capped with water-shedding dome.
Environmental Management	Environmental Management Plans as listed below: • flora and fauna; • water; • air quality; • decommissioning and rehabilitation; • health and safety; • emergency response; • radiation; • transport. Procedures for each disposal operation developed consistent with Operational Guidelines as listed below: • environmental; • health and safety and emergency response; • radiation; • transport.
Reporting	Long term monitoring and operational monitoring to be addressed in Environmental Management Plans.

Note: The incinerator component of the original proposal (assessment no. 168) will not proceed and has been removed from the description of the proposal.

Figure

Figure 1: Site Location (attached)

Figure 1. Site location.



Schedule 2

Proponent's Consolidated Environmental Management Commitments

25 October 2000

INTRACTABLE WASTE DISPOSAL FACILITY
MT WALTON EAST, SHIRE OF COOLGARDIE (Two proposals)
(Assessment No. 1286)

Waste Management (WA)

(The Health Department of Western Australia was formerly the proponent.)

Schedule 2 - Proponent's Consolidated Environmental Management Commitments of 25 October 2000

(Assessment No. 1286)

No.	TOPIC	ACTION	OBJECTIVE/S	TIMING	TO REQUIRE-MENTS OF	ADVICE	MEASURE-MENT / COMPLIANCE CRITERIA
1	**Environ-mental Management System**	(1.1) Demonstrate that there is in place an Environmental Management System that includes the following elements: (a) an environmental, health and safety policy and corporate commitment to it; (b) mechanisms and processes to ensure: • Planning to meet environmental, health and safety requirements; • Implementation and operation of actions to meet environmental, health and safety requirements; • Measurement and evaluation of environmental, health and safety performance; and (c) review and improvements of environmental, health and safety outcomes.	To effectively and comprehensively manage all matters relating to environmental protection and to fulfil the requirements of the conditions, procedures and commitments for the proposal.	Prior to the next disposal operation.	Environmental Protection Authority		Completed Environmental Management System
		(1.2) Implement the Environmental Management System required by commitment 1.1.	To effectively and comprehensively manage all matters relating to environmental protection and to fulfil the requirements of the conditions, procedures and commitments for the proposal.	Prior to the next disposal operation	Environmental Protection Authority		Performance and Compliance Report

No.	TOPIC	ACTION	OBJECTIVE/S	TIMING	TO REQUIRE-MENTS OF	ADVICE	MEASURE-MENT / COMPLIANCE CRITERIA
2	**Environ-mental Management Program**	(2.1) Prepare an Environmental Management Program.	To include but not be limited to the following: • environmental management plans (see commitment 3); and • operational guidelines (see commitment 4).	Prior to the next disposal operation.	Environmental Protection Authority		Approved Environmental Management Program
		(2.2) Advertise and make the approved Environmental Management Program required by commitment 2.1 publicly available.	To inform the community.	Prior to the next disposal operation.	Environmental Protection Authority		Performance and Compliance Report
		(2.3) Implement the Environmental Management Program required by commitment 2.1.	To ensure that requirements specified in the approved Environmental Management Program are adhered to.	During all disposal operations.	Environmental Protection Authority		Performance and Compliance Report
3	**Environ-mental Management Plans** **Flora and Fauna**	(3.1) Prepare a Flora and Fauna Management Plan.	To ensure that the abundance, species diversity, geographic distribution and productivity of vegetation communities and terrestrial fauna are maintained by monitoring against existing baseline survey data.	Prior to the next disposal operation.	Environmental Protection Authority		Approved Environmental Management Plan

No.	TOPIC	ACTION	OBJECTIVE/S	TIMING	TO REQUIRE-MENTS OF	ADVICE	MEASURE-MENT / COMPLIANCE CRITERIA
	Transport Management Plan	(3.2) Prepare a Transport Management Plan that describes the general principles of managing the transportation of wastes to the Intractable Waste Disposal Facility. The plan will include but not limited to: • emergency preparedness; • contractor responsibilities; • procedures; • communications; and • emergency response recovery.	To ensure that risk to the community, waste owners, contractors, employees, personnel and members of the emergency response services, property and the environment is minimised.	Prior to the next disposal operation.	Environmental Protection Authority		Approved Environmental Management Plan
	Water Management Plan	(3.3) Prepare a Water Management Plan.	To detail procedures and strategies to monitor: • for the presence of groundwater and if groundwater is present, groundwater will be analysed to determine whether it has been contaminated by leachate from disposed waste; and • surface water to ensure that if surface water is likely to run off the site it will be analysed to determine whether it has been contaminated if there has been a spillage of waste. • If contamination has occurred, a contingency plan that forms part of the Water Management Plan will be implemented.	Prior to the next disposal operation.	Environmental Protection Authority		Approved Environmental Management Plan

No.	TOPIC	ACTION	OBJECTIVE/S	TIMING	TO REQUIRE-MENTS OF	ADVICE	MEASURE-MENT / COMPLIANCE CRITERIA
	Emergency Response Plan	(3.4) Prepare an Emergency Response Management Plan.	To ensure that in the case of an incident at the Intractable Waste Disposal Facility: • all practicable measures are taken to ensure the welfare and amenity of the community; and • the environment is not adversely affected.	Prior to the next disposal operation.	Environmental Protection Authority		Approved Environmental Management Plan
	Health and Safety Management Plan	(3.5) Prepare a Health and Safety Management Plan. The Plan will include but not limited to: • procedures for training; and • procedures for monitoring.	To ensure that all practicable measures are taken to safeguard the welfare and amenity of personnel and the community at the Intractable Waste Disposal Facility.	Prior to the next disposal operation.	Environmental Protection Authority		Approved Environmental Management Plan
	Air Quality Management Plan	(3.6) Prepare an Air Quality Management Plan.	To detail monitoring procedures and strategies to suppress dust and odour adequately to ensure that dust and odour emissions do not adversely affect the environment, or health, welfare and amenity of personnel at the Intractable Waste Disposal Facility.	Prior to the next disposal operation.	Environmental Protection Authority		Approved Environmental Management Plan
	Radiation Management Plan	(3.7) Prepare a Radiation Management Plan which will include but not be limited to: • environmental radiation monitoring; • periodic reporting to the Environmental Protection Authority and Radiological Council (Western Australia); • procedures for compliance with the Code of Practice for the Near-surface Disposal of Radioactive Waste in Australia (1992); • personnel radiation monitoring; and • reporting of the monitoring results to the Community Liaison Committee.	To detail procedures and strategies to ensure that risk of exposure to radiation is kept within public health standards and as low as reasonably achievable for the community, waste owners, contractors, employees, personnel and members of emergency response services, and the environment.	Prior to the next disposal operation.	Environmental Protection Authority	Radio-logical Council (WA)	Approved Environmental Management Plan

No.	TOPIC	ACTION	OBJECTIVE/S	TIMING	TO REQUIRE-MENTS OF	ADVICE	MEASURE-MENT / COMPLIANCE CRITERIA
	Decomm-issioning and Rehabilitat-ion Management Plan	(3.8) Prepare a Decommissioning and Rehabilitation Management Plan to include but not be limited to: • removal or, if appropriate, retention of infrastructure; • rehabilitation of all disturbed areas to a standard suitable for agreed future land use/s; and • identification of disposal areas, including provision of evidence of notification to relevant statutory authorities.	To ensure that the proposal is decommissioned and rehabilitated to a standard suitable for the future landuse/s.	At least six months before decommissioning.	Environmental Protection Authority	Radio-logical Council (WA)	Approved Environmental Management Plan
		(3.9) Make the draft Environmental Management Plans required by commitment 3.1 to 3.8 available for a four week limited stakeholder review to the: • IWDF Community Liaison Committee; • The Chamber of Minerals and Energy of Western Australia; and • Chamber of Commerce and Industry of Western Australia; prior to the Environmental Protection Authority finalising its consideration of the Plans.	To obtain stakeholder input to the Environmental Management Plans.	Prior to the next disposal operation. (Note: commitment 3.8 requires stake-holder review at least 6 months prior to decomm-issioning.)	Environmental Protection Authority		Approved Environmental Management Plan
		(3.10) Advertise and make the approved Environmental Management Plans required by commitments 3.1 to 3.8 publicly available.	To inform the community.	Prior to the next disposal operation. (Note: commitment 3.8 requires advertising and making publicly available at least 6 months prior to decommissioning.)	Environmental Protection Authority		Performance and Compliance Report

No.	TOPIC	ACTION	OBJECTIVE/S	TIMING	TO REQUIRE-MENTS OF	ADVICE	MEASURE-MENT / COMPLIANCE CRITERIA
		(3.11) Implement the Environmental Management Plans required by commitments 3.1 to 3.8.	To ensure that requirements specified in the approved Environmental Management Plans are adhered to.	During each disposal operation. (Note: commitment 3.8 requires implementation at least 6 months prior to decomm-issioning.)	Environmental Protection Authority		Performance and Compliance Report
4	<u>Operational Guidelines</u> **Waste Acceptance** **Environ-mental** **Safety / Emergency Response** **Transport** **Radiation**	(4.1) Prepare the Waste Acceptance Operational Guidelines. (4.2) Prepare the Environmental Operational Guidelines. (4.3) Prepare the Safety/Emergency Response Operational Guidelines. (4.4) Prepare the Transport Operational Guidelines. (4.5) Prepare the Radiation Operational Guidelines.	All relevant Operational Guidelines are to be used as a guide to the proponent for the preparation of the Operational Procedures for each particular disposal operation (see commitments 5.1 and 5.2). The Operational Guidelines give guidance to the proponent on the means for achieving environmental outcomes required by a particular waste disposal operation.	Prior to the next disposal operation.	Environmental Protection Authority		Approved Operational Guidelines

No.	TOPIC	ACTION	OBJECTIVE/S	TIMING	TO REQUIREMENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA
		(4.6) Make the draft Operational Guidelines required by commitments 4.1 to 4.5 available for a four week limited stakeholder review to the: • IWDF Community Liaison Committee; • The Chamber of Minerals and Energy of Western Australia; and • Chamber of Commerce and Industry of Western Australia; prior to the Environmental Protection Authority finalising its consideration of the Plan.	To obtain stakeholder input to the Operational Guidelines.	Prior to the next disposal operation.	Environmental Protection Authority	Radiological Council (WA)	Approved Operational Guidelines
		(4.7) Advertise and make the approved Operational Guidelines required by commitments 4.1 to 4.5 publicly available.	To inform the community.	Prior to the next disposal operation.	Environmental Protection Authority		Performance and Compliance Report
		(4.8) Implement the Operational Guidelines required by commitments 4.1 to 4.5.	To ensure that requirements specified in the approved Operational Guidelines are adhered to.	Prior to the next disposal operation.	Environmental Protection Authority		Performance and Compliance Report
5	**Operational Procedures** Environmental, Radiation, Health and Safety	(5.1) Prepare the Environmental, Radiation, Health and Safety Operational Procedures in accordance with the Operational Guidelines.	To ensure that risk to the community, waste owners, contractors, employees, personnel and members of the emergency response services, and the environment is minimised.	Prior to each disposal operation.	Environmental Protection Authority	Radiological Council (WA)	Approved Operational Procedures

No.	TOPIC	ACTION	OBJECTIVE/S	TIMING	TO REQUIRE-MENTS OF	ADVICE	MEASURE-MENT / COMPLIANCE CRITERIA
	Transport	(5.2) Prepare the Transport Operational Procedures in accordance with the Operational Guidelines to include but not limited to: • details of waste loading and transport activities, and emergency response training for personnel; • identification of responsibility for the various aspects of transport, loading and unloading operations; • contingency plans for dealing with fire safety, accidents, spillages, vehicle breakdowns and other incidents should they occur; and • the procedure for liaison with the local community and emergency services. (The Operational Procedures documents referred to in commitments 5.1 and 5.2 will be the detailed working documents specific to each waste disposal operation).	To achieve environmental outcomes required by the Environmental Management Program in the conduct of a particular waste disposal operation (see commitment 2).	Prior to each disposal operation	Environmental Protection Authority		Performance and Compliance Report
		(5.3) Advertise and make the approved Operational Procedures required by commitments 5.1 and 5.2 publicly available.	To inform the community.	Prior to each disposal operation.	Environmental Protection Authority		Performance and Compliance Report

No.	TOPIC	ACTION	OBJECTIVE/S	TIMING	TO REQUIRE-MENTS OF	ADVICE	MEASURE-MENT / COMPLIANCE CRITERIA
		(5.4) Implement the Operational Procedures required by commitments 5.1 and 5.2.	To minimise the possibility of a waste disposal operation adversely affecting the environment.	During each particular waste disposal operation.	Environmental Protection Authority (Should any incident occur during each particular waste disposal operation it is to be reported immediately to the EPA)		Performance and Compliance Report
6	**Performance and Compliance Report**	(6.1) Prepare the Performance and Compliance Report at the conclusion of each waste disposal operation.	To outline the project outcomes and the environmental monitoring, and discuss adverse environmental impacts, if any and how these environmental impacts have been or will be managed. The process will provide feedback for continuous improvement to the Environmental Management Program.	Within three months following completion of each specific waste disposal operation.	Environmental Protection Authority	Radio-logical Council (WA) in relat-ion to radiation issues	Approved Performance and Compliance Report
		(6.2) Advertise and make the approved Performance and Compliance Report required by commitment 6.1 publicly available.	To inform the public.	Within 4 weeks of obtaining approval for the Performance and Compliance Report.	Environmental Protection Authority		Approved Performance and Compliance Report
7	**Waste**	(7.1) Limit disposal of waste at the Intractable Waste Disposal Facility to waste generated in Western Australia (see commitment 4.1).	To comply with State Government requirements.	Prior to each disposal operation.	Environmental Protection Authority		Environmental, Radiation, Health and Safety Operational Procedures

No.	TOPIC	ACTION	OBJECTIVE/S	TIMING	TO REQUIREMENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA
		(7.2) Ensure that approval to dispose of any specific waste is conditional on a review of currently practicably available waste treatment, disposal or management alternatives in Australia (see commitment 4.1).	To ensure that only wastes for which there is no currently practicably available destruction, disposal or management technologies in Australia are disposed of at the site and to maintain the site as a facility of last resort.	Prior to each disposal operation.	Environmental Protection Authority		Environmental, Radiation, Health and Safety Operational Procedures
		(7.3) Prepare a waste register data base to be maintained, updated and made publicly available at the office of the proponent or on the World Wide Web.	To show the method of disposal, source, type, quantity and location of all waste disposed of at the Intractable Waste Disposal Facility to enable future land users to take account of the deposited wastes and protect future users from adverse impacts on health and amenity.	Prepare the waste register data base within six months of the issuing of the Minister's Statement that the proposal may be implemented and update the register within three months of completion of each disposal operation.	Environmental Protection Authority		Performance and Compliance Report
8	**Community Liaison**	Convening a minimum of four meetings a year of the Community Liaison Committee.	To ensure that the community remains informed of activities at the Intractable Waste Disposal Facility.	Following the Minister's Statement that the proposal may be implemented.	Environmental Protection Authority		Performance and Compliance Report
9	**Fencing and Signposting**	Fence and signpost each discrete disposal cell.	To discourage access by: • fauna; • unauthorised personnel; and • the public.	Prior to demobilisation of each waste disposal operation following the Minister's Statement that the proposal may be implemented.	Environmental Protection Authority		Performance and Compliance Report

No.	TOPIC	ACTION	OBJECTIVE/S	TIMING	TO REQUIRE-MENTS OF	ADVICE	MEASURE-MENT / COMPLIANCE CRITERIA
10	**Water**	Demonstrate that there are at least 5 metres of clay between the base of any disposal cell and bedrock.	To allow for the possible establishment of a groundwater table in the future without impinging upon the disposal cells.	Prior to each disposal operation.	Environmental Protection Authority		Performance and Compliance Report
11	**Transport and Packaging**	Where transport and packaging is to be undertaken by a party other than the proponent, the proponent will ensure that the packaging and transport requirements specified in the Operational Transport Guidelines and Waste Acceptance Guidelines are adhered to through the use of contracts and other controls as necessary (see commitments 4.1 and 4.4).	To ensure that risk to the community, waste owners, contractors, employees, personnel and members of the emergency response services, property and the environment is minimised.	Prior to the commencement of transportation activities during each disposal operation.	Environmental Protection Authority		Approved operational Transport Procedures
12	**Decommiss-ioning and Rehabilitat-ion**	Implement the requirements of the Decommissioning and Rehabilitation Management Plan until the Minister for the Environment determines that decommissioning and/or rehabilitation is/are complete.	To ensure that the proposal is decommissioned and rehabilitated according to the requirements specified in the approved Decommissioning and Rehabilitation Management Plan (refer commitment 3).	During decommissioning and/or rehabilitation.	Minister for the Environment		Determination by the Minister for the Environment that decommiss-ioning and/or rehabilitation is/are complete.

Attachment 1 to Ministerial Statement 562

Notice of amendment to implementation conditions approved under section 45C of the *Environmental Protection Act 1986*

Proposal: **Intractable Waste Disposal Facility, Mt Walton East, Shire of Coolgardie**
Proponent: **Minister for Works C/- Department of Finance**

Pursuant to section 45C(1)(b) of the *Environmental Protection Act 1986*, the implementation conditions applying to the above proposal are changed in accordance with this Notice. I do not consider these changes to be a significant amendment to the conditions.

Darren Walsh
CHAIR
ENVIRONMENTAL PROTECTION AUTHORITY
For the Minister for Environment under Notice of Delegation under section 18 of the *Environmental Protection Act 1986*

Approval date: 20 October 2024

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1. Condition 2-1 is deleted and replaced with:

2-1 The proponent shall implement the environmental management commitments of 25 October 2000 as documented in Schedule 2 of this statement and amended from time-to-time in accordance with the *Environmental Protection Act 1986*.

2. Condition 3-3 is deleted and replaced with:

3-3 The proponent must notify the Chief Executive Officer, Department of Water and Environmental Regulation of any change of its name, physical address or postal address for the serving of notices or other correspondence within twenty-eight (28) days of such change. Where the proponent is a corporation or an association of persons, whether incorporated or not, the postal address is that of the principal place of business or of the principal office in the State.

3. Condition 5-1 is deleted and replaced with:

5-1 The proponent shall submit periodic Compliance Reports, in accordance with an audit program prepared in consultation between

the proponent and the Chief Executive Officer, Department of Water and Environmental Regulation.

4. Condition 5-2 is deleted and replaced with:

5-2 Unless otherwise specified, the Chief Executive Officer, Department of Water and Environmental Regulation is responsible for assessing compliance with the conditions, procedures and commitments contained in this statement and for issuing formal written advice that the requirements have been met.

5. Condition 5-3 is deleted.

6. Addition of Condition 6

Condition 6 below is added to the implementation condition of Statement 562:

6 Transportation

6-1 The proponent must ensure that all third-party carriers, in direct control of hazardous and intractable waste which is being transported to the facility have the appropriate permits or licences required under the relevant national and state legislation, regulation and codes of practice for the transportation and management of chemical waste and management of low-level radioactive waste.

6-2 Any hazardous and intractable waste being transported under the direct control of the proponent must be appropriately managed to ensure risks to human health and the environment from spills are minimised. This requirement shall be outlined in the relevant management plans required under the *Radiation Safety (Transport of Radioactive Substances) Regulations 2002* and *Dangerous Goods Safety (Road and Rail Transport of Non-explosives) Regulations 2007* as regulated by the Radiological Council of WA and Department of Energy, Mines, Industry Regulation and Safety.

7. The action for commitment 5.1 of condition 2 is deleted and replaced with:

(5.1) Prepare the Environmental, Radiation, Health and Safety Operational Procedures in accordance with the Operational Guidelines.

(The Operational Procedures will be the detailed working documents specific to each waste disposal operation).

8. Commitment 5.2 of condition 2 is deleted.

9. The action for commitment 5.3 of condition 2 is deleted and replaced with:

(5.3) Make the approved Operational Procedures required by commitments 5.1 publicly available.

10. The action for commitment 5.4 of condition 2 is deleted and replaced with:

(5.4) Implement the Operational Procedures required by commitment 5.1.

11. The action for commitment 6.2 of condition 2 is deleted and replaced with:

(6.2) Make the approved Performance and Compliance Report required by commitment 6.1 publicly available.

12. The action for commitment 7.3 of condition 2 is deleted and replaced with:

(7.3) Prepare a waste register data base to be maintained, updated and made publicly available. The locations of radioactive wastes will not be made publicly available unless requested by the Chief Executive Officer, Department of Water and Environmental Regulation.

13. The action for commitment 8 of condition 2 is deleted and replaced with:

A community meeting is to be convened annually and each time there is a disposal operation. These meetings can be combined where reasonable.

14. The action for commitment 12 of condition 2 is deleted and replaced with:

Implement the requirements of the Decommissioning and Rehabilitation Management Plan until the Chief Executive Officer, Department of Water and Environmental Regulation determines that decommissioning and/or rehabilitation is/are complete.

15. The text for all commitments of condition 2, except for commitments 5.4 and 12, in the "to requirements of" column of schedule 2 is deleted and replaced with:

Chief Executive Officer, Department of Water and Environmental Regulation

16. The text for commitment 5.4 of condition 2 in the "to requirements of" column in schedule 2 is deleted and replaced with:

Chief Executive Officer, Department of Water and Environmental Regulation (Should any incident occur during each particular waste disposal operation it is to be reported immediately to the Chief Executive Officer, Department of Water and Environmental Regulation)

17. The text for commitment 11 of condition 2 in the "measurement / compliance criteria" column in schedule 2 is deleted and replaced with:

Performance and Compliance Report

18. The text for commitment 12 of condition 2 in the "measurement / compliance criteria" column in schedule 2 is deleted and replaced with:

Determination by the Chief Executive Officer, Department of Water and Environmental Regulation that decommissioning and/or rehabilitation is/are complete.

CLEARED and DELETED Statement 562 Ministerial Conditions and Proponent Commitments

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE-MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
CLEARED MINISTERIAL CONDITIONS								
MC 4.1	Commencement	The proponent shall provide evidence to the Minister for the Environment within 5 years of the date of this statement that the proposals have been substantially commenced.	Within 5 years of Statement (i.e., before 1 February 2006).	Minister for the Environment		Approved PCR	**Cleared**	Cleared by EPA 23 April 2002 and 22 May 2002. Progress and Compliance Report 2001-2002.
MC 4.2	Commencement	Where the proposals have not been substantially commenced within 5 years of the date of this statement, the approvals to implement the proposals as granted in this statement shall lapse and be void. The Minister for the Environment will determine any question as to whether the proposals have been substantially commenced.	Within 5 years of Statement (i.e., before 1 February 2006).	Minister for the Environment			**Cleared**	Cleared by EPA 23 April 2002 and 22 May 2002. Progress and Compliance Report 2001-2002.
MC 4.3	Commencement	The proponent shall make application to the Minister for the Environment for any extension of approval for the substantial commencement of the proposals beyond five years from the date of this statement at least six months prior to the expiration of the five-year period referred to in Conditions 4.1 and 4.2.	At least 6 months prior to end of 5-year period (i.e., before 1 August 2005).	Minister for the Environment		Proponent Application	**Cleared**	Cleared by EPA 23 April 2002 and 22 May 2002. Progress and Compliance Report 2001-2002.
MC 4.4	Commencement	Where the proponent demonstrates to the requirements of the Minister for the Environment on advice of the EPA that the environmental parameters of the proposals have not changed significantly, then the Minister may grant an extension not exceeding five years for the substantial commencement of the proposal.	Within 5 years of Statement (i.e., before 1 February 2006).	Minister for the Environment	EPA	Proponent Submission	**Cleared**	Cleared by EPA 23 April 2002 and 22 May 2002. Progress and Compliance Report 2001-2002.

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE-MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
MC 5.3	Compliance Auditing	Where compliance with any condition, procedure or commitment is in dispute the matter will be determined by the Minister for the Environment.		Minister for the Environment		PCR submitted to EPA	**Deleted**	Following the approval of changes to Ministerial Statement 562 on the 20th of October 2024.
CLEARED PROPONENT COMMITMENTS								
PC 1.1	Environmental Management System (EMS)	Demonstrate that there is in place an EMS that includes the following elements: (a) an environmental, health and safety policy and corporate commitment to it; (b) mechanisms and processes to ensure: • Planning to meet environmental, health and safety requirements; • Implementation and operation of actions to meet environmental, health and safety requirements; • Measurement and evaluation of environmental, health and safety performance; and (c) review and improvements of environmental, health and safety outcomes.	Prior to the next disposal operation.	EPA		Completed EMS	**Cleared**	EMS approved by the EPA 24 April 2002.
PC 2.1	Environmental Management Program	Prepare an Environmental Management Program.	Prior to the next disposal operation.	EPA		Approved Environmental Management Program	**Cleared**	EMP was approved by the EPA 24 April 2002.
PC 2.2	Environmental Management Program	Advertise and make the approved Environmental Management Program required by commitment 2.1 publicly available.	Prior to the next disposal operation.	EPA		PCR	**Cleared**	by EPA 24 April 2002.

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE-MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
PC 3.1	Environmental Management Plans - Flora and Fauna	Prepare a Flora and Fauna Management Plan.	Prior to the next disposal operation.	EPA		Approved Environmental Management Plan	**Cleared**	by EPA 24 April 2002.
PC 3.2	**Transport Management Plan**	Prepare a Transport Management Plan that describes the general principles of managing the transportation of wastes to the Intractable Waste Disposal Facility. The plan will include but not be limited to: • emergency preparedness; • contractor; responsibilities; • procedures; • communications; and emergency response recovery.	Prior to the next disposal operation.	EPA		Approved Environmental Management Plan	**Cleared**	by EPA 24 April 2002.
PC 3.3	**Water Management Plan**	Prepare a Water Management Plan.	Prior to the next disposal operation.	EPA		Approved Environmental Management Plan	**Cleared**	by EPA 24 April 2002.
PC 3.4	**Emergency Response Management Plan**	Prepare an Emergency Response Management Plan.	Prior to the next disposal operation.	EPA		Approved Environmental Management Plan	**Cleared**	by EPA 24 April 2002.
PC 3.5	**Health and Safety Management Plan**	Prepare a Health and Safety Management Plan.	Prior to the next disposal operation.	EPA		Approved Environmental Management Plan	**Cleared**	by EPA 24 April 2002.
PC 3.6	**Air Quality Management Plan**	Prepare an Air Quality Management Plan.	Prior to the next disposal operation.	EPA		Approved Environmental Management Plan	**Cleared**	by EPA 24 April 2002.

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE-MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
PC 3.7	**Radiation Management Plan**	Prepare a Radiation Management Plan which will include but not be limited to: • environmental radiation monitoring; • periodic reporting to the EPA and RCWA • procedures for compliance with the Code of Practice for the Near-surface Disposal of Radioactive Waste in Australia (1992); • personnel radiation monitoring; and • reporting of the monitoring results to the Community Liaison Committee.	Prior to the next disposal operation.	EPA	RCWA	Approved Environmental Management Plan	**Cleared**	by EPA 24 April 2002.
PC 3.9	**Environmental Management Plans**	Make the draft Environmental Management Plans required by commitment 3.1 to 3.8 available for a four-week limited stakeholder review to the: • IWDF Community Liaison Committee; • The Chamber of Minerals and Energy of Western Australia; and • Chamber of Commerce and Industry of Western Australia; prior to the EPA finalising its consideration of the Plans	Prior to next disposal operation.	EPA		Approved Environmental Management Plans	**Cleared**	by EPA 24 April 2002.
PC 3.10	**Environmental Management Plans**	Advertise and make the approved Environmental Management Plans required by commitments 3.1 to 3.8 publicly available.	Prior to next disposal operation.	EPA		PCR	**Cleared**	by EPA 24 April 2002.
PC 4.1	**Operational Guidelines - Waste Acceptance**	Prepare the Waste Acceptance Operational Guidelines.	Prior to the next disposal operation.	EPA		Approved Operational Guidelines	**Cleared**	by EPA 24 April 2002.
PC 4.2	**Environmental**	Prepare the Environmental Operational Guidelines.	Prior to the next disposal operation.	EPA		Approved Operational Guidelines	**Cleared**	by EPA 24 April 2002.

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE-MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
PC 4.3	**Safety/Emergency Response**	Prepare the Safety/Emergency Response Operational Guidelines.	Prior to the next disposal operation.	EPA		Approved Operational Guidelines	**Cleared**	by EPA 24 April 2002.
PC 4.4	**Transport**	Prepare the Transport Operational Guidelines.	Prior to the next disposal operation.	EPA		Approved Operational Guidelines	**Cleared**	by EPA 24 April 2002.
PC 4.5	**Radiation**	Prepare the Radiation Operational Guidelines.	Prior to the next disposal operation.	EPA		Approved Operational Guidelines	**Cleared**	by EPA 24 April 2002.
PC 4.6	Operational Guidelines	Make the draft Operational Guidelines required by commitments 4.1 to 4.5 available for a four-week limited stakeholder review to the: • IWDF Community Liaison Committee; • The Chamber of Minerals and Energy of Western Australia; and • Chamber of Commerce and Industry of Western Australia; prior to the EPA finalising its consideration of the Plan.	Prior to next disposal operation.	EPA		Approved Operational Guidelines	**Cleared**	by EPA 24 April 2002.
PC 4.7	Operational Guidelines	Advertise and make the approved Operational Guidelines required by commitments 4.1 to 4.5 publicly available.	Prior to next disposal operation.	EPA		PCR	**Cleared**	by EPA 24 April 2002.

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE-MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
PC 5.2	Transport	Prepare the Transport Operational Procedures in accordance with the Operational Guidelines to include but not limited to: • details of waste loading and transport activities, and emergency response training for personnel; • identification of responsibility for the various aspects of transport, loading and unloading operations; • contingency plans for dealing with fire safety, accidents, spillages, vehicle breakdowns and other incidents should they occur; and the procedure for liaison with the local community and emergency services.	Prior to each disposal operation.	Chief Executive Officer, Department of Water and Environmental Regulation		Approved Operational Procedures	**Deleted**	Following the approval of changes to Ministerial Statement 562 on the 20th of October 2024.

APPENDIX B

Radiological Council Registration RS 13/2011 20590

Government of **Western Australia**
RADIOLOGICAL COUNCIL

Address all correspondence to
The Secretary

Your ref
Our ref 20590_230627ds | D-AA-295227
Enquiries D Surin 08 9222 0888

Ms Jodi Cant
Director General
Department of Finance
Attn: Ms Eleanor Hopkins, IWDF Project Director
Locked Bag 11
CLOISTERS SQUARE WA 6850

Dear Ms Hopkins

RADIATION SAFETY ACT

Thank you for your application for renewal of registration of the Mount Walton East Intractable Waste Disposal Facility (IWDF). The application has been approved and your registration certificate is enclosed.

As you are aware, Officers of the Radiological Council have been liaising with the Department of Finance, your approved Radiation Safety Officer and Aurora Environmental regarding the regulation of the IWDF and the transition from historically applying the *Code of practice for the near-surface disposal of radioactive waste in Australia (1992)* (RHS 35) to the current Australian *Code for Disposal Facilities for Solid Radioactive Waste (2018)* (RPS C-3). As part of this, draft safety case documentation was prepared and submitted to the Council; this is still under consideration.

Standard condition 203, *Disposal of low-level radioactive waste*, has now been applied to your registration under Section 36 of the Radiation Safety Act. This replaces the previous standard condition 114, *Disposal of radioactive waste at the Intractable Waste Disposal Facility (IWDF), Crown Reserve 42001*.

Special conditions have also been applied to your registration as follows –

1. The *Code of practice for the near-surface disposal of radioactive waste in Australia (1992)* (RHS 35) may be applied in the transition to compliance with the Australian *Code for Disposal Facilities for Solid Radioactive Waste (2018)* (RPS C-3) until the Safety Case referenced in 2.3 of Standard Condition 203 is approved.

2. The reporting of radioactive material received to the registered premises as required by Section 38 of the Radiation Safety Act may be made within 14 days of a campaign disposal, in place of the 'monthly' basis prescribed in 2.9 of Standard Condition 203.

Letters: Locked Bag 2006 PO Nedlands WA 6009
Email: radiation.health@health.wa.gov.au
Telephone: (61 8) 9222 0888
www.radiologicalcouncil.wa.gov.au

3. An independent auditor is required to be appointed by 2.11 of Standard Condition 203; however, due to the campaign disposal nature of the facility and in place of two-yearly intervals, the report will be required six months after a disposal campaign.

The third condition is in response to your letter of 1 May 2023 (your reference 06047401) which was considered at the Council's 302nd meeting on 13 June 2013. Council agreed to your proposal with the exception that the report from the independent auditor will be required within 6 months from a disposal campaign

The standard and special conditions form part of your registration and are attached to the certificate.

Should you have any queries in relation to this matter, please contact this office.

Yours faithfully

Ms H Upton
Secretary, Radiological Council

Encl. Certificate of Registration

FORM RS12
WESTERN AUSTRALIA

RADIATION SAFETY ACT 1975

CERTIFICATE OF REGISTRATION* OF PREMISES
in which
RADIOACTIVE SUBSTANCES
are to be used, stored or manufactured

It is hereby certified that the premises referred to in this certificate have been registered under the Radiation Safety Act 1975 for the radioactive substances and purpose(s) specified below. The registration* is subject to all applicable regulations under the Act and to any conditions, restrictions or limitations that are specified below or in any attachments.

1. Name and address of the registrant

MS JODI CANT
DIRECTOR GENERAL
DEPARTMENT OF FINANCE
ATTN: MS ELEANOR HOPKINS
LOCKED BAG 11
CLOISTERS SQUARE W A 6850

2. Location of premises subject to registration*

IWDF, MT WALTON EAST, CROWN RESERVE 42001, ~100 KM NORTH OF GT EASTERN HWY BOORABBIN W A 6429

3. Particulars of the radioactive substances to be used, stored, manufactured or otherwise dealt with on the premises *(See Note a). These particulars, where applicable, are given on attached supplementary sheet(s)*

4. Approved radiation safety officer(s). *(The registrant must appoint the person(s) named below in writing and inform them in writing of their duties and responsibilities. See also Note b).*

PARR MR STUART RADIOACTIVE SUBSTANCES -

5. Conditions, restrictions or limitations *(See Note c)* Cond 203.

SEE ATTACHED CONDITIONS

6. Purpose(s) applied to the registration*

DISPOSAL OF RADIOACTIVE WASTE

Notes

a) **Prior notice in writing** must be given to the Radiological Council of material changes. This includes changes affecting the type, form, maximum activity, use or purpose of the radioactive substances as well as any proposed changes to the structure, ventilation or drainage which may differ from information previously supplied and on which approval for this registration may be based. Failure to provide proper notification is an offence under section 38 of the Act.

b) Although the radiation safety officer has specified duties in the regulations, the registrant is responsible for ensuring that those duties are performed and that the use, storage or manufacture of the radioactive substances complies with the Act and regulations. Failure to do so is an offence.

c) **The registrant must ensure compliance** with any conditions imposed on this registration under section 36 of the Act. A requirement may be imposed for the **conditions to be displayed** in a location accessible to all radiation workers.

13 JUL 2023

Date

Secretary, Radiological Council

This Certificate is not valid until signed by the Secretary of the Radiological Council.

REGISTRATION* NO: RS 13/2011 20590 EXPIRY DATE: 08 Feb 2026

*** and/or Exemption from Registration if indicated in Item 6**

RADIATION SAFETY ACT

CONDITIONS, RESTRICTIONS AND LIMITATIONS (SECTION 36)

DISPOSAL OF LOW-LEVEL RADIOACTIVE WASTE

1. This Registration is for the disposal of low-level radioactive waste.

2. The Registrant is directed to ensure that –

DISPOSAL PERMITS

2.1 prior to radioactive waste being accepted for final disposal, a disposal permit must be granted by the Radiological Council in accordance with *Section 34 of the Act*;

REQUIRE COMPLIANCE WITH AUSTRALIAN CODE, RPS C-1 AND RPS C-3

2.2 all radiation management and safety are in accordance with the *Radiation Safety (General) Regulations (1983)*, and the *Australian Code for Radiation Protection in Planned Exposure Situations* (RPS C-1) and *Code for Disposal Facilities for Solid Radioactive Waste* (RPS C-3) published by the Australian Radiation Protection and Nuclear Safety Agency (ARPANSA);

2.3 the Safety Case and, where relevant, the information in the supporting Safety Assessment required under RPS C-1 is reviewed at 2-yearly intervals and any revised documentation is submitted to the Radiological Council;

RADIATION MANAGEMENT PLAN

2.4 the approved Radiation Management Plan, which forms part of the Safety Case, is implemented and reviewed at 2-yearly intervals with any revisions submitted to the Radiological Council for approval;

PREDISPOSAL MANAGEMENT

2.5 all radioactive waste to be disposed of shall be conditioned and packaged in accordance with the approved Radiation Management Plan, with reference to the Australian *Safety Guide for the Predisposal Management of Radioactive Waste* (RPS 16), published by ARPANSA;

TECHNICAL EXPERTISE

2.6 radiation safety management is undertaken by the approved *Radiation Safety Officer* (RSO), in accordance with the duties imposed under *Regulations 19(3)*;

TRANSPORT

2.7 transport of radioactive substances shall be in accordance with the *Radiation Safety (Transport of Radioactive Substances) Regulations 2002* and the *Code of Practice for the Safe Transport of Radioactive Material* as adopted;

REPORTING

2.8 the Radiation Safety Officer (RSO) reports annually in writing to the Radiological Council, the results of radiation monitoring and other factors relating to human health and the environment for the receipt, handling and near-surface disposal of the radioactive waste;

2.9 the reporting under Section 38 of the Radiation Safety Act of material received to site and of material disposed may be conducted on a monthly campaign basis;

MAINTENANCE OF RECORDS

2.10 accurate records of all radioactive material disposed shall be maintained and archived in an approved manner and

INDEPENDENT AUDIT

2.11 an independent auditor with expertise in radioactive waste management shall be appointed to review all actions of the proponent required by these conditions and provide publicly available reports to the Council, one year into commencement of operations and thereafter at two-yearly intervals.

CONDITION NO: **203**

CERTIFICATE NO: **RS 13/2011 20590**

EXPIRES ON: **08 February 2026**

RADIATION SAFETY ACT

CONDITIONS, RESTRICTIONS AND LIMITATIONS (SECTION 36)

SPECIAL CONDITIONS

1. The Code of practice for the near-surface disposal of radioactive waste in Australia (1992) (RHS 35) may be applied in the transition to compliance with the Australian Code for Disposal Facilities for Solid Radioactive Waste (2018) (RPS C-3) until the Safety Case referenced in 2.3 of Standard Condition 203 is approved.

2. The reporting of radioactive material received to the registered premises as required by Section 38 of the Radiation Safety Act may be made within 14 days of a campaign disposal, in place of the 'monthly' basis prescribed in 2.9 of Standard Condition 203.

3. An independent auditor is required to be appointed by 2.11 of Standard Condition 203; however, due to the campaign disposal nature of the facility and in place of two-yearly intervals, the report will be required six months after each disposal campaign.

APPENDIX C

Department of Water and Environmental Regulation Licence L8190/2007/2

Government of Western Australia
Department of Water and Environmental Regulation

Licence

Licence number	L8190/2007/2
Licence holder	Minister for Works C/- Department of Finance
ACN (if applicable)	NA
Registered business address	Djookanup, 16 Parkland Road Osborne Park WA 6017
DWER file number	2012/006884-1
Duration	18/08/2022 to 17/08/2042
Date of issue	16/08/2022
Premises details	Intractable Waste Disposal Facility BOORABBIN WA 6429 Crown Reserve No.42001 Lot 73 on Deposited Plan 217902 As defined by the coordinates in Schedule 1

Prescribed premises category description (Schedule 1, ***Environmental Protection Regulations 1987***)	**Assessed production / design capacity**
Category 66: Class V intractable site	Not applicable

This licence is granted to the licence holder, subject to the attached conditions, on 16/08/2022 by:

STEVE CHECKER
SENIOR MANAGER WASTE INDUSTRIES
REGULATORY SERVICES
an officer delegated under section 20 of the *Environmental Protection Act 1986* (WA)

Licence history

Date	Reference number	Summary of changes
L8190/2007/1	18/02/2002	Licence issued
L8190/2007/1	11/02/2016	Amendment to licence expiry date
L8190/2007/1	29/04/2016	Amendment Notice 1: extension of licence expiry date
L8190/2007/1	09/02/2022	Amendment to licence expiry date
L8190/2007/2	16/08/2022	Licence re-issued

Interpretation

In this licence:

(a) the words 'including', 'includes' and 'include' in conditions mean "including but not limited to", and similar, as appropriate;

(b) where any word or phrase is given a defined meaning, any other part of speech or other grammatical form of that word or phrase has a corresponding meaning;

(c) where tables are used in a condition, each row in a table constitutes a separate condition;

(d) any reference to an Australian or other standard, guideline, or code of practice in this licence:

  (i) if dated, refers to that particular version; and

  (ii) if not dated, refers to the latest version and therefore may be subject to change over time;

(e) unless specified otherwise, any reference to a section of an Act refers to that section of the EP Act; and

(f) unless specified otherwise, all definitions are in accordance with the EP Act.

NOTE: This licence requires specific conditions to be met but does not provide any implied authorisation for other emissions, discharges, or activities not specified in this licence.

Licence conditions

Infrastructure and equipment

1. The licence holder must ensure that the site infrastructure and equipment listed in Table 1 and located at the corresponding infrastructure location is maintained and operated in accordance with the corresponding operational requirement set out in Table 1.

Table 1: Infrastructure and equipment requirements

Site infrastructure and equipment	Operational requirement	Infrastructure location
Groundwater monitoring bores	Maintain in operational condition.	Bores GM1-GM9 as depicted in schedule 1 Bore location Map and any future bores
Surface water management system	Ensure excavated V drains are maintained around cells, to aid surface drainage away from the water shedding clay dome.	N/A
Security fencing	Ensure fencing for the demarcation of cells is maintained free of holes, breaks and other defects.	N/A

Waste acceptance and disposal

2. The Licence Holder must only accept onto the premises waste of a waste type and waste description in accordance with the requirements of Ministerial Statement (MS) 562.

3. The Licence Holder must immediately recover or remove and dispose of spills of intractable waste outside of the disposal cells.

4. The Licence Holder must ensure that Emergency Response Equipment is located on the premises for the duration of a waste disposal operation.

Stormwater management

5. The Licence Holder must ensure that bunding is constructed to ensure that stormwater is diverted from areas of the Premises where waste is handled or stored.

Monitoring

6. The Licence Holder must record the total amount of waste accepted onto the premises or removed from the premises, for each waste type listed in Table 2, with the corresponding parameters listed in Table 2, and for each corresponding time period set out in Table 2.

Table 2: Waste accepted onto or removed from the premises

Waste Type[1]	Parameter[1]	Time Period[1]
Intractable Wastes	(a) time and date of delivery; (b) waste type; (c) total quantity of the waste package (in kilograms, tonnes, litres or cubic metres); (d) the name of the waste generator; (e) the origin and source location of waste; (f) the physical, chemical and/or radiological characteristics of the waste; (g) the name and contact details of the company transporting the waste to the Premises; and (h) the name of the driver and registration number of the delivery vehicle.	Each load arriving at the Premises

Records and reporting

7. The licensee shall notify the CEO in writing at least 1-month prior[1] to the delivery of waste to the Intractable Waste Disposal Facility Mt Walton East. The following information shall be included in the notification (where known):

(a) waste type(s) and quantities to be disposed;

(b) disposal dates; and

(c) status of approval under MS 562 and the Radiological Safety Act 1975.

Note 1: In the case of an emergency disposal event, where notice of disposal is not able to be provided to the CEO within the timeframe outlined in condition 7, the Licence Holder shall provide notification to the CEO as soon as possible (and no later than the end of the next working day) after becoming aware of the emergency disposal event.

8. The Licence Holder must maintain accurate and auditable books including the following records, information, reports, and data required by this licence:

(a) any maintenance of infrastructure that is performed in the course of complying with condition 1 of this licence;

(b) monitoring undertaken in accordance with condition 6 of this licence; and

(c) complaints received under condition 10 of this licence.

9. The books specified under condition 8 must:

(a) be legible;

(b) if amended, be amended in such a way that the original version(s) and any subsequent amendments remain legible and are capable of retrieval;

(c) be retained by the Licence Holder for the duration of the licence; and

(d) be available to be produced to an Inspector or the CEO as required.

10. The licence holder must record the following information in relation to complaints received by the licence holder (whether received directly from a complainant or forwarded to them by the Department or another party) about any alleged emissions

from the premises:

(a) the name and contact details of the complainant, (if provided);

(b) the time and date of the complaint;

(c) the complete details of the complaint and any other concerns or other issues raised; and

(d) the complete details and dates of any action taken by the licence holder to investigate or respond to any complaint.

11. The licence holder must:

(a) undertake an audit of their compliance with the conditions of this licence during the preceding annual period; and

(b) prepare and submit to the CEO by no later than 90 days after the end of that annual period an Annual Audit Compliance Report in the approved form.

12. The Licence Holder must submit to the CEO by no later than 90 days after the end of each annual period, an Annual Environment Report for that annual period for the conditions listed in Table 3, and which provides the information in accordance with the corresponding requirement set out in Table 3.

Table 3: Annual Environment Report

Condition	Requirement
-	A summary of any failure or malfunction of any pollution control equipment or any incidents that have occurred during the previous annual period and any action taken.
NA	Any Performance and Compliance Reports relating to the disposal of waste which were prepared during the previous annual period
Table 1	An updated map showing monitoring bore locations and designations where changes to bore infrastructure has occurred during the previous annual period.
6	Monitoring reports
10	A summary of complaints received during the previous annual period

Definitions

In this licence, the terms in Table 1 have the meanings defined.

Table 1: Definitions

Term	Definition
ACN	Australian Company Number
ASNO	Australian Safeguards and Non-Proliferation Office
Annual Audit Compliance Report (AACR)	means a report submitted in a format approved by the CEO (relevant guidelines and templates may be available on the Department's website).
annual period	a 12 month period commencing from 1 July until 30 June of the immediately following year.
books	has the same meaning given to that term under the EP Act.
CEO	means Chief Executive Officer of the Department. "submit to / notify the CEO" (or similar), means either: Director General Department administering the *Environmental Protection Act 1986* Locked Bag 10 Joondalup DC WA 6919 or: info@dwer.wa.gov.au
Department	means the department established under section 35 of the *Public Sector Management Act 1994* (WA) and designated as responsible for the administration of the EP Act, which includes Part V Division 3.
discharge	has the same meaning given to that term under the EP Act.
emission	has the same meaning given to that term under the EP Act.
Emergency Response Equipment	Fire extinguishers, non-portable water tanks and other equipment approved by EPA for each disposal.
EP Act	*Environmental Protection Act 1986* (WA)
EP Regulations	*Environmental Protection Regulations 1987* (WA)
FMC	The Facility Management Contractor
IWDF	Intractable Waste Disposal Facility
licence	refers to this document, which evidences the grant of a licence by the CEO under section 57 of the EP Act, subject to the specified conditions contained within.

Term	Definition
licence holder	refers to the occupier of the premises, being the person specified on the front of the licence as the person to whom this licence has been granted.
OEWP	Operation Environmental and Waste Acceptance Procedures
Performance and Compliance Report	Report on the results of operation-specific activities carried out at IWDF.
RCWA	Radiological Council of Western Australia. The independent statutory authority appointed under the *Radiation Safety Act 1975* in Western Australia.
premises	refers to the premises to which this licence applies, as specified at the front of this licence and as shown on the premises map (Figure 1) in Schedule 1 to this licence.
prescribed premises	has the same meaning given to that term under the EP Act.
waste	has the same meaning given to that term under the EP Act.

END OF CONDITIONS

Schedule 1: Maps

Premises map

The boundary of the prescribed premises is shown in the map below (Figure 1).

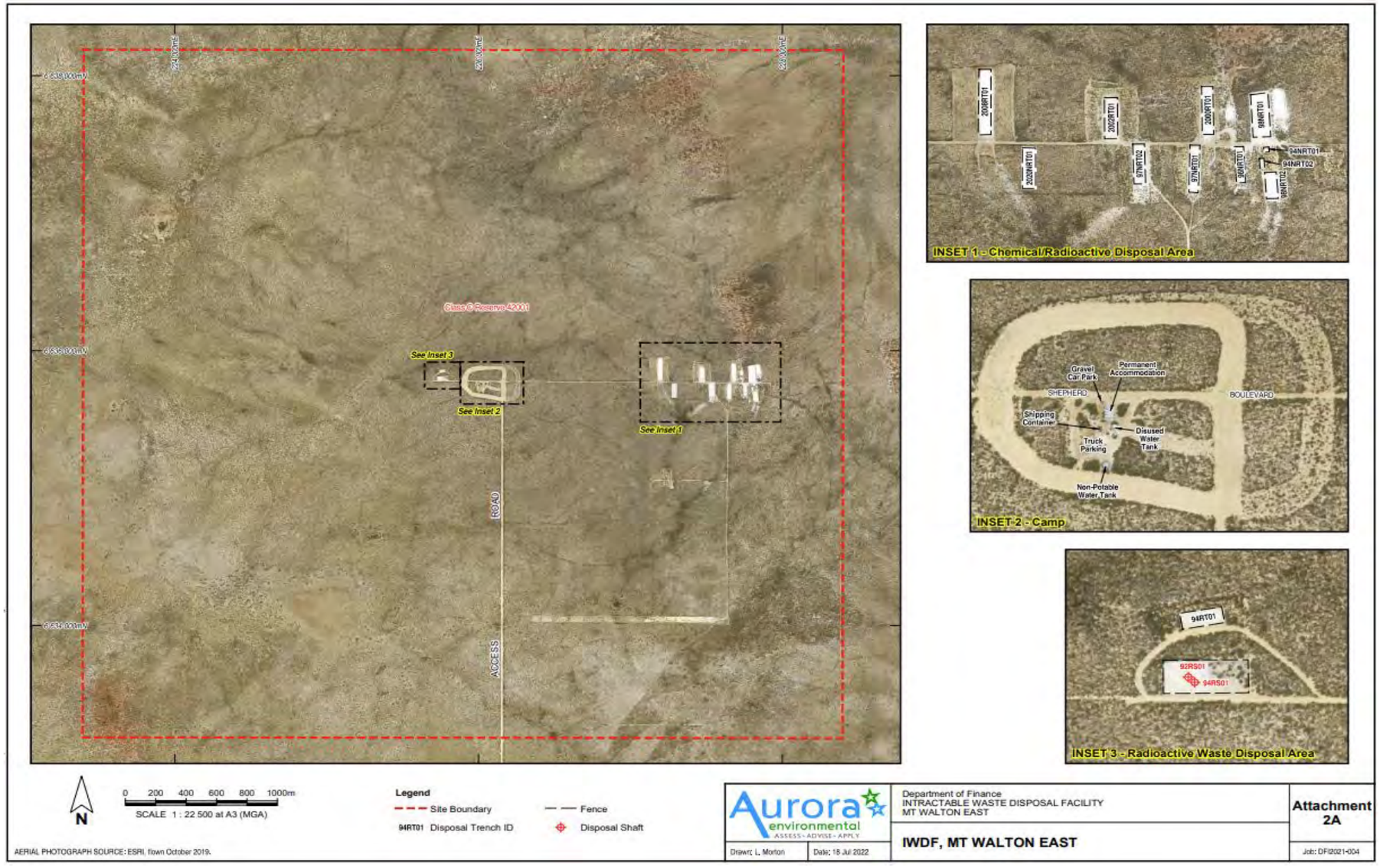

Figure 1: Map of the boundary of the prescribed premises

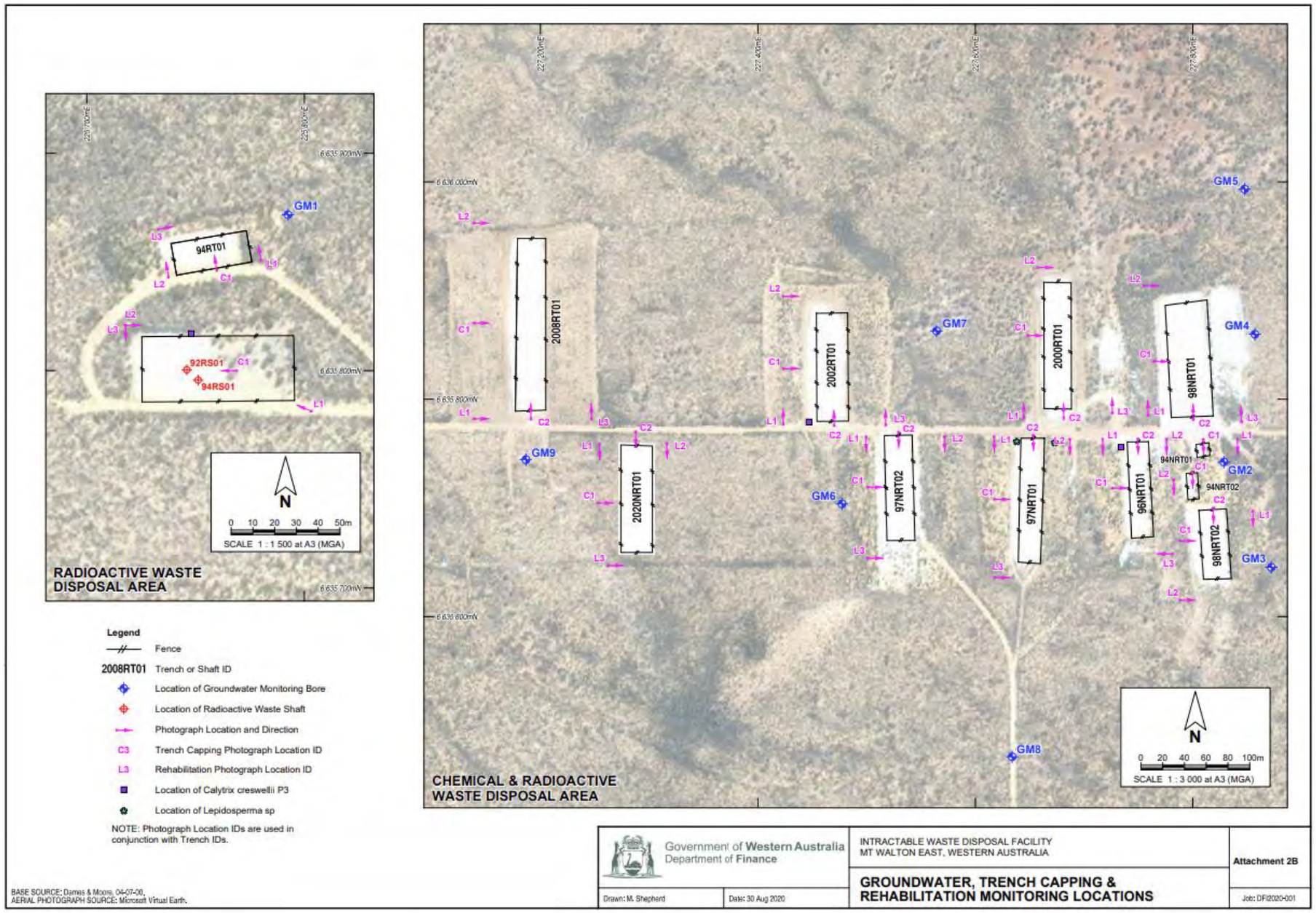

Figure 2: Groundwater monitoring location

Schedule 2: Premises boundary

The premises boundary is defined by the coordinates in Table 2.

Table 2: Premises boundary coordinates (GDA94)

Easting *Longitude (x)*	**Northing** *Latitude (y)*	**Zone**
120.12237	*-30.356576*	*NW*
120.174352	*-30.357766*	*NE*
120.172991	*-30.402860*	*SE*
120.120979	*-30.401658*	*SW*

APPENDIX D

ASNO Permit PN207 V4

PERMIT TO POSSESS NUCLEAR MATERIAL

This Permit granted pursuant to Section 13 of the *Nuclear Non-Proliferation (Safeguards) Act 1987* ("the Act") authorises the Permit Holder to possess the *nuclear material* designated in Part 1, subject to *the Act* and any orders, directions or regulations made thereunder and to the restrictions and conditions set out in Parts 1, 2 and 3 hereunder. Under section 21 of *the Act*, this Permit does not make it lawful for the Permit Holder to do any act or thing that, apart from *the Act*, is unlawful under another law of the Commonwealth or under a law of a State or Territory.

In this Permit, unless the contrary intention appears, words and phrases have the same meaning as in *the Act*. Terms in italics have specialised meanings, which are defined in Section 5 of the Class L2 Compliance Code.

The Compliance Code is an integral part of this Permit.

PART 1

1.	**NAME**	**Minister for Works C/- Department of Finance (Western Australia)**
	ABN/ACN	**99 593 347 728**
2.	**ADDRESS**	
2.1.	**Physical Address**	**Department of Finance, Djookanup, 16 Parkland Road, OSBORNE PARK WA 6017**
2.2.	**Postal Address**	**Department of Finance, Locked Bag 11, Cloisters Square, PERTH WA 6850**
3.	**PERMIT NUMBER**	**PN207**
	Version	**4**
	Class	**L2**
4.	**DATES OF EFFECT**	
4.1.	**Commencement Date**	**30 November 2024**
4.2.	**Expiration Date**	**30 November 2029**

5. Chemical and isotopic composition and physical form of *nuclear material* in relation to which this Permit has effect ("the nuclear material")		6. Maximum amount that the Permit Holder may possess at any one time under this Permit	
Source Material		**Element Weight**	
5.1	Depleted uranium in any form.....	6.1	500 kilograms
5.2	Natural uranium in any form.....	6.2	500 kilograms
5.3	Thorium in any form	6.3	500 kilograms
Special Fissionable Material		**Isotope Weight**	
5.4	Uranium-235 (as enriched U) in any form	6.4	5 grams
5.5	Uranium-233 in any form.....	6.5	5 grams
5.6	Plutonium-239 in any form	6.6	5 grams

7. Permit History

Version	Date of Effect	Description
1	21/11/2011	Permit original issue
2	28/09/2018	Variation – Issue of permit using Class L2 template
3	30/10/2020	Variation – Extension to permit and minor language updates to paragraphs 8 to 13 and Compliance Code sections 1, 3 and 4. Definitions updated and moved to Compliance Code.
4	30/11/2024	This Variation—Extension to permit and minor language updates to paragraphs 8, 9 and 12 and Compliance Code sections 2 and 3. Update to postal address and wording of physical address. Update to wording of Appendix A.

This Variation of the Permit is issued on the 18th of November 2024.

Digitally signed by Geoffrey Shaw (Dr)
Date: 2024.11.18 15:27:05 +11'00'

Director General

8. **Authorised Use and Storage**

8.1. Not Applicable.

8.2. Not Applicable.

8.3. Storage.

9. **Locations for Which This Permit has Effect ("Approved Locations")**

9.1. **Use and storage at:**

9.1.1 None

9.2. **Use only at:**

9.2.1 None

9.3. **Storage only at**:

9.3.1 Intractable Waste Disposal Facility (IWDF), Mt Walton East, Crown Reserve 42001, Western Australia, (GPS coordinates at centre point Lat -30 22' 43" Long 120 8' 46").

9.4. The Approved Locations may be updated by a Form ASO112 – Application to Create or Remove an Approved Location, that is approved by the Director General.

9.5. Not Applicable.

10. **Transport for Which This Permit has Effect**

This Permit grants the Permit Holder permission to transport *nuclear material* to anywhere within Australia for amounts up to those specified in paragraphs 5 and 6.

PART 2

11. **Communications with the Director General**

11.1. The Permit Holder or *Designated Individual* shall submit all applications, notifications and reports to the *Director General* via the following means:

- ASNO's NUMBAT online database portal: (https://numbat.dfat.gov.au);
- EMAIL: nuclear.asno@dfat.gov.au;
- Australian Safeguards and Non-Proliferation Office
  RG Casey Building
  John McEwen Crescent
  Barton, ACT 0221; or
- as otherwise specified in writing by the *Director General.*

NOTE: A reference to the Director General in relation to applications, approvals, notification or reports under this Permit or its Compliance Code *includes the Director General and ASNO inspectors.*

12. **General Requirements**

The Permit Holder shall:

12.1. implement the requirements of the Compliance Code to provide nuclear material accounting and control and *nuclear security*;

12.2. submit applications, notifications and reports as specified in the Compliance Code*;* and

12.2.1 not commence any activity for which approval of the *Director General* is required, prior to the receipt of written approval from the *Director General*; and

12.2.2 carry out such activity in accordance with any requirements specified by the *Director General* in such approval;

12.3. maintain effective control over *nuclear material* and *Approved Locations*;

12.4. notify the *Director General*, where a *loss of control* or incident involving *nuclear material* has occurred;

12.5. not dispose of *nuclear material* without written approval, by Form ASO108–Application to Consume, Dilute or Dispose of Nuclear Material or Associated Item, from the *Director General*;

12.6. not transfer *nuclear material* to another person in Australia or aid, abet, counsel or procure such a transfer, unless the transferee is the holder of:

12.6.1 a current appropriate Permit to Possess Nuclear Material granted under section 13 of *the Act*; except for *nuclear material* to which Part II of *the Act* does not apply when in the possession of the transferee; or

12.6.2 a current appropriate Special Transport Permit granted under section 16 of *the Act*; except for *nuclear material* of a kind prescribed by the regulations for the purpose of sub-section 24(1) of *the Act*;

12.7. notify *ASNO* of any change to individuals in the following positions:

12.7.1 a *Permit Holder's Representative*; and

12.7.2 *Designated Individuals* (and alternates for continuous oversight) by submitting Form ASO214 – Notification of Designation of an Individual;

12.8. train all persons authorised by the Permit Holder to have access to *nuclear material* in the conditions of this Permit and the Permit Holder's procedures enabling it to meet these conditions; and

12.9. apply any special conditions as set out in Appendix A of this Permit.

13. **Inspections by ASNO Inspectors and Agency Inspectors**

13.1. The Permit Holder shall:

13.1.1 provide *inspector*(*s*) with an up-to-date *inventory* listing at the commencement of an inspection;

13.1.2 provide, within 2 hours of a request by *inspector*(*s*), copies of any other record(s), demonstrating that the Permit Holder has operated, and is operating, in compliance with this Permit and the Compliance Code;

13.1.3 ensure, at the time of each inspection, the presence of persons responsible for those areas being inspected and the necessary personnel responsible for handling the *nuclear material*;

13.1.4 make available, at the request of the *inspector*(*s*), equipment that the Permit Holder has available for measurement of the *nuclear material* and, the means and staff required for handling the *nuclear material*;

13.1.5 if requested, provide suitable office space at the *Approved Locations* to facilitate inspection functions; and

13.1.6 afford *inspector*(*s*) every assistance and comply with any reasonable request in order to achieve a relevant safeguards purpose.

13.2. To further the health and safety requirements under the current Work Health and Safety legislation, and relevant state and federal legislation, regulations and standards, the Permit Holder shall:

13.2.1 provide to the *inspector*(*s*) (and the *Director General*, on request) sufficient information, training, instruction or supervision in order to allow those *inspectors* to comply with any health and safety procedures applicable at the *Approved Locations* and carry out their duties at the *Approved Locations* without risk to their health or safety;

13.2.2 provide the *inspector*(*s*) with all necessary personal protective equipment in order to ensure, so far as reasonably practicable, their health and safety while carrying out duties at the *Approved Locations*;

13.2.3 respond promptly to any request for information by an *inspector*, *Agency inspector*, or an officer of *ASNO* acting on behalf of such an *inspector*, regarding the procedures or equipment referred to in paragraphs 13.2.1 and 13.2.2; and

13.2.4 take any other reasonable steps to ensure the health and safety of the *inspector*(*s*) while those *inspectors* are at the *Approved Locations*, including steps to comply with any applicable provisions of a radiation protection law or regulation of the jurisdiction in which the Permit Holder is located which applies to the Permit Holder (in whole or in part).

PART 3

14. **Inspections to be Permitted**

14.1. The Permit is granted on condition that the Permit Holder consents, for the purposes of sections 59 and 60 of *the Act*, to all inspections carried out including:

14.1.1 the entry by any *ASNO inspector* upon any land or upon or into any premises occupied by the Permit Holder and the exercise by that *inspector* of any relevant power for any relevant safeguards purpose;

14.1.2 the entry by any *ASNO inspector* upon any vessel, aircraft or vehicle in the control of the Permit Holder and the exercise by that *inspector* of any relevant power for any relevant safeguards purpose;

14.1.3 the entry by any *Agency inspector* upon any land or upon or into any premises occupied by the Permit Holder, and the exercise by that *Agency inspector* of any relevant power for the purposes of carrying out an inspection that the *Agency* has the right to make in accordance with the *Agency Agreement* and the *Additional Protocol*;

14.1.4 the entry by an *Agency inspector* upon any vessel, aircraft or vehicle in the control of the Permit Holder, and the exercise by that *Agency inspector* of any relevant power for the purposes of carrying out an inspection that the *Agency* has the right to make in accordance with the *Agency Agreement* and the *Additional Protocol*; and

14.1.5 the Permit Holder shall provide upon request of an *inspector* or *Agency inspector* access to any place within an *Approved Location* as soon as possible, and in any case within 2 hours of a request for such access.

14.2. An *inspector* or *Agency inspector* exercising any relevant power is required to comply with the provisions of section 64 of *the Act*.

NOTE: Subject to the Administrative Review Tribunal Act 2024 and to sub-section 22(8) of the Nuclear Non-Proliferation (Safeguards) Act 1987, application may be made to the Administrative Review Tribunal, by or on behalf of a person whose interests are affected by a decision by the Minister, pursuant to sub-section (2) of section 13 of the Act, imposing a condition or restriction on the grant of a Permit, for review of the decision.

Appendix A – Special conditions for Permit PN207

1. For nuclear material that has been stored below ground since before the 30 October 2020 in shaft 92RS01, shaft 94RS01, trench 2000RT01, trench 2002RT01 or trench 2008RT01 (or any other below ground location/s with no intention of retrieval as approved by the *Director General* in writing on a case-by-case basis), the following special conditions shall apply:
    a. Section 1.1.2 of the Compliance Code does not apply; and
    b. Section 2.1.2 of the Compliance Code is replaced by

    "securing inventory in a drum-in-drum structure where 60 litre drums are filled with cement-based grout and placed inside 200 litre drums filled with concrete, (or any other packaging structure as approved by the *Director General* on a case by case basis); and"
2. For any nuclear material that has not been stored below ground since before 30 October 2020, the conditions in the Compliance Code shall apply and in particular:
    a. the Permit Holder shall not receive or otherwise allow such nuclear material to arrive at an Approved Location prior to the receipt of written approval from the *Director General*; and
    b. the Permit Holder shall not place below ground or allow the placement below ground of such nuclear material prior to the receipt of written approval from the *Director General*.

Note: In accordance with section 3 of the Compliance Code, the Permit Holder shall use the forms listed in section 3.1 for the purposes of seeking the approval of the *Director General*.

– END OF PERMIT –

COMPLIANCE CODE FOR CLASS L2 PERMITS

Compliance Code History

Version	Date of Effect	Description
1	18/09/2015	Compliance Code first issue.
2	28/09/2020	New section 4.2, incorporation of definitions section, minor updates to various conditions.
3	28/08/2024	This variation—Sections renumbered, change to condition regarding approval of transfers of nuclear material, minor updates to other conditions.

Purpose

The purpose of this Compliance Code is to establish a standard set of requirements for the systems of *Nuclear Material Accounting and Control* and *Nuclear Security* for all Class L2 Permits to Possess Nuclear Material issued under section 13 of *the Act*. It also sets out forms for the submission of applications, notifications and reports.

Scope

This Compliance Code applies to Permits to Possess Nuclear Material issued under section 13 of *the Act* identified under paragraph 3 of the Permit as a Class L2 Permit. The requirements of the code apply to all *nuclear material* in the possession of the Permit Holder except *nuclear material* which is declared under section 11 of *the Act* as exempt from the application of Part II of *the Act*.

For the purpose of this Compliance Code, *nuclear security* will be taken to apply to *nuclear material* including *UOC*, but not to include other radioactive materials.

1. **Nuclear Material Accounting and Control (NMAC) System**

1.1. The Permit Holder shall:

1.1.1 keep an *inventory* listing of *nuclear material* up-to-date;

1.1.2 label all physical batches and containers of *nuclear material* on the Permit Holder's *inventory*, with unique identification markings in a way that enables timely matching with batch numbers assigned by *ASNO*;

1.1.3 maintain organisational arrangements enabling the Permit Holder to determine the precise location of any material on the Permit Holder's *inventory* in less than 2 hours;

1.1.4 keep records of transfers of *nuclear material*;

1.1.5 conduct a Physical Inventory Taking (stocktake) not more than thirty (30) days prior to and no later than 30 June each year (or other dates as may be designated by *ASNO* in advance), of any *nuclear material* on the *inventory*;

1.1.6 maintain organisational arrangements to detect any *loss of control* of *nuclear material* listed on the *inventory* within 7 days; and

1.1.7 retain records of holdings and transfers of *nuclear material* for a period of 5 years.

1.2. Given the low safeguards significance of material covered by Class L2 Permits, the Permit Holder is not required to develop formal written NMAC procedures.

2. Security Measures

2.1. The Permit Holder shall maintain security measures for preventing the theft, loss or unauthorised handling of *nuclear material* and its associated records, including:

2.1.1 restricting access to *nuclear material* to persons who need to access such material;

2.1.2 securing *nuclear material* in a lockable room or container or, for *nuclear material* incorporated into equipment, securing the equipment; and

2.1.3 maintaining documentary records associated with the Permit conditions (e.g. defined access list, log in/out sheet).

2.2. The Permit Holder shall promptly notify *the Director General* within 2 hours of detection of each incident under Form ASO201 of:

2.2.1 a *loss of control* including actual, attempted or suspected theft, loss or compromise of *nuclear material*;

2.2.2 an unauthorised access to *nuclear material*; or

2.2.3 a failure of the security measures.

3. Reports, Notifications and Requests for Approvals

3.1. The Permit Holder or *Designated Individual* shall report to, notify or apply to the *Director General* as appropriate for each activity or item listed in section 4.

3.2. Each such report, notification or application shall be made by completing the specified forms listed in section 4 or using other formats as approved by *ASNO*.

3.3. The reports, notifications or applications shall be delivered to the *Director General* in accordance with the reporting requirements specified on the respective form.

3.4. The Permit Holder shall provide an annual report (as at 30 June) to *ASNO* and submit the report by the 5th of July of the same year (or other dates as may be designated by *ASNO* in advance), including:

3.4.1 Physical Inventory Taking as described in section 1.1.5, including the location of each item of *nuclear material*; and

3.4.2 All *inventory* changes that occurred during the reporting period.

3.5. Obtain *ASNO* approval, by Form ASO106 Application to Transfer Material (Import, Export Or Domestic Transfer), for all international or domestic transfers and receipts of *nuclear material* in accordance with the reporting timeframes and forms.

3.6. If requested by *ASNO*, the Permit Holder shall provide *inventory* reporting on any *nuclear material* subject to a prescribed international agreement in a manner specified in writing by *ASNO*.

4. ASNO Forms

The Permit Holder shall use the forms listed in sections 4.1–4.3 available at www.dfat.gov.au/asno, as amended from time to time or the equivalent on *ASNO*'s online portal (the NUMBAT database portal https://numbat.dfat.gov.au).

4.1. Application Forms

APPLICATION FORMS TO CONDUCT CERTAIN ACTIONS:[1]	TIMEFRAME LIMITS FOR APPLICATIONS, NOTICE OR REPORTING:[2, 3]	FORM TO USE:
Application to Transfer Material (Import, Export or Domestic Transfer)	– 7 day notice	ASO106
Application to Consume, Dilute or Dispose of Nuclear Material or Associated Item [4]	– 7 day notice	ASO108
Application to Create or Remove an Approved Location	– 7 day notice	ASO112
Application to Vary Disposition of Material Such That it will Become Unavailable for Verification	– 14 day notice	ASO128

4.2. Notification Forms

NOTIFICATION IS REQUIRED FOR: [1]	TIMEFRAME LIMITS FOR APPLICATIONS, NOTICE OR REPORTING:[2]	FORM TO USE:
Notification of an Incident	– Report incidents by phone within 2 hrs. of detection – submit form within 4 hrs.	ASO201
Notification of Designation of an Individual		ASO214
Notification of Change to Permit Holder's Particulars	– Within 10 days of effect of change	ASO231

4.3. Report Forms

REQUIRED REPORTS:[1]	TIMEFRAME LIMITS FOR APPLICATIONS, NOTICE OR REPORTING:[2]	FORM TO USE:
Report on Incident Investigation	– Within 10 days of initial notification	ASO303
Inventory Listing (Nuclear Materials and Associated Materials)	– 5 days after the physical inventory taking date set in 1.1.5	ASO310
Ledger Page	– Report monthly transactions or – 5 days after the physical inventory taking date set in 1.1.5	ASO311
Description of each building at an approved Location	– 15th of March every year	ASO316

[1] Each report, notification or application should be made by the *Permit Holder's Representative* or by a *Designated Individual* as notified under ASO214, responsible for compliance with that application requirement.
[2] Refer to related form for detailed timeframe requirements. All days refer to consecutive business days.
[3] For events requiring approval forms, the event must not take place before *ASNO* approval is granted.
[4] *Nuclear material* may only be disposed of in such a way that the *nuclear material* will become practicably irrecoverable.

Definitions

(the) **Act**	The *Nuclear Non-Proliferation (Safeguards) Act 1987*.
Additional Protocol	The Protocol Additional to the Agency Agreement (INFCIRC/217/Add.1) that entered into force on 12 December 1997.
(the) **Agency**	The International Atomic Energy Agency (IAEA).
Agency Agreement	The Agreement between Australia and the International Atomic Energy Agency for the Application of Safeguards in Connection with the Treaty on the Non-Proliferation of Nuclear Weapons (INFCIRC/217), being the Agreement which was signed on behalf of Australia on 10 July 1974, a copy of which is set out in Schedule 3 of *the Act*.
Approved Locations	Locations for which this permit has effect as described in Paragraph 9.
ASNO	The Australian Safeguards and Non-Proliferation Office.
Designated Individual(s)	Individual(s) to whom the *Permit Holder's Representative* delegates some of the responsibility and authority with respect to compliance with this Permit.
Director General	The Director General of the Australian Safeguards and Non-Proliferation Office.
Inspector	A person appointed an inspector or a person declared an Agency inspector, pursuant to section 57 of *the Act*.
Inventory	The entire physical stock of *nuclear material*, irrespective of its form or usefulness, held by the Permit Holder.
Loss of Control (of material)	The Permit Holder has lost the ability to apply the Permit conditions (on a continuous basis) to *nuclear material* including UOC or associated items (including technology, material or equipment).
Nuclear fuel cycle-related research and development activities	Those activities which are specifically related to any process or system development aspect of any conversion of *nuclear material*, enrichment of *nuclear material*, nuclear fuel fabrication, reactors, critical facilities, reprocessing of nuclear fuel, processing (not including repackaging or conditioning not involving the separation of elements, for storage or disposal) of intermediate or high-level waste containing plutonium, or high enriched uranium or uranium-233. It does not include activities related to theoretical or basic scientific research or to research and development on industrial radioisotope applications, medical, hydrological and agricultural applications, health and environmental effects and improved maintenance.

Nuclear Material	*Source* and *special fissionable material* the same as in *the Act* but for the purposes of this Permit excludes material that has been deemed by *ASNO* as practicably irrecoverable (Schedule 3, Article 11 of *the Act*) or material that is the subject of an exemption or termination declaration under section 11 of *the Act*.
Nuclear Security	The prevention of, detection of, and response to, criminal or intentional unauthorised acts involving or directed at *nuclear material*, nuclear facilities and associated items. NOTE: *The Act* refers to physical security, which in relation to the protection of *nuclear material*, is defined as nuclear security or physical protection consistent with IAEA guidance material, and for the protection of associated items, as protective security consistent with the Australian Physical Security Policy Framework (PSPF).
Permit Holder's Representative	The representative of the Permit Holder (i.e. the organisation) who will take responsibility and sign documents on behalf of the organisation. This person must be in a position with sufficient authority to ensure all Permit conditions are met.
Source Material and **Special Fissionable Material**	The same as in Schedule 1 of *the Act.*
UOC	Uranium ore concentrates.

NOTE: Subject to the Administrative Review Tribunal Act 2024 and to sub-section 22(8) of the Nuclear Non-Proliferation (Safeguards) Act 1987, application may be made to the Administrative Review Tribunal, by or on behalf of a person whose interests are affected by a decision by the Minister, pursuant to sub-section (2) of section 13 of the Act, imposing a condition or restriction on the grant of a Permit, for review of the decision.

APPENDIX E

2024 – 2025 IWDF Management Plans

Government of **Western Australia**
Department of **Finance**

ENVIRONMENTAL, HEALTH AND SAFETY AND RADIATION MANAGEMENT PLANS

INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST

In accordance with proponent commitment 3.1 - 3.8 of the Ministerial Statement for the operation and management of the IWDF, Mt Walton East, eleven Management Plans have been developed.

These Management Plans provide a summary of the methods and controls that are in place, and must be maintained, to achieve ongoing management targets.

Each Management Plan is designed to address an aspect of the IWDF's activities or management, as listed below:

1. Air Quality
2. Decommissioning and Rehabilitation
3. Emergency Response
4. Flora and Fauna
5. Health and Safety
6. Radiation
7. Transport
8. Water
9. Waste Acceptance
10. Community Liaison
11. Management Review

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO. 1
INTRACTABLE WASTE DISPOSAL FACILITY, MT WALTON EAST
AIR QUALITY

Environmental, Health and Safety Policy Statement:
Take all practical steps to minimise the impact of site activities on the environment and the community. Appropriately train all personnel to ensure the protection of the health and safety of the public and IWDF workers.

Management Goal:
To effectively manage air quality at the IWDF.

Management Objective:
To ensure dust and air emissions are monitored and managed to minimise potential risks to health and the environment.

Management Target:
- No waste dust released during operations at the site.
- Minimal atmospheric emissions from vehicles and machinery.
- No health or environmental effects resulting from air or dust emissions.

Management Program:
- FMC will undertake inspections to ensure that waste is appropriately packaged, transported, and unloaded to prevent spillage or rupture.
- FMC will inspect packages to ensure they are free from waste on outer surfaces prior to unloading.
- If a waste package ruptures, the waste material will be covered as soon as possible. Any spillage will be immediately contained and recovered.
- Appropriate personal protective equipment and safety measures will be utilised when necessary.
- Dust suppression techniques will be employed during earthworks.
- Dust monitoring shall be undertaken.
- Vehicles and machinery will be serviced regularly to ensure optimal efficiency.
- If required, hazardous atmospheres in disposal cells will be managed.

Improvement Program:
Nil

Relevant Documents and Procedures:
- Environmental Procedure EP-06: Air Quality and Dust Management.
- Environmental Instruction EI-02: Soil and Dust Environmental Sampling.
- Emergency Response Procedure ERP-01: Incident Prevention, Reporting & Investigation.
- OHSERP (operation-specific air quality requirements).
- A guideline for managing the impacts of dust and associated contaminants from land development sites, contaminated sites remediation and other related activities (DEC March 2011).
- State of Western Australia (Department of Energy, Mines, Industry Regulation and Safety) (2022) Work Health and Safety Commission, Confined Spaces: Code of Practice. 55p.
- AS / NZS 3580.10.1: 2016 Methods for Sampling and Analysis of Ambient Air - Determination of particulate matter - Deposited matter - Gravimetric method. (Currency checked June 2025)

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO. 1
INTRACTABLE WASTE DISPOSAL FACILITY, MT WALTON EAST
AIR QUALITY

- AS / NZS 3580.1.1: 2016 Methods for Sampling and Analysis of Ambient Air - Guide to siting air monitoring equipment. (Currency checked June 2025)
- AS / NZS 3580.9.13:2022 Methods for sampling and analysis of ambient air - Determination of suspended particulate matter - PM2.5 continuous direct mass method using a tapered element oscillating microbalance monitor. (Currency checked June 2025)

Forms:

- IWDF Form-03b: Sampling / Groundwater Monitoring Record.
- IWDF Form-01: Chain of Custody Record.

Monitoring of Performance:

- Predisposal monitoring: 5 days minimum dust sampling.
- Disposal operations: dust samples shall be collected during disposal at designated sites around the cell.
- In the case of a spill, samples shall be gathered from gauges in the vicinity of the spill and downwind.
- If hazardous atmospheres are suspected, air monitoring shall be conducted in a trench more than 1.2 m deep.

Reporting:

Annual Performance and Compliance Report

Key Responsibilities:

- Facility Management Contractor: monitoring.
- Environment Manager: implementation.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 2A
INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST
DECOMMISSIONING AND REHABILITATION - A
OPERATION SPECIFIC AND ONGOING

Environmental, Health and Safety Policy Statement:
Use recognised current best practices for near surface disposal of hazardous and low-level radioactive wastes. Remain aware of international advances in intractable waste management technology.

Management Goal:
To return the site to as close to its original condition as possible.

Management Objective:
To ensure that areas of the site where operations have ceased are progressively decommissioned and rehabilitated in a manner which restores the original ecosystem.

Management Target:
- Re-establishment of indigenous habitats following the conclusion of operations in the area.
- No introduction of non-indigenous species.

Management Program:
- Vegetation and topsoil cleared during operations shall be stockpiled nearby.
- Cleared areas shall be rehabilitated using the stockpiled vegetation and topsoil following completion of their use (except for fenced disposal compounds and tracks used for access).
- Areas undergoing rehabilitation will be monitored annually by the FMC and assessed by a botanist every ten years. Assessment by a botanist should be next undertaken in October 2034.
- Temporary infrastructure shall be removed upon completion of site works.
- Disused tracks and road shall be allowed to revegetate naturally.

Improvement program:
- Nil – see Long Term & Site Closure Management Plan under Decommissioning and Rehabilitation – B.

Relevant Documents and Procedures:
- Environmental Procedure EP-05: Rehabilitation Management (includes vegetation completion criteria).
- Environmental Instruction EI-04: Rehabilitation Monitoring.
- Flora identification kit (significant flora) – located within FMC EHSQMS.
- Aurora Environmental (2023) Final Cover Concept for Waste Disposal Cells at the Intractable Waste Disposal Facility, Mt Walton East, and Associated Costings. Prepared for Department of Finance, 13 December 2023. Review of rehabilitation scenarios process and costs every 5 years. Latest review December 2023.

Forms:
- IWDF Form 38a: Rehabilitation Monitoring Record.
- IWDF Form 39: Monitoring Register.
- Monitoring Location Figure – showing location of photo points, monitoring bores and any priority flora.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 2A
INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST
DECOMMISSIONING AND REHABILITATION - A
OPERATION SPECIFIC AND ONGOING

Performance Monitoring:
- Botanist: Inspect the progress of rehabilitation every ten years (next due Oct 2034).
- FMC personnel: annual monitoring of rehabilitation, preferably in spring (next due Oct 2025).

Reporting:
Annual Performance and Compliance Report - monitoring results for the reporting period.

Key Responsibilities:
- FMC Site Personnel: annual monitoring
- Botanist: rehabilitation progress status

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 2B
MT WALTON EAST INTRACTABLE WASTE DISPOSAL FACILITY
DECOMMISSIONING AND REHABILITATION - B
LONG TERM AND SITE CLOSURE

Environmental, Health and Safety Policy Statement:
Use recognised current best practices for near surface disposal of hazardous and low-level radioactive wastes. Remain aware of international advances in intractable waste management technology.

Management Goal:
To return the site to as close to its original condition as possible.

Management Objective:
To ensure that the site is rehabilitated and decommissioned in manner which restores the original ecosystem.

Management Target:
- Re-establish removed or disturbed indigenous habitats to their original states and levels of species diversity.
- Removal of all site infrastructure.

Management Program:
- A decommissioning statement will be prepared six months prior to decommissioning.
- Aurora Environmental (2023) Final Cover Concept for Waste Disposal Cells at the Intractable Waste Disposal Facility, Mt Walton East, and Associated Costings. Prepared for Department of Finance, 13 December 2023. Review of rehabilitation scenarios process and costs every 5 years. Latest review December 2023.
- The decommissioning statement will include a zone of restricted occupancy outside the site perimeter as a region in which there is public access. However, permanent occupancy is prohibited within this zone for the institutional control period.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 2B
MT WALTON EAST INTRACTABLE WASTE DISPOSAL FACILITY
DECOMMISSIONING AND REHABILITATION - B
LONG TERM AND SITE CLOSURE

Improvement program:

- Nil

Relevant Documents and Procedures:

- Environmental Procedure EP-05: Rehabilitation Management (includes vegetation completion criteria).
- Decommissioning and Rehabilitation Plan (to be developed 6 months prior to closure).

Forms:

- IWDF Form 38a: Rehabilitation Monitoring Record.
- IWDF Form 39: Monitoring Register.
- Monitoring Location Figure – showing location of photo points, monitoring bores and any priority flora.

Performance Monitoring:

- Botanist: Inspect the progress of vegetation rehabilitation every ten years (next due Oct 2034).
- IWDF Project Manager: Monitoring of rehabilitation every 12 months (preferably in spring), next due Oct 2025.

Reporting:
Annual Performance and Compliance Report

Key Responsibilities:
IWDF FMC Project Manager: coordinate development of Decommissioning Statement and Rehabilitation Plan when required.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 3
INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST
EMERGENCY RESPONSE

Environmental, Health, Safety and Quality Policy Statement:

- Meet and exceed statutory requirements for all IWDF activities including transport, safety, public health, and environmental protection. A process of continual review is employed to ensure the adequacy of the EHSQMS, the Environmental, Health and Safety and Quality Policy and operational activities at the IWDF.

- Take all practical steps to minimise the impact of site and operational activities on the environment and the community. Ensure the protection of the health and safety of the public and IWDF personnel by appropriately training all personnel involved in IWDF operations.

Management Goal:
To prevent and effectively manage emergency incidents at the IWDF.

Management Objective:
To ensure emergencies are responded to quickly and are managed effectively.

Management Target:
- No lost time injuries.
- No harm or injury to the public or environment.
- Quick, accurate, and effective responses to emergencies.
- Continual improvement and revision.

Management Program:
- Implement effective and appropriate emergency response procedures.
- Report thoroughly on all emergency or potential emergency incidents.
- Investigate all incidents, accidents, and near misses. Implement corrective actions to prevent their recurrence.
- Provide all personnel with the appropriate equipment and training.

Improvement Plan:
Nil

Relevant Documents and Procedures:
- Emergency Response Procedure ERP-01: Incident Prevention, Reporting, and Investigation.
- Emergency Response Procedure ERP-02: Emergency Response Management.
- Management Procedure MP-13: Control of Non-Conformances and Correctional Preventative Action.
- Emergency Response Instruction ERI-01: Injury or Medical Emergency Evacuation Response.
- Emergency Response Instruction ERI-02: Waste Incident and Spill Response.
- Emergency Response Instruction ERI-03: Fire Response.
- Emergency Response Instruction ERI-04: Transport Emergency Response.
- State Emergency Management Plan, a Strategic Framework for Emergency Management in Western Australia.
- State Hazard Plan: Hazardous materials emergencies (HAZMAT).

Forms:
- IWDF Form 06: Near Miss / Incident / Accident / Exposure Report.
- IWDF Form 07: Near Miss / Incident / Accident / Exposure Report Register.
- IWDF Form 36: Emergency Response Team Contact Details.
- IWDF Form 42: Emergency Response Equipment Checklist.

Performance Monitoring:
Continually review and assess the effectiveness of corrective actions.

Reporting:
- Close-out Report.
- Annual Performance and Compliance report, operation-specific incidents, and other incidents such as fires outside operations.

Key Responsibilities:

- Operations Manager and Safety Manager: revision, maintenance, and implementation.
- IWDF FMC Project Manager: reporting.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 4
MT WALTON EAST INTRACTABLE WASTE DISPOSAL FACILITY
FLORA AND FAUNA

Environmental, Health, Safety and Quality Policy Statement:
Meet and exceed statutory requirements for all IWDF activities including transport, safety, public health, and environmental protection. A process of continual review is employed to ensure the adequacy of the EHSQMS, the Environmental, Health and Safety and Quality Policy and operational activities at the IWDF.

Management Goal:
To minimise the impacts of the site on native flora and fauna.

Management Objective:
To ensure that potential impacts on native flora and fauna are effectively managed.

Management Target:

- Minimal impacts on native flora and fauna.
- Identify priority or endangered species.
- Prevent dust contamination of flora, fauna, and their habitats.
- Prevent the introduction of non-indigenous species.

Management Program:

- Flora and fauna surveys shall be undertaken to identify species at the site.
- The conservation status of plants in the proposed clearing area will be determined. Clearing will be avoided in areas containing priority species.
- Where necessary, a botanist shall be brought to site prior to significant clearing.
- Unnecessary clearance or disturbance of vegetation shall be avoided.
- Fauna injuries and deaths will be treated as environmental incidents.
- Drivers within the IWDF shall be aware of native fauna.
- Trenches and boreholes shall be designed to prevent the trapping of fauna.
- Dust suppression techniques shall be used during operations.
- Priority flora identification kit to be regularly updated (to be reviewed October 2025).
- Weed identification kit to be regularly reviewed (to be reviewed October 2025)

Improvement program:
Nil

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 4
MT WALTON EAST INTRACTABLE WASTE DISPOSAL FACILITY
FLORA AND FAUNA

Relevant Documents and Procedures:

- Environmental Procedure EP-01: Vegetation (Flora) Management.
- Environmental Procedure EP-02: Fauna Management.
- Emergency Response Procedures ERP-01: Incident Prevention, Reporting, and Investigation.
- Environmental Procedure EP-05: Rehabilitation Management (includes vegetation completion criteria).
- Environmental Procedure EP-06: Air Quality and Dust Management.
- Florabase Declared Rare Flora and Priority Database.
- Flora and weed identification kits.

Forms:

- Monitoring Location Figure – showing location of photo points, monitoring bores and any priority flora.

Performance Monitoring:
Flora (and Fauna) surveys as required.

Reporting:
Identification of new priority or rare species – Department of Water and Environmental Regulation (DWER).

Key Responsibilities:
Environment Manager on advice of the Botanist: approval of significant clearing.
Environment Manager: managing the protection of flora and fauna.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 5
INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST
HEALTH AND SAFETY

Environmental, Health, Safety and Quality Policy Statement:

- Meet and exceed statutory requirements for all IWDF activities including transport, safety, public health, and environmental protection. A process of continual review is employed to ensure the adequacy of the EHSQMS, the Environmental, Health and Safety and Quality Policy and operational activities at the IWDF.

- Take all practical steps to minimise the impact of site activities on the environment and the community. Appropriately train all personnel to ensure the protection of the health and safety of the public and IWDF workers.

Management Goal:
To provide a safe workplace and implement programs that ensure legislative compliance.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 5
INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST
HEALTH AND SAFETY

Management Objective:
To minimise risks to the health and safety of the public and workers through identification and management of potential risks.

Management Target:
- No lost time injuries.
- No major accidents or incidents.
- No complaints from the public.

Management Program:
- Comply with Operation Health and Safety and Emergency Response Procedures (OHSERP).
- IWDF health and safety processes and procedures comply with the *Work Health and Safety Act, 2020* (WHS Act) and accompanying regulations.
- Maintain an Aspects and Impacts (Risk) Register.
- Ensure Safety Data Sheets are readily available.
- Report all incidents and near misses and implement corrective actions.
- Ensure appropriate safety equipment is worn and maintained.
- Ensure all personnel are adequately trained.
- Hold safety management briefings, as appropriate to activities.
- Undertake regular site safety inspections and operation safety audits.
- Replace fire extinguishers every 5 years. All site fire extinguishers were replaced in either October 2024 or April 2025.

Improvement Program:
Nil

Relevant Documents and Procedures:
- Safety Procedure SP-01: Health and Safety Management and Planning.
- Safety Procedure SP-02: Operation Site Safety Management.
- Safety Instruction SI-01: Excavation Safety.
- Safety Instruction SI-02: Personal Protective Equipment.
- Safety Instruction SI-03: Hygiene and Decontamination.
- Safety Instruction SI-04: Occupational Monitoring.
- Safety Instruction SI-06: First Aid.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 5
INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST
HEALTH AND SAFETY

Forms:

- IWDF Form 06: Near Miss Incident / Accident / Exposure Report
- IWDF Form 12a: Competency Plan
- IWDF Form 12b: Operational Training Register
- IWDF Form 27a: Safety (Inspection) Record
- IWDF Form 28: Excavation Safety Record
- IWDF Form 30: Safety Audit Checklist
- IWDF Form 32: General Safety Induction Form
- IWDF Form 33: Waste Handling Safety Induction Form
- IWDF Form 37: Waste Transport Induction Form
- IWDF Form 43: Medical Advice Form

Performance Monitoring:

- Safety briefings.
- Site inspections and operational safety audits.
- Effectiveness of corrective actions.
- Complaints.

Reporting:
Incidents: reported in accordance with ERP-01

Key Responsibilities:

- Safety Manager and Operations Manager: training, management, and implementation on site.
- Safety Manager: planning and ongoing management.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 6
MT WALTON EAST INTRACTABLE WASTE DISPOSAL FACILITY
RADIATION

Environmental, Health and Safety Policy Statement:
Use recognised current best practices for near surface disposal of hazardous and low-level radioactive wastes. Remain aware of international advances in intractable waste management technology.

Management Goal:
To ensure radiation is managed effectively.

Management Objective:
To monitor and manage radioactive waste to ensure that the environment, the public, and workers are protected from the adverse effects of radiation.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 6
MT WALTON EAST INTRACTABLE WASTE DISPOSAL FACILITY
RADIATION

Management Target:

- Minimal release of radiation into the environment (compared to environmental background levels).
- Radiation levels to remain within the safe limits for the public, and occupational limits for the workers.
- Comply with *Code for Disposal Facilities for Solid Radioactive Waste (RPS C-3),* Australian Radiation and Nuclear Safety Agency (ARPANSA), October 2018.

Management Program:

- All radioactive wastes will be assessed against the Radioactive Waste Acceptance Guidelines and be will packaged and transported in the approved manner.
- The Radiological Council shall approve the design of the disposal trench.
- Radioactive waste will be placed in the disposal cell in accordance with the Radiological Council approval.
- The position and activity of each drum shall be recorded.
- A permanent marker shall be placed above all trenches containing radioactive waste.
- All personnel who come into proximity with radioactive waste shall attend an induction and wear personal radiation monitors and badges.
- Pre-disposal and post-disposal occupational radiation monitoring shall be undertaken.
- Pre-disposal and post-disposal environmental radiation monitoring shall be undertaken.
- A monitoring program for compliance with the public dose constraint shall be undertaken.
- Gamma radiation surveys are to be conducted every five years, or following a burial operation involving radioactive waste, whichever is the shortest interval. The last survey was completed in October 2022.
- If a radioactive waste disposal occurs, a Radiological Council approved independent auditor shall review all actions of the proponent required by the conditions of the Radiological Council Registration RS 13/2011 20590. This will include a compliance audit against the requirements of the *Radiation Safety (General) Regulations (1983)*, *Australian Code for Radiation Protection in Planned Exposure Situations* (ARPANSA RPS C-1 Rev. 1), *Code for Disposal Facilities for Solid Radioactive Waste* (ARPANSA RPS C-3), Radiological Council approved IWDF Safety Case, and where relevant the IWDF Safety Assessments.
- If waste is transported by the proponent, then compliance with the *Radiation Safety (Transport of Radioactive Substances) Regulations (2002), Code for the Safe Transport of Radioactive Material (ARPANSA RPS C-2 Rev.1 2019),* and the *Code of Practice for the Safe Transport of Radioactive Material (ARPANSA RPS 2),* shall be audited.
- An independent auditor shall be appointed to report on compliance during a radioactive waste disposal campaign, with the report required within 6 months of the disposal campaign.

Improvement Program:

- Approval of the IWDF Facility Safety Case (FSC), Operations Safety Assessment (OSA), and Post-Closure Safety Assessment (PCSA) from the Radiological Council.
- Formally document analysis of the behaviour of the cement matrix.
- Appoint a RC approved independent auditor with expertise in radioactive waste management.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 6
MT WALTON EAST INTRACTABLE WASTE DISPOSAL FACILITY
RADIATION

Relevant Documents and Procedures:

- Radioactive Waste Acceptance Guidelines.
- Radiation Instruction RI-01: Gamma Radiation Monitoring.
- Radiation Instruction RI-02: Occupational Radiation Monitoring (includes the Forms listed below).
- Radiation Procedure RP-01: Radiation Management.
- Operations Safety Assessment V7 May 2024, Post-Closure Safety Assessment V7 May 2024 and Facility Safety Case V7, June 2024.
- IWDF Waste Inventory Database Public Access Procedure.

Forms:

- Personal Radiation Monitoring form PRM-1: External Worker Dose
- Personal Radiation Monitoring form PRM-2: Personal Air Sampling
- Personal Radiation Monitoring form PRM-3: Dust Concentration
- Personal Radiation Monitoring form PRM-4: Internal Worker Dose
- Personal (Worker) Radiation Monitoring form PRM-5: External TLD Dose
- Personal (Public) Radiation Monitoring form PRM-6: External TLD Dose

Performance Monitoring:

- Pre-burial environmental radiation monitoring of disposal area.
- Post-burial environmental radiation monitoring of the disposal compound.
- On-going environmental gamma radiation monitoring of disposal compounds – next 5 yearly monitoring to be undertaken in October 2027.
- Occupational radiation monitoring.
- Public dose constraint monitoring.
- Independent audit during disposal operation.

Reporting:

- Radiological Council: Provide them with a copy of each radiation monitoring report and independent audit report. Activities at the IWDF will be audited against the requirements of RC registration certificate RS 13/2011 20590.
- Present findings of radiation monitoring report and independent audit report at annual community meeting. Activities at the IWDF will be audited against the requirements of RC registration certificate RS 13/2011 20590.
- DWER: The Annual Performance and Compliance Report will include a copy of all radiation monitoring activities across relevant reporting periods, as well as the independent audit report required after a radioactive disposal operation.

Key Responsibilities:

Radiation Safety Officer: personal and environmental radiation monitoring.
IWDF Project Manager: ensure that all required reporting is completed.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 7
INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST
TRANSPORT

Environmental, Health and Safety Policy Statement:
Meet and exceed statutory requirements for all IWDF activities including transport, safety, public health, and environmental protection. A process of continual review is employed to ensure the adequacy of the EHSQMS, the Environmental, Health and Safety and Quality Policy and operational activities at the IWDF.

Management Goal:
To effectively manage the transportation of waste to the IWDF.

Management Objective:
To ensure waste is transported in a manner which minimises any potential risks to humans or the environment.

Management Target:
- No unacceptable (above background) effects on public health or the environment from the transport of waste.
- No spill or leakage of waste during transport.

Management Program:
- Operation Transport Procedures (OTP) shall be developed for each operation. OTPs provide details of transport and packaging, emergency preparedness, contractor responsibilities, procedures, communications, and emergency response recovery. These are then submitted to DWER.
- Procedures for communications with the emergency response team, local community, and emergency services shall be prepared and included in the OTP.
- Waste shall be packaged, labelled, and transported in accordance with the OTP, as well as applicable dangerous goods and radioactive legislation. A Finance delegate will inspect the waste prior to transport to ensure compliance.
- Personnel involved in the loading and transport of waste (including contractors) shall be briefed on the potential risks, emergency response, and communication procedures.
- Appropriate protective clothing and equipment shall be used.
- Emergency Response Team (ERT) members shall be appropriately trained and equipped.
- Shipping documentation, OTPs, and emergency information shall be kept in the transport vehicle.
- If required, the Department of Fire and Emergency Services (DFES), Department of Energy, Mines, Industry Regulation & Safety (DEMIRS), and local government authorities shall be informed of transport routes and schedules.

Improvement Program:
Nil

Relevant Documents and Procedures:
- Emergency Response Instruction ERI-04: Transport Emergency Response.
- Emergency Response Plans.
- Operation Transport Procedures.
- Operational Procedure OP-04: Waste Preparation for Disposal.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 7
INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST
TRANSPORT

- Operational Procedure OP-05: Waste Loading and Transport.
- Operational Procedure OP-06: Waste Delivery, Acceptance and Disposal.
- Safety Instruction SI-05: Communications and Traffic Control.
- Safety Instruction SI-07: Heavy Machinery Operations.
- Waste Acceptance Guidelines.

Forms:

- IWDF Form 35: Transport Incident Questionnaire
- IWDF Form 37: Waste Transport Induction
- IWDF Form 45: Packaging and Loading Checklist
- IWDF Form 46: Transport Chain of Custody
- IWDF Form 47: Vehicle Checklist

Performance Monitoring:
Validation sampling in the event of a spill.

Reporting:

- **Close-out report:** results of operation-specific transport activities.
- Annual Performance and Compliance Report.

Key Responsibilities:

- FMC Operations Manager and Transport Coordinator: supervision and implementation
- FMC Project Manager: reporting

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 8
MT WALTON EAST INTRACTABLE WASTE DISPOSAL FACILITY
WATER

Environmental, Health and Safety Policy Statement:
Meet and exceed statutory requirements for all IWDF activities including transport, safety, public health, and environmental protection. A process of continual review is employed to ensure the adequacy of the EHSQMS, the Environmental, Health and Safety and Quality Policy and operational activities at the IWDF.

Management Goal:
To effectively manage and protect any groundwater and surface water on the site.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 8
MT WALTON EAST INTRACTABLE WASTE DISPOSAL FACILITY
WATER

Management Objective:
To effectively manage any groundwater and surface water to prevent contamination and minimise operational delays.

Management Target:
- No contamination of ground and surface water from waste components.
- Minimal operational difficulties and delays due to water.

Management Program:
- Operations will not be planned for the wet season.
- Regular weather reports will be obtained during waste disposal periods. Site activities will be scheduled to avoid waste acceptance and burial activities during rainfall.
- The trench and drainage systems will be designed and positioned to avoid the infiltration of surface water and potential groundwater effects.
- When heavy rainfall is expected, temporary berms and V drains will be constructed. Any waste in the open trench will be covered with compacted sand and gravel.
- Groundwater monitoring shall be undertaken.
- Water which accumulates in the trench will be allowed to dry in situ if contaminant free. However, water will be removed and analysed if contamination is suspected.

Relevant Documents and Procedures:
- Environmental Instruction EI-01: Groundwater Monitoring
- Environmental Procedure EP-03: Environmental Monitoring Management
- Environmental Procedure EP-04: Water Management
- Monitoring Location Figure – showing location of photo points, monitoring bores and any priority flora.

Improvement Program:
Nil

Forms:
- IWDF Form 01: Chain of Custody Record
- IWDF Form 02: Groundwater Analysis Register
- IWDF Form 03b: Sampling / Groundwater Monitoring Record
- IWDF Form 39: Monitoring Register

Performance Monitoring:
- Ongoing groundwater monitoring – every 6 months
- Operational groundwater monitoring - immediately before and after an operation

Reporting:
- Annual Performance and Compliance Report: groundwater monitoring results.
- Operation Close-out report: operation-specific surface water management results.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 8
MT WALTON EAST INTRACTABLE WASTE DISPOSAL FACILITY
WATER

Key Responsibilities:

- Operations Manager: drainage construction and surface water management.
- Environmental Manager: groundwater monitoring.
- FMC IWDF Project Manager and Director: annual reporting for performance and compliance, as well as operation close-out.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 9
INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST
WASTE ACCEPTANCE

Environmental, Health and Safety Policy Statement:

- Maintain a strict adherence to the "waste hierarchy" by ensuring that there is no **practically available** reuse, recycling, treatment, destruction, or alternative disposal options in Australia for all waste accepted for disposal at the IWDF.
- To ensure that only waste generated in Western Australia is accepted for disposal at the IWDF.

Management Goal:

To assess the suitability of the waste and the management options for its acceptance at the IWDF for disposal.

Management Objective:

To ensure that only waste that meets the Waste Acceptance Criteria is accepted for disposal at the IWDF .

Management Target:

- All waste disposed at the IWDF is to have no other practically available avoidance, waste reduction, treatment, recycling, and reuse alternative at the time of acceptance.
- No waste generated outside Western Australia will be accepted for disposal at the IWDF,
- Wastes that are in the following categories are not accepted, without prior conditioning, at the IWDF:
  - Free liquid or sludge (except in small volumes)
  - Explosive materials
  - Highly flammable materials
  - Highly reactive or chelating agent materials
  - Compressed gases (greater than 5% by waste volume)
  - Materials that may decompose
  - Toxic, pathogenic, or infectious radioactive materials.
- Intermediate (or High) Level Radioactive Waste is not accepted for disposal at the IWDF.

Management Program:

- Ensure all waste owners wishing to dispose of waste at the IWDF provide adequate details of the wastes, in accordance with Waste Acceptance Guidelines.
- Assess waste details against the Waste Acceptance Criteria.
- Provide details of the wastes in the Operation Environmental and Waste Acceptance Procedures submitted to DWER.
- Undertake inspections of the waste.

Improvement Plan:

Continue to monitor the current approach to waste acceptance and always strive to implement a more practical approach to the adherence to the waste hierarchy. Ensure that there are no inadvertent barriers to waste being disposed at the IWDF.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 9
INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST
WASTE ACCEPTANCE

Relevant Documents:

- Chemical Waste Acceptance Guidelines
- Radioactive Waste Acceptance Guidelines
- Operation Environmental and Waste Acceptance Procedures
- Operation Procedure OP-01: Assessment of Applications for Disposal
- Operational Procedure OP-02: Operational Administration, Planning and Approvals
- Operational Instruction OI-1: Waste Inspection
- Management Procedure MP-08: Operational Planning and Management

Forms:

- Waste Acceptance Proforma.
- IWDF Form 53: Waste Inspection Record.
- IWDF Form 55: Finance Waste Assessment Record.

Performance Monitoring:

Inspections and assessment of waste.

Reporting:

- DWER/Radiological Council: Performance and Compliance Report.
- DWER/Radiological Council: Close-out Report.
- DWER/Radiological Council: Operation Environmental and Waste Acceptance Procedures.

Key Responsibilities:

- IWDF Project Manager: ensure waste proposed for disposal complies with the Waste Acceptance Criteria.
- IWDF Project Manager and Operations Manager: waste inspections.
- Operations Manager: acceptance of waste at the IWDF.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 10
INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST
COMMUNITY LIAISON

Environmental, Health and Safety Policy Statement:
Liaise directly with the community on all operational activities and outcomes. Ensure that all disposal details and monitoring records are both publicly available and securely stored for future reference.

Management Goal:
To keep the community adequately informed of the IWDF and its operations.

Management Objective:
To ensure that the community is informed of IWDF activities and has easy access to important information regarding the site.

Management Target:
- Details of all waste disposed of at the IWDF to be readily available to the community.
- Representatives of the community can regularly voice their concerns and discuss these issues with the management of the IWDF.
- Community is kept informed with all activities associated with the IWDF.
- Zero complaints from the community.

Management Program:
- Maintain a waste inventory database which provides details of all waste disposed of at the IWDF. Publicly available register (spreadsheet) will be accessible through the Government web page for the IWDF.
- Respond efficiently to complaints and undertake appropriate corrective actions.
- An archiving schedule and record retention table are maintained to ensure that documents are archived to allow future generations access to the information.
- An annual community meeting will be held so that members of the community can raise community concerns, review important documents, and provide input into operational decision making.
- Ensure information regarding the IWDF on the Government web page is kept up to date.

Improvement Program:
- Monitor and record the public access request to IWDF data and review appropriateness of the database annually.

Relevant Documents and Procedures:
- IWDF Waste Inventory Database
- Management Procedure: MP-03 Communication and Public Relations
- Management Procedure: MP-07 Management of Records
- IWDF Complaints Register
- DA 2011-049 Retention and Disposal Schedule for the Department of Finance

Forms:
Nil – replaced by DA 2011-049 Retention and Disposal Schedule for the Department of Finance.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 10
INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST
COMMUNITY LIAISON

Performance Monitoring:

- Annual Community Meetings: provides community feedback.
- Management Review Meetings: detail number of complaints and corrective actions.

Reporting:

- Annual Performance and Compliance Report

Key Responsibilities:
FMC Project Manager: implementation and reporting

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 11
INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST
REVIEW OF MANAGEMENT

Environmental, Health and Safety Policy Statement:
Meet and exceed statutory requirements for all IWDF activities including transport, safety, public health, and environmental protection. A process of continual review is employed to ensure the adequacy of the EHSQMS, the Environmental, Health and Safety and Quality Policy and operational activities at the IWDF.

Management Goal:
To manage the IWDF and its operations as efficiently and successfully as possible.

Management Objective:
To ensure the IWDF meets all requirements and follows the principle of continual improvement.

Management Target:

- Operation and management of IWDF complies with all regulatory requirements, conditions, and commitments.
- EHSQMS successfully mitigates risks and impacts from the site.
- Establish and maintain current best practice for the near surface disposal of hazardous and low-level radioactive materials.

ENVIRONMENTAL HEALTH & SAFETY MANAGEMENT PLAN NO: 11
INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST
REVIEW OF MANAGEMENT

Management Program:

- Undertake regular audits of the management system.
- Hold management review meetings every six months.
- Undertake regular audits of operation-specific and ongoing management procedures.
- Produce an annual performance and compliance report and submit to the Department of Water and Environmental Regulation and Radiological Council.
- Correct non-conformances as soon as possible and ensure that appropriate corrective or preventative actions are put in place.
- Regularly review current disposal practices and developments in international best practices for the disposal of intractable waste.
- Liaise regularly with national and international waste management regulators.
- Submit annual Performance and Compliance Reports to the State Library to fulfil legal deposit requirements.

Improvement Plan:

Nil.

Relevant Documents and Procedures:

- IWDF Legal Register
- Management Procedure MP-02: Applicable Laws, Regulations and Other Requirements
- Management Procedure MP-11: Management Audits
- Management Procedure MP-12: Management Review
- Management Procedure MP-13: Control of Non-Conformances and Corrective and Preventative Action
- Emergency Response Procedure ERP-01: Incident Prevention, Reporting and Investigation
- Facility Management Procedure FMP-04: System Audit
- Facility Management Procedure FMP-05: Control of System Non-Conformance

Forms:

- IWDF Form 10: Corrective Action Request
- IWDF Form 11: Corrective Action Request Register
- IWDF Form 49: Audit Register
- IWDF Form 50: Internal Management Audit Schedule

Performance Monitoring:

Management Review Meetings

Reporting:

- Management Review Meetings.
- Performance and Compliance Report.

Key Responsibilities:

- Finance IWDF Project Manager / Director: review of management and implementation
- FMC IWDF Project Manager / Director: review of management and implementation

Rev	Date	Description	Prepared by:	Checked by:	Approved by:
1	17/09/01	Draft	LCH	LM	
2	4/10/01	Draft	LCH	MJS	
3	1/10/07	Draft	LM	MJS	
4	22/06/09	Draft	LM	MJS/RH	
5	01/07/10	Draft	LM	RH/MJS	
6	04/08/11	Draft	LM	RH	
6.1	14/12/11	Review for PCR	LM	MJS	
7	12/03/12	Review & minor changes to Plans 2, 3 & 4	LM	RH	
7.1	13/09/12	Review & minor changes to Plans 3 & 4	LM	MJS	
8	07/01/13	Review & minor changes to Plans 5 & 6	LM	MJS	
8.1	16/07/13	Review & minor changes to Plans 2, 3 & 4	LM	MJS	
9	15/01/14	Review & minor changes to Plans 2, 3 & 4	LM	MJS	
10	17/04/14	Review and acceptance of past changes	LM	LM & RH	RH
10.1	09/01/15	Review & update to improvement program sections of each plan	LM		
11	25/05/15	Review & update to improvement program sections of each plan and changes to Management program for plans 2a, 2b & 6	LM	LM & RH	
12	24/05/16	Review & update to improvement program sections of each plan and changes to Management program for plans 2b & 6	LM		MJS
13	13/07/16	Review & update to improvement program sections of each plan and changes to Management program for plans 1, 2b & 4	LM		MJS
14	14/02/17	Review & update to improvement program sections of each plan and changes to Management program for plans 1, 2b, 4, 6 & 11.	LM		MJS
15	23/05/17	Update to plan 6 to include OSC and Safety Assessment	LM		MJS
16	6/12/17	Update to improvement plan sections to include outcome as agreed at MRM held 22 June 17	LM		MT
17	27/09/18	Review with consideration to the updated legislation e.g., DG transport, Cops etc, dates for upcoming events updated	LM		
18	10/05/19	Plan 3 updated to include the New (Dec 218) State Emergency Management Plan & Hazmat Plan, Plan 6 updated to include new code, Plan 11 updated improvement request re MRM	LM		MT
19	15/11/19	Reviewed and updated prior to planned disposal for Feb 2020 only significant change MP04 where advice from DWER regarding clearing permit requirements has been included.	LM		MT
20	12/05/20	Reviewed/ updated to remove improvement plans that are now completed.	LM	MT	MT
21	22/11/20	Management Plan 11 – change to meeting frequency	LM	MT	MT
22	15/05/21	Review, update to improvement program of Management Plan 6 – MPs reviewed and agreed on at MRM held 3 June 2021, AS /NZS standards checked for currency May 2021.	LM	MT	MT

Rev	Date	Description	Prepared by:	Checked by:	Approved by:
23	03/11/21	General formatting changes to all plans, update to dates for monitoring events etc., Policy statement updated to reflect current naming conventions in plans 3,4,5,7,8, and 11. Plan 11 new Improvement Plan item, Plan 9 updated item in Management Target section, where improvements plans were completed, action was moved to Management Program for ongoing maintenance.	LM	MT	MT
24	07/02/22	Update to Plan 5 to include requirement for fire extinguisher replacement.	LM	MT	MT
25	12/05/22	Plan 1 update to AS / NZS 3580.9.13. Plans 2a and 2b updated to include Final Cover approval from RCWA.	LM	MT	MT
26	03/12/22	Plan 1 updated to include Confined Spaces CoP, 2a&b dates updated, 4 monitoring dates updated, 5 update to Improvement Program and Key Responsibilities, 6 update to Management Target, Management Program, and Performance Monitoring to include safe limits for the public. 10 Relevant Docs & Procedure and Forms updated to include Finance R&D Schedule. Update to Finance branding.	LM	MT	MT
27	06/06/23	Minor formatting changes. Plan 6 Relevant Documents and Procedures updated with Operations Safety Assessment V4 Feb 2023, Post-closure Safety Assessment V5 Jan 2023 and Facility Safety Case V4, Mar 2023. Plan 6 Forms updated to include corrected form numbers and titles.	LM	MT	MT
28	25/08/23	Update to almost all sections of Plan 6 Radiation to address requirements of the new RCWA Registration Certificate RS 13/2011 20590 received 25 August 2023.	LM		
29	18/12/23	Updated and edited all Management Plans	MJS	SP + MT	MT
30	26/06/24	Updated versions of the OSA, PCSA, and FSC which were submitted to the RC. Currency check of all legislation and Australian Standards.	MJS	CG + MT	MT
31	3/12/24	Updated and edited all Management Plans. Currency check of all legislation and Australian Standards. Removal of EPA from reporting requirements. Changed Community Liaison Committee to “Annual Community Meetings”.	CJG	MJS + MT	MT
32	05/06/25	Updated and edited all Management Plans. Currency check of all legislation and Australian Standards. Update to the names of relevant documents and forms.	CJG	MJS + MT	MT

APPENDIX F

2024 – 2025 Groundwater Monitoring Records

INTRACTABLE WASTE DISPOSAL FACILITY
MT WALTON EAST, WESTERN AUSTRALIA

MONITORING REGISTER

IWDF-FORM-39

Date	Year	Monitoring Record Completed**	Locations monitored	Result	Analysis Required*
20 OCTOBER	2015	YES	GM 1-9	DRY	N/A
12 APRIL	2016	YES	GM 1-9	DRY	N/A
18 OCTOBER	2016	YES	GM 1-9	DRY	N/A
20 APRIL	2017	YES	GM 1-9	DRY	N/A
17 OCTOBER	2017	YES	GM 1-9	DRY	N/A
19 APRIL	2018	YES	GM 1-9	DRY	N/A
25 OCTOBER	2018	YES	GM 1-9	DRY	N/A
2 APRIL	2019	YES	GM 1-9	DRY	N/A
24 OCTOBER	2019	YES	GM 1-9	DRY	N/A
2 FEBRUARY	2020	YES	GM 1-9	DRY	N/A
9 APRIL	2020	YES	GM 1-9	DRY	N/A
30 OCTOBER	2020	YES	GM 1-9	DRY	N/A
31 MARCH	2021	YES	GM 1-9	DRY	N/A
13 OCTOBER	2021	YES	GM 1-9	DRY	N/A
5 APRIL	2022	YES	GM 1-9	DRY	N/A
18 OCTOBER	2022	YES	GM 1-9	DRY	N/A
17 MAY	2023	YES	GM 1-9	DRY	N/A
17 OCTOBER	2023	YES	GM 1-9	DRY	N/A
17 APRIL	2024	YES	GM 1-9	DRY	N/A
17 OCTOBER	2024	YES	GM 1-9	DRY	N/A

* For groundwater monitoring - See IWDF Form 21 for up-to-date list of parameters to be analysed

** For groundwater monitoring - IWDF Form 03
For capping monitoring – IWDF Form 38b
For rehabilitation monitoring – IWDF Form 38a.

INTRACTABLE WASTE DISPOSAL FACILITY
FACILITY MANAGEMENT CONTRACTOR

SAMPLING/GROUNDWATER MONITORING RECORD FORM IWDF-FORM-03b

Project No.: DFI-PP03-486-ANMO	Location of Retained Samples: N/A	Sampled By: JWS + SP
Site Name: Intractable Waste Disposal Facility, Mt Walton East		Operation/Project: Monitoring
Location: IWDF		Date: 17/10/2024

Sample/Bore No.	Groundwater depth (if applicable)	Sample* Depth	Sampling Date	Sampling Time*	CoC No.	Sample Destination	Disposal Date	Collection Procedure	Sample Description and any Observations	Container Type	Preservation
GM1	38.000	DRY							DRY		
GM2	40.654	DRY							DRY		
GM3	39.117	DRY							DRY		
GM4	30.070	DRY							DRY		
GM5	28.064	DRY							DRY		
GM6	25.898	DRY							DRY		
GM7	31.565	DRY							DRY		
GM8	31.395	DRY							DRY		
GM9	42.117	DRY							DRY		

GENERAL COMMENTS: -

WATER PROBE TESTED YES SIGNED: MJ Shepherd

Duplicate Sample Yes No (N/A) Field Blanks Yes No (N/A) Original to file. Copy to Finance Project Manager within 14 days.

INTRACTABLE WASTE DISPOSAL FACILITY
MT WALTON EAST, WESTERN AUSTRALIA

MONITORING REGISTER

IWDF-FORM-39

Date	Year	Monitoring Record Completed**	Locations monitored	Result	Analysis Required*
20 OCTOBER	2015	YES	GM 1-9	DRY	N/A
12 APRIL	2016	YES	GM 1-9	DRY	N/A
18 OCTOBER	2016	YES	GM 1-9	DRY	N/A
20 APRIL	2017	YES	GM 1-9	DRY	N/A
17 OCTOBER	2017	YES	GM 1-9	DRY	N/A
19 APRIL	2018	YES	GM 1-9	DRY	N/A
25 OCTOBER	2018	YES	GM 1-9	DRY	N/A
2 APRIL	2019	YES	GM 1-9	DRY	N/A
24 OCTOBER	2019	YES	GM 1-9	DRY	N/A
2 FEBRUARY	2020	YES	GM 1-9	DRY	N/A
9 APRIL	2020	YES	GM 1-9	DRY	N/A
30 OCTOBER	2020	YES	GM 1-9	DRY	N/A
31 MARCH	2021	YES	GM 1-9	DRY	N/A
13 OCTOBER	2021	YES	GM 1-9	DRY	N/A
5 APRIL	2022	YES	GM 1-9	DRY	N/A
18 OCTOBER	2022	YES	GM 1-9	DRY	N/A
17 MAY	2023	YES	GM 1-9	DRY	N/A
17 OCTOBER	2023	YES	GM 1-9	DRY	N/A
17 APRIL	2024	YES	GM 1-9	DRY	N/A
17 OCTOBER	2024	YES	GM 1-9	DRY	N/A
15 APRIL	2025	YES	GM 1-9	DRY	N/A

* For groundwater monitoring - See IWDF Form 21 for up-to-date list of parameters to be analysed

** For groundwater monitoring - IWDF Form 03
For capping monitoring – IWDF Form 38b
For rehabilitation monitoring – IWDF Form 38a.

INTRACTABLE WASTE DISPOSAL FACILITY
FACILITY MANAGEMENT CONTRACTOR

SAMPLING/GROUNDWATER MONITORING RECORD FORM IWDF-FORM-03b

Project No.: DFI-PP03-721-ANMO	Location of Retained Samples: N/A	Sampled By: MJS + JWS
Site Name: Intractable Waste Disposal Facility, Mt Walton East		Operation/Project: Monitoring
Location: IWDF		Date: 15/4/2025

Sample/Bore No.	Groundwater depth (if applicable)	Sample* Depth	Sampling Date	Sampling Time*	CoC No.	Sample Destination	Disposal Date	Collection Procedure	Sample Description and any Observations	Container Type	Preservation
GM1	38.015	DRY							DRY		
GM2	40.655	DRY							DRY		
GM3	39.120	DRY							DRY		
GM4	30.085	DRY							DRY		
GM5	28.060	DRY							DRY		
GM6	25.895	DRY							DRY		
GM7	31.570	DRY							DRY		
GM8	31.405	DRY							DRY		
GM9	42.110	DRY							DRY		

GENERAL COMMENTS:

WATER PROBE TESTED YES SIGNED: MJ Shepherd

Duplicate Sample Yes No (N/A) Field Blanks Yes No (N/A) Original to file. Copy to Finance Project Manager within 14 days.

APPENDIX G

2024 – 2025 Site Visit Checklists

INTRACTABLE WASTE DISPOSAL FACILITY
MT WALTON EAST, WESTERN AUSTRALIA
SITE VISIT CHECKLIST
IWDF-FORM-52

Pre-Visit Check	Tick
You will be visiting the site with at least one other person	☑
At least one person from Finance (e.g., IWDF Project Manager) is aware of your visit	☑
You have a satellite phone and will phone a nominated person to inform them of your safe arrival & return	☑

Site Visit Check	
Reason for Inspection/Visit: GROUNDWATER, REHABILITATION & CAPPING MONITORING + MAINTENANCE	
Visitor/Inspector: MJS	Affiliation: AURORA ENVIRONMENTAL
Other Visitors (at least one other person to be at site): SP + JWS	
Date: 15/10/2024 - 18/10/2024	
Time Arrived: 1815	Time Departed: 1045

Issue/Action	Checked (tick)	Comments (Give any details regarding quantities of supplies, non-compliance, requirements for maintenance, etc.)
Access Road Condition Report	☑	IWDF Form-44
General Supplies	☑	
Fuel	☑	IWDF Form-51
Water - potable	☑	2/3 FULL NEW FILTRATION SYSTEM INSTALLED
Water – non-potable	☑	EMPTY
Food/provisions/domestic supplies	☑	NEED PINE-O--CLEAN
Security		
Locks to all buildings intact	☑	
All trench fences intact & locked	☑	
All signs to fences intact/present	☑	
Infrastructure		
Fire extinguishers in place	☑	NEW & REFILLED EXTINGUISHERS IN PLACE
Generator operational	☑	SERVICED AFTER 350hrs
Kitchen/toilet operational	☑	
Weather station intact	☒	DISUSED
Phone & internet operational	☒	MOBILE SATPHONE USED + STARLINK WORKED WELL
Above ground markers intact	☑	ALL PLINTHS NOW STAINLESS STEEL
Maintenance		
Electrical tagging up to date	☑	
Fire extinguishers checked	☑	AS ABOVE
Generator serviced	☑	AS ABOVE - NEXT SERVICE AT 700hrs
Monitoring		
Groundwater monitoring	☑	IWDF Form-03
Capping monitoring	☑	IWDF Form-38b
Rehabilitation monitoring	☑	IWDF Form-38a
Radiation monitoring	☒	RI-01
Firebreaks/camp/access road/disposal cell V drains check	☑	FIREBREAK STILL TO BE GRADED
Other (specify)	☑	SEE ATTACHED FOR MAINTENANCE ITEMS

Post-Visit Check	
	Time Departed: 0815
Confirmed safe return: YES	Time: 1530
Signed: MJShepherd	Date: 18/10/2024

Original to FMC Project Manager. Copy to Finance IWDF Project Manager.

INTRACTABLE WASTE DISPOSAL FACILITY
MT WALTON EAST, WESTERN AUSTRALIA
SITE VISIT CHECKLIST
IWDF-FORM-52

Pre-Visit Check	Tick
You will be visiting the site with at least one other person	☑
At least one person from Finance (e.g., IWDF Project Manager) is aware of your visit	☑
You have a satellite phone and will phone a nominated person to inform them of your safe arrival & return	☑

Site Visit Check	
Reason for Inspection/Visit: GROUNDWATER MONITORING + MAINTENANCE OF DRAINS	
Visitor/Inspector: MJS	Affiliation: AURORA ENVIRONMENTAL
Other Visitors (at least one other person to be at site): JWS	
Date: 14/4/2025 – 16/4/2025	
Time Arrived: 1805	Time Departed: 1015

Issue/Action	Checked (tick)	Comments (Give any details regarding quantities of supplies, non-compliance, requirements for maintenance, etc.)
Access Road Condition Report	☑	IWDF Form-44
General Supplies	☑	
Fuel	☑	IWDF Form-51
Water - potable	☑	≥ ½ FULL
Water – non-potable	☑	EMPTY
Food/provisions/domestic supplies	☑	NEED GLOBES
Security		
Locks to all buildings intact	☑	
All trench fences intact & locked	☑	
All signs to fences intact/present	☑	
Infrastructure		
Fire extinguishers in place	☑	
Generator operational	☑	HAD TO JUMP START OFF VEHICLE
Kitchen/toilet operational	☑	
Weather station intact	☒	
Phone & internet operational	☒	MOBILE SATPHONE USED
Above ground markers intact	☑	
Maintenance		
Electrical tagging up to date	☑	
Fire extinguishers checked	☑	2 NEW 4.5kg EXTINGUISHERS REPLACED OLD PAIR
Generator serviced	☑	
Monitoring		
Groundwater monitoring	☑	IWDF Form-03
Capping monitoring	☒	IWDF Form-38b
Rehabilitation monitoring	☒	IWDF Form-38a
Radiation monitoring	☒	RI-01
Firebreaks/camp/access road/disposal cell V drains check	☑	
Other (specify)	☒	

Post-Visit Check	
Confirmed safe return: YES	Time Departed: 0845
Signed: MJShepherd	Time: 1540
	Date: 16/4/2025

Original to FMC Project Manager. Copy to Finance IWDF Project Manager.

APPENDIX H

2024 – 2025 Complaints Register

IWDF Complaints Register

Complaint Number	Date	Complainant Name	Address	Phone / email	Complaint Area	Complaint Description	Action Taken	Outcome
1A	13/09/2023	Jan McLeod	Widgiemooltha, Shire of Coolgardie	0427 208 023	CLC Meeting 23 June 2023 – 9.1 Ministerial Statement Review p8-11 (draft minutes)	Method of delivery	Responded to in writing dated 30 November 2023	Complaint addressed in response letter (TRIM 06516069)
1B	13/09/2023	Jan McLeod	Widgiemooltha, Shire of Coolgardie	0427 208 023	CLC Meeting 23 June 2023 – 9.1 Ministerial Statement Review p8-11 (draft minutes)	Content of information provided – summary only	Responded to in writing dated 30 November 2023	Complaint addressed in response letter (TRIM 06516069)
1C	13/09/2023	Jan McLeod	Widgiemooltha, Shire of Coolgardie	0427 208 023	CLC Meeting 23 June 2023 – 9.1 Ministerial Statement Review p8-11 (draft minutes)	No opportunity for input from the CLC prior to submission to DWER	Responded to in writing dated 30 November 2023	Complaint addressed in response letter (TRIM 06516069)
1D	13/09/2023	Jan McLeod	Widgiemooltha, Shire of Coolgardie	0427 208 023	CLC Meeting 23 June 2023 – 9.1 Ministerial Statement Review p8-11 (draft minutes)	CLC had no knowledge of the proposed change to the CLC	Responded to in writing dated 30 November 2023	Complaint addressed in response letter (TRIM 06516069)
1E	13/09/2023	Jan McLeod	Widgiemooltha, Shire of Coolgardie	0427 208 023	CLC Meeting 23 June 2023 – 9.1 Ministerial Statement Review p8-11 (draft minutes)	Proposed change is not an administrative change	Responded to in writing dated 30 November 2023	Complaint addressed in response letter (TRIM 06516069)
1F	13/09/2023	Jan McLeod	Widgiemooltha, Shire of Coolgardie	0427 208 023	CLC Meeting 23 June 2023 – 9.1 Ministerial Statement Review p8-11 (draft minutes)	Discussion was not encouraged	Responded to in writing dated 30 November 2023	Complaint addressed in response letter (TRIM 06516069)
1G	13/09/2023	Jan McLeod	Widgiemooltha, Shire of Coolgardie	0427 208 023	Department of Finance	Complaints only go to the Department of Finance – there is no independent arbitor (sic)	Responded to in writing dated 30 November 2023	Complaint addressed in response letter (TRIM 06516069) CAR009 raised 6/10/23 but not finalised until 5/08/24. Refer TRIM 07134363.
2A	30/10/2024	Jan McLeod	Widgiemooltha, Shire of Coolgardie	0427 208 023	S.45C Request	CLC not provided with a draft of the s.45C amendments to MS 562	Responded to in writing dated 27 November 2024	Complaint addressed in response letter at TRIM 07400373
2B	30/10/2024	Jan McLeod	Widgiemooltha, Shire of Coolgardie	0427 208 023	CLC Meeting 25 July 2024 - Chair's refusal to hold general discussion on intractable wastes	The Chair refused to hold a discussion about the waste streams which may be disposed of at the IWDF in the future.	Responded to in writing dated 27 November 2024	Complaint addressed in response letter at TRIM 07400373

APPENDIX I

Previous Radiological Council Registration (2020-2023) RS 13/2011 20590 Cond 114

FORM RS12
WESTERN AUSTRALIA

RADIATION SAFETY ACT 1975

CERTIFICATE OF REGISTRATION* OF PREMISES
in which
RADIOACTIVE SUBSTANCES
are to be used, stored or manufactured

It is hereby certified that the premises referred to in this certificate have been registered under the Radiation Safety Act 1975 for the radioactive substances and purpose(s) specified below. The registration* is subject to all applicable regulations under the Act and to any conditions, restrictions or limitations that are specified below or in any attachments.

1. Name and address of the registrant

MS EMMA SAVAGE-JONES
DIRECTOR, BUILDING MANAGEMENT
DEPARTMENT OF FINANCE
LOCKED BAG 44
CLOISTERS SQUARE W A 6850

DEPARTMENT OF FINANCE
RECORDS
24 FEB 2020

2. Location of premises subject to registration*

IWDF, MT WALTON EAST, CROWN RESERVE 42001, ~100 KM NORTH OF GT EASTERN HWY BOORABBIN W A 6429

3. Particulars of the radioactive substances to be used, stored, manufactured or otherwise dealt with on the premises *(See Note a). These particulars, where applicable, are given on attached supplementary sheet(s)*

4. Approved radiation safety officer(s). *(The registrant must appoint the person(s) named below in writing and inform them in writing of their duties and responsibilities. See also Note b).*

PARR MR STUART RADIOACTIVE SUBSTANCES -

5. Conditions, restrictions or limitations *(See Note c)* Cond 114

SEE ATTACHED CONDITIONS

6. Purpose(s) applied to the registration*

DISPOSAL OF RADIOACTIVE WASTE - INTRACTABLE WASTE DISPOSAL FACILITY (IWDF), MT WALTON EAST

Notes

a) **Prior notice in writing** must be given to the Radiological Council of material changes. This includes changes affecting the type, form, maximum activity, use or purpose of the radioactive substances as well as any proposed changes to the structure, ventilation or drainage which may differ from information previously supplied and on which approval for this registration may be based. Failure to provide proper notification is an offence under section 38 of the Act.

b) Although the radiation safety officer has specified duties in the regulations, the registrant is responsible for ensuring that those duties are performed and that the use, storage or manufacture of the radioactive substances complies with the Act and regulations. Failure to do so is an offence.

c) **The registrant must ensure compliance** with any conditions imposed on this registration under section 36 of the Act. A requirement may be imposed for the **conditions to be displayed** in a location accessible to all radiation workers.

10 FEB 2020
Date

Secretary, Radiological Council

This Certificate is not valid until signed by the Secretary of the Radiological Council.

REGISTRATION* NO: RS 13/2011 20590 **EXPIRY DATE:** 08 Feb 2023

*** and/or Exemption from Registration if indicated in Item 6**

RADIATION SAFETY ACT

CONDITIONS, RESTRICTIONS AND LIMITATIONS (SECTION 36)

DISPOSAL OF RADIOACTIVE WASTE AT THE INTRACTABLE WASTE DISPOSAL FACILITY (IWDF), CROWN RESERVE 42001

1. This Registration is for the disposal of radioactive waste at the Intractable Waste Disposal Facility (IWDF), Crown Reserve 42001 in accordance with the *Radiation Safety Act 1975 (Section 28)*.

2. The Registrant is directed to ensure that –

   2.1 prior to radioactive waste being accepted for final disposal at the IWDF, a disposal permit must be granted by the Radiological Council in accordance with *Section 34 of the Act*;

   2.2 disposals are undertaken in accordance with the *Radiation Safety (General) Regulations (1983)* and *Regulation 31(A) Near-surface disposal of radioactive waste*, as amended;

   2.3 radiation safety management is undertaken by the appointed *Radiation Safety Officer (RSO)*, in accordance with his duties under *Regulations 19(3)*;

   2.4 all radioactive waste to be disposed of at the IWDF shall be conditioned in accordance with the *Code of Practice for the Near-Surface Disposal of Radioactive Waste in Australia (1992), Radiation Health Series No. 35, National Health and Medical Research Council of Australia 1992*;

   2.5 all radioactive waste to be packaged and transported to the IWDF shall be in accordance with the *Radiation Safety (Transport of Radioactive Substances) Regulations 2002* and the *Code of Practice for the Safe Transport of Radioactive Material (2008)* as adopted;

   2.6 the *Radiation Safety Officer (RSO)* reports periodically in writing to the Radiological Council, the results of radiation monitoring and other factors relating to human health for the receipt, handling and near-surface disposal of the radioactive waste; and if there are any changes to the radiation safety management procedures for the IWDF;

   2.7 accurate records of all radioactive material disposed of at the IWDF shall be maintained and archived in an approved manner, and reported to the Radiological Council, including an updated report after each disposal campaign;

2.8 where appropriate, radiation safety is managed in accordance with the following IWDF guidelines, procedures and instructions –

2.8.1 *Disposal of Radioactive Waste at the Intractable Waste Disposal Facility (IWDF), Mt Walton East, Waste Acceptance Guideline and Waste Acceptance Proforma, Government of Western Australia Department of Finance Building Management and Works, as amended*;

2.8.2 *IWDF Radiation Procedure RP-01, Radiation Management, Government of Western Australia, Department of Finance, Building Management and Works, as amended*;

2.8.3 *IWDF Operational Procedure OP-04, Waste Preparation for Disposal, Government of Western Australia Department of Finance Building Management and Works, as amended*;

2.8.4 *IWDF Operational Procedure OP-05, Waste Loading and Transport, Government of Western Australia Department of Finance Building Management and Works, as amended*;

2.8.5 *IWDF Operational Procedure OP-06, Waste Delivery, Acceptance and Disposal, Department of Finance, Building Management and Works, as amended*;

2.8.6 *IWDF Operational Procedure OP-10, Operation Site Safety Management, Government of Western Australia, Department of Finance, Building Management and Works, as amended*;

2.8.7 *IWDF Operational Instruction OI-01, Waste Inspection, Government of Western Australia Department of Finance Building Management and Works, as amended.*

CONDITION NO: **114**

CERTIFICATE NO: **RS 13/2011 20590**

EXPIRES ON: **08 February 2023**

RADIATION SAFETY ACT

CONDITIONS, RESTRICTIONS AND LIMITATIONS (SECTION 36)

SPECIAL CONDITIONS

1. Inventory locations of material at Intractable Waste Disposal Facility (IWDF), Mt Walton East, are outlined as follows -
- 92RS01: Final report on disposal of low level radioactive waste at the IWDF east of Mt Walton. Environmental Health Branch
- 92RS02: Disposal of second batch of radioactive waste at the IWDF, Mt Walton. Katee Enterprises, July 1994
- 94RT01: Radiological aspects of the acceptance and burial of CSBP & Farmers Ltd radioactive waste at Mt Walton East. Katee Enterprises, July 1994
- 2000RT01: 1999 Annual Radiation Report: Operations of the IWDF Mt Walton East. WM(WA), June 2000
- 2002RT01: 2002 Annual Radiation Report: Operations of the IWDF Mt Walton East. WM(WA)
- Report EP2008-154: Performance and Compliance Report: Intractable Waste Disposal Facility Mt Walton East, Coffey Environments, December 2008

2. The full inventory of items buried at the IWDF is to be available on a database maintained by the Registrant.

APPENDIX J

Extract from Department of Finance Retention and Disposal Schedule

Extract from Department of Finance Retention and Disposal Schedule 2018-005 – matters relating directly to the Intractable Waste Disposal Facility, Mt Walton East

Item	Container	Description	Action	Timeframe
1	**ADVICE** Refer also to General Disposal Authority for State Government Information			
1.2	**Advice – File Notification Areas**	The Department of Energy, Mines, Industry Regulation and Safety (DEMIRS) liaise with Department of Finance regarding any proposed activity around the Intractable Waste Disposal Facility, Mt Walton East. The Department of Finance provides advice and suggests conditions for the approval for the third party. The Department of Finance is not advised if any of these conditions are applied to the approval for the third party. The term File Notification Area is used by DEMIRS for this process.	Destroy	Retain 7 years after date of last action, then destroy.
2.2	**Vesting Orders/ Reserve Management Orders**	Placing control of reserved Crown Land with the Department (under the Land Administration Act 1997)	Required as State archives	Retain 10 years after action completed, then transferred to the SRO.
3	**ACQUISITION/ DISPOSAL**	Refer also to General Disposal Authority for State Government Information		
3.1	**Waste Disposal**	Records relating to the disposal of radioactive/chemical/hazardous waste at the Intractable Waste Disposal Facility, Mt Walton East. For disposal of other hazardous materials e.g. asbestos refer to GDASGI.	Required as State archives	Retain 5 years after action completed, then transfer to SRO.
6	**COMPLIANCE**	Refer also to General Disposal Authority for State Government Information		
6.2	**Management System – Mount Walton East Intractable Waste Disposal Facility**	Refers to all records relating to the Environmental, Health and Safety, and Quality Management System as it relates to the Intractable Waste Disposal Facility, Mt Walton East. The management system is a requirement under the Ministerial Statement and is approved by the Department of Water and Environmental Regulation (DWER). While not certified, the management system meets the requirements of ISO 9001 Quality Management, ISO14001 Environmental Management System and ISAS/NZS 4801 Occupational Health and Safety Management Systems. The system includes but is not limited to procedures, forms, reference material, meetings, reviews, registers, and manuals.	Required as State archives	Retain 5 years after action completed, then transfer to SRO.
7	**CONSTRUCTION / CAPITAL WORKS SURVEY**	Refer also to General Disposal Authority for State Government Information		
7.1	**Surveys – Significant**	Records relating to significant Environmental, Radiological, Geological, Geotechnical, Geophysical, Aboriginal and Ethnographical surveys where they are kept separately from Construction Files e.g. surveys relating to the Intractable Waste Disposal Facility, Mt Walton East. Refer also to General Disposal Authority for State Government Information	Required as State archives	Retain 5 years after date of last action, then transfer to the SRO.
12	**ENQUIRES**	Refer also to General Disposal Authority for State Government Information		

12.1	**Enquires – Hazardous Waste Disposal**	Enquires relating directly to intractable waste disposal at the Intractable Waste Disposal Facility, Mt Walton East.	Required as State archives	Retain 5 years after date of last action, then transfer to the SRO.
18	**LICENCES AND PERMITS**	Records relating to licences, permits or registrations issued to or from the Department of Finance.		
18.1	**Licences and Permits – Significant**	Records relating to significant Licences, Permits or Registrations issued to or from the Department of Finance. Such as: Licence to operate a landfill facility, Radiological Council Registration to store Radioactive Waste, Intractable Waste Disposal Facility Safety Case, Operations Safety Assessment and Post Closure Safety Assessment, Australian Safeguards and Non-Proliferation Office Permit to store nuclear waste, Road Use Permits in relation to the Intractable Waste Disposal Facility, Mt Walton East. See related Activities: • Agreements/Contracts	Required as State archives	Retain 5 years after expiry of approval, then transfer to the SRO.
20	**MAINTENANCE**	Refer also to General Disposal Authority for State Government Information		
20.1	**Disposal Cell - Shafts and Trenches**	Records relating to the maintenance of Disposal Cells at the Intractable Waste Disposal Facility, Mt Walton East.	Required as State archives	Retain 5 years after action completed, then transfer to the SRO.
23	**MONITORING**	Records relating to the activity of monitoring operations and effects of various systems, includes but is not limited to the monitoring of: • Groundwater • Capping (process used at Mt Walton East Waste Disposal Facility) • Dust • Rehabilitation • Performance - organizational not personal • Radiation (environmental and personnel)		
23.1	**Monitoring - Significant**	Records relating to monitoring where there may be potential long-term impacts on public health and safety, could relate to facility or personnel, e.g. exposure to radiation. Note: Monitoring occurring at the Intractable Waste Disposal Facility, Mt Walton East is considered significant.	Required as State archives	Retain 5 years after last action, then transfer to the SRO.
27	**REPORTING**	Refer to General Disposal Authority for State Government Information		

27.1	**Reports - Mount Walton East Intractable Waste Disposal Facility**	Reports relating specifically to the Intractable Waste Disposal Facility, Mt Walton East • Close-out reports contain details of each specific disposal operation • Performance and Compliance Reports • Technical audit reports	Required as State archives	Retain 5 years after date of last action, then transfer to the SRO.
30	**OCCUPATIONAL HEALTH AND SAFETY**	Also refer to General Disposal Authority for State Government Information		
30.1	**Intractable Waste - OHS**	Includes but is not limited to: Use, presence, neutralization and removal, transport, safety precautions, chemical and radiological issues; and advice on health risks relating to the Intractable Waste Disposal Facility, Mt Walton East.	Required as State archives	Retain 5 years after last action, then transfer to the SRO.

APPENDIX K

ASNO ASO316 Report and IAEA Guidance on Access Submission Acknowledgement

From: ASNO Nuclear <nuclear.asno@dfat.gov.au>
Sent: Thursday, 6 March 2025 6:37 AM
To: Gibson, Tegan <Tegan.Gibson@finance.wa.gov.au>
Cc: Hopkins, Eleanor <Eleanor.Hopkins@finance.wa.gov.au>; Mark Shepherd <mark.shepherd@auroraenvironmental.com.au>
Subject: RE: Permit Number PN207 - Submission of ASO316 form & IAEA access guidance - 2025 [SEC=OFFICIAL]

OFFICIAL

Good morning Tegan,

Thank you for providing the ASO316 form, map and IAEA Guidance on Access for PN207 IWDF Mt Walton.

We will let you know if we require any further details, at this stage nothing further is required. If you have any queries, please don't hesitate to reach out to us.

Kind regards,

Sophie Yang
Safeguards Officer | Safeguards Implementation Section
Nuclear Safeguards and Security Branch
Australian Safeguards and Non-Proliferation Office

T +61 6261 1920 D +61 2 6178 6098
E asno@dfat.gov.au M +61 401 270 001
W asno.gov.au DE Sophie.yang@dfat.gov.au

From: Gibson, Tegan <Tegan.Gibson@finance.wa.gov.au>
Sent: Wednesday, 5 March 2025 12:28 PM
To: ASNO Nuclear <nuclear.asno@dfat.gov.au>
Cc: Hopkins, Eleanor <Eleanor.Hopkins@finance.wa.gov.au>; Mark Shepherd <mark.shepherd@auroraenvironmental.com.au>
Subject: Permit Number PN207 - Submission of ASO316 form & IAEA access guidance - 2025

OFFICIAL

Hello,

Please find attached the completed ASO316 Form and relevant site maps in PDF format for permit number PN207. The information provided in the ASO316 Form has not changed since the 2024 submission.

There has been no disposal of nuclear material in the reporting period, with the last disposal containing nuclear material occurring in 2008.

Please also find attached PN207 – IAEA Guidance on Access.

If you have any questions, please do not hesitate to contact me.

Kind regards,

Tegan

Tegan Gibson
Contract Manager (IWDF) | Buildings and Contracts
Djookanup, 16 Parkland Rd, Osborne Park WA 6017
+61865511381 | WA.gov.au

Government of **Western Australia**
Department of **Finance**

The Department of Finance acknowledges the traditional custodians of Western Australia and their continuing connection to the land, waters and community. We pay our respects to all members of Aboriginal communities and their cultures; and to Elders both past and present.

DISCLAIMER: The information contained in this email (including attachments) is intended only for the use of the person(s) to whom it is addressed as it may be confidential and contain legally privileged information. If you are not the intended recipient you are hereby notified that any perusal, use, distribution, copying or disclosure is strictly prohibited. If you have received this email in error, please immediately advise us by return email and delete the email document.

This notice should not be removed.

APPENDIX L

June 2025 ASNO Annual Inventory Submission Acknowledgement

Mark Shepherd

From: nuclear.asno@dfat.gov.au
Sent: Wednesday, 18 June 2025 7:57 AM
To: eleanor.hopkins@finance.wa.gov.au; Mark Shepherd; stuart.parr@ransconsultancy.com; nuclear.asno@dfat.gov.au
Subject: Report on Physical Inventory Taking submitted on 18 Jun 2025 for Minister for Works c/- Department of Finance (Western Australia) - Intractable Waste Disposal Facility (IWDF), Mt Walton East by michelle.spencer@finance.wa.gov.au [SEC=OFFICIAL:Sensitive]
Attachments: Finalised Physical Inventory for Dept Finance (WA) at 18Jun2025 095608.xlsx

This email acknowledges that a contact for your organisation has logged into the NUMBAT database (https://numbat.dfat.gov.au) and clicked the "Complete Physical Inventory Taking" button, submitting the inventory list of nuclear material for your organisation as of 30 June 2025.

You are receiving this email because you are listed as a primary contact for your organisation. The Australian Safeguards and Non-Proliferation Office (ASNO) will review your submission and contact you if it has any questions.

For reference, attached is a copy of your organisation's inventory list as reported by your organisation today. If you have any questions, please contact nuclear.asno@dfat.gov.au.

APPENDIX M

2024 – 2025 Community Liaison Committee Meeting Minutes

Intractable Waste Disposal Facility (IWDF), Mount Walton East Community Liaison Committee (CLC) Meeting Minutes

Final v1

Chairperson:	Eleanor Hopkins	**Date & Time:**	29 February 2024 10.03 am – 11.48 am
Meeting:	IWDF, Mount Walton East Community Liaison Committee Meeting	**Venue:**	Coolgardie Community Recreation Centre, Sylvester St, Coolgardie
		Meeting No.	2023/24 Meeting 2

Attendees:		
Eleanor Hopkins	(EH)	IWDF Project Director, Department of Finance (Chairperson)
Mark Shepherd	(MS)	IWDF FMC Project Director / Operations Manager
John Shepherd	(JS)	IWDF FMC Assistant
Jan McLeod	(JMcL)	Coolgardie Community Representative
Rhonda Evans	(RE)	Coolgardie Community Representative
Bryan Close	(BC)	Deputy Shire President, Shire of Yilgarn
Bianca Bradford	(BB)	Councillor, Shire of Yilgarn
Mal Cullen	(MC)	President, Shire of Coolgardie

Apologies		
Gary Guerini	(GG)	Councillor, Shire of Yilgarn
Tracey Rathbone	(TR)	Deputy President, Shire of Coolgardie
Kelly Watts	(KW)	Executive Manager Regulatory Services, Shire of Yilgarn
Glenda Teede	(GT)	Chief Executive Officer, Shire of Menzies
Phil Nolan	(PN)	Councillor, Shire of Yilgarn
Nic Warren	(NW)	Chief Executive Officer, Shire of Yilgarn

Non-attendees		
Suzie Williams	(SW)	Councillor, City of Kalgoorlie Boulder
James Trail	(JT)	CEO, Shire of Coolgardie
Greg Dwyer	(GD)	Shire President, Shire of Menzies
Abnesh Chetty	(AC)	Environmental Officer – Licensing, Department of Water and Environmental Regulation

Observers
Deborah Ovens, Coolgardie Community Member
Peter McGregor, Coolgardie Community Member

Meeting Agenda

Item		Action / When
1.0	**Open the Meeting and Welcome** EH declared the meeting open at 10.03 am. EH acknowledged the Traditional Owners of the land on which the meeting was held and paid her respects to Elders past, present and emerging. EH introduced herself and welcomed all committee members and Observers.	
2.0	**Apologies received and non-attendees** Apologies and non-attendees were noted and are documented at the beginning of these minutes.	
3.0	**Introductions** Each member and observer present introduced themselves, providing their name and the type of membership they are representing on the CLC (documented at the beginning of these minutes).	
4.0	**Previous Minutes** EH stated the draft minutes for the previous meeting, held on 19 October 2023, were distributed on 2 November 2023, within the two-week timeframe in accordance with the CLC Terms of Reference and Operational Guidelines (CLC ToR). A hard copy was mailed to JMcL on 2 November 2023. EH advised she had received three requests for amendments to the 19 October 2023 minutes from Jan McLeod and Mal Cullen. Updated draft minutes were emailed to the CLC on the 28 February 2024 (V0.7). EH asked members if there were any further amendments. JMcL noted concerns with changes from V0.5 to V0.7 draft minutes. In draft minutes V0.5 there was one section titled “Apologies”, while in V0.7 the “Apologies” section was divided into “Apologies” and “Non-attendees”. EH confirmed that “non-attendees” did not formally respond to the meeting invitation, as opposed to “apologies”. JMcL requested that the excerpt from the Shire of Coolgardie that was removed from draft minutes be noted and an apology from MC was formally requested by JMcL. MC responded by stating that he stands by his comments and noted that it was a draft, with comments eventually removed from the minutes from the previous meeting. JMcL requested additional updates to previous minutes, however these were not accommodated by EH as they were not directly related to CLC business. JMcL then requested that the title of the document “Response to comments on performance and compliance report 2022/23” be changed to “Response to some of the comments on performance and compliance report 2022/23”. EH agreed to this. EH moved to accept the 19 October 2023 minutes as amended. RE seconded.	EH to provide updated document to members with draft minutes

5.0	**Business Arising from Previous Minutes** **5.1 Table illustrating proposed MS 562 changes** Table illustrating the proposed changes to Ministerial Statement (MS) 562 was emailed to CLC members on 2 November 2023 with a hardcopy mailed to Jan McLeod. The table was also included as an attachment to the 19 October 2023 CLC minutes and further emailed to CLC members with the meeting papers for this 29 February 2024 meeting on 7 February 2024 with a hard copy provided to Jan McLeod. **5.2 Provide a copy of the Proponent's response to some of Jan McLeod's comments on the draft 2022-23 Performance and Compliance Report (PCR) to all CLC members** A copy of the document that provides a response to some of Jan McLeod's comments on the draft 2022-23 PCR was emailed to CLC members on 2 November 2023 with a hardcopy mailed to Jan McLeod. The document was also included as an attachment to the 19 October 2023 CLC minutes and further emailed to CLC members with the meeting papers for this 29 February 2024 meeting on 7 February 2024 with a hard copy provided to Jan McLeod. It is important to note that many of Jan's comments were addressed directly in the PCR and that the document provided to members addresses only those comments that did not result in changes to the PCR. JMcL noted that Section 9.2 Consultation Contacts is missing from these minutes and requested that this be added to General Business. JMcL also requested that Roads be included in these meeting minutes. EH responded by stating that the Roads section will not be included as it is outside the scope of this committee, though road condition will be reported as a part of MS site visit updates. JMcL requested that "other business" be included in General Business. EH agreed.	
6.0	**Management of the IWDF** **6.1 IWDF Safety Assessments and Safety Case** Feedback from the Radiological Council on the Safety Assessment and Safety Cases was received 31 October 2023. The IWDF Management team provided a response to the comments to the Radiological Council on 15 November 2023 many of which committed to revising aspects of the Safety Assessments and Safety Case. All three documents have been redrafted by the Radiation Safety Officer and provided to the FMC for review. The final draft is to be submitted to Radiological Council by 31 March 2024 for consideration at their April 2024 meeting. Minor updates have been included in the Safety Assessments and more detailed updates have been added to the Safety Case documentation by the FMC. Further updates provided by MS include details on site history and conditions which have been appended to the safety case document. JMcL requested the documentation be provided to the CLC. EH agreed to provide this document once finalised/approved and agreed to provide draft copies when requested by the CLC. However, EH noted that further comments from the CLC will not be addressed in the document.	

6.2 Management Review Meeting (MRM)

6.2.1 June 2023 MRM

MS stated that members were emailed revision 2.0 of the June 2023 MRM minutes on 7 February 2024 as the date at item 15.1 had been updated to amend reference to 2021-2022 FMC performance against estimated costs, to the correct year, being 2022-2023.

6.2.2 5 December 2023 MRM

MS reported that the 19th MRM was held on 5 December 2023. Minutes were emailed to the CLC on 4 January 2024 with a hard copy posted to Jan McLeod on the same date.

6.2.2.1 Legal Deposit

MS advised a legal deposit of all Performance and Compliance Reports (PCRs) post 2008, all Handbooks and all Brochures was to be provided to the State Library by 31 January 2024 however this had been delayed due to the library contact being on leave.

Post meeting note: All PCRs post 2008, all Handbooks and all Brochures were provided to the State Library on 7th March 2024.

Additional details on waste delivery to the IWDF from Coffey's time as FMC have been found in the State Library and was provided to Leanne Morton (IWDF Project Manager) on the 7th of March. This information will be used to finalise the IWDF Database entry for 97NRT0.

6.2.2.2 IWDF Management System

MS confirmed the IWDF Management System matrices and registers, and Management Plans and Procedures had been reviewed and updated in December 2023 with some finalisation occurring in January 2024. No material changes were made, however it was agreed a comprehensive review of the management system was required given the system developed in 2001 has remained largely unchanged.

JMcL requested that complaints lodged and discussed in the Management Review Meeting be recorded in the minutes for that meeting. EH stated she recalled complaints being discussed at the meeting but acknowledged the item is not in the minutes. A response to the complaints raised by JMcL was provided on 30 November 2023.

6.3 Ministerial Statement Review – s.45C

EH advised assessment of the s.45C was still progressing. DWER had confirmed the assessment was in its consultation phase and on 7 February 2024, DWER advised feedback had been received by DWER's Industry Regulation Branch, but no response had been received from the Department of Energy, Mines, Industry Regulation and Safety (DEMIRS) as yet.

On 11 December 2023, the IWDF Management Team had a brief meeting with DWER who were seeking to understand whether the proponent wanted to change governance of the IWDF from MS 562 to sit solely under the DWER licence. The proponent advised that there was no intention to remove governance of the IWDF away from MS562.

JMcL requested a copy of the reply from the industry regulation branch. EH and MS confirmed that this would have been forwarded directly to DWER. EH confirmed that comments from JMcL have been forwarded to the case manager

for the industry regulation branch. EH confirmed that DWER were aware that the CLC was invited to make a submission.

6.4 Complaints

EH confirmed the proponent had provided a response dated 30 November 2023 to the seven complaints received from Ms Jan McLeod dated 13 September 2023. The complaints register has been updated.

EH confirmed that a copy of the response was provided to committee members earlier this week as requested by JMcL. EH stated that although the CLC is informed of complaints received, the contents of the response would not generally be discussed at a CLC meeting. However this situation was unique given the complainant is a CLC member (JMcL) and she has requested the matter be discussed at the meeting. Given the CLC is the forum for members to raise concerns regarding the IWDF, EH invited JMcL to discuss the responses.

JMcL noted that responses to comments were lacking with the complaints not properly addressed. Complaints raised by JMcL included: 1) that the information regarding the s.45C was not provided in hard copy and that in future pertinent information should be provided in hard-copy form. JMcL stated that the response was inadequate; 2) that only summary documents were provided, and the full documents are needed for making an informed decision. JMcL stated that the response was inadequate; 3) that there was no opportunity for input on the proposed changes by the committee prior to submission. JMcL rejected the response that changes were purely administrative. MC responded suggesting that the ability of the community to have input is not diminished with the changes proposed in the s.45C. RE noted that the role of the community liaison committee is to provide information back to the community, but not to have input into the administrative matters of the IWDF; 4) that the CLC had no knowledge of the intention to replace it prior to the statement regarding the s.45C being read out; 5) JMcL believes that the change to the CLC is not just administrative as it affects Proponent Commitment 8 of MS 562 and given that a request to adapt proponent commitment 7.1 was denied on the basis of policy that this should also apply to change/removal of proponent commitment 8. MC stated that he disagreed that this is an issue; 6) it was JMcL view that discussion of the s.45C was not encouraged, only a written option was offered; and finally, 7) JMcL pointed out that complaints only go to the proponent, which means that any comments will be biased towards the Department of Finance's position and that there should be an independent arbiter for complaints.

JMcL feels that the committee has lost ability to have input into the IWDF. The reduction in the number of meetings per year impacts the ability of the committee to have input.

EH stated that all complaints have been fully addressed. JMcL asked why the Tellus facility can accept waste from interstate while the IWDF cannot. MC responded by stating that this has been answered many times previously. EH stated that the policy position with respect to the IWDF being available for intractable wastes generated in Western Australia had not changed and that Tellus was a private, commercial operation with a different business model than the IWDF.

JMcL asked if any corrective action requests (CARs) have been made on complaints. EH responded by stating that no CARs have been raised based on complaints.

	6.5 2023 - 2024 Internal Audit Results MS provided an update on the internal audit plan. Suzanna Beech will be working on the internal audit. MS will complete the PCR and will require Suzanna's input. JMcL requested that the explanatory introductory lines to the PCR internal audit be included moving forward as these helped the community to better understand the audit findings. JMcL noted that this was standard prior to the last PCR. EH noted that the point made by JMcL will be taken on board, though keeping the PCR document brief is a priority. MS stated that this year's PCR will likely resemble last year's PCR in terms of structure. **6.6 Questions from Observers** EH invited Observers to ask any questions. No questions were asked.	
7.0	**Waste Disposals** **7.1 Waste Enquiries** MS advised there have been no new waste enquiries since the last CLC meeting. No waste enquiries have progressed beyond the initial enquiry. **Waste Acceptance Applications** MS advised no new waste acceptance applications had been received by the FMC since the last CLC meeting. JMcL enquired as to the status of waste disposal mentioned in the last CLC meeting. MS advised that the volume of waste is not sufficient at present for a waste disposal operation. At the request of RE, MS explained the process of waste disposal at both Tellus and IWDF sites. Tellus has greater ability to dispose of small quantities of waste. JMcL noted that Tellus has the licence to store radioactive waste while the IWDF does not.	
8.0	**CLC Operations and Membership** **8.1 Annual review of CLC Terms of Reference and Operational Guidelines** EH advised a copy of Revision 20 of the CLC Terms of Reference and Operational Guidelines had been provided to all members with meeting papers emailed on 7 February 2024. As agreed, this document would be reviewed annually and EH asked members whether they had any items to discuss or propose to be changed. No members requested any changes to the document. EH moved to finalise this. BC seconded. **8.2 Expiring memberships** EH advised that Leanne Morton would no longer be attending CLC Meetings and would cease her employment with the IWDF Management Team post 31 March 2024 or upon completion of the database. EH stated that Leanne had been a member of the IWDF Management Team since 1998 and had been pivotal to the successful management of the facility. EH	

	recognised Leanne's passion and dedication and thanked her for her contributions over her many years as part of the team. EH invited members to make comment on Leanne's tenure with the CLC. MS stated the LM is the hardest working, most knowledgeable person that he has worked with over the last 25 years. She is a dedicated and particularly decent person. MS is sad to see her go. MC stated that LM has done a great job over the last 16 years that he has had dealings with the IWDF. She has always been on top of matters relating to the IWDF. JMcL stated that the knowledge, attention to detail, input into the role of the CLC and how these things mesh were LM's strong point. She excelled at all parts of her job. LM and JMcL worked together to recover lost information and place it in a database. JMcL noted that the IWDF is world-class standard, and that LM has been pivotal in this. JMcL stated that her input and knowledge are second to none. EH stated that LM leaves big shoes to fill and that she will be missed. MC asked for clarification on timing for the "new" community meeting. EH responded that this is still dependent on assessment of the s.45C, so EH is unable to provide an update at this time. There were no other expiring memberships due this year, however EH advised of the following vacancies: • Traditional Custodians of the Land on which the IWDF is located, two positions. • Local community from the Shire of Coolgardie, two positions. • Local community from the Shires of Yilgarn and Menzies and City of Kalgoorlie-Boulder, four positions. • Western Australian community outside the Shires of Coolgardie, Yilgarn, Menzies and City of Kalgoorlie-Boulder, two positions. JMcL noted the reduction in population in Coolgardie and stated that lack of availability rather than lack of community interest is responsible for reduced committee size.	
9.0	**General Business** **9.1 Updated IWDF Handbook and Brochure** EH advised updated copies of the IWDF Handbook and Brochure had been published on wa.gov.au on 23 January 2024. MS advised that updates were as follows. **Handbook:** • Replaced Class S with intermediate level waste. **Brochure:** • Removed WA from RCWA • Updated dates for documentation • Updated rehab photos to include latest ones • Updated reference documents	

	• Removed section about ARPANSA **9.1 Consultation Contacts** JMcL advised that in accordance with contacts provided by EH with whom concerns regarding the proposed changes to Ministerial Statement 562 could be raised, she had put a submission forward to the Minister for Environment, the Chairperson of the EPA and three Members of Parliament including Kyle McGinn, Ali Kent and Rick Wilson. JMcL read the cover letter for this submission (submitted 6th November 2023). Two key points were raised: 1) a complaint regarding the dissolution of the CLC and replacement with a yearly community meeting (Page 66); and 2) a request to change the ability for the IWDF to accept waste from interstate as Tellus is able to, due to increased level of nuclear waste produced across Australia and lack of an accepted national waste disposal site. **9.2 Other Business** JMcL stated that 80-210T road trains are using the Mt Walton road. JMcL expressed concerns regarding the condition of the road after use by these particularly heavy road trains. MC raised a point of order stating that this was conjecture and that these road trains are operating legally on the roads they are travelling. EH confirmed that whilst the road was outside the remit of the CLC, members should be assured that the road remains suitable to be travelled on. EH confirmed that road permits are granted based on a thorough review of proposals which take into consideration current road usage and require contribution to maintenance costs commensurate with usage levels of the permit holder. BC agreed with MC that it is not relevant for this committee.	
10.0	**Scheduling of Next Meeting / Meeting Close** EH asked members whether the June CLC meeting could be moved to July. This will ensure the June MRM meeting can be held late in the month so all auditing can be captured, and subsequent minutes can be provided to the members for their review before the next meeting. EH proposed the next meeting be held 25th July 2024 and noted this would result in a further non-compliance with MS562 as only two CLC meetings would be held in 2023-24. This was seconded by BC. JMcL noted that it will be a non-compliance by moving the meeting to the next financial year (2 rather than 3 meetings this year). JMcL also noted that the timing issue is understood but requested earlier meetings in order to fit 3 meetings per year. JMcL requested that the further non-compliance this year not impact the number of meetings next year. EH proposed November and March for meetings moving forward. EH will send a placeholder for 25th of July. JMcL noted that the ability to call extra meetings when needed is within the rights of the CLC. EH confirmed this. EH closed the meeting at 11.48 am.	

Intractable Waste Disposal Facility (IWDF), Mount Walton East Community Liaison Committee (CLC) Meeting Minutes

Final V1

Chairperson:	Eleanor Hopkins	**Date & Time:**	25 July 2024 10.08 am – 11:59 am
Meeting:	IWDF, Mount Walton East Community Liaison Committee Meeting	**Venue:**	Coolgardie Community Recreation Centre, Sylvester St, Coolgardie
		Meeting No.	2024/25 Meeting 1

Attendees:		
Eleanor Hopkins	(EH)	IWDF Project Director, Department of Finance (Chairperson)
Tegan Gibson	(TG)	IWDF Project Manager, Department of Finance
Mark Shepherd	(MS)	IWDF FMC Project Director / Operations Manager
Jan McLeod	(JMcL)	Coolgardie Community Representative
Rhonda Evans	(RE)	Coolgardie Community Representative
Bryan Close*	(BC)	Deputy Shire President, Shire of Yilgarn
Mal Cullen	(MC)	President, Shire of Coolgardie
Gary Guerini*	(GG)	Councillor, Shire of Yilgarn
Kelly Watts*	(KW)	Regulatory Services Officer, Shire of Yilgarn

*indicates attending via Teams

Apologies		
Glenda Teede	(GT)	CEO, Shire of Menzies
James Trail	(JT)	CEO, Shire of Coolgardie
Tracey Rathbone	(TR)	Deputy President, Shire of Coolgardie

Non-attendees		
Suzie Williams	(SW)	Councillor, City of Kalgoorlie Boulder
Greg Dwyer	(GD)	Shire President, Shire of Menzies
Abnesh Chetty	(AC)	Environmental Officer – Licensing, Department of Water and Environmental Regulation

Observer:
Bruce Olsen, Community observer (refer item 3.1) (BO)

Meeting Agenda		
Item		**Action / When**
1.0	**Open the Meeting and Welcome** EH declared the meeting open at 10:08 am. EH acknowledged the Traditional Owners of the land on which the meeting was held and paid her respects to Elders past and present. EH introduced herself and welcomed all committee members and Observers. EH advised that observers were not able to participate in the meeting, however, would have an opportunity to ask questions at the conclusion of item 6. EH noted that RE is backfilling for several unwell staff so will be in and out of the meeting today.	
2.0	**Apologies received and non-attendees** Apologies and non-attendees were noted and are documented at the beginning of these minutes.	
3.0	**Introductions** Each member and observer present introduced themselves, providing their name and the type of membership they are representing on the CLC (documented at the beginning of these minutes). ***3.1 Expression of Interest*** EH reported that an Expression of Interest (EOI) had been received from Bruce Olsen on 22 July 2024 to become a community representative for the Shire of Coolgardie. The completed EOI form was sent to all CLC members along with the final agenda on 22 July 2024. A hard copy was printed at the Finance Kalgoorlie Regional Office for collection by Jan McLeod. JMcL noted that BO had been involved with chemicals, responsible for hazardous chemicals in nickel processing, operation and maintenance of power stations, the petrochemical industry as well as pharmaceuticals. Jan stated that considering the talk about nuclear around Australia and pharmaceutical hazardous waste Bruce would make a marvellous asset to be a community member on the committee. EH asked if everybody was happy to accept the EOI. There were no objections. EH welcomed Bruce to the committee and confirmed he is now a member of the CLC.	
4.0	**Previous Minutes** EH stated that the draft minutes for the previous meeting, held on 29 February 2024, were distributed on 14 March 2024, within the two-week timeframe in accordance with the CLC Terms of Reference and Operational Guidelines (CLC ToR). A hard copy was mailed to JMcL on 14 March. No amendments to the February 2024 minutes were requested prior to or during the meeting.	

	EH moved to accept the 29 February 2024 minutes. MC seconded.	
5.0	**Business Arising from Previous Minutes** **5.1 EH to provide updated document to members with draft minutes** The title of the document "Response to comments on performance and compliance report 2022/23" was changed to "Response to some of the comments on performance and compliance report 2022/23" and was included as an attachment to the 29 February 2024 CLC minutes and further emailed to CLC members with the meeting papers for this 25 July 2024 meeting on 11 July 2024 with a hardcopy printed at the Kalgoorlie Finance office on 15 July 2024 for collection by Jan McLeod. JMcL responded that because these comments were made over the phone it was difficult to go through it and not everything got captured and without noting 'some' of the comments it could be interpreted that these were the only comments. EH agreed and thanked JMcL. **5.2 EH to provide IWDF Safety Assessments and Safety Case once finalised/approved.** EH reported the IWDF Safety Assessments and Safety Case have not yet been approved by the Radiological Council (RC) however draft copies could be made available to CLC members on request. JMcL was provided with a hard copy during the meeting. EH noted it was a large document and any members wishing to review the draft document should email EH to gain access. EH went on to explain that no changes to the document could be requested by the CLC as it has been submitted to RC. Accordingly, provision of the draft to the CLC would be for information purposes and questions only. **5.3 MRM minutes to include reference to complaints received.** It was requested that the MRM minutes included complaints. EH confirmed that as per Final MRM Meeting 20 Minutes, section 14.2 Complaints outlines the complaints received by CLC Member Jan McLeod on 13 September 2023. JMcL advised that she had questions on this meeting however upon reviewing the agenda noted that these will be able to be discussed in section 6.5.	EH to provide draft Safety Assessments and Safety Case to BO
6.0	**Management of the IWDF** **6.1 Site Monitoring Visit April 2024** **Site Monitoring** MS reported that the site monitoring was undertaken in April 2024 with the usual checks on the facilities as well as the water monitoring and some work was undertaken on the fire break and in the drains next to each dome. This work involved spraying and in some cases on the firebreak, manual removal of larger plants. **Groundwater Monitoring** MS reported that groundwater monitoring was conducted on 17/04/2024 and no groundwater was detected in any of the monitoring bores. Little in the way of vegetation was found in any of the drains. MS noted this is now a regular check to ensure the drains are clear and the water can run off the dome and down the drains unimpeded.	

	Access Road MS reported that the condition of the IWDF access road was good and it was evident that the first half of the road that it is quite heavily used and that the second half was in good condition. JMcL queried if Mineral Resources (MinRes) use the road. EH responded that MinRes do have a permit to travel on the road. JMcL noted that road use should lighten up at the end of the year. EH noted that MS reported that the road was in a suitable condition for a disposal. MS stated that when the road was first constructed it was not particularly good however it has now been gravel sheeted and is in much better condition. It has been well upgraded by the companies using the road and there are processes and procedures in place to ensure road maintenance occurs. MS confirmed that the rail crossing has boom gates and lights. EH went on to confirm that there is a rail hut attendant. JMcL commented that the booth was there when they went on the site visit. JMcL queried how many companies are using the road. EH responded that this information would not be able to be shared. JMcL stated there was a commitment by Brendon Atkinson that modifications to the agreements can be discussed at the meeting and noted that this comment is not inappropriate. EH confirmed there are two main road use agreements and some smaller agreements which do not include heavy haulage. JMcL noted when she has been past the site turn off on Great Eastern Highway that there is a dedicated turning left lane which would indicate far more traffic usage. JMcL noted it is a private road and EH agreed. **6.2 Performance and Compliance Reporting** MS reported that the draft Performance and Compliance Report (PCR) would be finished by the end of next week (Friday, 2 August 2024). EH noted this would not be possible to print at the Kalgoorlie office as the document is too large but could be couriered to JMcL. MS explained that Leanne Morton (LM) supervised the audit for the 2023/24 PCR following advice from the person who was due to take over the role from LM accepting a different job in the end. JMcL commented that this will probably be done quicker as LM is familiar with the process. MS expressed agreeance and gave the example of familiarity with the locations to look for information. MS went on to explain that after the comments from JMcL on the previous PCR he had tried to put some of the information back in. JMcL expressed appreciation and explained that the lack of information concerned her as this information helps set the scene about what that section is about and without that context it is just a tick the box exercise as you do not see where that is in the context of the PCR. MS explained that one of the older templates was used and this allowed retention of the information that had previously been removed. EH asked if any other committee members would like a copy of the draft PCR. MC and BO expressed interest in having an electronic copy.	EH to provide draft PCR in hard copy to JMcL and soft copy to MC & BO.

JMcL commented on the feedback process and requested that a meeting be held to discuss feedback on the PCR to allow comments to be discussed over the table as a consideration before it goes to DWER. She noted it was awkward trying to do this over the phone and to assist in not falling into the situation where there are only two meetings in a compliance period. JMcL commented that given there were only two CLC meetings during the last compliance period there could be a perception that this is fine and therefore only one meeting would also be fine however the ability and opportunity for the committee to provide input into these reports would be compromised.

EH supported there being a meeting to discuss feedback on the PCR however that this meeting would need to be via Teams. It was agreed with the committee that this meeting would be held on 28 August 2024 via Teams.

JMcL commented that Thursday may not fit with all committee members, EH noted that this date was a Wednesday and queried if there was a particular time that would suit. JMcL asked to discuss the time later as some committee members worked and it would depend on availability. MS advised he was able to take calls with any queries. JMcL commented that it would be good to get feedback on comments prior to the meeting. EH advised she would issue calendar booking and requested members either accept or declined to indicate whether they would be in attendance.

EH to provide a placeholder for PCR meeting on 28 August 2024.

EH asked if there was any other questions or comments on the PCR. No comments were provided.

6.3 IWDF Safety Assessments and Safety Case

MS reported that following feedback from the Radiological Council on the first drafts of the IWDF Safety Assessments and Case, version 2 of the drafts was submitted to the Radiation Health Unit (RHU) on 11 June 2024 for their review prior to submitting to the Radiological Council (RC). It was noted that JMcL now has a hard copy of the draft. The document is submitted to the Radiation Health unit and once this review has been completed it will be passed to RC. No feedback has been received yet.

MS explained that the process had been an original submission to RC who requested additional information. This involved including and documenting past studies done from 1988 to relatively recently including information on flora & fauna as well as seismic work from soil & rock engineering. The RC required reasoning behind the selection of the site and MS has summarised this in the Safety Case which brings information from the Safety Assessment and Post Closure Report together. These documents have calculations based on exposure to radiation at the site which is recorded as highly unlikely. MS gave an example of a lightning strike causing a fire as a risk that was highly unlikely to cause damage where disposal cells are covered, and no vegetation exists however the risk of this while there is an operation is slightly more likely and the outcomes are outlined in the reports.

JMcL expressed that this information would be very helpful and that she would enjoy reading the report.

6.4 IWDF Public Waste Inventory Database

EH reported that work on the IWDF Public Waste Inventory Database was still progressing with two disposal operations remaining (97NRT02 & 2008RT01).

EH advised that LM has been working hard to complete this task however was unable to complete by the original completion date of March this year due to personal reasons and the new completion date was end of October this year

following which a process for the public to access the information will be worked out. MS noted that disposal trench 97 was likely completed by now, where as disposal trench 08 contains different materials from different origins, so this will take longer to complete.

6.5 Management Review Meeting (MRM)

24 June 2024 MRM

EH reported that the 20th MRM was held on 24 June 2024. Draft minutes were emailed to the CLC on 10 July 2024. A hard copy was printed at the Finance Kalgoorlie Office for collection by Jan McLeod. EH noted some minor changes were required, as noted in the email circulating the meeting papers. Final minutes were emailed to the CLC on 22 July 2024. A hard copy was printed at the Finance Kalgoorlie Regional Office for collection by Jan McLeod. The revisions addressed updates to section 4.6 FMC Environmental Health and Safety Management System (EHSMS) & FMC Procedures where the table identifying changes has now been completed. The other revision was for section 10.4 Dose Constraint Monitoring however these results have not yet been received from the laboratory so could not be reported on. If available, they will be reported to the CLC at the next meeting and certainly at the next MRM.

MS explained that Stuart Parr, the RSO, is no longer working for Aurora and as such MS had to submit the badges under his own name to ensure the results were returned to him. JMcL queried who the RSO is. MS explained that SP is still the RSO, as he is working as a subconsultant to Aurora and is still the appointed RSO by the RC. MS noted that if the RSO was to be changed, it would require approval by the RC.

EH opened the floor to all invited questions.

JMcL asked for clarification on a number of items outlined below:

- Wildcard search – what is this process and when will it be deployed?

EH advised that the wildcard search allows for a term to be entered and relevant results are provided. EH will follow up on the deployment. MS expressed that this should be done once the database is completed.

EH to follow up on deployment of Wildcard search improvements following completion of the database.

- JMcL asked that the committee be included in the review of the Management plans.

MS explained that the review at this stage is mainly on preliminary information which is repeated across documents and would not be particularly relevant to the CLC. Any changes are noted as part of the MRM. MS noted that these small changes are still awaiting approval by Finance.

JMcL commented that previously the CLC had input into the management plans which had led to positive changes and that the CLC had a role to ensure that management plans were appropriate. MS confirmed this had occurred in the past and on this basis, EH agreed a draft of the management plans could be provided once finalised noting the PCR audits the performance of the IWDF Management Team against the requirements of the management plans. EH advised once the PCR and database were complete, the management system review would be the focus for the rest of the financial year.

EH assured members the current plans are not unsuitable however there is now opportunity to review and consolidate (where appropriate).

- Radioactive waste – low level radioactive waste

	JMcL raised a concern whereby the MRM noted that a change to Management Plan 9 was that "Intermediate (or High) Level Radioactive Waste is not accepted for disposal at the IWDF" and JMcL noted that short term intermediate waste is accepted. MS advised there is no medium level intermediate waste accepted and if it is on the borderline an application must be made to the RC. MS stated it was accurate to state it was not accepted. • JMcL queried what the redefined terms of the Aspects and Impacts Register are. MS noted that engineer Cameron Garside (CG) has experience in risk registers and that these terms were realigned with industry standards. EH explained, as stated in the MRM minutes, there would be a risk workshop held after the PCR was completed to undertake a comprehensive review of the current risks captured. • Change to MP06 whereby the saving of emails containing documents is not a requirement. JMcL expressed concerns in knowing where documents have ended up and who was provided specific documents. EH explained that this requirement was made when email was relatively new however now all correspondence occurs via email with documents continuously sent back and forth between stakeholders and that saving all these emails was not practical. MS noted that all documents are still stored however saving each covering email where a document has been shared does not occur. MS & EH confirmed that the documents are in the document library. EH advised documents were not password protected. JMcL queried if there is a list of documents in the document library. MS confirmed there are a massive number of documents in the document library and that the PCR references some of the pertinent and up to date documents that are held there. MS confirmed that these documents are not accessible to the public. EH confirmed that the public database will be accessible to the public however these management plans are not available to the public as they are management documents. • JMcL noted that the Driggs facility in the UK was reviewed. MS noted that similar facilities are considered once or twice a year. This continual checking confirms that the management and geological advantages of the IWDF are unparalleled. JMcL expressed that providing more information gives more credence to the PCR which therefore provides a fuller understanding of the IWDF given that it is a public document. • 4.2 – 'bought' to the attention EH confirmed that this would be updated to 'brought' however this would not result in a new version of the MRM minutes. • Queried what DRF stands for. MS confirmed that this is Declared Rare Fauna (DRF). • Concerned that ERI-03 indicates vehicle fires are extinguished by site personnel only if there is no risk of poisonous gases being generated when blaze meets waste. MS confirmed that whilst an emergency response would be enacted by site personnel there would not be an expectation that they put their lives in danger.	TG to update typo in MRM minutes

MS provided an example of a vehicle carrying arsenic trioxide that could release arsine gas should the vehicle catch alight. In such instances, it would be appropriate that DFES respond to the situation given they have the appropriate technical skills and equipment. MS noted that whilst it may take some time for DFES to arrive on site, vegetation is cleared from disposal sites so whilst the vehicle was likely to burn, the surrounding vegetation would not.

JMcL noted that there are frequent vehicle fires on the Coolgardie Esperance Highway and that one had occurred just last week.

- 4.2 IWDF Management Plans – This section was referring to Procedures and has been updated to reflect the Management Plan changes.

TG confirmed that this section was referencing procedures rather than management plans. This change was addressed via the email that was sent with the updated meeting papers. JMcL confirmed she did receive a copy of this email with the updated meeting papers.

- Expressed that it was excellent that the monitoring survey would be done this year.
- Queried if the clearing of the firebreaks would be supervised.

MS confirmed that this work will all be supervised at the October site visit.

- Staff training – queried if CG should be TG?

MS confirmed that Cameron Garside (CG) is a chemical engineer undertaking work for Aurora. He has not yet visited site however would undertake training prior to any site visit occurring.

- Section 14.2 states that a response to the complaints raised by JMcL was made in writing dated 30 November 2023. JMcL expressed concern that the response was provided prior to the June 2024 MRM meeting and had not been properly captured previously.

EH confirmed that the response to the complaints was written by Mark Bryden (MB), General Manager Operations, Department of Finance. This response was reviewed by EH and posted to JMcL. The response was also provided to MS and the facilities management team. EH explained the complaints had been captured in the June MRM minutes given they had not been captured in the December 2023 minutes.

JMcL responded that the response is very subjective and requested that a record of the reply be documented somewhere. EH confirmed that this is in the complaints register and includes a reference to the Finance records system where the response has been filed.

JMcL queried why a CAR (Corrective Action Request) was not raised with respect to the complaint with the management system itself.

EH advised that a CAR had been raised but as the complaint has been responded to there was no further action required.

JMcL stated that the Department of Finance will back up the Department of Finance and there is no independent recourse. She noted that in the management system CARs will be raised however has not seen any CAR raised. She stated that there needs to be something as you are not following your own procedure.

MC interjected with a point of order stating that this has been addressed before and this is a personal issue, and it is a grievance by a community member and is a personal opinion and that the complaints have been responded to.

	JMcL asked again where the response is noted that the CAR has been raised and requested that EH make it clear about there being no independent person. EH confirmed that a CAR had been raised. EH reiterated the avenues provided in the response should JMcL wish to progress the complaint. JMcL stated that she would explain later in the meeting a lack of response. EH advised the matter would not be further reviewed by Finance. **6.6 Ministerial Statement Review – s.45C** EH advised assessment of the s.45C was still progressing and on 9 July DWER advised the status of the review had been updated from 'consultation' to 'In Progress'. Drafts of the changes to the Ministerial Statement 562 were received in May and June 2024 from DWER. The draft changes are now being further reviewed by DWER. JMcL asked if the committee will be able to see what is in the draft. EH responded there was a process that needed to be adhered to and that she did not want to pre-empt the outcome, as such a draft could not be provided. JMcL shared with the committee that she had submitted comments to DWER however had not received a response and now that it had been changed, she was concerned as she would not be able to make any more informed comments. She noted that as a committee there should be opportunity to have input into the operation and management of the IWDF and the committee should be privy to these changes to Ministerial Statement 562. EH advised there are no further changes other than those already outlined to the committee in June 2023. EH expressed apologies to JMcL that DWER had not responded to her submission. JMcL explained the history of the Ministerial Statement to new committee member BO, advising that, in accordance with the statement, there must be a minimum of 4 meetings per year and this is a commitment from the state of Western Australia to give the community the opportunity to have input into the operation and management of the facility. EH responded that the objective of the CLC is to ensure the community remains informed of the activities of the IWDF and that the proposed change continues to support this as the annual community meeting will provide an avenue to keep the community informed and it would not be limited by membership. JMcL commented that the committee had been trying to change condition 7.1 of the Ministerial Statement for many years without success however now the Department of Finance has sought to change the Ministerial Statement without this request. **6.7 Questions from Observers** There were no Observers.	
7.0	**Waste Disposals** **7.1 Waste Enquiries** MS advised there have been no new waste enquiries since the last CLC meeting and no enquiries have progressed.	

	Waste Acceptance Applications MS advised no new waste acceptance applications had been received by the FMC since the last CLC meeting. MS advised that the status of applications ranged from highly unlikely or not likely with a small number noted as 'possible' if there was a disposal operation.	
8.0	**CLC Operations and Membership** **8.1 Expiring memberships** EH stated the following memberships are due to expire or have already expired. • Suzie Williams (tenure expired in June 2024) EH noted there had not been any official communication from SW or the City of Kalgoorlie-Boulder in regards to her membership. EH noted if there is any communication she is welcome to join. • Rhonda Evans (tenure expires Feb 2025) – EH noted there will still be a few CLC meetings held prior to this expiry. EH requested that members with upcoming expiry please provide an indication of their interest in continuing on the committee prior to membership expiring. EH reminded members that the tenure for community representative committee members is three years. If after three years, there are no other nominations from the community represented, then the community member may re-nominate for committee membership. There were no other expiring memberships due this year, however EH advised of the following vacancies: • Traditional Custodians of the Land on which the IWDF is located, two positions • Local community from the Shire of Coolgardie, one position now that we have welcomed Bruce • Local community from the Shires of Yilgarn and Menzies and City of Kalgoorlie-Boulder, six positions • Western Australian community outside the Shires of Coolgardie, Yilgarn, Menzies and City of Kalgoorlie-Boulder, two positions EH opened the floor to any questions. JMcL shared that before the meeting officially commenced she had asked EH about Joan Gray as she has an interest in submitting an EOI to become a committee member. Further JMcL had heard Madeline King on the radio regarding nuclear submarines and the proposed radioactive waste facility at the naval base following which she has contacted her office and sent details suggesting that there may be interest from community in Rockingham and Perth in joining the CLC. EH thanked JMcL and shared that Joan Gray will be provided with an EOI form tomorrow.	EH to provide an EOI form to Joan Gray

9.0	**General Business** **9.1 Notification of change of Finance contract management personnel** EH advised that TG has commenced in the Contract Management role for the IWDF. **9.2 Other Business** **9.2.1 Concerns** JMcL expressed concern that she had not received response from any of the following parliamentarians or government organisations: Kyle McGinn, Ali Kent, Rick Wilson, DWER, Chairperson of the EPA or Reece Whitby, however she had met with Neil Thomson and spoken with Peter Rundle. JMcL stated that with the talk of nuclear submarines and nuclear power to generate electricity it becomes extremely frustrating when no response is received. JMcL noted that people are very concerned about storing low level radioactive waste in Rockingham and asked if there is any discussion on using Mt Walton. JMcL further queried if there was discussion occurring within government, given that Tellus is a commercial operation with a 25 year mining lease, and that the State Government will have to take responsibility for the site. EH responded that the Department of Finance operates and manages the IWDF and does not set waste management policy, however if an enquiry is received, this would be actioned in accordance with the usual process. EH explained that she is not aware of broader discussions in relation to the concerns raised. JMcL asked why the government should pay a commercial operator. MC responded that he understands the concerns however these are business discussions which are generally commercial in confidence, and outside of the remit of Finance and those within the CLC. MC commented that the Department would not be notified if there was a deposit going to Tellus and that contacting elected members of Parliament may be appropriate given the upcoming general State election. EH noted that this committee, and meeting, is specific to the IWDF and that she was a representative of the Department of Finance. As such, EH is not well placed to comment on broader government issues. JMcL commented that once Tellus closes it will come under the remit of Finance. MC noted that this is an assumption. RE expressed a full understanding of JMcL's frustration at not having received responses from politicians. However, a government department has a narrow field in what they can work on. RE commented that the Department of Finance is not the way to go about it. JMcL responded that Finance is the conduit between Mt Walton and the ministers. That the facility has had different proponents over the years and that MS will attest to this. Given the discussion on nuclear waste JMcL believes we should be better informed about the small modular reactors. JMcL suggested she would like the committee to go through the various waste situations so we are better informed and when we hear about waste in the media, we have a better idea of what is involved. EH responded that it would be possible to discuss radioactive waste and how these enquiries are processed and then disposed of at the IWDF. However, a	

	general discussion is not supported as it is outside the remit of Finance and the operations of the IWDF. RE expressed disagreement with JMcL and stated that this is not the forum to have those discussion. JMcL commented that Mt Walton came into being as part of the waste issue. That the Department of Defence or whoever is taking carriage of these submarines will push it through the process and it is at this point that we will get involved. EH explained that the local member is the representative for a community and that Finance is not the conduit to all waste issues across the state. JMcL suggested a physicist is hired to discuss the matter at the community meeting. EH reiterated that if there are questions on radioactive waste specific to the IWDF that these can be addressed. JMcL noted that as a community committee it is a community concern. EH apologised, noting she empathised with JMcL's frustration however cannot provide further details as this is outside the remit of Finance which just manages the facility. RE agreed. JMcL stated that the opportunity for a minimum of 4 meetings a year was being removed. EH advised that the committee endorsed the changes and that JMcL was the only person who had concerns. All committee members were invited to make a submission and since the June 2023 meeting EH has not received any other concerns or objection to having one community meeting a year. MC & RE agreed. MC outlined that as a community member she can write to the minister however as a committee there is not the same remit. EH outlined that whilst JMcL may raise her concerns it is not something that can be responded to. JMcL stated that until she has replies she will continue raising her concerns. EH acknowledged the importance of being mindful of all members on the committee and commented that whilst JMcL is very dedicated to representing the community the committee cannot keep going over old ground. **9.2.2 Next meeting** EH confirmed a meeting would be held on 28 August and this meeting will be an opportunity to go through feedback on the PCR. JMcL requested this meeting be a formal CLC meeting which would allow new members to be endorsed and ensure that the required meeting numbers are fulfilled noting that only two meetings were held last year with three meetings held in previous years. EH questioned whether there would be sufficient items to discuss and suggested a vote to decide if the next meeting is a formal CLC. Two for vs five against. JMcL noted that new committee members will not be able to have input into the PCR. EH noted that new committee members would not be in a position to provide comment on the PCR and that new committee members will be able to utilise the final report for information.	EH to provide a Teams link to all members for the PCR feedback meeting.

10.0	**Scheduling of Next CLC Meeting / Meeting Close** EH proposed the next meeting be held Thursday 17 October 2024 to align with the FMC site visit. JMcL stated that Tuesday or Wednesday would be a better day, noting that she and BO have work and that while Thursdays previously worked for everybody this would no longer be the case. MS clarified that Monday to Thursday would be the site monitoring and as such if the meeting was held in October it would need to be a Thursday. JMcL noted that Wednesday would be better. Given the above, EH proposed 6 November for the next CLC meeting. TG will send a placeholder for the calendar subject to availability of the rooms. EH asked if there was anything else anybody would like to raise. Members raised no further items for discussion. EH closed the meeting at 11:59 am.	TG to send a placeholder for the November CLC meeting subject to availability of rooms.

Intractable Waste Disposal Facility (IWDF), Mount Walton East Community Liaison Committee (CLC) Meeting Minutes

Final V1

Chairperson:	Eleanor Hopkins	**Date & Time:**	8 November 2024 10.00 am – 12:30 pm
Meeting:	IWDF, Mount Walton East Community Liaison Committee Meeting	**Venue:**	Coolgardie Community Recreation Centre, Sylvester St, Coolgardie
		Meeting No.	2024/25 Meeting 2

Attendees:		
Eleanor Hopkins	(EH)	IWDF Project Director, Department of Finance (Chairperson)
Tegan Gibson	(TG)	IWDF Project Manager, Department of Finance
Mark Shepherd	(MS)	IWDF FMC Project Director / Operations Manager
Jan McLeod	(JMcL)	Coolgardie Community Representative
Rhonda Evans	(RE)	Coolgardie Community Representative
Bruce Olsen	(BO)	Coolgardie Community Representative
Mal Cullen	(MC)	President, Shire of Coolgardie
Kristy Van Kuyl*	(KVK)	CEO, Shire of Menzies
Kelly Watts*	(KW)	Regulatory Services Officer, Shire of Yilgarn

*indicates attending via Teams

Apologies		
Tracey Rathbone	(TR)	Deputy President, Shire of Coolgardie
James Trail	(JT)	CEO, Shire of Coolgardie
Bryan Close	(BC)	Deputy Shire President, Shire of Yilgarn
Gary Guerini	(GG)	Councillor, Shire of Yilgarn

Non-attendees		
Greg Dwyer	(GD)	Shire President, Shire of Menzies
Abnesh Chetty	(AC)	Environmental Officer – Licensing, Department of Water and Environmental Regulation

Meeting Agenda		
Item		**Action / When**
1.0	**Open the Meeting and Welcome** EH declared the meeting open at 10:02 am. EH welcomed everybody to the meeting. EH acknowledged the Traditional Owners of the land on which the meeting was held and paid her respects to Elders past and present. EH introduced herself and requested that those present at the meeting introduce themselves.	
2.0	**Apologies received and non-attendees** Apologies and non-attendees were noted and are documented at the beginning of these minutes.	
3.0	**Introductions** Each member present introduced themselves, providing their name and the type of membership they are representing on the CLC (documented at the beginning of these minutes).	
4.0	**Previous Minutes** EH stated that the draft minutes for the previous meeting, held on 25 July 2024, were distributed on 7 August 2024, within the two-week timeframe in accordance with the CLC Terms of Reference and Operational Guidelines (CLC ToR). A hard copy was mailed to JMcL on 7 August 2024. EH reported that an updated version of V0.5 draft minutes was issued with the CLC meeting papers on 21 October 2024 with two minor changes: • Heading 5.2 was repeated which is now 5.2 and 5.3 • The Enterprise Content Management reference was added to the footer. No amendments to the July 2024 minutes were requested prior to or during the meeting. EH moved to accept the 25 July 2024 minutes. MC seconded.	
5.0	**Business Arising from Previous Minutes** **5.1 Draft Safety Assessments and Safety Case to be provided to BO.** EH reported that Aurora Environmental provided the electronic link to the Safety Case and Assessments to BO on 7 August 2024. **5.2 Draft PCR to be provided in hard copy to JMcL and soft copy to MC & BO.** EH reported that the PCR was couriered to JMcL on 9 August 2024. EH reported that the electronic link to the PCR was emailed to MC and BO on 13 August 2024. **5.3 PCR meeting on 28 August 2024.** EH distributed the PCR feedback meeting invitation on 7 August 2024. The meeting was held on 28 August 2024.	

5.4 Wildcard search improvements following completion of the database.

EH advised that the database would be revisited later in the meeting and that this action had not yet been actioned as the database had not yet been completed.

5.5 EOI form to Joan Gray.

EH advised that Joan Gray (JG) was provided an Expression of Interest form on 18 July 2024. On 25 July 2024, after the last CLC meeting, the completed form was provided to Finance. TG received a call on 14 October 2024 from JG who requested that her EOI be withdrawn.

JMcL has been in contact with JG and shared that unfortunately JG has some medical issues and so because of her health, not due to a lack of interest, she feels at this time she cannot contribute to this committee.

EH thanked JMcL for this insight.

JMcL advised she had queries from the previous minutes that she wanted to raise.

1) Page 11 of the draft minutes state that 'MC noted that this is an assumption' in response to a comment from JMcL that 'once Tellus closes it will come under the remit of Finance'

JMcL requested it be that page 60 of the Alignment of Gateway Tonnage document from 9 July 2021 it states – '…transfer of the management of the facility to the WA Government along with financial provision for the management of the facility for the institutional control period (ICP)'. Additionally, on page 360 '…at the end of phase 1 of the ICP the site will be handed back to the WA Government to complete the remainder of the ICP'.

EH asked that the focus of the conversation steers back to the IWDF.

JMcL clarified the reason she raised the matter was that comments such as MC's from the 25 July 2024 meeting raises questions about anything she has stated as fact. MC thanked JMcL for clarifying and shared that he felt it was an assumption at the time and is happy to receive the clarification.

2) Page 11 of the draft minutes which state 'JMcL asked why the government should pay a commercial operator.'

JMcL stated that both facilities are Class 5 and the State Government will be managing both in the long term. Given the State already has one facility why would they look to use another commercial facility.

EH responded that DWER have provided the approval for the operation of the Tellus-run facility and that this is outside the remit of this committee.

3) On page 6 EH agreed a copy of the management plans could be provided once completed as there is now an opportunity to review and consolidate. JMcL requested a copy to better understand what changes would be made.

MS shared what had been done so far, that is a review of the management plans, making note of information which is repeated across different documents. For example, the same three pages is repeated at the front of each management plan and what is being proposed is that this information will only be stated once. MS shared that the intention is not to change the information but consolidate it.

JMcL wanted clarification that the contents of the document is staying the same.

MS commented that it will have the same meaning however aspects such as spelling mistakes, repetition, ambiguities and similar will be rectified. MS added that none of the management plans had been changed yet, there is work being done on them however they have not yet gone to Finance for review. For example, the FMC and Finance both

have manuals and these cover the same information and what is being proposed is that there is one manual which states the responsible party.

JMcL asked if the document will show delineation of who is responsible for what.

MS shared that the originals are being retained as well as the updated documents so anybody can see what has changed. At the Management Review Meeting (MRM), scheduled for 5 December, specific details will be discussed with Finance. Another reason for the review is that all the management plans were completed in 2000 by consultant Dames and Moore and the resulting auditing requirements are onerous and not contemporary.

JMcL queried that consolidate is a loose term.

MS expressed an understanding of her concerns and reconfirmed the principle content of the documents will not change. MS added that there will be copies of both documents so if anybody ever wanted to go through them they can. He explained that the updated management plans will be retained by Aurora and, once approved by Finance, will become the current management plans.

JMcL queried the approval process and asked if the FMC will send the document to Finance and then will it go to the MRM, including which portions had been reviewed.

MS clarified that some of the detail will be discussed at the MRM and that it would be captured in the minutes.

4) Laboratory results from the dose constraint monitoring for October to December would be reported on as stated on page 6.

MS explained that the October to December badges were worn on the most recent October monitoring visit. He advised that the badges from earlier in the year had not been returned as these are sent back when the next set of badges are provided for analysis. MS explained that he was sent 10 badges, seven of which are controls and that they had made a mistake so MS emailed to advise of this. MS was unsure why so many controls would have been provided.

MS explained that the latest results would be available in December.

5) Risk Workshop

EH advised that this was still planned however it had been rescheduled and would now be held on 14 November.

MS added that the risk register had undergone an initial review by his staff member Cameron Garside (CG) who had experience in this area having done the risk register for an industrial company down south for a year with positive feedback. MS stated the register still needs further consideration given that some items are from 10 years ago.

JMcL expressed that some of the risks were not clear and that an update is what needs to happen so it makes better sense.

EH added that whilst the procedures and other management system items were regularly reviewed, there had not been a comprehensive review for some time and that she anticipated a number of improvements from the review. As an example, EH stated the management manual could be difficult to interpret given there is a Finance manual and FMC manual with overlap.

MS added that CG also expressed difficulty following the manual.

EH shared that it was also about future proofing so that if the management was to be handed over or new people onboarded, it would be a lot easier to understand and for the proponent and the FMC to be clear on their roles and responsibilities.

JMcL stated that it was good to commence it and to make the public aware and present information in a way that the public can understand.

	MS added it will be easier to follow as well. BO shared that he had read the whole Safety Case and Assessments. BO queried whether rehabilitation of any of the boreholes had occurred because at a site north of Coolgardie some old holes had been found and rain had gone in and washed them out and they got bigger and bigger. MS advised that bore cover plugs (octoplugs) were used, rather than try to fill them all in, as some of them are 40m deep. Once in place over the borehole the plugs were covered with soil. MS shared that not all the old holes had been checked however these would have been covered when the drilling was completed, back in 1995. MS shared that you can see the original drill lines in the geotech report and that some of the original lines were used when installing the later ground water monitoring bores. MS confirmed that the original boreholes that he regularly walks past when checking the monitoring wells appear to have been rehabilitated satisfactorily such that no subsidence is apparent. BO noted that the report mentioned telehandlers and training personnel using the equipment. MS noted that the telehandlers are provided as part of the contracting personnel for a disposal operation. BO commented that telehandling is a two minute crash course and there is nothing much on the certification on such a dangerous machine with so many blind spots. MS agreed with the blind spots with the extendable arm so it is like a forklift but it is a much bigger machine. He noted Tellus had one out on site yesterday to help load up the rubbish they had been contracted to clear from the site. MS advised that these machines are supervised when loading and unloading and drums pose less risk than a bulka bag. BO raised a concern with people running amuck with a forklift and asked if the people working on site get along. MS shared that there has only ever been one person removed from site and otherwise there hadn't been any real issue at any of the other disposal operations. EH noted the crew are unique to a disposal operation and they are not the same people who do the site inspections. BO thanked EH and MS for this information. JMcL queried if an IWDF management team representative is on site and that it is a given that any work has to be supervised by MS or a representative. MS confirmed he is on site while they are doing a waste disposal. Initially the location for the trench is determined, followed by the blast and lots of digging to get down to the clay and building the benches. MS confirmed he was always on site when the waste is going into the trench. JMcL noted she was more concerned with the littler jobs such as plumbing or tree slashing. MS responded that EH had sent MS out to make sure that the tank came down safely, rubbish removal was undertaken and shared that the contractors from Tellus were very professional, did a good job and had their own supervisor on site as well. EH confirmed there is always somebody on site for the IWDF operations, however for maintenance items it can be a representative from Aurora or Finance. JMcL said it should be Aurora as Finance are not experienced. EH responded that Finance travel to remote sites very frequently. MS added that staff all undertake training and it has been identified as a training exercise to go through the details of the site. He noted the slashing was not a problem given it was vegetation that was overhanging the road.	

EH confirmed that efforts are made to align maintenance activities for when MS is on site however it does not always work out that way.

MS noted it was important to undertake the maintenance activities to improve equipment, gate, access, lights and other things.

JMcL stated she will always dispute those lights at the gate as somebody who drives out in the bush at night.

MS responded that the lights don't shine in your eyes.

JMcL responded that they diffuse the light as we have them down at Widgiemooltha and it is hard to see the turning and everything as the light was diffused.

6) At the previous meeting EH had stated she would clarify the CAR because it had been stated in the minutes that no CAR had been raised.

EH advised that when the complaint was initially received there was preliminary information entered into the CAR form however before it was completed, it was discussed with the IWDF Management Team that as the complaint did not relate to the management system, it was determined that a CAR was not required.

JMcL said the letter responding to her complaints was dated 30 November but the management team did not meet until 5 December 2023.

EH advised that the IWDF management team meet monthly and speak regularly, generally at least once a week.

JMcL asked why it was not in the minutes for the 5 December 2023 meeting.

EH responded that as it had been determined the CAR was not required it was not addressed at the meeting. EH agreed it was unclear and that was why, for completeness and transparency, the CAR had been completed and signed at a later date, albeit the outcome of the CAR was that a CAR was not required to be raised, and that it will be captured in the December 2024 MRM minutes.

JMcL noted the first six complaints were about delivery and the seventh was about the management system itself and that you can't lump them all together.

EH asked JMcL what outcome she was seeking.

JMcL raised the concern that her complaint about there being no independent arbiter had not been addressed.

EH responded that the question had been answered and that the avenues to progress any further concerns would be through your local member or Minister and that Finance have always provided those opportunities.

MS commented that it was not considered the complaint required a CAR from the IWDF management team but consequently a discussion was held and it was decided to put it into the CAR and to capture this to attempt to close it out and that the letter responding was part of the overall response to the complaints.

JMcL said the letter doesn't really say anything. JMcL stated she thought the response might outline how if you were to go down this track again, what you might do better but your response does not say that but I thought the CAR would look at the situation and, I presume, address it.

EH advised that when complaints are received they go into the register and are considered and if a CAR does need to be raised it will be however there are also instances where a CAR is not required.

JMcL explained that a positive result or a positive action is what she expected from a CAR and that it is where things are addressed but the person who wrote the letter is not in the management team.

EH responded that Mark Bryden is the representative for the Minister for Works and has the delegated authority for the facility and is the decision-maker with respect to the IWDF.

	JMcL shared she has just noted that.	
6.0	**Management of the IWDF** **6.1 Site Monitoring Visit October 2024** **6.1.1 Site Monitoring** MS reported that the site monitoring visit was undertaken from 15 to 18 October 2024. There was a botanist on site coordinating the 10 yearly check and MS undertook the rehabilitation monitoring which involves assessing species and taking photographs from 3 defined points. MS shared that having the botanist on site allowed a check of the number of species identified and the botanist found just one or two additional species. MS noted that often when a cell is first covered there are a variety of species that will grow and as time progresses it becomes more of a monoculture. JMcL commended MS for this work. MS shared that his assessment of the average percentage of ground coverage was very close with the percentage of ground coverage estimated by the botanist, which was pleasing. MS shared that while on site the botanist pointed out a Tiger Orchid. RE noted these grow in gravel pits. MS outlined some of the maintenance activities for the site that had occurred, including replacement of the water purification system as the previous one had leaked and rusted. An additional fire extinguisher has been added near the generator. MS also noted the team utilised a Starlink unit which allowed MS to receive phone calls from the Tellus team to coordinate maintenance activities and access emails on site. The concrete plinths had all been replaced with stainless steel. **6.1.2 Groundwater Monitoring** MS reported that groundwater monitoring was conducted on 17 October 2024 and no groundwater was detected in any of the monitoring bores. **6.1.3 Rehabilitation Monitoring** MS advised the vegetation rehabilitation monitoring of the disturbed areas around the disposal cells was undertaken on the 17 October 2024. **6.1.4 Capping Monitoring** MS reported that capping monitoring was also undertaken on 17 October with no abnormalities detected. **6.2 Performance and Compliance Report 2023/24** EH reported that the 2023/24 PCR was published on the WA.gov.au website on 19 September 2024 and both the Department of Water and Environmental Regulation (DWER) and the Radiological Council (RC) were emailed the link on 19/9/2024. CLC members were emailed the link to the PCR on 3 October 2024. JMcL was provided a hard copy of the PCR at this meeting. EH advised that Finance are still coordinating the deposit at the State Library. MS queried if a response is received or if the report is just submitted. EH advised that DWER and RC do not provide a response and that when the submission is made it is to the link on the WA.gov.au website as the document is too large to send over email.	

6.3 IWDF Safety Assessments and Safety Case

MS reported that the safety case had been submitted some time ago. MS spoke with Duncan Surin (DS) and DS advised he had put some time aside to go through it and is hoping to be able to make a submission to the council meeting in February 2025.

EH commented that it will be great to get that signed off.

JMcL queried who Duncan is. MS advised DS is one of the senior people at the radiation health unit and noted that whilst there used to be many more staff at radiation health, staff numbers have been considerably reduced.

EH clarified some of the delays was due to the additional amendments required and noted members might recall that it has been submitted before and required some clarifications.

MS commented that this was the updated version and it includes more information on how the site was selected, how much work was done on it and now includes the data rather than just calculations. The document includes lots of appendices however these have been summarised in the document to make it easier. MS summarised that all the requests for clarification had been provided and that hopefully he will be advised once it does go to council.

6.4 IWDF Public Waste Inventory Database

MS reported that work on the IWDF Public Waste Inventory Database was still progressing with one disposal operation remaining (2008RT01). MS advised that trench 08 contains different materials from different origins so is taking longer to complete.

EH reported the database was at 63% completion at the end of October with just 60 deliveries to go now, having started with 204.

MS responded that Leanne Morton is working to have this completed before the end of November however will definitely have it done before Christmas.

EH reconfirmed that once the database is completed, Finance will relook at the wildcard search which is basically a different type of search feature and will develop a process where the public can access the information.

6.5 Training

EH advised that Site Induction Training occurred for four Finance staff and one Aurora Environmental (Aurora) staff member on 10 September 2024. The updated training register was provided to Finance on 17 September. EH noted this was the general site induction training.

MS advised he has completed a site induction for Ping, the radiation specialist Aurora has employed from Queensland. Ping was the Radiation Safety Officer (RSO) for the University of Queensland for all their departments so is very knowledgeable. MS shared that the existing RSO will continue to provide service for the IWDF as a process is required to change the RSO, but Aurora now have access to a radiation specialist to provide advice and the process will be that the RSO is able to provide sign off.

MS shared that if you are an RSO in any other state your registration is recognised in Western Australia however administratively this is not the case for QLD.

6.6 BMW0344919 Contract Extension

EH advised that Finance had undertaken a contract review of BMW0344919 - Environmental and Operational Management of the Mount Walton East Intractable Waste Disposal Facility (IWDF). This is the contract with Aurora Environmental which has now been extended for a further five years, with a new contract expiry of 11

	November 2029. EH commented that this is a good outcome and Finance continues to appreciate Aurora's work and collaboration in managing the site. MS shared that Finance could have gone one year at a time which is the set up but appreciate they have gone and exercised all five options at once. JMcL added that it provided certainty for the community as well and questioned if there were any more extensions. EH responded that it was the final extension. **6.7 Retention Schedule** EH advised, as per previous notifications to the CLC, that the record retention schedule will be reviewed in 2025 and the Department of Finance records team have engaged with the IWDF management team to review the existing schedule. EH shared there will be a meeting in the near future to discuss the appropriate record keeping approach for the public waste database once that becomes live. JMcL queried if their role was to review the appropriate record keeping for the site. EH explained that the schedule classifies documents related to the IWDF and describes their retention period and is in accordance with the *State Records Act 2000*. EH asked for any other questions on the IWDF. JMcL responded that she had questions which she will raise in general business. **6.8 Questions from Observers** There were no Observers.	
7.0	**Waste Disposals** **7.1 Waste Enquiries** MS advised there has been one new waste enquiry since the last CLC meeting which was for one drum, a small Caesium-137 source, and that MS had pointed the enquirer in the direction of Tellus. The enquirer had got back to MS and thanked him for this help and advised that Tellus had accepted the waste and the waste owner could dispose of it. MS advised that nothing else has been raised. **Waste Acceptance Applications** MS advised no new waste acceptance applications had been received by the FMC since the last CLC meeting. JMcL commented that there were certainly a lot sitting waiting. MS shared that the NORMS operation will be building up some drums. JMcL queried if there was enough to do a disposal operation. MS advised that people who wish to dispose of 1 or 10 drums at a time have the option of Tellus, which is what happened with the example earlier which had to be disposed of in a hurry. JMcL commented that it is a cost recovery basis and it is up to the waste owner to determine why they want to dispose of it. JMcL queried if there is a mix of chemical waste and radioactive waste just sitting. MS advised that the existing applications are for mostly just radioactive waste. Chemical waste usually only arises if there has been an accidental spill or more rarely, when there has been a scheduled clean-up. For example an accidental spill of DDT in toluene at	

	Wongan Hills many years ago, resulted in chemical contamination of the underlying soil. As a result the soil had to be removed and was then disposed of at the IWDF. JMcL thanked MS for this information. EH asked if there were any other questions. There we no questions.	
8.0	**Amended Ministerial Statement** **8.1 Overview of Ministerial Statement amendments** EH provided an overview of the amendments to Ministerial Statement 562. The Chair of the Environmental Protection Authority approved the Notice of amendment to implementation conditions approved under section 45C of the Environmental Protection Act 1986 on 20 October 2024. Finance was advised of the approval on 21 October 2024 by the Department of Water and Environmental Regulation. EH advised there was an internal process to go through before an updated agenda was able to be provided to the CLC notifying them the section 45C had been approved. EH advised the amendments were contained in the document provided with the updated agenda titled Attachment 1 to Ministerial Statement 562 (Attachment 1), noting the Ministerial Statement itself has not been updated. EH noted the amendments to the Ministerial Statement were difficult to ascertain from the Attachment 1 and so Finance had compiled and provided members with an additional table (attachment 2) to better highlight the changes that had occurred. EH provided the following summary of the amendments: 1. Update the proponent name from Waste Management WA to the Minister for Works c/- Department of Finance. The request to change the proponent name was made and EH reiterated that the Ministerial Statement does not change however this change is captured in Attachment 1. 2. Change the approval authority from the Environmental Protection Authority (EPA) to Department of Water and Environmental Regulation (DWER). EH added that this has been reflected throughout the Ministerial Statement and was best viewed in Attachment 2. 3. Removal of approval of transport operational procedures, prior to each disposal operation. EH added that given that transport is governed by legislation it was not necessary to have a separate approval however there have been additional conditions imposed to minimise the risks of waste transport and ensure third parties transporting waste have the appropriate approvals. 4. Removal of requirement to advertise operational procedures, prior to each disposal operation. JMcL asked who will determine if the operational procedures are appropriate. EH responded it would be the CEO of DWER and that DWER is the determining authority. JMcL stated that some written clarification, not just verbal, on how compliance would be assured, not just it is now over to DWER. EH responded that the compliance report is submitted to DWER and the CEO of DWER is responsible to review and advise Finance if they have any concerns. MS added that in the past the Department of Environmental Protection (DEP) was the regulator and the previous proponent was Waste Management WA a body corporate of	

	the DEP, as such there was a conflict of interest and therefore the Environmental Protection Authority (EPA) was made the approval authority for compliance. However as the proponent is now the Minister for Works, there is no longer a conflict and DWER (which subsumed the DEP) can appropriately regulate compliance with the Ministerial Statement. JMcL asked what to do if you have a problem with DWER. MS advised you would have to go to the Minister and that Finance just makes sure it is compliant with the requirements of the regulator. JMcL noted EH had addressed the amendments to Schedule 1 and was now moving on to Schedule 2. EH said she was happy to go through line by line and recognised that this is important so happy to take any questions. 5. Removal of requirement to advertise the performance and compliance report (PCR). EH advised Finance has and will continue to publish PCRs on its public IWDF web page. JMcL asked how the public will know it is available if you do not advertise. EH said she was happy to open it up to suggestions from the committee with respect to matters that are placed onto WA.gov.au, noting the offer had been made to utilise the socials from the Shire of Coolgardie to reach the public, and whether members felt strongly that it needed to be advertised in the paper as well. JMcL responded that when you put it on the website people are too busy and don't see it. She noted that by reading the Kalgoorlie Miner regularly, she was able to see the advertisements for the IWDF and she does not use the website. EH responded that if community members felt strongly that the PCR needed to appear in the paper for the time being, the request can be considered, noting the previous requirement to advertise the PCR was only following a disposal operation. MS commented that it could just go in the Kalgoorlie Miner and not the West. JMcL said it still need to be in the West. RE added that there is the option to distribute adverts to the regional newspapers as well. JMcL commented that the Ministerial Statement still required a number of items to be advertised. EH advised that although a number of commitments had already been achieved, the EPA advised they would not remove them as requested in the section 45C because they were a part of the Ministerial Statement requirements and needed to remain. EH added the requirements would have been ticked off by the EPA and the advertising requirement would have been completed back when the facility was just commencing. EH stated that Finance will provide an updated table that highlights the commitments which have been met through the process of establishing the IWDF some time ago so the ongoing commitments were clear. JMcL asked if this is why it is still RCWA because they are RC now but it was RCWA. MS responded that yes because that is what was in the original. MS added that in the PCR there is a note against commitments that have been approved. 6. Removal of requirement to publish location data of waste disposed of at the IWDF. EH added that the location would still be captured in the waste database, however it would not be made publicly available and the public would need to make a specific request to find out the location. JMcL stated if anybody wanted to find out the location they could anyway. EH advised that while we do not have control over the national register the issue was raised by the RC and should a member of the public or whoever else, want to access the location, they can seek to do so by making a case to the CEO of DWER, who has the right to	Finance to provide an updated table of changes to Ministerial Statement 562.

refuse the request. EH advised that as a regulatory body, Finance takes advice from the RC.

7. Removal of the requirement to maintain the CLC, and instead convene a community meeting once per year and each time there is a disposal operation.

EH noted that meetings may be combined where both events are scheduled to occur in close succession and it make sense to do so. Attendance and participation at these meetings will be open to all members of the public and not be limited by membership.

JMcL would like to dispute this because, questioning the phraseology that EH had used, removal of the requirement to maintain the CLC which is not what has been stated there, what has been stated there is how often the CLC meets.

EH responded that the requirement to have the CLC was provided through the action of this commitment and the topic was community liaison with the action being that the CLC has to exist. EH added that there is no other reference to the committee in the document so now that that has been removed the requirement is to have a community meeting annually.

JMcL disputed this and shared there are references to the CLC in other parts, for example in PC 3.7 reporting of the monitoring results to the CLC.

EH clarified that this commitment as well as others, for example 4.6, were already completed and approved by the EPA upon establishment of the facility. EH added that regardless of this, the monitoring results would continue to be reported at the community meeting.

JMcL said the CLC is further referred to in commitment 3.9.

EH responded that it is the way it is constructed and that these are commitments that have been achieved. MS confirmed they have been closed out and reported on.

JMcL asked about the management plan commitments. MS confirmed that they have also been completed and closed out.

JMcL referred to the IWDF community management plan which states a community liaison committee, containing members of the community is to meet and raise concerns, review important documents and provide input into operational decision making. JMcL stated the wording in the Ministerial Statement is not stating that the committee is terminated, adding that it was a commitment of the state government of Western Australia when the facility was established. JMcL confirmed her commitment to representing the community.

EH stated that the community would continue to be informed and furthermore, the meeting will not be limited by membership. JMcL responded that you may not get more there than you do here. JMcL queried how the community is going to be informed and how will she know about what needs to be reviewed and the management plans to which JMcL confirmed she has an abiding interest.

EH responded the PCR would continue to review compliance against the management plan and would be a source for the public to view the management plan requirements.

JMcL responded the PCR is the end result and does not provide the ability to have the input that we have currently as a committee. JMcL further stated that Finance was changing that ability for the CLC to have the opportunity to provide input into the operation of the facility.

EH responded that the facility is up and running, and whilst the CLC provided input into the initial development of the facility, it has been operational for many years and there have been minimal disposal operations. The annual meeting will be an opportunity for

	the community to be kept informed but the need for community input into the procedures and management plans is not foreseen going forward. JMcL said you have taken that away. EH responded that Finance remains committed to keeping the community informed and provided the example that even though it is not a requirement to make the PCR available to the public in non-disposal years, Finance does and will continue to make it available to the public as it provides a lot of information about the facility, measures compliance and provides deep insights into how it is managed. JMcL asked how she is going to know when to review it. MC added that at the last two meetings the Shire of Coolgardie have offered to print the document or even provide it at the Recreation Centre or Kambalada so people can read the document or go into the office in Kalgoorlie. JMcL responded that the Shire wouldn't let me take it away and I am not going to sit in the office for 3 days. MC responded that JMcL may have to pay the printing fee. MC added that Finance might print it off at the Kalgoorlie office. EH clarified that under the current DWER licence it must always be available by 30 September and due to that timeframe, you will know when it is available. JMcL asked why did you ask for the CLC to be removed as it was intrinsic for community input into the establishment. EH responded that the avenue for community engagement had not been removed and the ability to inform the community about site monitoring, waste enquiries and similar can be provided to the community at the annual meeting which is not limited by membership. JMcL requested three meetings a year to catch up with MS and catch up on the enquiries. EH shared that she failed to see what the outcome of that would be. JMcL responded that the public is better informed. EH responded not necessarily better informed, just more frequently informed. Adding that we are not going to agree on this. JMcL said she is raising on behalf of community members, nuclear power issues and submarine and solar and lithium batteries which are interactable wastes which probably didn't exist 40 years ago. EH shared that when we get those enquiries they will be reported on at the annual meeting. Reiterating that the point at which Finance gets involved is when waste owners contact us. RE gave thanks for the attachments. JMcL queried why Finance did not consider requesting the CLC convene a minimum of one meeting a year. EH sought clarity and JMcL explained minimum of one per year rather than annual. MC said that is the wording. JMcL said I am asking the question as it was convening a minimum of 4 and now I am asking the question why didn't you consider convening one meeting a year. EH clarified that the annual meeting will be one meeting a year. JMcL asked why couldn't you change CLC to one a year and keep the CLC. I want that answer. EH stated that the community meeting will be open to whole community and not limited to membership with the intention to provide opportunity for other community members to	

	be informed of the IWDF, adding that now the facility is established the input and degree of granular detail provided to the current CLC is not required moving forward. JMcL shared that she did try to find members and whether we will get more where we just sit there and you tell us what is going on rather than here where we can have quantifiable input into the facility remains to be seen. EH responded that she takes this point on board and agreed that we are yet to see how the community meeting will turn out and the attendance. However it is reasonable to say that people may be more interested given they do not have to commit to a committee with an EOI process to join, rather they can just turn up and do not require membership. JMcL said once upon a time we didn't have those forms. MC added that some of the reasons previous members have left is that they are comfortable with how the facility is being run and they can see everything is operating to spec and it is all out in the open with documents they can access. EH agreed that could be a possibility. JMcL shared that she disagreed as this was not the case with people she has known that have left. **8.2 Community Meeting** EH opened to the floor, asking members what information they have found valuable, what venue, what types of things should be presented, if this time of day works or if after work be more suitable, if Kalgoorlie would be more suitable as a venue noting the facility is within the Shire of Coolgardie. EH shared that she was thinking it would be good to hold the meeting at this time of year when there has been two site visits, the PCR has been completed and we could address these. EH requested those online and those in person to share what they think would be valued by the community. MC expressed that this time of year is a good time as you have that information from site visits, documents are available and where the meeting is held, the venue, will not be a gamechanger where you have it. MC added it will probably be trial and error and to put it out there and see what the interest is. MC made a suggestion that the venue could be changed, with one year in Kalgoorlie and one year in Coolgardie. EH shared that there would be an intention to get attendees to sign in and to ask how they found out about the meeting whether it was through the paper, the website and start collecting data about how the community are being notified about the facility. BO shared that he found a lot of people did not even know it exists and he happened upon it through searches on the internet. EH asked BO what he has found valuable about the CLC. BO responded that he had been buried in paperwork and had sat down and read through the safety case and wondered why water had gone from bore 4 to bore 5 and there is a lot of stuff in the safey case. BO shared that he was aware of some fauna that used to exist under the power cable that runs from Kambalda to Kalgoorlie however due to the 20m clearance required under the power cable this was removed. He shared that it is a crash course on lots of stuff he did not know before. EH summarised that it was the history of the site and the environmental management that was interesting for BO. BO advised that other issues have not yet arisen such as drill rigs on the back of trucks driving around uncontrolled at times. Driving through the bush and inadvertently driving through the IWDF site area.	

	MS commented that he was aware of people driving through the bush but there was not much that could be done about it. BO added that these people may have a GPS or they may not and that lots of people go crashing through the bush. BO further commented that whatever is being done at the IWDF will last for 150 to 200 years or more. MS shared that some of the original disposals generated a lot of community interest and he recalled having to walk past protesters to attend the meetings. JMcL shared that there was standing room only at those early meetings. People were not working 12 hour shifts continuously, not doing FIFO. You have not taken into account that the population of the shire was 6,500 and now there is just over 3,000 and it has dropped by 50% and people are running around and working too long and they just do not have the spare time. It is fortunate that BO can organise the roster to be able to be here but it is difficult for people. EH responded that she could recognise that. EH shared that Finance do not often receive enquiries from the community. BO added that is because they do not know about it. JMcL asked what Finance can do about that. EH stated that the internet is a powerful tool and that is what she continues to believe is the best way to disseminate information. BO shared that you can pick up lots of things on Google earth like a cricket pitch and cycle paths. RE agreed. EH advised that Finance are not actively promoting the activities of the IWDF as it was not a commercial operation, rather it provides a service which is available to waste owners if they require it. MS noted it would be great to go out and advertise however that is not the role of the IWDF and instead Tellus have the opportunity to do that as they are a private facility. BO shared he had spoken to a truck going up to Sandy Ridge and questioned why they would be burying railway sleepers in Sandy Ridge and noted there was another truck carrying items coming across from over east. MS responded that he would not be sure if that is what they were but that BHP had had a whole lot of sleepers with contamination and that may well be what is going out there. EH asked KW and KVK for input into the community meeting. No suggestions were made by those joining online. EH asked if there were any other comments on 8.2. JMcL said it has been a bad time as it is in the middle of exams, in the middle of year 11 and 12 exams and late notice in getting this in just 2 days and being in exams. I take this role on the CLC very seriously and give it my all and just wondering how I can retain the same commitment to what I think is a top world class facility that should be open to waste from all over Australia like Tellus and become the national repository. EH gave thanks to RE who had to depart early. JMcL wanted to know exactly when the committee agreed to changing the 4 meetings to 1 meeting and to know when the CLC had endorsed an annual meeting. EH responded that the committee hadn't endorsed an annual meeting but they had agreed to reduce from 4 meetings to 3 meetings. JMcL commented that it was written somewhere in the minutes that the CLC endorsed the change to one meeting a year. EH queried which minutes. JMcL responded she had seen it stated somewhere but that we have never endorsed one meeting a year. Adding that you are missing the point EH. EH responded that yes, I think I am, I don't recall saying the CLC has endorsed having one meeting a year. In July 2023 at the CLC meeting I know you raised concerns with	

	the s45C proposal but all other members present did not object and supported the proposal. JMcL responded that is not the same as endorsing it. EH added that she has received no other comments and would think that somebody else from the committee would have objected if they did not support the proposal. JMcL added no hard copy, no prior knowledge as it wasn't on the agenda, so how could we actually make any informed comment as to exactly what was being proposed. EH added that following the advice at the meeting, a table outlining the proposed changes was provided. JMcL shared she had written a submission and it is luckily in the PCR because it went to Finance, DWER the Minister and the local member but she had not received a response from anyone. EH clarified that the submission was not submitted to Finance it was submitted to DWER. JMcL said she received no response to anything in her submission. EH clarified that it was provided to DWER and provided at the CLC meeting and although EH had read it, Finance had not responded as it was not addressed to Finance. However Finance had responded to the complaints received by JMcL. JMcL said that providing the response had not addressed her complaints. JMcL asked when her recently submitted complaints to Finance should be addressed. EH stated she could raise them now. JMcL provided an overview of the two complaints. Complaint 1 – Draft changes to the Ministerial Statement have not been made available to the CLC. JMcL read out complaint 1. EH confirmed Finance has received the complaint. EH advised that no CAR will be raised as it is not a complaint against the management system. JMcL said this is a complaint about how Finance operates. EH responded that the complaint is about the submission of the S.45C and that CARs are raised for the IWDF management system. JMcL said MS is terrific and she has never had any issue as I know the quality of the work that they do so it is nothing about that it is about the other behind the scenes operations. JMcL said it is in the management system that the CLC will review important documents and provide input into operational decision making. EH said Finance will still engage with the community however input into operational decision making at that level is not required any more. JMcL asked who decided our input is not required. EH stated that input into emergency procedures, training, maintenance schedules etc are all matters that do not require community input and are typically required to adhere to industry standards or legislation. EH noted however, that the requirements and compliance are included in the PCR and this report is made publicly available to the community so that they can ask questions should they have any concerns. JMcL added the problem is the CLC had input and by doing what you are doing if there is any change or different outlook we are not having input into those. EH confirmed the complaint had been received and would be responded to in due course. Complaint 2 – Radioactive waste discussion JMcL read out Complaint 2. EH responded that the complaint had been received and would be responded to. JMcL added that because we have been trying since 2018 to change this to become the national waste repository and we have been stonewalled and we have done everything	

	that has been asked but they will still not justify or answer questions on that particular formal request by this committee. EH stated that Finance had responded to this many times. JMcL asked why the discussion on radioactive waste was outside the remit of the committee. EH outlined that when an enquiry is received, it will be responded to and as she said previously, she is happy to discuss how radioactive waste is determined to be appropriate for the IWDF however a broader discussion about Australia's radioactive waste and how it should be disposed of is not part of the remit of this committee. JMcL stated it would be good to know the waste streams so you know what can be disposed of. EH responded that it is class 5 material and we know what can be disposed of at the IWDF. JMcL said the waste shouldn't all be lumped into radioactive waste as there are other potential waste streams. EH stated that it is clear what waste can be accepted but MS could take the committee through this or the waste acceptance process. JMcL responded no we are fine I just want my comments noted. JMcL queried where parts of her DWER submission had been removed from the PCR. EH said there were letters that could not be published as they were not addressed to you and were correspondence with the State's Solicitors Office. MS confirmed that unfortunately that is the process. EH shared that Finance had been very accommodating in including the submission and should the public choose to read it, they will still be able to get a good understanding of JMcl's concerns. JMcL added not only my concerns it is the concerns of people out there in the community and I hear concerns from other people who are not in a position to join the committee or attend or observe. EH stated the comment would be recorded as stated by JMcL but she had not spoken to or been contacted by those individuals.	
9.0	**CLC Operations and Membership** **9.1 Acknowledgement and thank you** EH thanked all CLC members for their commitment and dedication over the years. Acknowledging that some had been members for a very long time and expressed appreciation for the dedication and time and effort member had put in to showing up to the meetings and on behalf of Finance expressed thanks. EH shared a hope that members do support the community meeting and suggested sharing it with neighbours and colleagues, and to please promote it as we do not want to hold it to an empty room. EH opened to the floor to statements from members. MC expressed on behalf of the community thanks to all staff past and present, for the valuable input from Leanne, Mark Shepherd and Mark Bryden and all those other people who have contributed. MC shared that he believes it has been informative and the community has had the opportunity to have input. MC reflected that a few years ago, all the shires, including Yilgarn and Menzies and the City of Kalgoorlie used to sit around the table. MC reiterated his earlier comment that the community is more comfortable with the operation. EH expressed thanks and opened to those online. KW expressed thanks.	

	EH thanked Yilgarn for their attendance at every meeting via Teams and expressed appreciation for that commitment. BO had no further comments but shared he was still studying hazardous waste and goods at the moment. JMcL asked what will happen to the minutes of this meeting. EH responded that they will be provided to the people present and members of the committee. JMcL asked about reviewing the MRM minutes. EH responded that they will be part of the PCR. JMcL asked if they can be gathered and provided at the end of the MRM. EH reiterated that they will be part of the PCR. JMcL explained that this committee goes through those minutes and most of the last meeting was MRM minutes and that it is keeping the community informed. She expressed concern that it would be 12 months or 6 months and there would have been two management review meetings that will have occurred. JMcL stated that due to her interest in the facility she would like to be able to obtain the minutes from the MRM meeting when they are available. EH responded that this question will be taken on notice. JMcL shared that the MRM minutes are an important part of the operation of the facility and that it keeps the community informed. EH responded that it is not likely that the minutes would continue to be provided straight after the meeting given that they are provided as part of the PCR which will allow any concerns to be raised at the community meeting. JMcL asked if the PCR will be available at the community meeting. EH responded that yes, it would be available given the community meeting will be in October or November. JMcL expressed concern as that is a busy time of the year and is in the middle of exams. MS asked when the exams will be done. JMcL shared that exams will be done next week and that she is in the midst of year 11 exams. EH suggested the community meeting be held at the end of November. JMcL stated that an MRM is in December which would be old news. MS clarified that there is an MRM in June and another in December. EH added that there will be the two site visits to report on as well. JMcL commented that if the meeting is trying to explain the wildcard access, documentation and other items it will be a lot of things happening at once in one meeting and people will get bored and walk away. JMcL reflected that the PCR feedback meeting took an hour plus the add on bits and it will be a huge agenda where attendees will be told a, b & c. EH responded that the IWDF management team have not yet sat down and had a look at what it will look like. However EH stated it is unlikely that the MRM minutes would be shared as a specific agenda item and feedback requested, instead the PCR would have already been published, any non-compliances would be highlighted and then the meeting would be opened to the floor for any questions from attendees. JMcL commented that this committee is good because you can ask more informed questions.	EH to provide response regarding MRM minutes Post meeting note: The MRM minutes will be available in the Performance and Compliance Report which is published on WA.gov.au by 30 September each year.

	EH reflected that as BO pointed out, as awareness of the facility grows there may be people who become more interested and expects that with an increase in awareness there will be more people asking questions. JMcL commented that she could not see how one session would be enough when we have four or three meetings of two hours currently which is six hours worth of discussion. EH responded that we are just going to have to see how it goes. JMcL requested another CLC meeting to work through the format of this new meeting and requested that this should be put in the minutes. EH responded that there would not be another CLC meeting.	
10.0	**General Business** EH opened the floor to any general business. JMcL expressed concern about Tellus appearing on the front page of the West Australian on 1 October 2024 with the headline 'Toxic dome is WA's Dirty Little Secret' as well as on the front page of the Kalgoorlie Miner on 4 October 2024 with the headline 'Toxic Waste Graveyard to Expand'. BO agreed with JMcL. MS commented that he had seen the West Australian article however did not see the Kalgoorlie Miner article. BO mentioned that he had seen the length of the lease granted to Tellus and wondered who it was going to. EH noted that the Sandy Ridge facility is subjected to the same Institutional Control Period (ICP) and requirements as the IWDF. EH advised that if somebody had concerns about Tellus you could contact them or contact the regulator. BO commented that mining companies abandoning projects is just a dirty trick the same as BHP burying uranium tailings. JMcL added that it was the same as Western Mining as she knows people who know exactly where it is buried out of Kambalda. BO shared that mine sites have to allow for rehabilitation of the site however many mine operators will just run away. BO provided an example of a mine site which got shut down in 2003 with materials sitting there just rusting away and while the site had security guards all the stuff was sitting there in plastic containers since 2003 and pouring into bunded areas around the storeyard. He explained that everything is just decaying and he can see the same thing happening with Sandy Ridge – they will get their money and run away and it will be somebody else's problem. He commented that there are other repositories and Mt Walton can take these products and is handling it well and it is very quiet but as mentioned previously there are reasons to keep quiet these days. EH commented that the IWDF is not a commercial operation and is not operating for profit. BO expressed that the IWDF handles some things that nobody else wants to. JMcL commented that it costs too much to run the committee but we are not making money on it and so when you bring it up as an excuse this is where I get frustrated as you say one thing and it is taken care of in another but you use that as a reason to close the committee down. JMcL made the suggestion that EH not stay the night when in town and that there are other options to minimise the cost and she does not think they have been explored thoroughly enough. EH responded that Finance is committed to engaging with the community it just looks a little bit different. EH shared that she appreciates that JMcL has a different view	

	however this is the path we are going down in the near future and we will continue to publish the PCR on an annual basis.	
11.0	**Meeting Close** EH asked if there was anything else anybody would like to raise. Members raised no further items for discussion. EH closed the meeting at 12:27 pm. EH expressed appreciation for all who attended and invited those present to join for a light lunch as a small token of appreciation.	

Post meeting note: An additional attachment (Attachment 3) has been included in these minutes for completeness. This attachment is the email containing the final minutes from the 8 November CLC Meeting circulated to all CLC members on 12 December 2024. The draft minutes were circulated to all CLC members on 22 November 2024 requesting any comments or changes are provided by 6 December 2024. Following this, the minutes have been finalised out of session.

Attachment 1 to Ministerial Statement 562

Notice of amendment to implementation conditions approved under section 45C of the *Environmental Protection Act 1986*

Proposal: **Intractable Waste Disposal Facility, Mt Walton East, Shire of Coolgardie**
Proponent: **Minister for Works C/- Department of Finance**

Pursuant to section 45C(1)(b) of the *Environmental Protection Act 1986*, the implementation conditions applying to the above proposal are changed in accordance with this Notice. I do not consider these changes to be a significant amendment to the conditions.

Darren Walsh
CHAIR
ENVIRONMENTAL PROTECTION AUTHORITY
For the Minister for Environment under Notice of Delegation under section 18 of the *Environmental Protection Act 1986*

Approval date: 20 October 2024

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1. Condition 2-1 is deleted and replaced with:

2-1 The proponent shall implement the environmental management commitments of 25 October 2000 as documented in Schedule 2 of this statement and amended from time-to-time in accordance with the *Environmental Protection Act 1986*.

2. Condition 3-3 is deleted and replaced with:

3-3 The proponent must notify the Chief Executive Officer, Department of Water and Environmental Regulation of any change of its name, physical address or postal address for the serving of notices or other correspondence within twenty-eight (28) days of such change. Where the proponent is a corporation or an association of persons, whether incorporated or not, the postal address is that of the principal place of business or of the principal office in the State.

3. Condition 5-1 is deleted and replaced with:

5-1 The proponent shall submit periodic Compliance Reports, in accordance with an audit program prepared in consultation between

the proponent and the Chief Executive Officer, Department of Water and Environmental Regulation.

4. Condition 5-2 is deleted and replaced with:

5-2 Unless otherwise specified, the Chief Executive Officer, Department of Water and Environmental Regulation is responsible for assessing compliance with the conditions, procedures and commitments contained in this statement and for issuing formal written advice that the requirements have been met.

5. Condition 5-3 is deleted.

6. Addition of Condition 6

Condition 6 below is added to the implementation condition of Statement 562:

6 Transportation

6-1 The proponent must ensure that all third-party carriers, in direct control of hazardous and intractable waste which is being transported to the facility have the appropriate permits or licences required under the relevant national and state legislation, regulation and codes of practice for the transportation and management of chemical waste and management of low-level radioactive waste.

6-2 Any hazardous and intractable waste being transported under the direct control of the proponent must be appropriately managed to ensure risks to human health and the environment from spills are minimised. This requirement shall be outlined in the relevant management plans required under the *Radiation Safety (Transport of Radioactive Substances) Regulations 2002* and *Dangerous Goods Safety (Road and Rail Transport of Non-explosives) Regulations 2007* as regulated by the Radiological Council of WA and Department of Energy, Mines, Industry Regulation and Safety.

7. The action for commitment 5.1 of condition 2 is deleted and replaced with:

(5.1) Prepare the Environmental, Radiation, Health and Safety Operational Procedures in accordance with the Operational Guidelines.

(The Operational Procedures will be the detailed working documents specific to each waste disposal operation).

8. Commitment 5.2 of condition 2 is deleted.

9. The action for commitment 5.3 of condition 2 is deleted and replaced with:

(5.3) Make the approved Operational Procedures required by commitments 5.1 publicly available.

10. The action for commitment 5.4 of condition 2 is deleted and replaced with:

(5.4) Implement the Operational Procedures required by commitment 5.1.

11. The action for commitment 6.2 of condition 2 is deleted and replaced with:

(6.2) Make the approved Performance and Compliance Report required by commitment 6.1 publicly available.

12. The action for commitment 7.3 of condition 2 is deleted and replaced with:

(7.3) Prepare a waste register data base to be maintained, updated and made publicly available. The locations of radioactive wastes will not be made publicly available unless requested by the Chief Executive Officer, Department of Water and Environmental Regulation.

13. The action for commitment 8 of condition 2 is deleted and replaced with:

A community meeting is to be convened annually and each time there is a disposal operation. These meetings can be combined where reasonable.

14. The action for commitment 12 of condition 2 is deleted and replaced with:

Implement the requirements of the Decommissioning and Rehabilitation Management Plan until the Chief Executive Officer, Department of Water and Environmental Regulation determines that decommissioning and/or rehabilitation is/are complete.

15. The text for all commitments of condition 2, except for commitments 5.4 and 12, in the "to requirements of" column of schedule 2 is deleted and replaced with:

Chief Executive Officer, Department of Water and Environmental Regulation

16. The text for commitment 5.4 of condition 2 in the "to requirements of" column in schedule 2 is deleted and replaced with:

Chief Executive Officer, Department of Water and Environmental Regulation (Should any incident occur during each particular waste disposal operation it is to be reported immediately to the Chief Executive Officer, Department of Water and Environmental Regulation)

17. The text for commitment 11 of condition 2 in the "measurement / compliance criteria" column in schedule 2 is deleted and replaced with:

Performance and Compliance Report

18. The text for commitment 12 of condition 2 in the "measurement / compliance criteria" column in schedule 2 is deleted and replaced with:

Determination by the Chief Executive Officer, Department of Water and Environmental Regulation that decommissioning and/or rehabilitation is/are complete.

ATTACHMENT 2 TO MINISTERIAL CONDITIONS AND PROPONENT COMMITMENTS FROM MINISTERIAL STATEMENT 562

COLOUR KEY

White	**Changes made**
Grey	**No change**
Dark grey	**Commitments have been satisfied and cleared by the EPA.**

No.	TOPIC	ACTION	OUTCOME
MC 1.1	**Implementation**	Subject to these conditions and procedures, the proponent shall implement the proposals as documented in schedule 1 of statement.	**NO CHANGE**
MC 1.2	**Implementation**	Where the proponent seeks to change any aspect of the proposals as documented in schedule 1 of this statement in any way that the Minister for the Environment determines, on advice of the Environmental Protection Authority, is substantial, the proponent shall refer the matter to the Environmental Protection Authority.	**NO CHANGE**
MC 1.3	**Implementation**	Where the proponent seeks to change any aspect of the proposals as documented in schedule 1 of this statement in any way that the Minister for the Environment determines, on advice of the Environmental Protection Authority, is not substantial, those changes may be effected.	**NO CHANGE**
MC 2.1	**Proponent Commitments**	~~The proponent shall implement the environmental management commitments of 25 October 2000, as documented in schedule 2 of this statement.~~ The proponent shall implement the environmental management commitments of 25 October 2000 as documented in Schedule 2 of this statement and amended from time-to-time in accordance with the Environmental Protection Act 1986.	**Condition 2-1 is deleted and replaced with:** 2-1 The proponent shall implement the environmental management commitments of 25 October 2000 as documented in Schedule 2 of this statement and amended from time-to-time in accordance with the Environmental Protection Act 1986.
MC 2.2	**Proponent Commitments**	The proponent shall implement subsequent environmental management commitments which the proponent makes as part of the fulfillment of conditions and procedures in this statement.	**NO CHANGE**
MC 3.1	**Proponent**	The proponent for the time being nominated by the Minister for the Environment under section 38(6) or (7) of the Environmental Protection Act 1986 is responsible for the implementation of the proposals until such time as the Minister for the Environment has exercised the Minister's power under section 38(7) of the Act to revoke the nomination of that proponent and nominate another person in respect of the proposals.	**NO CHANGE**
MC 3.2	**Proponent**	Any request for the exercise of that power of the Minister referred to in conditions 3.1 shall be accompanied by a copy of this statement endorsed with an undertaking by the proposed replacement proponent to carry out the proposals in accordance with the conditions and procedures set out in the statement.	**NO CHANGE**
MC 3.3	**Proponent**	~~The proponent shall notify the Environmental Protection Authority of any change of proponent contact name and address within 30 days of such change.~~ The proponent must notify the Chief Executive Officer, Department of Water and Environmental Regulation of any change of its name, physical address or postal address for the serving of notices or other correspondence within twenty-eight (28) days of such change. Where the proponent is a corporation or an association of persons, whether incorporated or not, the postal address is that of the principal place of business or of the principal office in the State.	**Condition 3-3 is deleted and replaced with:** 3-3 The proponent must notify the Chief Executive Officer, Department of Water and Environmental Regulation of any change of its name, physical address or postal address for the serving of notices or other correspondence within twenty-eight (28) days of such change. Where the proponent is a corporation or an association of persons, whether incorporated or not, the postal address is that of the principal place of business or of the principal office in the State.
MC 4.1	**Commencement**	The proponent shall provide evidence to the Minister for the Environment within five years of the date of this statement that the proposals have been substantially commenced.	**Commitment has been satisfied and cleared by the EPA.** Cleared by EPA 23 April 2002 and 22 May 2002 Progress and Compliance Report 2001-2002
MC 4.2	**Commencement**	Where the proposals have not been substantially commenced within five years of the date of this statement, the approvals to implement the proposals as granted in this statement shall lapse and be void. The Minister for the Environment will determine any question as to whether the proposals have been substantially commenced.	**Commitment not applicable as 4.1 was met.** Not applicable – Refer MC 4.1

No.	TOPIC	ACTION	OUTCOME
MC 4.3	**Commencement**	The proponent shall make application to the Minister for the Environment for any extension of approval for the substantial commencement of the proposals beyond five years from the date of this statement at least six months prior to the expiration of the five year period referred to in conditions 4.1 and 4.2.	**Commitment not applicable as 4.1 was met.** Not applicable – Refer MC 4.1
MC 4.4	**Commencement**	Where the proponent demonstrates to the requirements of the Minister for the Environment on advice of the Environmental Protection Authority that the environmental parameters of the proposals have not changed significantly, then the Minister may grant an extension not exceeding five years for the substantial commencement of the proposals.	**Commitment not applicable as 4.1 was met.** Not applicable – Refer MC 4.1
MC 5.1	**Compliance Auditing**	~~The proponent shall submit periodic Compliance Reports, in accordance with an audit program prepared in consultation between the proponent and the Environmental Protection Authority.~~ The proponent shall submit periodic Compliance Reports, in accordance with an audit program prepared in consultation between the proponent and the Chief Executive Officer, Department of Water and Environmental Regulation.	**Condition 5-1 is deleted and replaced with:** 5-1 The proponent shall submit periodic Compliance Reports, in accordance with an audit program prepared in consultation between the proponent and the Chief Executive Officer, Department of Water and Environmental Regulation.
MC 5.2	**Compliance Auditing**	~~Unless otherwise specified, the Environmental Protection Authority is responsible for assessing compliance with the conditions, procedures and commitments contained in this statement and for issuing formal written advice that the requirements have been met.~~ Unless otherwise specified, the Chief Executive Officer, Department of Water and Environmental Regulation is responsible for assessing compliance with the conditions, procedures and commitments contained in this statement and for issuing formal written advice that the requirements have been met.	**Condition 5-2 is deleted and replaced with:** 5-2 Unless otherwise specified, the Chief Executive Officer, Department of Water and Environmental Regulation is responsible for assessing compliance with the conditions, procedures and commitments contained in this statement and for issuing formal written advice that the requirements have been met.
~~MC 5.3~~	~~**Compliance Auditing**~~	~~Where compliance with any condition, procedure or commitment is in dispute the matter will be determined by the Minister for the Environment.~~	**Condition 5-3 is deleted.**
MC 6.1	**Transport**	The proponent must ensure that all third-party carriers, in direct control of hazardous and intractable waste which is being transported to the facility have the appropriate permits or licences required under the relevant national and state legislation, regulation and codes of practice for the transportation and management of chemical waste and management of low-level radioactive waste.	**Condition 6.1 and 6.2 are new**
MC 6.2	**Transport**	Any hazardous and intractable waste being transported under the direct control of the proponent must be appropriately managed to ensure risks to human health and the environment from spills are minimised. This requirement shall be outlined in the relevant management plans required under the *Radiation Safety (Transport of Radioactive Substances) Regulations 2002* and *Dangerous Goods Safety (Road and Rail Transport of Non-explosives) Regulations 2007* as regulated by the Radiological Council of WA and Department of Energy, Mines, Industry Regulation and Safety.	

No.	TOPIC	ACTION	OBJECTIVES	TIMING	TO REQUIREMENTS OF	ADVICE	MEASUREMENT/ COMPLIANCE CRITERIA	OUTCOME
PC 1.1	**Environmental Management System**	Demonstrate that there is in place an Environmental Management System that includes the following elements: (a) an environmental, health and safety policy and corporate commitment to it; (b) mechanisms and processes to ensure: • Planning to meet environmental, health and safety requirements; • Implementation and operation of actions to meet environmental, health and safety requirements; • Measurement and evaluation of environmental, health and safety performance; and (c) review and improvements of environmental, health and safety outcomes.	To effectively and comprehensively manage all matters relating to environmental protection and to fulfil the requirements of the conditions, procedures and commitments for the proposal.	Prior to the next disposal operation.	EPA		Completed Environmental Management System	**Commitment has been satisfied and cleared by the EPA.** Cleared – EMS approved by the EPA 24 April 2002.
PC 1.2	Environmental Management System	Implement the Environmental Management System required by commitment 1.1.	To effectively and comprehensively manage all matters relating to environmental protection and to fulfil the requirements of the conditions, procedures and commitments for the proposal.	Prior to the next disposal operation.	~~EPA~~ Chief Executive Officer, Department of Water and Environmental Regulation		PCR	**The text for all commitments of condition 2, except for commitments 5.4 and 12, in the "to requirements of" column of schedule 2 is deleted and replaced with:** Chief Executive Officer, Department of Water and Environmental Regulation
PC 2.1	**Environmental Management Program**	Prepare an Environmental Management Program.	To include but not be limited to the following: • environmental management plans (see commitment 3); and • operational guidelines (see commitment 4).	Prior to the next disposal operation.	EPA		Approved Environmental Management Program	**Commitment has been satisfied and cleared by the EPA.** Cleared – EMP was approved by the EPA 24 April 2002
PC 2.2	**Environmental Management Program**	Advertise and make the approved Environmental Management Program required by commitment 2.1 publicly available.	To inform the community.	Prior to the next disposal operation.	EPA		PCR	**Commitment has been satisfied and cleared by the EPA.** Cleared – 24 April 2002
PC 2.3	**Environmental Management Program**	Implement the Environmental Management Program required by commitment 2.1.	To ensure that requirements specified in the approved Environmental Management Program are adhered to.	During all disposal operations.	~~EPA~~ Chief Executive Officer, Department of Water and Environmental Regulation		PCR	**The text for all commitments of condition 2, except for commitments 5.4 and 12, in the "to requirements of" column of schedule 2 is deleted and replaced with:** Chief Executive Officer, Department of Water and Environmental Regulation

No.	TOPIC	ACTION	OBJECTIVES	TIMING	TO REQUIREMENTS OF	ADVICE	MEASUREMENT/ COMPLIANCE CRITERIA	OUTCOME
PC 3.1	**Environmental Management Plans - Flora and Fauna**	Prepare a Flora and Fauna Management Plan.	To ensure that the abundance, species diversity, geographic distribution and productivity of vegetation communities and terrestrial fauna are maintained by monitoring against existing baseline survey data.	Prior to the next disposal operation.	EPA		Approved Environmental Management Plan	**Commitment has been satisfied and cleared by the EPA.** **Cleared** – by EPA 24 April 2002
PC 3.2	**Transport Management Plan**	Prepare a Transport Management Plan that describes the general principles of managing the transportation of wastes to the Intractable Waste Disposal Facility. The plan will include but not be limited to: • emergency preparedness; • contractor; responsibilities; • procedures; • communications; and • emergency response recovery.	To ensure that risk to the community, waste owners, contractors, employees, personnel and members of the emergency response services, property and the environment is minimised.	Prior to the next disposal operation.	EPA		Approved Environmental Management Plan	**Commitment has been satisfied and cleared by the EPA.** **Cleared** – by EPA 24 April 2002
PC 3.3	**Water Management Plan**	Prepare a Water Management Plan.	To detail procedures and strategies to monitor: • for the presence of groundwater and if groundwater is present, groundwater will be analysed to determine whether it has been contaminated by leachate from disposed waste; and • surface water to ensure that if surface water is likely to run off the site it will be analysed to determine whether it has been contaminated if there has been a spillage of waste. • If contamination has occurred, a contingency plan that forms part of the Water Management Plan will be implemented.	Prior to the next disposal operation.	EPA		Approved Environmental Management Plan	**Commitment has been satisfied and cleared by the EPA.** **Cleared** – by EPA 24 April 2002

No.	TOPIC	ACTION	OBJECTIVES	TIMING	TO REQUIREMENTS OF	ADVICE	MEASUREMENT/ COMPLIANCE CRITERIA	OUTCOME
PC 3.4	**Emergency Response Management Plan**	Prepare an Emergency Response Management Plan.	To ensure that in the case of an incident at the Intractable Waste Disposal Facility: • all practicable measures are taken to ensure the welfare and amenity of the community; and • the environment is not adversely affected.	Prior to the next disposal operation.	EPA		Approved Environmental Management Plan	**Commitment has been satisfied and cleared by the EPA.** **Cleared** – by EPA 24 April 2002
PC 3.5	**Health and Safety Management Plan**	Prepare a Health and Safety Management Plan. The plan will include but not be limited to: • procedures for training; and • procedures for monitoring.	To ensure that all practicable measures are taken to safeguard the welfare and amenity of personnel and the community at the Intractable Waste Disposal Facility.	Prior to the next disposal operation.	EPA		Approved Environmental Management Plan	**Commitment has been satisfied and cleared by the EPA.** **Cleared** – by EPA 24 April 2002
PC 3.6	**Air Quality Management Plan**	Prepare an Air Quality Management Plan.	To detail monitoring procedures and strategies to suppress dust and odour adequately to ensure that dust and odour emissions do not adversely affect the environment, or health, welfare and amenity of personnel at the Intractable Waste Disposal Facility.	Prior to the next disposal operation.	EPA		Approved Environmental Management Plan	**Commitment has been satisfied and cleared by the EPA.** **Cleared** – by EPA 24 April 2002
PC 3.7	**Radiation Management Plan**	Prepare a Radiation Management Plan which will include but not be limited to: • environmental radiation monitoring; • periodic reporting to the Environmental Protection Authority and Radiological Council (Western Australia); • procedures for compliance with the Code of Practice for the Near-surface Disposal of Radioactive Waste in Australia (1992); • personnel radiation monitoring; and • reporting of the monitoring results to the Community Liaison Committee.	To detail procedures and strategies to ensure that risk of exposure to radiation is kept within public health standards and as low as reasonably achievable for the community, waste owners, contractors, employees, personnel and members of emergency response services, and the environment.	Prior to the next disposal operation.	EPA	RCWA	Approved Environmental Management Plan	**Commitment has been satisfied and cleared by the EPA.** **Cleared** – by EPA 24 April 2002

No.	TOPIC	ACTION	OBJECTIVES	TIMING	TO REQUIREMENTS OF	ADVICE	MEASUREMENT/ COMPLIANCE CRITERIA	OUTCOME
PC 3.8	**Decommissioning and Rehabilitation Management Plan**	Prepare a Decommissioning and Rehabilitation Management Plan to include but not be limited to: • removal or, if appropriate, retention of infrastructure; • rehabilitation of all disturbed areas to a standard suitable for agreed future land use/s; and • identification of disposal areas, including provision of evidence of notification to relevant statutory authorities.	To ensure that the proposal is decommissioned and rehabilitated to a standard suitable for the future landuse/s.	At least six months before decommissioning	Chief Executive Officer, Department of Water and Environmental Regulation	RCWA	Approved Environmental Management Plan	**The text for all commitments of condition 2, except for commitments 5.4 and 12, in the "to requirements of" column of schedule 2 is deleted and replaced with:** Chief Executive Officer, Department of Water and Environmental Regulation
PC 3.9	**Environmental Management Plans**	Make the draft Environmental Management Plans required by commitment 3.1 to 3.8 available for a four week limited stakeholder review to the: • IWDF Community Liaison Committee; • The Chamber of Minerals and Energy of Western Australia; and • Chamber of Commerce and Industry of Western Australia; prior to the EPA finalising its consideration of the Plans.	To obtain stakeholder input to the Environmental Management Plans.	Prior to the next disposal operation. (Note: commitment 3.8 requires stakeholder review at least 6 months prior to decommissioning.)	EPA		Approved Environmental Management Plan	**Commitment has been satisfied and cleared by the EPA.** Cleared – by EPA 24 April 2002
PC 3.10	**Environmental Management Plans**	Advertise and make the approved Environmental Management Plans required by commitments 3.1 to 3.8 publicly available.	To inform the community.	Prior to the next disposal operation. (Note: commitment 3.8 requires advertising and making publicly available at least 6 months prior to decommissioning.)	EPA		PCR	**Commitment has been satisfied and cleared by the EPA.** Cleared – by EPA 24 April 2002
PC 3.11	**Environmental Management Plans**	Implement the Environmental Management Plans required by commitments 3.1 to 3.8.	To ensure that requirements specified in the approved Environmental Management Plans are adhered to.	During each disposal operation. (Note: commitment 3.8 requires implementation at least 6 months prior to decommissioning.)	~~EPA~~ Chief Executive Officer, Department of Water and Environmental Regulation		PCR	**The text for all commitments of condition 2, except for commitments 5.4 and 12, in the "to requirements of" column of schedule 2 is deleted and replaced with:** Chief Executive Officer, Department of Water and Environmental Regulation
PC 4.1	**Operational Guidelines - Waste Acceptance**	Prepare the Waste Acceptance Operational Guidelines.	All relevant Operational Guidelines are to be used as a guide to the proponent for the preparation of the Operational Procedures for each particular disposal operation (see commitments 5.1 and 5.2). The Operational Guidelines give guidance	Prior to the next disposal operation.	EPA		Approved Operational Guidelines	**Commitment has been satisfied and cleared by the EPA.** **Cleared** – by EPA 24 April 2002

No.	TOPIC	ACTION	OBJECTIVES	TIMING	TO REQUIREMENTS OF	ADVICE	MEASUREMENT/ COMPLIANCE CRITERIA	OUTCOME
PC 4.2	**Environmental**	Prepare the Environmental Operational Guidelines.	to the proponent on the means for achieving environmental outcomes required by a particular waste disposal operation.	Prior to the next disposal operation.	EPA		Approved Operational Guidelines	**Commitment has been satisfied and cleared by the EPA.** **Cleared** – by EPA 24 April 2002
PC 4.3	**Safety /Emergency Response**	Prepare the Safety/Emergency Response Operational Guidelines.		Prior to the next disposal operation.	EPA		Approved Operational Guidelines	**Commitment has been satisfied and cleared by the EPA.** **Cleared** – by EPA 24 April 2002
PC 4.4	**Transport**	Prepare the Transport Operational Guidelines.		Prior to the next disposal operation.	EPA		Approved Operational Guidelines	**Commitment has been satisfied and cleared by the EPA.** **Cleared** – by EPA 24 April 2002
PC 4.5	**Radiation**	Prepare the Radiation Operational Guidelines.		Prior to the next disposal operation.	EPA		Approved Operational Guidelines	**Commitment has been satisfied and cleared by the EPA.** **Cleared** – by EPA 24 April 2002
PC 4.6	**Operational Guidelines**	Make the draft Operational Guidelines required by commitments 4.1 to 4.5 available for a four week limited stakeholder review to the: • IWDF Community Liaison Committee; • The Chamber of Minerals and Energy of Western Australia; and • Chamber of Commerce and Industry of Western Australia; prior to the Environmental Protection Authority finalising its consideration of the Plan.	To obtain stakeholder input to the Operational Guidelines.	Prior to next disposal operation.	EPA	RCWA	Approved Operational Guidelines	**Commitment has been satisfied and cleared by the EPA.** **Cleared** – by EPA 24 April 2002
PC 4.7	**Operational Guidelines**	Advertise and make the approved Operational Guidelines required by commitments 4.1 to 4.5 publicly available.	To inform the community.	Prior to next disposal operation.	EPA		PCR	**Commitment has been satisfied and cleared by the EPA.** **Cleared** – by EPA 24 April 2002
PC 4.8	**Operational Guidelines**	Implement the Operational Guidelines required by commitments 4.1 to 4.5.	To ensure that requirements specified in the approved Operational Guidelines are adhered to.	Prior to next disposal operation.	~~EPA~~ Chief Executive Officer, Department of Water and Environmental Regulation		PCR	**The text for all commitments of condition 2, except for commitments 5.4 and 12, in the "to requirements of" column of schedule 2 is deleted and replaced with:** Chief Executive Officer, Department of Water and Environmental Regulation

No.	TOPIC	ACTION	OBJECTIVES	TIMING	TO REQUIREMENTS OF	ADVICE	MEASUREMENT/ COMPLIANCE CRITERIA	OUTCOME
PC 5.1	**Operational Procedures - Environmental, Radiation, Health & Safety**	~~Prepare the Environmental, Radiation, Health and Safety Operational Procedures in accordance with the Operational Guidelines~~. Prepare the Environmental, Radiation, Health and Safety Operational Procedures in accordance with the Operational Guidelines. (The Operational Procedures will be the detailed working documents specific to each waste disposal operation).	To ensure that risk to the community, waste owners, contractors, employees, personnel and members of the emergency response services, and the environment is minimised.	Prior to each disposal operation.	~~EPA~~ Chief Executive Officer, Department of Water and Environmental Regulation	RCWA	Approved Operational Procedures	**The action for commitment 5.1 of condition 2 is deleted and replaced with**: (5.1) Prepare the Environmental, Radiation, Health and Safety Operational Procedures in accordance with the Operational Guidelines. (The Operational Procedures will be the detailed working documents specific to each waste disposal operation). **The text for all commitments of condition 2, except for commitments 5.4 and 12, in the "to requirements of" column of schedule 2 is deleted and replaced with:** Chief Executive Officer, Department of Water and Environmental Regulation
~~PC 5.2~~	~~**Transport**~~	~~Prepare the Transport Operational Procedures in accordance with the Operational Guidelines to include but not limited to:~~ ~~• details of waste loading and transport activities, and emergency response training for personnel;~~ ~~• identification of responsibility for the various aspects of transport, loading and unloading operations;~~ ~~• contingency plans for dealing with fire safety, accidents, spillages, vehicle breakdowns and other incidents should they occur; and~~ ~~• the procedure for liaison with the local community and emergency services.~~	~~To achieve environmental outcomes required by the Environmental Management disposal operation Program in the conduct of a particular waste disposal operation (see commitment 2).~~	~~Prior to each disposal operation.~~	~~EPA~~		~~Approved Operational Procedures~~	**Commitment 5.2 of condition 2 is deleted.**

No.	TOPIC	ACTION	OBJECTIVES	TIMING	TO REQUIREMENTS OF	ADVICE	MEASUREMENT/ COMPLIANCE CRITERIA	OUTCOME
PC 5.3	**Operational Procedures**	~~Advertise and make the approved Operational Procedures required by commitments 5.1 and 5.2 publicly available.~~ Make the approved Operational Procedures required by commitments 5.1 publicly available.	To inform the community.	Prior to each disposal operation.	~~EPA~~ Chief Executive Officer, Department of Water and Environmental Regulation		PCR	**The action for commitment 5.3 of condition 2 is deleted and replaced with:** (5.3) Make the approved Operational Procedures required by commitments 5.1 publicly available. **The text for all commitments of condition 2, except for commitments 5.4 and 12, in the "to requirements of" column of schedule 2 is deleted and replaced with:** Chief Executive Officer, Department of Water and Environmental Regulation
PC 5.4	**Operational Procedures**	~~Implement the Operational Procedures required by commitments 5.1 to 5.2.~~ Implement the Operational Procedures required by commitment 5.1.	To minimise the possibility of a waste disposal operation adversely affecting the environment.	During each particular waste disposal operation.	~~EPA (Should any incident occur during each particular waste disposal operation it is to be reported immediately to the EPA)~~ Chief Executive Officer, Department of Water and Environmental Regulation (Should any incident occur during each particular waste disposal operation it is to be reported immediately to the Chief Executive Officer, Department of Water and Environmental Regulation)		PCR	**The action for commitment 5.4 of condition 2 is deleted and replaced with:** (5.4) Implement the Operational Procedures required by commitment 5.1. **The text for commitment 5.4 of condition 2 in the "to requirements of" column in schedule 2 is deleted and replaced with:** Chief Executive Officer, Department of Water and Environmental Regulation (Should any incident occur during each particular waste disposal operation it is to be reported immediately to the Chief Executive Officer, Department of Water and Environmental Regulation)

No.	TOPIC	ACTION	OBJECTIVES	TIMING	TO REQUIREMENTS OF	ADVICE	MEASUREMENT/ COMPLIANCE CRITERIA	OUTCOME
PC 6.1	**Performance and Compliance Report**	Prepare the Performance and Compliance Report at the conclusion of each waste disposal operation.	To outline the project outcomes and the environmental monitoring, and discuss adverse environmental impacts, if any and how these environmental impacts have been or will be managed. The process will provide feedback for continuous improvement to the Environmental Management Program.	Within three months following completion of each specific waste disposal operation.	~~EPA~~ Chief Executive Officer, Department of Water and Environmental Regulation	RCWA in relation to radiation issues	Approved PCR	**The text for all commitments of condition 2, except for commitments 5.4 and 12, in the "to requirements of" column of schedule 2 is deleted and replaced with:** Chief Executive Officer, Department of Water and Environmental Regulation
PC 6.2	**Performance and Compliance Report**	~~Advertise and make the approved Performance and Compliance Report required by commitment 6.1 publicly available.~~ Make the approved Performance and Compliance Report required by commitment 6.1 publicly available.	To inform the public.	Within 4 weeks of obtaining approval for the PCR.	~~EPA~~ Chief Executive Officer, Department of Water and Environmental Regulation		Advertisement of approved PCR	**The action for commitment 6.2 of condition 2 is deleted and replaced with:** (6.2) Make the approved Performance and Compliance Report required by commitment 6.1 publicly available. **The text for all commitments of condition 2, except for commitments 5.4 and 12, in the "to requirements of" column of schedule 2 is deleted and replaced with:** Chief Executive Officer, Department of Water and Environmental Regulation
PC 7.1	**Waste**	Limit disposal of waste at the Intractable Waste Disposal Facility to waste generated in Western Australia (see commitment 4.1).	To comply with State Government requirements.	Prior to each disposal operation.	~~EPA~~ Chief Executive Officer, Department of Water and Environmental Regulation		Environmental, Radiation, Health and Safety Operational Procedures	**The text for all commitments of condition 2, except for commitments 5.4 and 12, in the "to requirements of" column of schedule 2 is deleted and replaced with:** Chief Executive Officer, Department of Water and Environmental Regulation
PC 7.2	**Waste**	Ensure that approval to dispose of any specific waste is conditional on a review of currently practicably available waste treatment; disposal or management alternatives in Australia (see commitment 4.1).	To ensure that only wastes for which there is no currently practicably available destruction, disposal or management technologies in Australia are disposed of at the site and to maintain the site as a facility of last resort.	Prior to each disposal operation.	~~EPA~~ Chief Executive Officer, Department of Water and Environmental Regulation		Environmental, Radiation, Health and Safety Operational Procedures	**The text for all commitments of condition 2, except for commitments 5.4 and 12, in the "to requirements of" column of schedule 2 is deleted and replaced with:** Chief Executive Officer, Department of Water and Environmental Regulation

No.	TOPIC	ACTION	OBJECTIVES	TIMING	TO REQUIREMENTS OF	ADVICE	MEASUREMENT/ COMPLIANCE CRITERIA	OUTCOME
PC 7.3	**Waste**	~~Prepare a waste register data base to be maintained, updated and made publicly available at the office of the proponent or on the World Wide Web.~~ Prepare a waste register data base to be maintained, updated and made publicly available. The locations of radioactive wastes will not be made publicly available unless requested by the Chief Executive Officer, Department of Water and Environmental Regulation.	To show the method of disposal, source, type, quantity and location of all waste disposed of at the Intractable Waste Disposal Facility to enable future land users to take account of the deposited wastes and protect future users from adverse impacts on health and amenity.	Prepare the waste register data base within six months of the issuing of the Minister's Statement that the proposal may be implemented and update the register within three months of completion of each disposal operation.	~~EPA~~ Chief Executive Officer, Department of Water and Environmental Regulation		PCR	**The action for commitment 7.3 of condition 2 is deleted and replaced with:** (7.3) Prepare a waste register data base to be maintained, updated and made publicly available. The locations of radioactive wastes will not be made publicly available unless requested by the Chief Executive Officer, Department of Water and Environmental Regulation. **The text for all commitments of condition 2, except for commitments 5.4 and 12, in the "to requirements of" column of schedule 2 is deleted and replaced with:** Chief Executive Officer, Department of Water and Environmental Regulation
PC 8	**Community Liaison**	~~Convening a minimum of four meetings a year of the Community Liaison Committee.~~ A community meeting is to be convened annually and each time there is a disposal operation. These meetings can be combined where reasonable.	To ensure that the community remains informed of activities at the Intractable Waste Disposal Facility.	Following the Minister's Statement that the proposal may be implemented.	~~EPA~~ Chief Executive Officer, Department of Water and Environmental Regulation		PCR	**The action for commitment 8 of condition 2 is deleted and replaced with:** A community meeting is to be convened annually and each time there is a disposal operation. These meetings can be combined where reasonable. **The text for all commitments of condition 2, except for commitments 5.4 and 12, in the "to requirements of" column of schedule 2 is deleted and replaced with:** Chief Executive Officer, Department of Water and Environmental Regulation
PC 9	**Fencing and Signposting**	Fence and signpost each discrete disposal cell.	To discourage access by: • fauna; • unauthorised personnel; and • the public.	Prior to demobilisation of each waste disposal operation following the Minister's Statement that the proposal may be implemented.	~~EPA~~ Chief Executive Officer, Department of Water and Environmental Regulation		PCR	**The text for all commitments of condition 2, except for commitments 5.4 and 12, in the "to requirements of" column of schedule 2 is deleted and replaced with:** Chief Executive Officer, Department of Water and Environmental Regulation

No.	TOPIC	ACTION	OBJECTIVES	TIMING	TO REQUIREMENTS OF	ADVICE	MEASUREMENT/ COMPLIANCE CRITERIA	OUTCOME
PC 10	**Water**	Demonstrate that there are at least 5 metres of clay between the base of any disposal cell and bedrock.	To allow for the possible establishment of a groundwater table in the future without impinging upon the disposal cells.	Prior to each disposal operation.	~~EPA~~ Chief Executive Officer, Department of Water and Environmental Regulation		PCR	**The text for all commitments of condition 2, except for commitments 5.4 and 12, in the "to requirements of" column of schedule 2 is deleted and replaced with:** Chief Executive Officer, Department of Water and Environmental Regulation
PC 11	**Transport and Packaging**	Where transport and packaging is to be undertaken by a party other than the proponent, the proponent will ensure that the packaging and transport requirements specified in the Operational Transport Guidelines and Waste Acceptance Guidelines are adhered to through the use of contracts and other controls as necessary (see commitments 4.1 and 4.4).	To ensure that risk to the community, waste owners, contractors, employees, personnel and members of the emergency response services, property and the environment is minimised.	Prior to the commencement of transportation activities during each disposal operation.	~~EPA~~ Chief Executive Officer, Department of Water and Environmental Regulation		~~Approved Operational Transport Procedures~~ Performance and Compliance Report	**The text for commitment 11 of condition 2 in the "measurement / compliance criteria" column in schedule 2 is deleted and replaced with:** Performance and Compliance Report **The text for all commitments of condition 2, except for commitments 5.4 and 12, in the "to requirements of" column of schedule 2 is deleted and replaced with:** Chief Executive Officer, Department of Water and Environmental Regulation
PC 12	**Decommissioning and Rehabilitation**	~~Implement the requirements of the Decommissioning and Rehabilitation Management Plan until the Minister for the Environment determines that decommissioning and/or rehabilitation is/are complete.~~ Implement the requirements of the Decommissioning and Rehabilitation Management Plan until the Chief Executive Officer, Department of Water and Environmental Regulation determines that decommissioning and/or rehabilitation is/are complete**.**	To ensure that the proposal is decommissioned and rehabilitated according to the requirements specified in the approved Decommissioning and Rehabilitation Management Plan (refer commitment 3).	During decommissioning and/or rehabilitation.	Minister for the Environment		~~Determination by the Minister for the Environment that decommissioning and/or rehabilitation is/are complete.~~ Determination by the Chief Executive Officer, Department of Water and Environmental Regulation that decommissioning and/or rehabilitation is/are complete.	**The action for commitment 12 of condition 2 is deleted and replaced with:** Implement the requirements of the Decommissioning and Rehabilitation Management Plan until the Chief Executive Officer, Department of Water and Environmental Regulation determines that decommissioning and/or rehabilitation is/are complete**.** **The text for commitment 12 of condition 2 in the "measurement / compliance criteria" column in schedule 2 is deleted and replaced with:** Determination by the Chief Executive Officer, Department of Water and Environmental Regulation that decommissioning and/or rehabilitation is/are complete.

Appendix 1

ATTACHMENT 3 - PROPOSED AMENDMENTS TO MINISTERIAL STATEMENT 562 CONDITIONS

Abbreviation	Term / Definition
CEO	The Chief Executive Officer of the Department of the Public Service of the State responsible for the administration of section 48 of the *Environmental Protection Act 1986*, or his delegate.
CLC	Community Liaison Committee
DWER	Department of Water and Environmental Regulation
DEP	Department of Environmental Protection
DHW	Department of Housing and Works

Abbreviation	Term / Definition
EPA	Environmental Protection Authority
PCR	Progress and Compliance Report
RCWA	Radiological Council of Western Australia
WM (WA)	Waste Management Western Australia

Condition / Commitment	Current Wording	Proposed Change	Outcome	Justification / Purpose	Request for other amendments which arise to be made
Proponent:	Waste Management (WA)	Replace proponent as listed in the Ministerial Statement with "Minister for Works C/- Department of Finance"		As per the *Notice of Revocation of a Proponent and Notice of Nomination as Proponent* received from the Delegate of the Minister for Environment on 21 January 2022, the Minister for Works C/- Department of Finance is the person responsible for the Proposal. This change has not been reflected in Ministerial Statement 562 and is also not evident from the EPA website where the Statement is published. Waste Management (WA) who is listed on the Statement has not been the proponent for the IWDF since 2005.	Yes
All conditions and commitments	To requirements of	To satisfaction of		To reflect current practice.	Yes
MC 4.1, 4.2, 4.3, 4.4 PC 1.1, 2.1, 2.2, 3.1, 3.2, 3.3, 3.4, 3.5, 3.6, 3.7, 3.9, 3.10, 4.1, 4.2, 4.3, 4.4, 4.5, 4.6, 4.7	Refer to Ministerial Statement 562.	Remove commitments.		Commitments have been satisfied and cleared by the EPA.	Yes
MC 3.3	The proponent shall notify the Environmental Protection Authority of any change of proponent contact name and address within 30 days of such change.	The proponent shall notify the CEO of any change of proponent contact name and address within 30 days of such change.	The proponent must notify the Chief Executive Officer, Department of Water and Environmental Regulation of any change of its name, physical address or postal address for the serving of notices or other correspondence within twenty-eight (28) days of such change. Where the proponent is a corporation or an association of persons, whether incorporated or not, the postal address is that of the principal place of business or of the principal office in the State.	A change of the approval authority from the EPA to the Department of Water and Environmental Regulation (DWER) is sought to streamline the approval process and allocate approval authority to an agency with appropriate technical expertise. EPA approval was historically required as the IWDF was managed by Waste Management WA, a corporate body of the then Department of Environmental Protection (DEP). To avoid any potential or perceived conflict of interest, the IWDF was monitored by the EPA. This resulted in several conditions and commitments requiring EPA approval rather than DEP approval which was the standard approval authority at	Yes
MC 5.1	The proponent shall submit periodic Compliance Reports, in accordance with an audit program prepared in consultation between the proponent and the Environmental Protection Authority.	The proponent shall submit periodic Compliance Reports, in accordance with an audit program prepared in consultation between the proponent and the CEO.	The proponent shall submit periodic Compliance Reports, in accordance with an audit program prepared in consultation between the proponent and the Chief Executive Officer, Department of Water and Environmental Regulation.		Yes

MC 5.2	Unless otherwise specified, the Environmental Protection Authority is responsible for assessing compliance with the conditions, procedures and commitments contained in this statement and for issuing formal written advice that the requirements have been met.	Unless otherwise specified, the CEO is responsible for assessing compliance with the conditions, procedures and commitments contained in this statement and for issuing formal written advice that the requirements have been met.	Unless otherwise specified, the Chief Executive Officer, Department of Water and Environmental Regulation is responsible for assessing compliance with the conditions, procedures and commitments contained in this statement and for issuing formal written advice that the requirements have been met.	the time. As the care of the IWDF is now with the Department of Finance, there is no longer a perceived or potential conflict of interest and DWER can act as the approval authority. This is consistent with standard practice and will enable more timely receipt of approvals. The EPA has also previously expressed its recommendation for the proponent to request this amendment to the Ministerial Statement.	Yes
PC 1.2, 2.3, 3.8, 3.11, 4.8, 5.1, 5.2, 5.3, 5.4, 6.1, 6.2, 7.1, 7.2, 7.3, 8, 9, 10, 11	To requirements of Environmental Protection Authority.	To satisfaction of the CEO.			Yes
PC 5.2	Prepare the Transport Operational Procedures in accordance with the Operational Guidelines to include but not limited to: • details of waste loading and transport activities, and emergency response training for personnel; • identification of responsibility for the various aspects of transport, loading and unloading operations;	Remove 'To requirements of Environmental Protection Authority.'		Waste loading and transport is undertaken in accordance with the legislative requirements of the *Dangerous Goods Safety (Road and Rail Transport of Non- Explosives) Regulations 2007*. Under the Certificate of Registration of Premises for the IWDF, issued by the Radiological Council of WA, radioactive waste is to be packaged and transported in accordance with the *Radiation Safety (Transport of Radioactive*	Yes

Condition / Commitment	Current Wording	Proposed Change		Justification / Purpose	Request for other amendments which arise to be made
	• contingency plans for dealing with fire safety, accidents, spillages, vehicle breakdowns and other incidents should they occur, and • the procedure for liaison with the local community and emergency services.			*Substances) Regulations 2002* and the *Code of Practice for Safe Transport of Radioactive Materials*. Due to the governance of waste loading and transport for the IWDF through other mechanisms, EPA approval is not considered necessary, however, Transport Operational Procedures will continue to be prepared for each disposal operation.	
~~PC 5.3~~	~~Advertise and make the approved Operational Procedures required by commitments 5.1 and 5.2 publicly available.~~	~~Make the Operational Procedures required by commitment 5.1 publicly available.~~		~~The Proponent will make the Operational Procedures publicly available in accordance with the OEPA's Post Assessment Guideline No.4 – Post Assessment Guideline for Making Information Publicly Available by publishing a notice on the IWDF webpage advising that copies of the Operational Procedures are available on request.~~ ~~The requirement to advertise the procedures in the newspaper creates an unnecessary time and cost impost and there are now more modern ways to share information with the public. It should be noted that no public comment was received on the Operational Procedures for the 2008 or 2020 disposal. It is also noted that this requirement is not imposed on the Sandy Ridge Facility which also accepts Class V waste.~~	Yes
Addition of Condition 6 **6 Transportation**				6-1 The proponent must ensure that all third-party carriers, in direct control of hazardous and intractable waste which is being transported to the facility have the appropriate permits or licences required under the relevant national and state legislation, regulation and codes of practice for the transportation and management of chemical waste and management of low-level radioactive waste.	
				6-2 Any hazardous and intractable waste being transported under the direct control of the proponent must be appropriately managed to ensure risks to human health and the environment from spills are minimised. This requirement shall be outlined in the relevant management plans required under the *Radiation Safety (Transport of Radioactive Substances) Regulations 2002* and *Dangerous Goods Safety (Road and Rail Transport of Non-explosives) Regulations 2007* as regulated by the Radiological Council of WA and Department of Energy, Mines, Industry Regulation and Safety.	
PC 6.1	Prepare the Performance and Compliance Report at the conclusion of each waste disposal operation.	Remove commitment.		This commitment is now regulated by DWER under condition 12 of the IWDF's licence for prescribed premises (L8190/2007/2). Condition 12 states that any Performance and Compliance Reports relating to the disposal of waste must be submitted to the CEO of DWER. As a result, approval from the EPA is no longer required.	Yes
PC 6.2	Advertise and make the approved Performance and Compliance Report required by commitment 6.1 publicly available.	Make the Performance and Compliance Report publicly available.	(6.2) Make the approved Performance and Compliance Report required by commitment 6.1 publicly available.	Finance has and will continue to publish the latest PCR on its public IWDF webpage and provide copies of previous PCRs to members of the public upon request. Advertisement of the PCR in the newspaper is no longer the most effective way to inform the public and creates an unnecessary administrative and cost impost.	Yes

PC 7.3	Prepare a waste register data base to be maintained, updated and made publicly available at the office of the proponent or on the World Wide Web. (Objective) To show the method of disposal source, type, quantity and location of all waste disposed of at the Intractable Waste Disposal Facility to enable future land users to take account of the deposited wastes and protect future users from adverse impacts on health and amenity.	Remove requirement to publish location data. i.e. Amend to, "To show the method of disposal source, type and quantity of all waste disposed of…"	The action for commitment 7.3 of condition 2 is deleted and replaced with: (7.3) Prepare a waste register data base to be maintained, updated and made publicly available. The locations of radioactive wastes will not be made publicly available unless requested by the Chief Executive Officer, Department of Water and Environmental Regulation.	The Radiological Council of Western Australia (RCWA) has expressed concern in relation to the inclusion of information identifying individual source details at specific locations, citing security concerns for radioactive sources. Location data is captured in the database and will be provided to regulatory bodies as required; however, it is not necessary for the general public to have access to this information.	Yes
PC 8	Convening a minimum of four meetings a year of the Community Liaison Committee.	EPA reviews requirement to maintain a Community Liaison Committee	The action for commitment 8 of condition 2 is deleted and replaced with: A community meeting is to be convened annually and each time there is a disposal operation. These meetings can be combined where reasonable.	It is the proponent's view that the public liaison approach should be modernised in line with other similar waste providers including Tellus Holdings Ltd who are the operators of the Sandy Ridge Facility. The commitment to convene a CLC is a result of the contentiousness of the proposal amongst the local community when the IWDF was established in 1992. However, the facility is considered to be less contentious by the community given that recent disposal operations have attracted little public interest and interest in CLC membership has been low. Furthermore, the requirement to hold a minimum of four Community Liaison Committee (CLC) meetings per year is an administrative and costly burden that is not imposed on other waste facility operators. Interest in the CLC has been low over the last decade. Of the 12 community representative positions on the CLC, only four are currently occupied. Prior to	Yes

Condition / Commitment	Current Wording	Proposed Change	Justification / Purpose	Request for other amendments which arise to be made
			each CLC meeting, an advertisement in The West Australian and Kalgoorlie Miner newspapers is published seeking Expressions of Interest for vacant community representative positions, however only six Expressions of Interests have been received since 2014. Additionally, attendance at meetings has been decreasing despite offering both face-to-face and videoconferencing options to attendees. Given the infrequency of waste disposal operations, meetings largely consist of Finance reporting on business as usual activities to the CLC such as administration of licences and permits, groundwater and environmental monitoring results, waste enquiries, results of compliance audits, updates to documentation and other such information that is generally captured in the annual Performance and Compliance Report which is published on the IWDF webpage. The cost to government of convening four CLC meetings per year is approximately $72,000 which includes advertising costs, travel and accommodation costs, venue hire, consultant costs and Departmental staff wages. Bearing in mind the objective of the CLC is 'to ensure that the community remains informed of activities at the Intractable Waste Disposal Facility', there are more modern ways to ensure the community remains informed, noting that the annual Performance and Compliance Report (PCR) is an effective means of communicating the operations at the IWDF to the public. Finance has published the 2020-21 PCR on the IWDF webpage and will continue to make the latest PCR available on the webpage. Furthermore, all PCRs, handbooks and brochures about the IWDF from 2008 onwards will be submitted to the State Library and made available to the public. A contact email address for the IWDF is provided on the IWDF webpage and was included in the most recently published PCR. This email address can be used by the general public to contact Finance regarding the IWDF. In lieu of the CLC, it is proposed that a new Proponent Commitment is introduced to require a community meeting be held once per year and each time there is a disposal operation. Where an annual meeting has not been held and a disposal operation is planned, the meetings can be combined to minimise the time and cost imposts to attendees who have historically travelled significant distances to attend meetings in person. Attendance and participation at these meetings will be open to all members of the public and not be limited by membership. Local Shire members will be invited to attend. Attendees will have the opportunity to learn about activities at the IWDF, ask questions and raise any concerns.	

APPENDIX N

October 2024 Rehabilitation Monitoring Records and Botanical Survey

INTRACTABLE WASTE DISPOSAL FACILITY
FACILITY MANAGEMENT CONTRACTOR

REHABILITATION MONITORING RECORD IWDF-FORM-38A

Project No.: DFI-PP03-721-ANMO	**Storage Location of Photos: Aurora Environmental**	**Monitored By: MJS and PvdM**
Site Name: Intractable Waste Disposal Facility, Mt Walton East		**Client: Department of Finance**
Monitoring Location: IWDF		**Date: 17/10/2024**

Trench/ Area	Location		Date	Time	Vegetation Density			Vegetation Variety		Description and Other Comments (e.g. soil status)			
	Loc. No	Photo No.			% Cover	Max height	Ave'ge height	Y/N	Number of plant types	Soil Status	Dead veg?	Tyned?	Other Comments
2020NRT01	01	-	17/10/2024	1421	35	1.5	0.8	Y	14	Gravelly Sand	Y	Y	Growing well
	02	-	17/10/2024	1427	30	2	0.8	Y	17	Gravelly Sand	Y	Y	Lagging behind Location 01
	03	-	17/10/2024	1439	2	0.4	0.2	Y	5	Gravelly Sand	Y	Y	Growth sparse perhaps due to presence of clay
2008RT01	01	-	17/10/2024	1449	70	5.0	1.6	Y	14	Gravelly Sand	Y	Y	
	02	-	17/10/2024	1454	60	2.0	1.0	Y	13	Gravelly Sand	Y	Y	
	03	-	17/10/2024	1500	70	2.5	1.6	Y	17	Gravelly Sand	Y	Y	
													Rehabilitation of cells pre 2008 have been deemed complete and will no longer be monitored
[illegible]	[illegible]												
[illegible]	[illegible]												
[illegible]	[illegible]												
[illegible]	[illegible]												
[illegible]	[illegible]												
[illegible]	[illegible]												
[illegible]	[illegible]												
[illegible]	[illegible]												
[illegible]	[illegible]												

IWDF MT. WALTON EAST

REHABILITATION PHOTOS

OCTOBER 2024

2020NRT01 - Loc.1

2020NRT01 - Loc.2

2020NRT01 - Loc.3

2008RT01 - Loc.1

2008RT01 - Loc.2

2008RT01 - Loc.3

INTRACTABLE WASTE DISPOSAL FACILITY, MT WALTON EAST

FLORA AND VEGETATION SURVEY OF FUTURE OPERATIONS AREA AND 2024 REHABILITATION MONITORING

Prepared for:	Department of Finance
Report Date:	1 May 2025
Version:	1
Report No.	2025-892

pgv ENVIRONMENTAL

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1 INTRODUCTION

1.1 Background

The Western Australian Government's Intractable Waste Disposal Facility (IWDF) at Mount Walton East is located on Crown Reserve 42001 approximately 124km north-east of Southern Cross (Figure 1). Nine disposal operations have occurred on the facility from 1992-2020, resulting in the development of 13 underground disposal sites.

The disposal sites are grouped close together on a west-east alignment towards the centre of the large reserve (Figure 2). Future disposal operations are intended for the facility and are highly likely to be located close to the existing disposal sites. Future sites will require the clearing of native vegetation followed by rehabilitation of the surrounds.

This flora and vegetation survey was commissioned by the Department of Finance to identify the flora and vegetation within the likely area of future disposal operations. In addition, the report provides an assessment of the progress of rehabilitation on existing disposal sites.

1.2 Previous Flora Surveys

Four flora surveys have been undertaken at the IWDF site: the original by Survey and Mapping Group in 1988, a second survey by *ecologia* Environmental Consultants in 1997 and a follow-up survey by ATA Environmental in 2002. Three Priority listed flora species were recorded on the site by *ecologia* Environmental Consultants. The location of one of the *Calytrix creswellii* plants was in close proximity to the current accommodation units and disposal sites. None of the Priority flora species was recorded in the ATA Environmental survey. The ATA Environmental survey was undertaken shortly after a fire had burnt the whole site which would have compromised the results of the survey and enabled identification of Priority species very difficult. The survey, however, was able to record post-fire ephemerals which only occur for a relatively short time after a fire.

A survey of the likely future disposal areas was undertaken by PGV Environmental in 2014 (PGV Environmental, 2015). The survey also monitored the progress of rehabilitation around existing disposal sites.

Other flora surveys have been undertaken in the general region on similar yellow sandplain soils that occur on the IWDF site. The survey undertaken by Mattiske Consulting Pty Ltd for Polaris Metals (Mattiske Consulting Pty Ltd, 2012) to the south of the IWDF site identified the occurrence of several additional Priority flora species on yellow sandplain soils.

1.3 Rehabilitation

All sites used for previous disposal operations were rehabilitated according to Procedure EP – 05 (Rehabilitation Management) apart from the area directly over the trenches.

The areas surrounding the trenches were completely cleared of native vegetation during disposal activities up to a width of around 60m from the trench in order to allow for storage of trench spoil,

vehicle movements and temporary container storage prior to burial. The cleared vegetation and topsoil from the trench surrounds were stockpiled in a position close to the trench in windrows less than 2m high.

Following capping of the trenches the capped area was fenced. These areas directly above the disposal trenches have been managed so that they are free of any vegetation to avoid the possibility of root and water penetration into the cell. It is the long-term intention that these areas are rehabilitated with plant species that have shallow root systems which do not penetrate deep into the cell.

Areas cleared outside the fenced part of the site were re-spread with the stockpiled vegetation and topsoil. The area was then ripped to promote infiltration of rainwater to assist in rehabilitation. No supplementary seeding or planting of the rehabilitation areas was undertaken.

Photographs have been taken of the rehabilitation areas from set positions annually since 2001. Initial monitoring of the plant species within the rehabilitation areas was undertaken in 2014.

The objective of this report is to provide information on the progress of rehabilitation and make recommendations for any future work, if necessary.

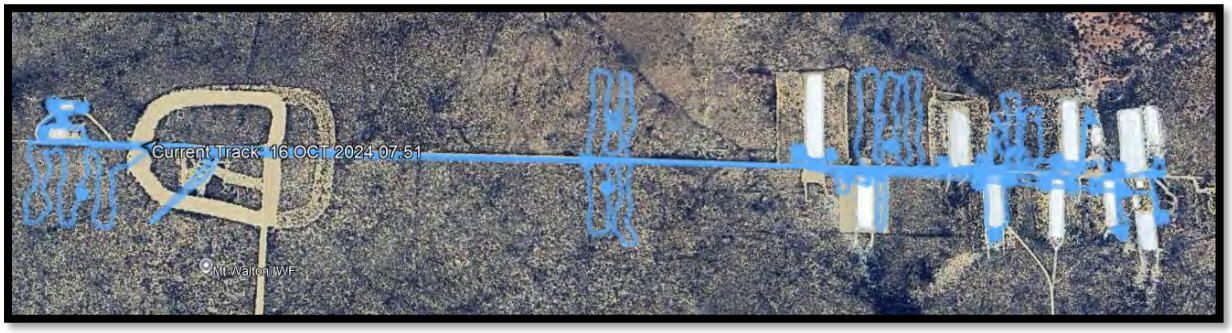
2 METHODOLOGY

2.1 Native Vegetation

A flora and vegetation survey of the uncleared native vegetation on the site was conducted by Dr Paul van der Moezel from PGV Environmental on 16 and 17 October 2024. The survey focussed on areas that were not surveyed in detail in the 2014 survey.

The survey included sampling from five 20m x 20m quadrats which were in addition to the initial 9 quadrats sampled in 2014 (Figure 3). Within each quadrat all plant species were recorded including average height and percentage cover. Other species not located in quadrats were also recorded in the vicinity of the new quadrats. The track log for the 2024 survey is shown in Plate 1.

Plate 1: Track Log 2024 Survey



2.2 Rehabilitation Areas

Twenty one monitoring plots, each 20m x 20m in size, were established next to disposal sites in 2014. Two additional plots were established next to the 2020 disposal site in this 2024 survey.

Within each monitoring plot all plant species were recorded including average height and percentage cover. Other species not located in the plot but within the rehabilitation area were also recorded.

2.3 Desktop Studies

Three Priority species were recorded on the IWDF site by *ecologia* Environmental Consultants (1997). ATA Environmental (2003) did not record any of the three Priority species on the IWDF site presumably due to the recent fire prior to the survey. ATA Environmental, however did record the presence of *Sowerbaea laxiflora* P1 on the site although its designation as a Priority species was not noted in the report.

Table 1: Conservation Significant Flora known to occur on or Near the Site

Species	Status Under Wildlife Conservation Act 1950	IWDF Site
Acacia crenulata	P3	Previously recorded[1]
Acacia cylindrica	P3	
Acacia formidabilis	P3	
Austrostipa blackii	P3	
Baeckea sp Helena and Aurora Range	P1	
Banksia arborea	P4	
Banksia lullfitzii	P3	
Calytrix creswellii	P3	Previously recorded[1]
Chamelaucium sp. Koolyanobbing	P1	
Cryptandra crispula	P3	
Cyathostemon verrucosus	P3	
Eremophila caerulea subsp. *merrallii*	P4	
Eucalyptus formanii	P4	
Eutaxia ?nanophylla	P3	
Gnephosis sp. Norseman	P3	
Goodenia jaurdiensis	P2	
Grevillea erectiloba	P4	
Grevillea georgeana	P3	
Hakea rigida	P2	
Hibbertia lepidocalyx subsp. *tuberculata*	P3	
Labichea eremaea	P3	
Lepidosperma lyonsii	P1	
Lepidosperma sp. Parker Range	P1	
Leucopogon sp Yellowdine	P1	
Mirbelia ferricola	P3	
Mirbelia sp Helena and Aurora	P3	
Myriophyllum lapidicola	T	
Myriophyllum petraeum	P4	
Neurachne annularis	P3	
Persoonia leucopogon	P1	
Phebalium appressum	P1	
Sowerbaea multicaulis	P1	Previously recorded[2]
Stylidium choreanthum	P3	
Styphelia sp Bullfinch	P3	
Verticordia stenopetala	P3	Previously recorded[1]
Wurmbea murchisoniana	P4	

[1] – *ecologia* Environmental Consultants (1997)

[2] – ATA Environmental (2003)

2.4 Survey Conditions

The conditions that the survey was undertaken in are presented in Table 2 in order to assess the adequacy of the survey. In summary, there were no constraints to the survey.

Table 2: Statement of Botanical Survey Conditions

Issue	Constraints (Y/N)*	Comment
Competency/experience of the consultant conducting the survey	No constraints	Dr Paul van der Moezel has botanical survey experience in the Goldfields including the disposal site and access road to the IWDF site.
Proportion of the flora identified^	No constraints	The timing of the survey in October should have enabled most of the native species on the site to be identified.
Sources of information (historic/recent or new data)	No constraints	Four surveys of the IWDF site as well as several surveys of nearby sites were reviewed.
Proportion of the task achieved and further work that may need to be undertaken		No further work necessary.
Timing/weather/season/cycle		The timing of the survey in October is most suitable for the region.
Intensity of survey (e.g. In retrospect was the intensity adequate)	No constraints	Approximately 7hr survey of native vegetation and 7hr survey of revegetation plots is adequate for a site with ease of access, uniformity of vegetation types and low species richness.
Completeness (e.g. was relevant area fully surveyed)	No constraints	
Resources (e.g. degree of expertise available for plant identification)	No constraints	Experienced botanist undertook plant identifications on-site and off-site using standard reference material.
Remoteness and/or access problems		Remote site but with accommodation on-site, allowed a full day's survey.
Availability of contextual (e.g. bioregional) information for the study area.		A Biodiversity Audit of WA (not required)

*Constraints have been rated as Significant, Moderate or No constraints

Note: Fungi and nonvascular flora (e.g. algae, mosses and liverworts) were not surveyed for during the survey.

3 RESULTS

3.1 Native Vegetation

3.1.1 Flora

The 2024 survey added 11 species to the 72 species recorded during the 2014 flora survey. The list of species having been recorded in the survey area is now 83 (Appendix 1). The total includes 65 species recorded from within the native uncleared vegetation and a further 18 species in the rehabilitated areas around the site.

All the flora species recorded were native species. No introduced species have been recorded on any of the previous surveys of the whole IWDF site.

The plant Families with the highest representation of species is the Myrtaceae (23 species), Fabaceae (7), Goodeniaceae (6 species), Proteaceae (5), Rutaceae (5) and Poaceae (5 species).

The 83 species recorded in the 130ha study site for this report compares favourably with the total of 153 species recorded in the entire 2,500ha IWDF site (reported in ATA Environmental, 2003). The dominant families in the whole IWDF were also the Myrtaceae and Fabaceae (then separated as Mimosaceae, Papilionaceae and Caesalpiniaceae) with the Poaceae, Proteaceae and Myoporaceae (now part of Scrophulariaceae) also common.

The quadrat data are shown in Appendix 2. The number of species recorded in the five additional quadrats surveyed in 2024 ranged from 9-14 (Average 12.0). This is very similar to the range of 8-15 (average 10.0) recorded in the nine quadrats surveyed in 2014. Overall, the average species richness in the 14 quadrats is 10.7.

In the 2014 survey, one Priority 3 species, *Calytrix creswellii*, was recorded in five locations including from within one vegetation survey quadrat, three rehabilitation monitoring plots and one population on the edge of the firebreak that encircles the camp facilities. Only small numbers were recorded in the quadrat and monitoring plots. No new populations of *Calytrix creswellii* were recorded in the 2024 survey.

Calytrix creswellii is currently known to occur within the Coolgardie and Murchison bioregions of the Eremaean province (Florabase). It has previously been recorded on the IWDF site including from near the current camp site and was also recorded along the Mt Walton access road by Alan Tingay & Associates (1991) and by Mattiske Consulting (2012). The Mattiske Consulting survey recorded many separate populations of the species with population sizes greater than 50 common. *Calytrix creswellii* is a small shrub 0.25-1m high with white flowers from September to December (Florabase).

A small population of the sedge species, *Lepidosperma* sp., was recorded in 2014 in *Acacia neurophylla/Allocasuarina acutivalvis/Grevillea paradoxa* Open Low Heath as well as from within two rehabilitation monitoring plots. The species was not able to be identified to specific level but was not considered to be any of the three Priority species previously recorded in the vicinity of the site (Table 1). In their survey of the yellow sandplain vegetation on the Mt Walton Road to the south

of the site Mattiske Consulting Pty Ltd (2012) recorded 13 species of *Lepidosperma* which were not able to be identified to species level mostly due to the species being undescribed. The taxonomy of *Lepidosperma* is being reviewed by the Western Australian Herbarium staff (R. Barrett) and until those results are published the *Lepidosperma* recorded on the site should be treated as potentially having some conservation value.

No additional plants of *Lepdiosperma* were recorded in the 2024 survey.

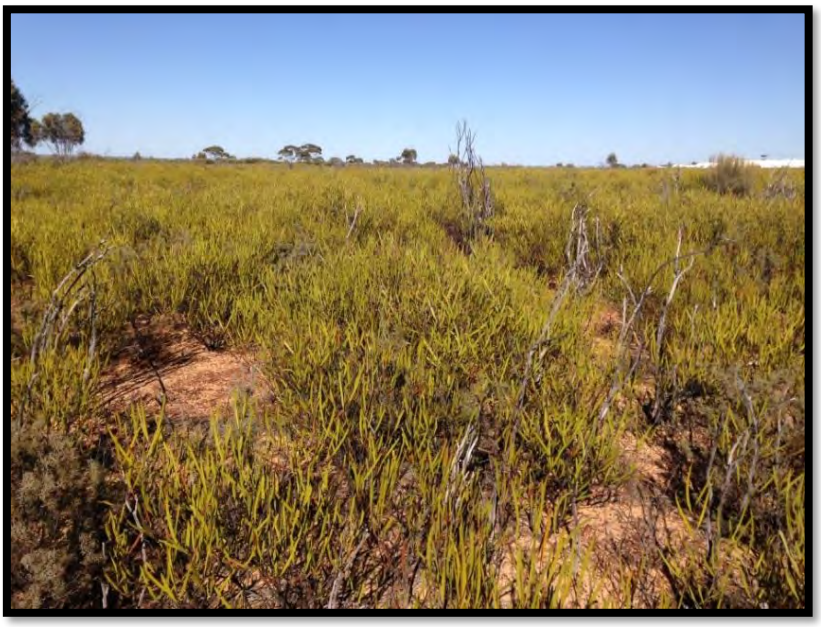
3.1.2 Vegetation Types

The vegetation types recorded by PGV Environmental in 2014 were reviewed during the 2024 survey and found to be accurate. The vegetation types on the site are mapped on Figure 3 and described as follows:

AnAaGp *Acacia neurophylla/Allocasuarina acutivalvis/Grevillea paradoxa* Open Low Heath

This vegetation type occurs over approximately half the site, generally in the eastern half. The most common species throughout this unit are the shrubs *Acacia neurophylla* and *Allocasuarina acutivalvis* up to 1m tall (Plate 2). *Acacia resinimarginea* is also common but patchier. *Grevillea paradoxa, Seringia velutina* subsp. *velutina* and *Beyeria calycina* are common shrub species. *Phebalium* species (*P. canaliculatum, P. filifolium, P. laevigatum*) are also prevalent in this vegetation type. The soils are orange-brown loamy sand with some ironstone pebbles at the surface in places.

Plate 2: *Acacia neurophylla/Allocasuarina acutivalvis/Grevillea paradoxa* Open Low Heath

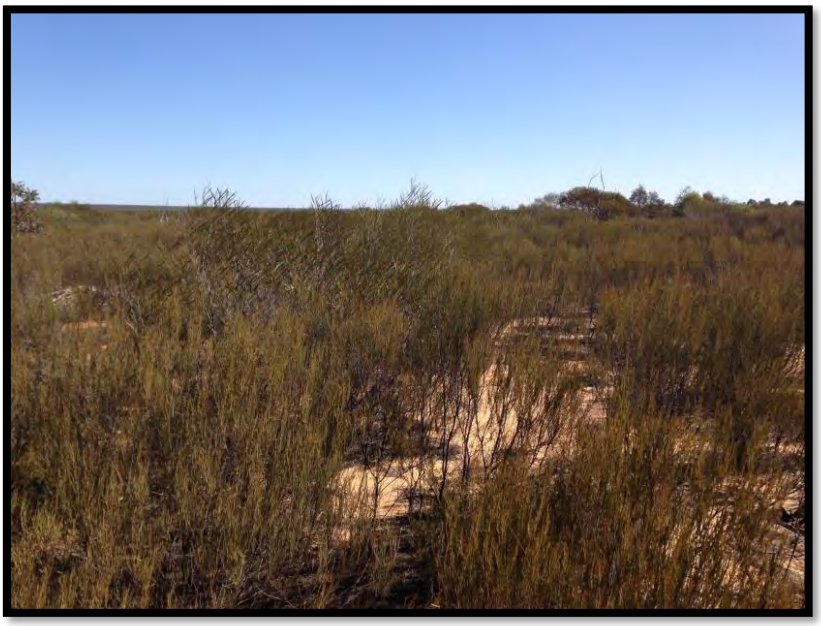


AeMuAa *Acacia enervia/ Melaleuca uncinata/Allocasuarina acutivalvis* Tall Open Heath

This vegetation type occurs over approximately half the site, generally in the western half and is structurally and floristically quite similar to the AnAaGp vegetation type, differing mostly in a few key shrub species such as the presence of *Acacia enervia* and *Melaleuca uncinata* as common species and the absence of *Acacia neurophylla* and *Grevillea paradoxa* as dominant species (Plate 3). Other common species include *Philotheca tomentella, Phebalium filifolium, Seringia velutina* subsp.

velutina, Beyeria calycina and *Amphipogon caricinus*. The soil type is consistently light orange-brown loamy sand.

Plate 3: *Acacia enervia/ Melaleuca uncinata/Allocasuarina acutivalvis* Tall Open Heath



EcEe *Eucalyptus celastroides/ E. eremophila* Low Woodland over *Melaleuca uncinata/ Allocasuarina acutivalvis* Open Shrubland

A small stand of this vegetation type occurs near the northeastern part of the survey area. The trees (*E. celastroides, E. eremophila, E. capillosa* subsp. *polyclada*) are 3-4m high over a 2m tall open shrubland of *Melaleuca uncinata* and *Allocasuarina acutivalvis* over an open understorey with *Beyeria calycina, Monotaxis luteiflora* and *Seringia velutina* subsp. *velutina* common species (Plate 4). The soil type is orange-brown loamy sand with pebbles at the surface.

Plate 4: *Eucalyptus celastroides/E. eremophila* Low Woodland over *Melaleuca uncinata/ Allocasuarina acutivalvis* Open Shrubland

3.1.3 Vegetation Condition

The condition of the vegetation in the areas of native vegetation was all considered Pristine given the complete absence of any introduced species.

3.2 Rehabilitation Areas

3.2.1 Monitoring Plots

A total of 21 monitoring plots 20m x 20m in size were set up and recorded on the site around the ten fenced disposal sites in 2014 and a further two new plots were set up around the 2020 disposal site in 2024. The years of disposal operations included 1992, 1994, 1996, 1997, 1998, 2000, 2002, 2008 and 2020. The age of the rehabilitated areas therefore ranged from 4 to 32 years. The results for the monitoring plots are presented in Appendix 3.

3.2.2 Plant Species

A total of 59 plant species have been recorded in the rehabilitation areas. This represents an increase of 9 compared to the 2014 survey.

The 59 species compares favourably with the 83 species recorded in the surrounding native vegetation in the 2014 and 2024 surveys. Additionally, the composition of the flora in the rehabilitation areas was very similar to the composition of the flora in the native vegetation with the four dominant plant Families being the same (Myrtaceae, Fabaceae, Rutaceae and Proteaceae).

Additional species recorded in 2024 included the Freckled Sun Orchid (*Thelymitra sargentii*) which was recorded in one of the more recent rehabilitation areas from 2020 (Plate 5).

Plate 5: *Thelymitra sargentii* recorded in the 2020 rehabilitation area.

The number of plant species recorded in 2024 in the original 21 monitoring plots sampled in 2014 ranged from 9-18 (average 13.0). This is very similar to the number of plant species recorded in 2014 in the 21 monitoring plots which ranged from 8-17 (average of 13.5), indicating that species richness in the more mature revegetation areas has not diminished in the 10 years between 2014 and 2024. The number of species in the two new monitoring plots was much higher with 23 and 24 species, respectively. The larger number is due to the younger age of the revegetation (around 5 years) and the prevalence of species that occur in recently disturbed areas but die out after several years such as *Glischrocaryon angustifolium, Stylidium limbatum, Cyanostegia angustifolia, Dampiera eriocephala, Hemiphora elderi* and *Goodenia elderi*. The average number of species in the older rehabilitation areas (Average 13.0) is slightly higher that recorded in the native vegetation quadrats (average 10.7).

Nine species were very common in the rehabilitation areas, having been recorded in more than 50% of the 23 monitoring plots (Table 3).

Table 3: Species found most commonly in the rehabilitation areas

Species	Number of Monitoring Plots
Phebalium filifolium	23
Acacia resinimarginea	22
Beyeria calycina	22
Allocasuarina acutivalvis subsp. *acutivalvis*	19
Seringia velutina subsp. *velutina*	18
Thryptomene urceolaris	18
Amphipogon caricinus var. *caricinus*	17
Phebalium canaliculatum	17
Grevillea paradoxa	16

3.2.3 Vegetation Structure

Photographs of the rehabilitation areas have been taken annually since 2001 resulting in an excellent visual record of the progress of rehabilitation. Plates 6 and 7 show the progress of rehabilitation in two areas over 23 years between 2001 and 2024. The photographs demonstrate that the vegetation in the rehabilitation areas has grown from small, sparse cover shortly after the rehabilitation commenced into a dense shrub cover similar to the native vegetation.

The height of the dominant species in the 21 original monitoring plots in 2024 ranged from 1.5-2.8m with an average of around 2.0 (average of 21 plots). This compares to the 2014 average of 1.6m, representing a growth of around 0.4m in the last 10 years. The average height of the dominant stratum in the rehabilitation areas is slightly higher than the 1.5m recorded in the native vegetation.

The species which are most abundant in each rehabilitation area include *Acacia resinimarginea, Allocasuarina acutivalvis* and *Grevillea paradoxa. Acacia neurophylla* is more common in the eastern rehabilitation sites. The composition of the main species in the rehabilitation sites is very similar to the vegetation on the eastern side of the survey area with a greater presence of *Acacia resinimarginea* than in the native vegetation.

Plate 6 Rehabilitation Area 96 NRT01 L2

October 2001	November 2014	October 2024

Plate 7 Rehabilitation Area 98 NRT02 L1

October 2001	November 2014	October 2024

4 CONCLUSIONS AND RECOMMENDATIONS

The 2024 Flora and Vegetation survey of the future potential operations area at the Mt Walton East Intractable Waste Disposal Facility has resulted in the following findings and recommendations:

- A total of 83 plant species have been recorded in an area 2.7km long and 500m wide containing approximately 130ha of native vegetation. The total included 65 species from within the native uncleared vegetation and a further 18 species in the rehabilitated areas around the site;
- All 83 plant species are native species;
- One Priority 3 *Calytrix creswellii* was recorded at 5 locations in 2014 but no additional locations were recorded in 2024. Future disposal operations should attempt to avoid disturbance to this species;
- One potentially undescribed *Lepidosperma* species recorded in three locations in 2014 was not recorded in additional locations in 2024;
- Three vegetation types occur in the survey area:
  - *Acacia neurophylla/Allocasuarina acutivalvis/Grevillea paradoxa* Open Low Heath
  - *Acacia enervia/ Melaleuca uncinata/Allocasuarina acutivalvis* Tall Open Heath
  - *Eucalyptus celastroides/ E. eremophila* Low Woodland over *Melaleuca uncinata/ Allocasuarina acutivalvis* Open Shrubland;
- The condition of the vegetation in the undisturbed areas is considered Pristine due to the absence of any introduced species on the site.

Monitoring of the rehabilitation areas around the disposal trenches has resulted in the following findings and recommendations:

- Plant species richness in the rehabilitation monitoring plots (13.0) recorded in 2024 was similar to the richness recorded in the plots in 2014 (13.5) and is slightly higher than the species richness in the surrounding native vegetation (10.7);
- Dominant plant families (Myrtaceae, Fabaceae, Proteaceae and Rutaceae) were the same as recorded in the native vegetation;
- The structure and composition of the vegetation in the oldest rehabilitation sites is very similar to that in the native vegetation. The vegetation structure in younger rehabilitation site from 2020 shows signs of achieving the same structure as the native vegetation;
- Photographic monitoring of the rehabilitation areas should continue on a periodic basis to demonstrate the progress of rehabilitation; and
- Overall, the rehabilitation programme around the disposal sites is considered as highly successful.

5 REFERENCES

Alan Tingay & Associates (1991). *Mt Walton Integrated Waste Storage Facility Access Road Flora Survey.* Prepared for the Health Department of Western Australia. Report No. 91/23.

ATA Environmental (2003) *Mt Walton Intractable Waste Disposal Facility Flora and Vegetation Survey.* Prepared for Waste Management (WA). Report No. 2003/46.

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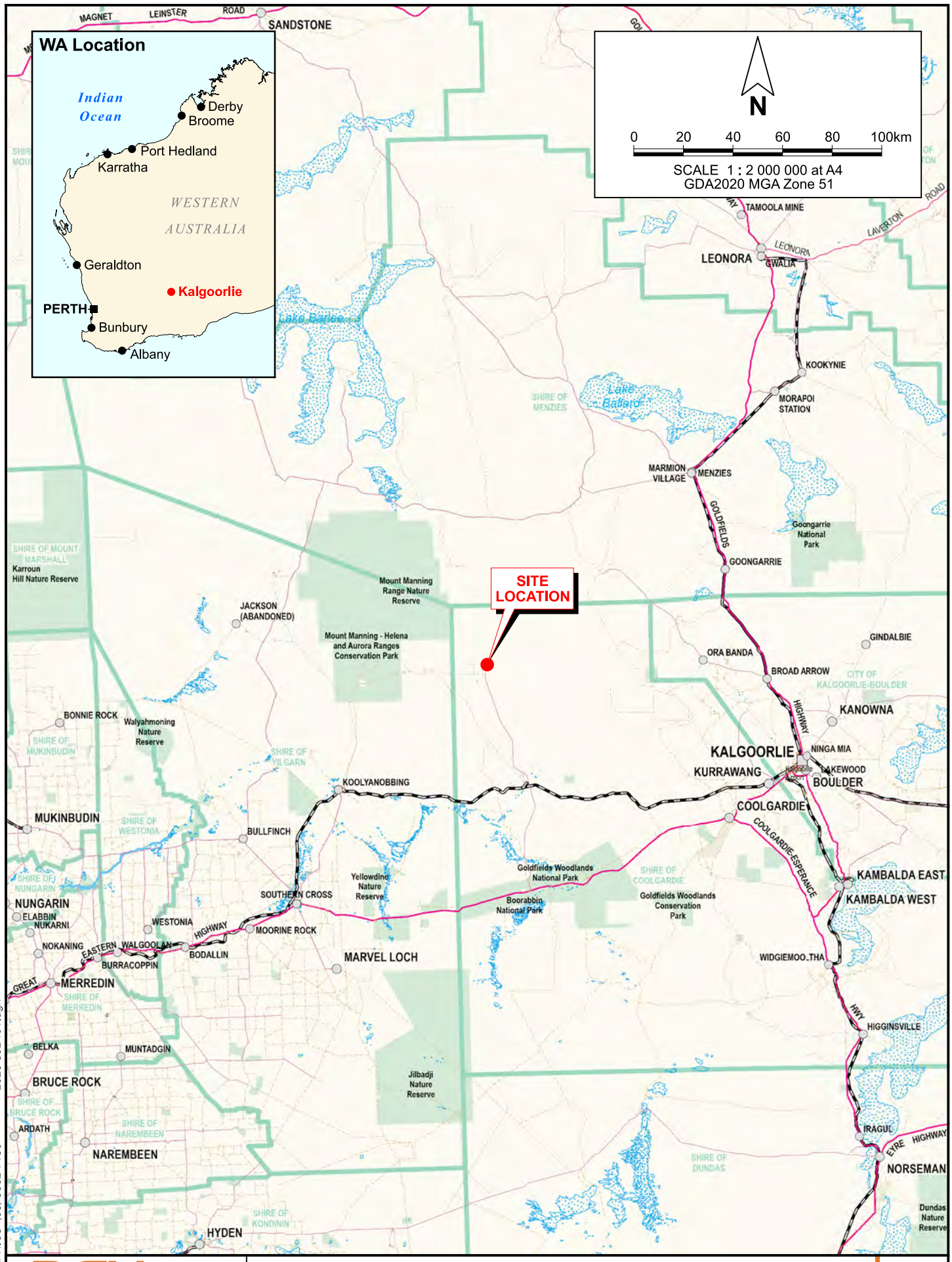
Survey and Mapping Group Pty Ltd (1989) *Proposed Toxic Waste Disposal site – Flora and Vegetation Survey.*

FIGURES



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PINPOINT CARTOGRAPHICS (08) 9562 7136

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Department of Finance
FLORA AND VEGETATION SURVEY OF FUTURE OPERATIONS AREA AND 2024 REHABILITATION MONITORING - INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST

Drawn: P. van der Moezel	Date: 30 Apr 2025
Job: 10197 Rpt: 2025-892	Revision: A

SITE LOCATION

Figure 1

226 000mE
227 000mE
228 000mE
6 636 000mN
6 635 000mN
N
0 50 100 150 200 250m
SCALE 1 : 7 500 at A3
GDA2020 MGA Zone 50
Legend
Site Boundary
Cadastral Boundary
Disposal Trench
Firebreak
Shaft Disposal
Accommodation Camp
TRACK
Disposal Trench
Disposal Trenches
Clay Stockpile
Silcrete Disposal Area
Disposal Trench
Disposal Trenches
UCL
73
R 42001
ROAD
ACCESS
Track
Oversize Silcrete Disposal Area
Disused Track
CADASTRAL SOURCE: Landgate, April 2025
AERIAL PHOTOGRAPH SOURCE: ESRI, flown February 2023.
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2025-892-f02.dgn
pgv ENVIRONMENTAL
Department of Finance
FLORA AND VEGETATION SURVEY OF FUTURE OPERATIONS AREA AND 2024 REHABILITATION MONITORING - INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST
Drawn: P. van der Moezel
Date: 30 Apr 2025
Job: 10197 Rpt: 2025-892
Revision: A
SITE BOUNDARY
Figure 2

N

0 50 100 150 200 250m

SCALE 1 : 7 500 at A3
GDA2020 MGA Zone 50

226 000mE

227 000mE

228 000mE

6 636 000mN

6 635 000mN

MW9

MW7

MW12

MW5

AnAaGp

MW11

MW10

EcEe

MW3

MW1

TRACK

MW14

MW8

MW13

MW6

MW4

AeMuAa

MW2

UCL

ROAD

ACCESS

73
R 42001

Vegetation Types

AnAaGp
Acacia neurophylla/Allocasuarina acutivalvis/Grevillea paradoxa Open Low Heath

AeMuAa
Acacia enervia/Melaleuca uncinata/Allocasuarina acutivalvis Tall Open Heath

EcEe
Eucalyptus celastroides/E. eremophila Low Woodland over Melaleuca uncinata/Allocasuarina acutivalvis Open Shrubland

Legend

- Site Boundary
- Cadastral Boundary
- Quadrat Location
- Location of *Calytrix creswellii* P3
- Location of *Lepidosperma* sp.
- Vegetation Type Boundary
- EcEe Vegetation Type

CADASTRAL SOURCE: Landgate, April 2025
AERIAL PHOTOGRAPH SOURCE: ESRI, flown February 2023.

PINPOINT CARTOGRAPHICS (08) 9562 7136 2025-892-f03.dgn

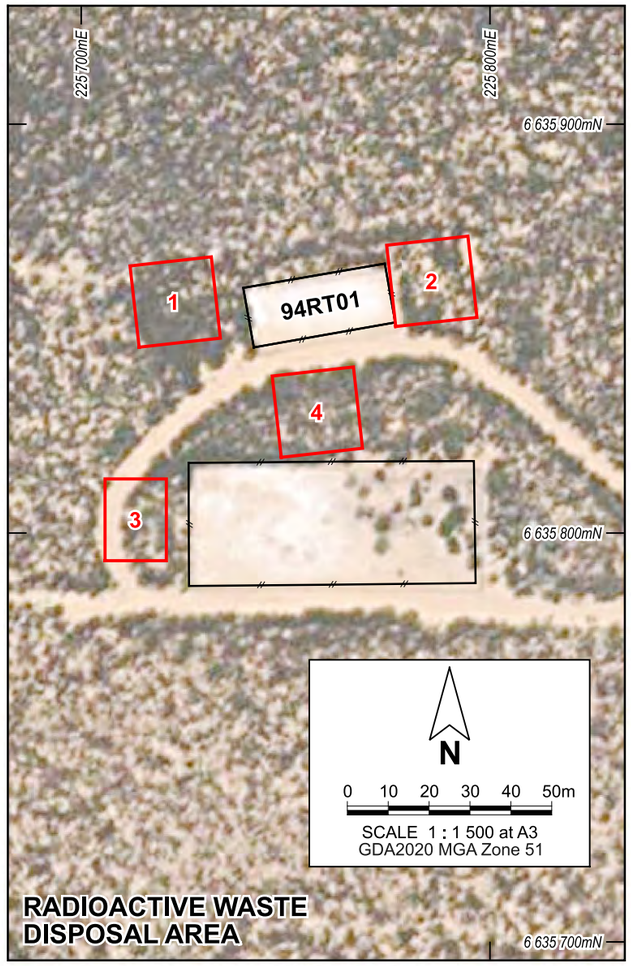
pgv ENVIRONMENTAL

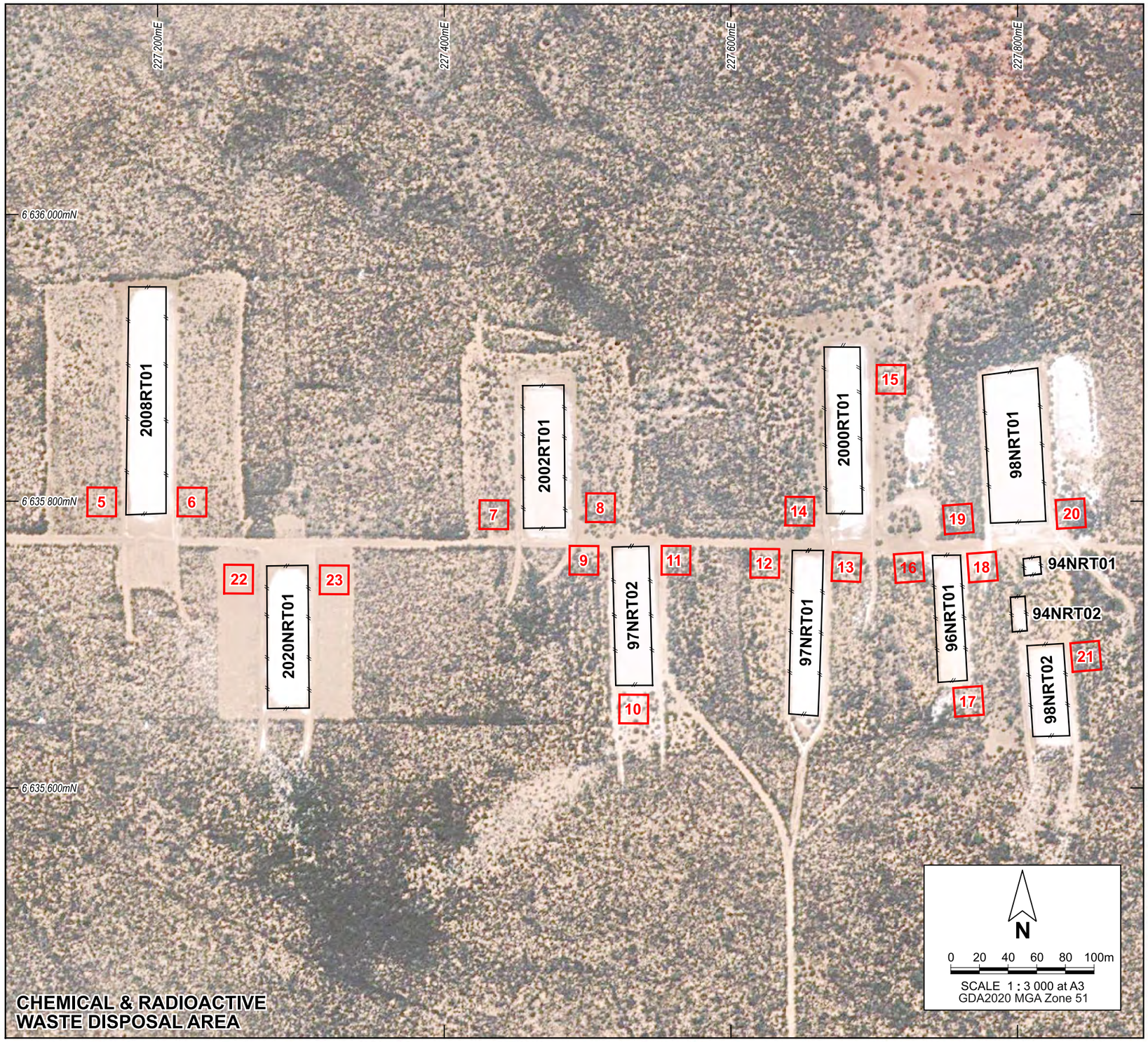
Department of Finance
FLORA AND VEGETATION SURVEY OF FUTURE OPERATIONS AREA AND 2024 REHABILITATION MONITORING - INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST

Drawn: P. van der Moezel | Date: 30 Apr 2025
Job: 10197 Rpt: 2025-892 | Revision: A

VEGETATION TYPES

Figure 3





Legend

Fence

2008RT01 Trench or Shaft ID

Rehabilitation Monitoring Plot Location

AERIAL PHOTOGRAPH SOURCE: ESRI, flown February 2023.

PINPOINT CARTOGRAPHICS (08) 9562 7136 2025-892-f04.dgn

pgv ENVIRONMENTAL

Department of Finance
FLORA AND VEGETATION SURVEY OF FUTURE OPERATIONS AREA AND 2024
REHABILITATION MONITORING - INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST

Drawn: P. van der Moezel | Date: 30 Apr 2025
Job: 10197 Rpt: 2025-892 | Revision: A

REHABILITATION MONITORING PLOT LOCATIONS

Figure 4

APPENDIX 1

Species List

SPECIES LIST – IWDF Future Operations Area and Rehabilitation Monitoring Plots (October 2014 and 2024)

GYMNOSPERMS

CUPRESSACEAE
Callitris columellaris

MONOCOTYLEDONS

ASPARAGACEAE
Thysanotus patersonii

CYPERACEAE
Lepidosperma sp.

HEMEROCALLIDACEAE
Dianella revoluta var. *divaricata*

ORCHIDACEAE
Thelymitra

POACEAE
Amphipogon caricinus var. *caricinus*
Austrostipa nitida
Eriachne ?flaccida
Triodia scariosa
Triodia tomentosa

DICOTYLEDONS

APOCYNACEAE
Alyxia buxifolia

ASTERACEAE
Olearia exiguifolia
Olearia muelleri
Podolepis capillaris
Rhodanthe citrina

BORAGINACEAE
Halgania integerrima

CASUARINACEAE
Allocasuarina acutivalvis subsp. *acutivalvis*
Allocasuarina corniculata

ERICACEAE
Leucopogon sp. Boorabbin
Leucopogon sp. Clyde Hill

EUPHORBIACEAE
Beyeria calycina
Monotaxis grandiflora var. *obtusifolia*
Monotaxis luteiflora

FABACEAE
Acacia enervia subsp. *enervia*
Acacia hemiteles
Acacia nigripilosa subsp. *nigripilosa*
Acacia neurophylla
Acacia resinimarginea
Acacia steedmanii subsp. *steedmanii*
Petalostylis cassioides

GOODENIACEAE
Dampiera eriocephala
Dampiera stenostachya
Goodenia discophora
Goodenia elderi
Scaevola restiacea
Scaevola spinescens

HALORAGACEAE
Glischrocaryon angustifolium
Glischrocaryon aureum

LAMIACEAE
Cyanostegia angustifolium
Hemiphora elderi
Lachnostachys coolgardiensis

MALVACEAE
Seringia velutina subsp. *velutina*

MYRTACEAE
Baeckea elderiana
Baeckea muricata

Calytrix creswellii **(P3)**
Ericomyrtus serpyllifolia
Calytrix creswellii ciliate leaf form
Eucalyptus angustata subsp. *angustata*
Eucalyptus cometae-vallis
Eucalyptus capillosa subsp. *polyclada*
Eucalyptus celastroides
Eucalyptus ?ebbanoensis
Eucalyptus eremophila subsp. *eremophila*
Eucalyptus leptopoda
Eucalyptus oldfieldii
Euryomyrtus maidenii
Homalocalyx thryptomenoides
Leptospermopsis roei
Malleostemon roseus
Melaleuca cordata
Melaleuca eleuterostachya
Melaleuca uncinata
Melaleuca lateriflora
Thryptomene cuspidata
Thryptomene urceolaris

PROTEACEAE
Grevillea acacioides
Grevillea oncogyne
Grevillea paradoxa
Hakea scoparia subsp. *scoparia*
Hakea francisiana

RUTACEAE
Phebalium canaliculatum
Phebalium filifolium
Phebalium laevigatum
Phebalium tuberculatum
Philotheca tomentella

SANTALACEAE
Leptomeria preissianus
Santalum acuminatum
Santalum spicatum

SAPINDACEAE
Dodonaea lobulata

SCROPHULARIACEAE
Eremophila alternifolia
Eremophila drummondii

STYLIDIACEAE
Stylidium limbatum

VIOLACEAE
Pigea sp.

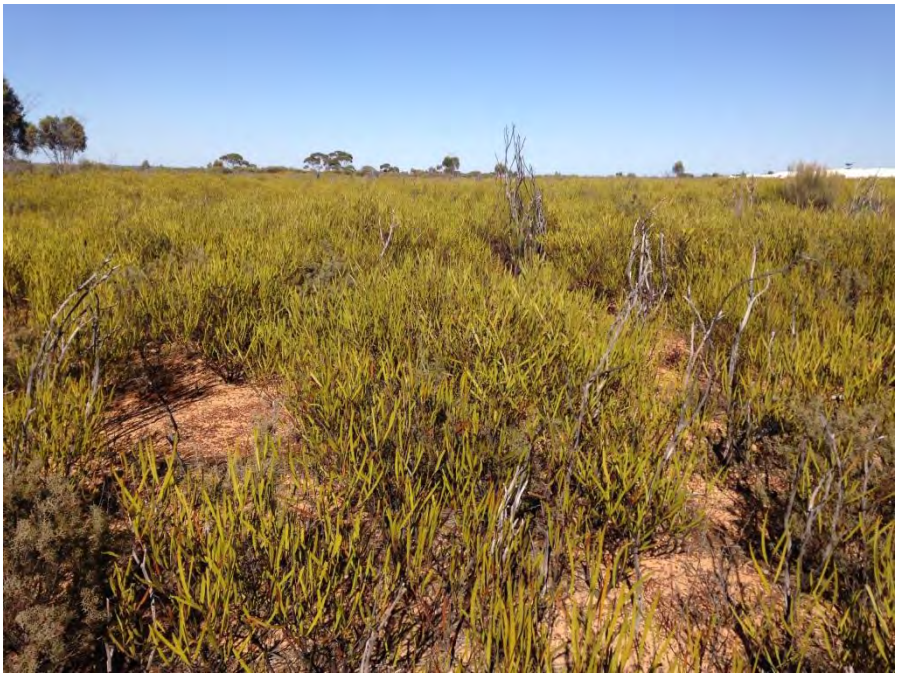
APPENDIX 2

Quadrat Data - Native Vegetation

QUADRAT MW1

50 228068 E 6635846 N

Vegetation: *Acacia neurophylla/Allocasuarina acutivalvis/Grevillea paradoxa* Open Low Heath
Condition: Excellent
Soil Type: Orange-brown loamy sand
Landform: Flat



QUADRAT (20 x 20m)

SPECIES	HEIGHT (m)	COVER (%)
Acacia neurophylla	0.8	40
Grevillea paradoxa	0.8	10
Acacia resinimarginea	0.5	<1
Allocasuarina acutivalvis	0.5	<1
Phebalium laevigatum	0.4	<1
Keraudrenia velutina	0.3	2
Phebalium canaliculatum	0.3	<1
Amphipogon caricinus	0.1	<1

* introduced species

QUADRAT MW2

50 228076 E 6635613 N

Vegetation: *Allocasuarina acutivalvis/Acacia neurophylla* Open Heath
Condition: Excellent
Soil Type: Light yellow-brown loamy sand
Landform: Flat

QUADRAT (20 x 20m)

SPECIES	HEIGHT (m)	COVER (%)
Allocasuarina acutivalvis	1.3	40
Acacia neurophylla	1.3	5
Grevillea paradoxa	0.8	1
Melaleuca uncinata	0.5	1
Phebalium laevigatum	0.4	<1
Philotheca tomentella	0.4	<1
Keraudrenia velutina	0.3	1
Beyeria calycina	0.3	<1
Phebalium filifolium	0.3	<1
Baeckea crispiflora	0.3	<1
Amphipogon caricinus	0.2	<1

* introduced species

QUADRAT MW3

50 227784 E 6635951 N

Vegetation: *Eucalyptus celastroides/ E. eremophila* Low Woodland over *Melaleuca uncinata/ Allocasuarina acutivalvis* Open Shrubland

Condition: Excellent

Soil Type: Orange-brown loamy sand with pebbles

Landform: Flat

QUADRAT (20 x 20m)

SPECIES	HEIGHT (m)	COVER (%)
Eucalyptus celastroides	4	10
Eucalyptus eremophila	3	10
Eucalyptus capillosa subsp. *polyclada*	3	2
Santalum spicatum	2.2	<1
Melaleuca uncinata	2	10
Allocasuarina acutivalvis	2	5
Thryptomene urceolaris	0.6	<1
Beyeria calycina	0.5	15
Monotaxis luteiflora	0.4	2
Keraudrenia velutina	0.4	1
Grevillea paradoxa	0.4	<1
Olearia muelleri	0.4	<1
Austrostipa nitida	0.4	<1
Podolepis capillaris	0.3	<1
Eremophila drummondii	0.1	<1

* introduced species

QUADRAT MW4

50 227453 E 6635701 N

Vegetation: *Acacia enervia/ Melaleuca uncinata/Allocasuarina acutivalvis* Tall Open Heath

Condition: Excellent

Soil Type: Light orange-brown loamy sand

Landform: Flat

QUADRAT (20 x 20m)

SPECIES	HEIGHT (m)	COVER (%)
Acacia enervia	2	15
Allocasuarina acutivalvis	2	2
Melaleuca uncinata	1.5	20
Grevillea paradoxa	1	5
Grevillea acacioides	0.8	<1
Phebalium laevigatum	0.5	1
Beyeria calycina	0.5	<1
Keraudrenia velutina	0.4	10
Philotheca tomentella	0.3	1
Thryptomene urceolaris	0.3	<1
Amphipogon caricinus	0.2	<1

* introduced species

QUADRAT MW5

50 227035 E 6635869 N

Vegetation: *Acacia neurophylla/Allocasuarina acutivalvis/Grevillea paradoxa* Open Low Heath
Condition: Excellent
Soil Type: Light orange-brown sandy loam
Landform: Flat

QUADRAT (20 x 20m)

SPECIES	HEIGHT (m)	COVER (%)
Acacia neurophylla	1	50
Melaleuca eleuterostachya	1	1
Grevillea paradoxa	1	1
Acacia resinimarginea	0.8	1
Allocasuarina acutivalvis	0.5	1
Beyeria calycina	0.4	1
Keraudrenia velutina	0.3	1
Austrostipa nitida	0.2	1
Phebalium filifolium	0.2	<1

* introduced species

QUADRAT MW6

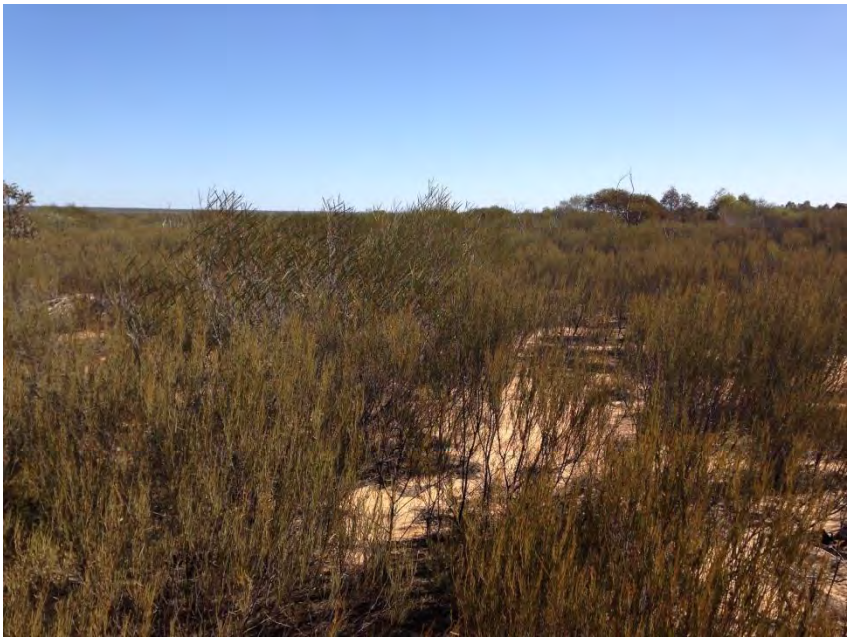
50 226980 E 6635677 N

Vegetation: *Acacia enervia/ Melaleuca uncinata/Allocasuarina acutivalvis* Open Heath

Condition: Excellent

Soil Type: Light orange-brown loamy sand

Landform: Flat



QUADRAT (20 x 20m)

SPECIES	HEIGHT (m)	COVER (%)
Acacia enervia	1.5	10
Melaleuca uncinata	1.2	30
Allocasuarina acutivalvis	0.5	2
Keraudrenia velutina	0.4	1
Beyeria calycina	0.4	<1
Philotheca tomentella	0.4	<1
Phebalium filifolium	0.3	<1
Amphipogon caricinus	0.1	<1

* introduced species

QUADRAT MW7

50 226555 E 6635861 N

Vegetation: *Acacia neurophylla/A. enervia/Allocasuarina acutivalvis* Open Heath
Condition: Excellent
Soil Type: Light orange-brown loamy sand
Landform: Flat

QUADRAT (20 x 20m)

SPECIES	HEIGHT (m)	COVER (%)
Allocasuarina acutivalvis	1.5	5
Acacia enervia	1.2	15
Acacia neurophylla	1	30
Grevillea paradoxa	1	3
Acacia resinimarginea	1	2
Keraudrenia velutina	0.4	2
Beyeria calycina	0.3	1
Phebalium canaliculatum	0.3	<1
Thryptomene urceolaris	0.3	<1

* introduced species

QUADRAT MW8

50 226387 E 6635706 N

Vegetation: *Acacia enervia* Open Heath
Condition: Excellent
Soil Type: Light orange-brown loamy sand
Landform: Flat

QUADRAT (20 x 20m)

SPECIES	HEIGHT (m)	COVER (%)
Acacia enervia	1.7	60
Allocasuarina acutivalvis	0.6	2
Beyeria calycina	0.4	1
Grevillea paradoxa	0.4	<1
Keraudrenia velutina	0.3	1
Phebalium canaliculatum	0.3	<1
Allocasuarina corniculata	0.3	<1
Phebalium filifolium	0.3	<1

* introduced species

QUADRAT MW9

50 226142 E 6635928 N

Vegetation: *Allocasuarina corniculata/Acacia enervia/Acacia resinimarginea* Open Heath
Condition: Excellent
Soil Type: Light orange-brown loamy sand
Landform: Flat

QUADRAT (20 x 20m)

SPECIES	HEIGHT (m)	COVER (%)
Eucalyptus cometae-vallis	2	1
Allocasuarina corniculata	1.2	30
Acacia resinimarginea	1.2	30
Melaleuca uncinata	0.6	<1
Philotheca tomentella	0.4	1
Phebalium filifolium	0.4	<1
Phebalium canaliculatum	0.4	<1
Thryptomene urceolaris	0.3	1
Calytrix creswellii **P3**	0.2	<1
Keraudrenia velutina	0.2	<1
Amphipogon caricinus	0.2	<1

* introduced species

QUADRAT MW10

50 227563 E 6635806 N

Vegetation: *Allocasuarina acutivalvis/Acacia neurophylla* Open Heath
Condition: Excellent
Soil Type: Light orange-brown loamy sand, some ironstone pebbles
Landform: Flat
Date: 17.10.24

QUADRAT (20 x 20m)

SPECIES	HEIGHT (m)	COVER (%)
Allocasuarina acutivalvis	1.7	50
Acacia neurophylla	1.6	1
Thryptomene cuspidata	1.3	<1
Grevillea paradoxa	1.2	1
Thryptomene urceolaris	0.8	<1
Phebalium canaliculatum	0.7	<1
Phebalium filifolium	0.5	<1
Triodia scariosa	0.3	<1
Thysanotus patersonii	Climber	<1

* introduced species

QUADRAT MW11

50 227328 E 6635815 N

Vegetation: *Eucalyptus celastroides/Allocasuarina acutivalvis/Acacia resinimarginea* Open Heath
Condition: Excellent
Soil Type: Light orange-brown loamy sand
Landform: Flat
Date: 17.10.24

QUADRAT (20 x 20m)

SPECIES	HEIGHT (m)	COVER (%)
Eucalyptus celastroides	2.5	2
Allocasuarina acutivalvis	1.5-2	40
Allocasuarina corniculata	1.4	1
Acacia resinimarginea	1.2	20
Grevillea paradoxa	1.2	<1
Eremophila alternifolia	1	<1
Acacia neurophylla	1	<1
Phebalium canaliculatum	0.8	<1
Thryptomene cuspidata	0.7	<1
Baeckea sp	0.6	1
Acacia hemiteles	0.6	<1
Homalocalyx thryptomenoides	0.4	<1
Phebalium filifolium	0.3	<1
Triodia scariosa	0.1	<1

* introduced species

QUADRAT MW12

50 226801 E 6635838 N

Vegetation: *Acacia neurophylla/Acacia enervia/Eucalyptus celastroides* Open Heath
Condition: Excellent
Soil Type: Light orange-brown loamy sand, some gravel
Landform: Flat
Date: 17.10.24

QUADRAT (20 x 20m)

SPECIES	HEIGHT (m)	COVER (%)
Eucalyptus celastroides	2	1
Allocasuarina acutivalvis	1.6	1
Accia enervia	1.4	2
Acacia neurophylla	1.2	50
Acacia resinimarginea	1	2
Grevillea paradoxa	0.8	<1
Phebalium canaliculatum	0.7	<1
Melaleuca uncinata	0.7	<1
Phebalium filifolium	0.5	<1
Triodia tomentosa	0.3	<1
Beyeria calycina	0.3	<1

* introduced species

QUADRAT MW13

50 226799 E 6635715 N

Vegetation: *Acacia enervia/Acacia neurophylla/Allocasuarina acutivalvis* Open Heath
Condition: Excellent
Soil Type: Light orange-brown loamy sand
Landform: Flat
Date: 17.10.24

QUADRAT (20 x 20m)

SPECIES	HEIGHT (m)	COVER (%)
Allocasuarina acutivalvis	1.9	5
Acacia enervia	1.8	40
Acacia neurophylla	1.4	2
Allocasuarina corniculatum	1.4	<1
Acacia resinimarginea	1.1	<1
Phebalium canaliculatum	0.9	1
Philotheca tomentella	0.7	<1
Grevillea acacioides	0.7	<1
Phebalium filifolium	0.6	1
Calytrix creswellii	0.3	<1
Seringia velutina	0.3	<1
Stylidium limbatum	0.3	<1
Triodia scariosa	0.1	<1

* introduced species

QUADRAT MW14

50 225799 E 6635681 N

Vegetation: *Allocasuarina corniculata/Acacia resinimarginea /Acacia enervia* Open Heath
Condition: Excellent
Soil Type: Light orange-brown loamy sand
Landform: Flat
Date: 17.10.24

QUADRAT (20 x 20m)

SPECIES	HEIGHT (m)	COVER (%)
Acacia enervia	2.2	5
Allocasuarina corniculata	1.9	40
Acacia resinimarginea	1.4	5
Melaleuca uncinata	1.2	2
Phebalium filifolium	0.8	2
Grevillea paradoxa	0.6	<1
Phebalium canaliculatum	0.6	<1
Thryptomene urceolaris	0.5	1
Beyeria calycina	0.5	1
Triodia tomentosa	0.5	<1
Homalocaylx thryptomenoides	0.3	<1
Seringia velutina	0.2	<1
Triodia scariosa	0.1	<1

* introduced species

APPENDIX 3

Rehabilitation Monitoring Plot Data

94RT01 L2

MONITORING PLOT 1

16.10.24

50 225738 E 6635851 N SE peg

QUADRAT (20 x 20m) **Pegs in SW and SE corner**

SPECIES	HEIGHT (m)	COVER (%)
Hakea francisiana	4	2
Grevillea oncogyne	2.0	<1
Allocasuarina corniculata	2.5	20
Acacia resinimarginea	2.0	40
Eucalyptus cometae-vallis	1.8	1
Melaleuca uncinata	1.7	<1
Leptomeria preissianus	2.0	<1
Beyeria calycina	1.0	2
Callitris columellaris	1.1	<1
Melaleuca cordata		
Phebalium filifolium	1.1	<1
Leptospermopsis roei	0.6	<1
Philotheca tomentella		
Seringia velutina	0.3	<1
Phebalium canaliculatum	0.5	<1
Thryptomene urceolaris	0.3	<1
Triodia scariosa	0.3	<1
Amphipogon caricinus	0.3	<1

* introduced species

94RT01 L1

MONITORING PLOT 2

16.10.24

50 225776 E 6635849 N SW peg

QUADRAT (20 x 20m) **Pegs in SW and SE corner**

SPECIES	HEIGHT (m)	COVER (%)
Hakea francisiana	4	5
Grevillea oncogyne	3	<1
Eucalyptus cometae-vallis	2.5	1
Acacia resinimarginea	1.8	40
Allocasuarina corniculata	2.5	30
Eucalyptus sp	1.8	1
Melaleuca uncinata	1.3	<1
Leptomeria preissianus	1.2	<1
Beyeria calycina	1.1	2
Callitris columellaris	0.6	<1
Thryptomene urceolaris	0.5	<1
Seringia velutina		
Phebalium filifolium	0.5	<1
Triodia scariosa	0.3	<1
Philotheca tomentella	0.3	<1
Amphipogon caricinus		

* introduced species

92RS01 L3

MONITORING PLOT 3

16.10.24

50 225723 E 6635813 N NE peg

QUADRAT (15 x 20m) **Pegs NW and NE corner**

SPECIES	HEIGHT (m)	COVER (%)
Grevillea oncogyne		
Eucalyptus oldfieldii	2.5-3	4
Acacia enervia	2.0	1
Leptomeria preissianus	1.9	<1
Santalum acuminatum	1.7	<1
Allocasuarina acutivalvis	1.6	5
Acacia resinimarginea	1.5	30
Melaleuca uncinata	1.4	10
Callitris columellaris	0.8	<1
Beyeria calycina	0.4	2
Melaleuca cordata	0.5	<1
Phebalium filifolium	0.8	<1
Thryptomene urceolaris	0.3	<1
Phebalium canaliculatum		
Seringia velutina		
Amphipogon caricinus		

* introduced species

92RS01 L2

MONITORING PLOT 4

16.10.24

50 225748 E 6635817 N SW peg

QUADRAT (20 x 20m) **Pegs NW and SW corner**

SPECIES	HEIGHT (m)	COVER (%)
Grevillea oncogyne		
Eucalyptus cometae-vallis	4	1
Melaleuca uncinata	1	<1
Acacia enervia	1.9	1
Acacia resinimarginea	1.5	40
Leptomeria preissianus	1.9	<1
Allocasuarina acutivalvis	1.6	30
Melaleuca cordata	0.7	<1
Seringia velutina		
Beyeria calycina	0.6	<1
Phebalium filifolium	0.5	5
Thryptomene urceolaris	0.3	<1
Scaevola restiacea		
Calytrix creswellii	0.3	<1
Baeckea muricata	0.3	<1
Philotheca tomentella		
Amphipogon caricinus	0.1	<1

* introduced species

2008RT01 L1

MONITORING PLOT 5

16.10.24

50 227171 E 6635389 N SE peg

QUADRAT (20 x 20m) **Pegs SW and SE corner**

SPECIES	HEIGHT (m)	COVER (%)
Grevillea oncogyne	1.5	<1
Acacia resinimarginea	1.4	10
Cyanostegia angustifolium		
Acacia neurophylla	1.7	5
Acacia enervia	1.2	<1
Goodenia elderi		
Monotaxis luteiflora		
Grevillea paradoxa	1.5	1
Thryptomene cuspidata	0.5	<1
Homalocalyx thryptomenoides	0.5	<1
Ericomyrtus serpyllifolia	0.4	2
Philotheca tomentella	0.6	<1
Phebalium canaliculatum	0.3	<1
Phebalium filifolium	0.7	2
Seringia velutina	0.2	<1
Beyeria calycina	0.4	<1
Hemiphora elderi	0.2	<1
Eremophila alternifolia		
Amphipogon caricinus		
Stylidium limbatum	0.1	<1

* introduced species

2008RT01 L3

MONITORING PLOT 6

16.10.24

50 227213 E 6635788 N SW peg

QUADRAT (20 x 20m) **Pegs SW and SE corner**

SPECIES	HEIGHT (m)	COVER (%)
Grevillea oncogyne	dead	
Acacia resinimarginea	1-1.5	10
Cyanostegia angustifolium		
Grevillea paradoxa	1.1	3
Leptomeria preissianus		
Acacia hemiteles		
Acacia neurophylla	1.1	<1
Thryptomene cuspidata	0.7	<1
Goodenia elderi		
Beyeria calycina	0.5	<1
Phebalium canaliculatum	0.7	<1
Phebalium filifolium	0.5	<1
Ericomyrtus serpyllifolia	0.5	<1
Phebalium tuberculatum		
Glischrocaryon angustifolium		
Philotheca tomentella	0.4	<1
Homalocalyx thryptomenoides	0.5	2
Seringia velutina	0.3	<1
Amphipogon caricinus	0.2	<1
Triodia tomentosa	0.2	<1
Eremophila alternifolia		

SPECIES	HEIGHT (m)	COVER (%)
Stylidium limbatum		

* introduced species

2002RT01 L1

MONITORING PLOT 7

16.10.24

50 227447 E 6635779 N SE peg

QUADRAT (20 x 20m) **Pegs SW and SE corner**

SPECIES	HEIGHT (m)	COVER (%)
Allocasuarina acutivalvis	0.8-2.5	<1
Acacia hemiteles	0.5	<1
Baeckea sp	0.6	<1
Acacia resinimarginea	1.5	30
Grevillea paradoxa	0.7	1
Thryptomene urceolaris	0.6	2
Beyeria calycina	0.6	1
Calytrix creswellii	0.2	<1
Seringia velutina	0.2	1
Phebalium filifolium	1.0	<1
Stylidium limbatum		
Triodia scariosa	0.2	<1

* introduced species

2002RT01 L3

MONITORING PLOT 8

16.10.24

50 227498 E 6635784 N SW peg

QUADRAT (20 x 20m) **Pegs SW and NE corner**

SPECIES	HEIGHT (m)	COVER (%)
Allocasuarina acutivalvis	1.8-2.5	<1
Acacia resinimarginea	1.8	40
Grevillea paradoxa	1.2	2
Acacia neurophylla	1.0	<1
Acacia hemiteles	1.2	<1
Phebalium canaliculatum	0.5	<1
Phebalium filifolium	0.7	<1
Beyeria calycina	0.6	<1
Seringia velutina	0.5	<1
Thryptomene cuspidata	0.5	<1
Euryomyrtus maidenii		
Philotheca tomentella	0.4	<1
Thryptomene urceolaris	0.7	2
Baeckea muricata		
Triodia scariosa	0.2	<1

* introduced species

97NRT02 L1

MONITORING PLOT 9

16.10.24

50 227512 E 6635758 N NE peg

No Photo

QUADRAT (20 x 20m) **Pegs NW and NE corner**

SPECIES	HEIGHT (m)	COVER (%)
Hakea francisiana	2.8	<1
Acacia enervia		
Leptomeria preissianus	1.8	<1
Allocasuarina acutivalvis	1.5-2.5	60
Allocasuarina corniculata	1.5-2	<1
Acacia resinimarginea	1.8	5
Grevillea paradoxa	1.2	<1
Beyeria calycina	0.5	3
Thryptomene urceolaris	0.4	<1
Phebalium filifolium	0.6	2
Triodia scariosa	dead	

* introduced species

97NRT02 L3

MONITORING PLOT 10

16.10.24

50 227523 E 6635663 N NW peg

No photo

QUADRAT (20 x 20m) **Pegs NW and SW corner**

SPECIES	HEIGHT (m)	COVER (%)
Allocasuarina acutivalvis	to 2.5	20
Eucalyptus cometae-vallis	1.4	<1
Acacia resinimarginea	1.1	5
Allocasuarina corniculata	1.0	<1
Acacia enervia		
Acacia neurophylla	1.5	<1
Grevillea paradoxa	0.7	<1
Beyeria calycina	0.5	<1
Petalostylis cassioides		
Olearia exiguifolia	0.3 sick	<1
Philotheca tomentella		
Phebalium filifolium	0.6	<1
Thryptomene urceolaris		
Phebalium canaliculatum	0.5	<1
Seringia velutina	0.3 sick	1
Triodia scariosa	0.1	<1
Stylidium limbatum	0.1	<q

* introduced species

97NRT02 L2

MONITORING PLOT 11

16.10.24

50 227556 E 6635766 N NW peg

QUADRAT (20 x 20m) **Pegs NW and NE corner**

SPECIES	HEIGHT (m)	COVER (%)
Allocasuarina acutivalvis	2.5	40
Eucalyptus sp	1.8	<1
Acacia resinimarginea	1.6	20
Allocasuarina corniculata	1	<1
Grevillea paradoxa	0.8	5
Phebalium filifolium	0.7	1
Beyeria calycina	0.6	3
Seringia velutina	0.7	<1
Phebalium canaliculatum	0.4	<1
Thryptomene urceolaris	0.4	<1
Philotheca tomentella	0.3	<1
Amphipogon caricinus		

* introduced species

97NRT01 L1

MONITORING PLOT 12

50 227638 E 6635761 N NE peg

QUADRAT (20 x 20m) **Pegs NW and NE corner**

SPECIES	HEIGHT (m)	COVER (%)
Hakea francisiana	3.0	<1
Allocasuarina acutivalvis	2-3	30
Grevillea paradoxa	1.7	<1
Acacia neurophylla	1.6	<1
Allocasuarina corniculata	1.5	<1
Acacia enervia	2.1	1
Acacia resinimarginea	1.8	20
Leptomeria preissianus	1.7	<1
Philotheca tomentella		
Thryptomene urceolaris	0.6	<1
Phebalium canaliculatum	0.3	<1
Phebalium filifolium	0.6	1
Lepidosperma sp.	0.3	<1
Scaevola restiacea		
Seringia velutina	0.5	<1
Beyeria calycina	0.5	2
Prostanthera serpyllifolia	0.3	<1
Amphipogon caricinus	0.2	<1

* introduced species

97NRT01 L2

MONITORING PLOT 13

16.10.24

50 227673 E 6635760 N

No photo

QUADRAT (20 x 20m) **Pegs NW and NE corner**

SPECIES	HEIGHT (m)	COVER (%)
Hakea francisiana	3	1
Allocasuarina acutivalvis	2	25
Grevillea oncogyne	2	<1
Acacia enervia	2	1
Acacia resinimarginea	1.8	15
Allocasuarina corniculata	1.6	<1
Melaleuca uncinata	1.0	1
Grevillea acacioides	1.4	<1
Leptomeria preissianus	1.4	1
Grevillea paradoxa	0.6	<1
Lepidosperma sp.	0.5	1
Thryptomene urceolaris	0.4	<1
Beyeria calycina	0.5	2
Philotheca tomentella	0.3	<1
Seringia velutina	0.2	<1
Phebalium canaliculatum	0.5	<1
Phebalium filifolium	0.6	2
Triodia scariosa	0.2	<1
Amphipogon caricinus		

* introduced species

2000RT01 L1

MONITORING PLOT 14

16.10.24

50 227658 E 6635786 N SE peg

QUADRAT (20 x 20m) **Pegs SW and SE corner**

SPECIES	HEIGHT (m)	COVER (%)
Allocasuarina acutivalvis	3	20
Hakea francisiana	3.5	<1
Leptomeria preissianus		
Acacia neurophylla	2	2
Acacia resinimarginea	2.5	25
Acacia enervia	1.8	<1
Grevillea paradoxa	1.6	10
Acacia hemiteles	1.2	<1
Phebalium filifolium	0.8	<1
Beyeria calycina	0.6	2
Glischrocaryon angustifolium		
Callitris columellaris	1.1	<1
Phebalium canaliculatum		
Amphipogon caricinus	0.1	1

* introduced species

2000RT01 LX

MONITORING PLOT 15

16.10.24

50 227709 E 6635874 N SW peg

QUADRAT (20 x 20m) **Pegs SW and SE corner**

SPECIES	HEIGHT (m)	COVER (%)
Allocasuarina acutivalvis	2.3	15
Santalum spicatum	2	<1
Allocasuarina corniculata	1.8	<1
Grevillea paradoxa	1.2	5
Acacia resinimarginea	1.9	10
Beyeria calycina	0.7	5
Acacia hemiteles	1.2	<1
Monotaxis luteiflora	0.7	<1
Prostanthera serpyllifolia	0.6	<1
Phebalium filifolium	1	5
Thryptomene urceolaris		
Phebalium canaliculatum	0.4	<1
Amphipogon caricinus	0.2	1
Stylidium limbatum	0.1	<1
Rhodanthe citrina	0.1	<1

* introduced species

96NRT01 L1

MONITORING PLOT 16

16.10.24

50 227734 E 6635756 N NE peg

No photo

QUADRAT (20 x 20m) **Pegs NW and NE corner**

SPECIES	HEIGHT (m)	COVER (%)
Grevillea oncogyne	4	1
Allocasuarina acutivalvis	2-4	30
Eucalyptus eremophila	3.5	<1
Acacia resinimarginea	2	20
Allocasuarina corniculata	1.9	1
Leptomeria preissianus	1.7	<1
Melaleuca uncinata	1.7	<1
Leptospermopsis roei	1.4	<1
Beyeria calycina	0.4	<1
Phebalium filifolium	0.8	<1
Thryptomene urceolaris	0.7	<1
Lepidosperma sp	0.6	<1
Ericomyrtus serpyllifolia	0.5	<1
Seringia velutina		
Monotaxis luteiflora		
Baeckea muricata		
Philotheca canaliculata	0.3	<1
Calytrix creswellii	0.3	<1
Amphipogon caricinus	0.2	<1

* introduced species

Others in 96NRT01 L1: *Eucalyptus celastroides*

96NRT01 L3

MONITORING PLOT 17

16.10.24

50 227775 E 6635677 N NE peg

QUADRAT (20 x 20m) **Pegs SE and NE corner**

SPECIES	HEIGHT (m)	COVER (%)
Eucalyptus eremophila	3.5	<1
Acacia enervia	2.1	<1
Allocasuarina acutivalvis	2	10
Allocasuarina corniculata	1.5	2
Grevillea paradoxa	1	5
Acacia resinimarginea	1.6	25
Acacia neurophylla	1.6	2
Thryptomene cuspidata	0.7	<1
Baeckea muricata	0.6	<1
Monotaxis grandiflora var. *obtusifolia*		
Phebalium sp.		
Beyeria calycina	0.4	<1
Phebalium filifolium	1	<1
Seringia velutina		
Thryptomene urceolaris	0.9	<1
Phebalium canaliculatum	0.5	<1

* introduced species

96NRT01 L2

MONITORING PLOT 18

16.10.24

50 227765 E 6635755 N NW peg

QUADRAT (20 x 20m) **Pegs NW and NE corner**

SPECIES	HEIGHT (m)	COVER (%)
Eucalyptus celastroides	3.5	<1
Acacia enervia subsp. *enervia*	2	<1
Acacia resinimarginea	1.7	20
Allocasuarina acutivalvis	2	50
Allocasuarina corniculata	1.8	1
Acacia neurophylla	2	1
Santalum acuminatum	1.7	<1
Grevillea paradoxa	0.8	<1
Lepidosperma sp	0.6	<1
Thryptomene urceolaris	0.3	<1
Phebalium filifolium	0.5	1
Beyeria calycina	0.3	1
Phebalium canaliculatum	0.6	<1
Callitris columellaris	0.7	<1
Melaleuca uncinata		
Triodia scariosa	0.1	<1

* introduced species

Others in 96NRT01 L2: *Alyxia buxifolia*

98NRT01 L1

MONITORING PLOT 19

16.10.24

50 227772 E 6635774 N SW peg

QUADRAT (20 x 20m) **Pegs SW and SE corner**

SPECIES	HEIGHT (m)	COVER (%)
Allocasuarina acutivalvis	1.5-2	70
Hakea francisiana	1	<1
Eucalyptus celastroides	1.6	<1
Grevillea paradoxa	0.6	2
Beyeria calycina	0.6	<1
Melaleuca uncinata		
Phebalium canaliculatum	0.5	<1
Amphipogon caricinus	0.3	<1
Phebalium filifolium	0.3	<1
Leucopogon sp Boorabbin	0.3	<1

* introduced species

Others in 98NRT01 L1: *Acacia resinimarginea*

98NRT01 L3

MONITORING PLOT 20

16.10.24

50 227833 E 6635781 N SW peg

QUADRAT (20 x 20m) **Pegs SW and SE corner**

SPECIES	HEIGHT (m)	COVER (%)
Allocasuarina acutivalvis	2.5	75
Acacia neurophylla	2	2
Acacia resinimarginea	1.9	5
Acacia enervia	1.8	<1
Grevillea paradoxa	1.1	10
Phebalium filifolium	1	<1
Phebalium canaliculatum	0.5	<1
Beyeria calycina	0.5	1
Seringia velutina		
Leucopogon sp Boorabbin	0.3	<1
Amphipogon caricinus	0.2	<1

* introduced species

98NRT02 L1

MONITORING PLOT 21

16.10.24

50 227835 E 6635702 N

QUADRAT (20 x 20m) **Pegs NW and NE corner**

SPECIES	**HEIGHT (m)**	**COVER (%)**
Eucalyptus celastroides	**3.5**	**<1**
Acacia neurophylla	2.5	10
Acacia enervia subsp. *enervia*		
Allocasuarina acutivalvis	2-2.5	60
Acacia resinimarginea	2	15
Allocasuarina corniculata	1.6	<1
Grevillea paradoxa	1.2	5
Phebalium canaliculatum	0.6	<1
Beyeria calycina	0.6	2
Phebalium sp.		
Thryptomene sp	0.5	<1
Phebalium filifolium	0.6	<1
Philotheca tomentella	0.4	<1
Leucopogon sp. Clyde Hill		
Seringia velutina		
Triodia scariosa	0.1	<1

* introduced species

2020NRT01

MONITORING PLOT 22

16.10.24

50 227268 E 6635767 N (NE peg)

No photo

QUADRAT (20 x 20m) **Pegs NW and NE corner**

SPECIES	HEIGHT (m)	COVER (%)
Grevillea oncogyne	2	<1
Cyanostegia angustifolium	1.2	1
Leptomeria preissianus	0.9	1
Grevillea paradoxa	0.8	10
Allocasuarina acutivalvis	0.7	<1
Acacia resinimarginea	0.6	1
Glischrocaryon angustifolium	0.5	<1
Hemiphora elderi	0.5	<1
Phebalium filifolium	0.4	1
Prostanthera serpyllifolia	0.4	<1
Dampiera stenostachya	0.4	<1
Philotheca tomentella	0.3	<1
Goodenia elderi	0.3	<1
Halgania integerrima	0.3	<1
Seringia velutina	0.3	<1
Eremophila alternifolia	0.3	<1
Phebalium canaliculatum	0.3	<1
Baeckea muricata	0.3	<1
Thelymitra urceolaris	0.3	<1
Baeckea sp	0.2	1
Thryptomene urceolaris	0.2	1
Thryptomene cuspidata	0.2	<1
Stylidium limbatum	0.1	<1
Rhodanthe citrina	0.1	<1

* introduced species

2020NRT01

MONITORING PLOT 23

16.10.24

50 227308 E 6635767 N (NW peg)

QUADRAT (20 x 20m) **Pegs NW and NE corner**

SPECIES	HEIGHT (m)	COVER (%)
Cyanostegia angustifolium	1	2
Acacia enervia	1	1
Acacia resinimarginea	0.8	<1
Grevillea paradoxa	0.7	5
Leptomeria preissianus	0.7	<1
Acacia neurophylla	0.7	<1
Dampiera stenostachya	0.5	1
Allocasuarina acutivalvis	0.4	1
Scaevola sp	0.4	<1
Hemiphora elderi	0.4	<1
Phebalium filifolium	0.3	1
Halgania integerrima	0.3	<1
Glischrocaryon angustifolium	0.3	<1
Seringia velutina	0.3	<1
Prostanthera serpyllifolia	0.3	<1
Triodia scariosa	0.3	<1
Acacia hemiteles	0.3	<1
Thryptomene sp	0.2	1
Goodenia elderi	0.2	<1
Thryptomene urceolaris	0.2	<1
Beyeria calycina	0.2	<1

SPECIES	HEIGHT (m)	COVER (%)
Stylidium limbatum	0.1	<1
Thryptomene cuspidata	0.1	<1

* introduced species

APPENDIX O

October 2024 Capping Monitoring Records

INTRACTABLE WASTE DISPOSAL FACILITY
FACILITY MANAGEMENT CONTRACTOR

CAPPING MONITORING RECORD IWDF-FORM-38b

Project No.: DFI-PP03-721-ANMO	**Storage Location of Photos: Aurora Environmental**	**Monitored By: MJS**
Site Name: Intractable Waste Disposal Facility, Mt Walton East		**Client: Department of Finance**
Monitoring Location: IWDF Disposal Cells		**Date: 17/10/2024**

Trench No.	Location/ Photo No.	Date	Time	Erosion channels?			Subsidence?			Description and Other Comments	
				Y/N	Number	Depth*	Y/N	Number	Depth*	View	Details
2020NRT01	Loc. 1	17-Oct	12:43	Y	Numerous	2-10cm	N	-	-	Compound	Still looks new
	Loc. 2	17-Oct	12:49	Y	1	5cm	N	-	-	Dome	One channel 5-10cm deep in fine clay
2008RT01	Loc. 1	17-Oct	12:28	Y	A few	1-3cm	N	-	-	Compound	Not deeply scoured
	Loc. 2	17-Oct	12:35	Y	2	1-2cm	N	-	-	Dome	Minor short channels
2002RT01	Loc. 1	17-Oct	12:14	N	-	-	N	-	-	Compound	Very minor channels
	Loc. 2	17-Oct	12:20	N	-	-	N	-	-	Dome	Most fines gone
2000RT01	Loc. 1	17-Oct	12:01	Y	A few	2-10cm	N	-	-	Compound	
	Loc. 2	17-Oct	12:07	Y	1	5-15cm	N	-	-	Dome	Main channel scoured again
98NRT02	Loc. 1	17-Oct	11:48	N	-	-	N	-	-	Compound	Southern end - minor
	Loc. 2	17-Oct	11:52	N	-	-	N	-	-	Dome	
98NRT01	Loc. 1	17-Oct	11:38	Y	Numerous	1-10cm	N	-	-	Compound	One channel on NW end 15cm deep
	Loc. 2	17-Oct	11:43	Y	2	1-15cm	N	-	-	Dome	One slightly deeper channel
97NRT02	Loc. 1	17-Oct	11:28	Y	A few	1-5cm	N	-	-	Compound	Minor channels, fines mostly gone
	Loc. 2	17-Oct	11:32	N	-	-	N	-	-	Dome	
97NRT01	Loc. 1	17-Oct	11:15	Y	A few	1-2cm	N	-	-	Compound	
	Loc. 2	17-Oct	11:22	Y	2	2cm	N	-	-	Dome	
96NRT01	Loc. 1	17-Oct	10:35	N	-	-	N	-	-	Compound	
	Loc. 2	17-Oct	10:40	N	-	-	N	-	-	Dome	
94NRT02	Loc. 1	17-Oct	10:30	N	-	-	N	-	-	Dome	
94NRT01	Loc. 1	17-Oct	10:25	N	-	-	N	-	-	Compound	
94RT01	Loc. 1	17-Oct	10:14	N	-	-	N	-	-	Compound	
92RS01+94RS01	Loc. 1	17-Oct	10:08	N	-	-	N	-	-	Dome	Surface fines mostly removed

IWDF MT. WALTON EAST

TRENCH CAPPING PHOTOS

OCTOBER 2024

2020NRT01 - Loc.1

2020NRT01 - Loc.2

2008RT01 - Loc.1

2008RT01 - Loc.2

2002RT01 - Loc.1

2002RT01 - Loc.2

2000RT01 - Loc.1

2000RT01 - Loc.2

1998NRT02 - Loc.1

1998NRT02 - Loc.2

1998NRT01 - Loc.1

1998NRT01 - Loc.2

1997NRT02 - Loc.1

1997NRT02 - Loc.2

1997NRT01 - Loc.1

1997NRT01 - Loc.2

1996NRT01 - Loc.1

1996NRT01 - Loc.2

1994NRT02 - Loc.1

1994NRT01 - Loc.1

1994RT01 - Loc.1

1992RS01 / 1994RS01 - Loc.1

APPENDIX P

2024 – 2025 Management System Manuals

Government of **Western Australia**
Department of **Finance**

INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST ENVIRONMENTAL, HEALTH & SAFETY AND QUALITY MANAGEMENT SYSTEM (EHSQMS)

MANAGEMENT AND POLICY MANUAL DEPARTMENT OF FINANCE

This manual is the Environmental, Health and Safety and Quality Policy, organisational structure, and procedures as adopted by the Department of Finance (Finance) for the management of the Intractable Waste Disposal Facility, Mt Walton East (IWDF).

This Management and Policy Manual is intended to provide an overview of policy, corporate status, and of the Management System itself.

This Management and Policy Manual should be read in conjunction with the relevant procedures and attachments.

Rev	Date	Description	Prepared by:	Checked by:	Approved by:
1		Draft			
1.1	26/08/07	Draft	LDM	MJS	
2	10/09/07	Final	LDM	MJS	MJS
3	01/03/10	Draft	LDM	RH	
4	15/08/10	Final	LDM	RH	RH
4.1	01/07/11	Draft	LDM	RH	
5	14/08/11	Final change of proponent details	LDM	RH	RH
5.1	12/09/12	Update Section 4 DEC to OEPA	LDM	RH	RH
6	06/09/13	Update Sections 2,4 & 5 & change DEC to DER	LDM	RH	RH
7	12/06/14	Minor corrections and update to Section 3.3	LDM	LM & RH	RH
8	10/11/14	Review and comment on Environmental & Quality policy for discussion at next MRM	LDM	LM & RH	
9	14/09/15	Update to env policy – new ISO 14001 & 9001	LDM	LM & RH	MT
10	23/10/16	update to section 3.3	LDM		MT
11	31/05/17	Update to EHSQ Policy	LDM	MJS	MT
12	24/10/17	Inclusion of signed EHSQ policy, pagination & version #, also updated RSO info	LDM	MJS	
13	21/11/18	Update to naming of govt depts., review of policy, update to summary of disposal, governance	LDM	MJS	MT
14	14/11/19	Review – branding change	LDM	MJS	MT
15	22/03/21	Update to include 2020NRT01, minor change to Policy title, update (replacement to governance structure figure), minor change to Policy to ISO standard naming	LDM	MT	MT
16	10/09/21	Revised Figure 3: IWDF Governance Structure included, 92RS02 renamed 94RS01, title of Figure 3 in TOC updated,	LDM	MT	MT
17	16/12/21	minor formatting changes, update to S4 to rename Chemical Disposal Area to Chemical and Radioactive Disposal area for some disposal cell summaries. Policy review.	LDM	MT	MT approved 16/12/21
18	11/05/22	Section updated to include change of proponent to Minister for Works C/- Department of Finance	LDM	MT	MT
19	15/11/22 20/12/22	Section 3.1 updated with renewed DWER Licence conditions; Section 5.5 with updated governance structure. Updated to include Policy review date.	LDM	MT	MT
20	08/12/23	Inclusion of reviewed and signed policy	LDM	MT	MT
21	18/07/24	Review and update to policy. All licenses and registration documents shifted to appendices. Figures 1, 2, and 3 updated.	CJG	MJS	MJS

MT – Management Team

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C **ASNO Permit PN207**

Government of **Western Australia**
Department of **Finance**

ENVIRONMENTAL, HEALTH & SAFETY AND QUALITY POLICY
INTRACTABLE WASTE DISPOSAL FACILITY

The Department of Finance is responsible for the management of the Intractable Waste Disposal Facility (IWDF), owned by the State Government of Western Australia. The objective of intractable waste disposal is to isolate the waste permanently from the community and environment as safely and economically as possible.

COMMITMENT

The Department of Finance is committed to minimising the impact of the IWDF and its operations on the environment, IWDF personnel, and the general community of Western Australia. This commitment will be achieved through the continual implementation of the Environmental and Health & Safety and Quality Management System (EHSQMS), which is consistent with the requirements of ISO 9001:2015/AMDT 1:2024, ISO 14001:2015/AMDT 1:2024, and ISO 45001:2018/AMDT 1:2024.

OBJECTIVES

The objectives of the IWDF EHSQMS are to ensure:

1. the requirements of all statutory obligations, standards, specifications, and codes of practice relevant to the operation of the IWDF are fulfilled or exceeded;

2. the IWDF is operated to the highest standards of public sector management;

3. the use of recognised current best practices, such as pollution prevention practices, for all activities at the IWDF;

4. continual awareness of international advances in technologies relevant to the operation of the IWDF;

5. the continued adequacy and suitability of the Environmental, Health & Safety and Quality Policy, and the EHSQMS, through a process of maintaining, monitoring, reviewing, auditing and continually improving;

6. that all personnel involved in IWDF management and operations are appropriately educated and trained in order to continually improve professional skills, awareness and knowledge of the issues and practices;

7. direct liaison with the community of Western Australia on all operational activities and outcomes; and

8. that all disposal details, monitoring and auditing records, are both publicly available and securely stored for future reference.

RESPONSIBILITIES

Senior management will provide the resources and framework for setting objectives, targets and detailed actions, as well as specifying review periods for assessing their continued suitability.

All IWDF personnel are responsible for implementing this policy and achieving the expectations of this policy within the area of their responsibility.

REVIEW

This policy will be reviewed annually for ongoing suitability by the management team.

Signed: Eleanor Hopkins Date: 18/07/2024
IWDF Project Director

1. IWDF SITE INFORMATION

1.1 Overview

Prior to the establishment of the Intractable Waste Disposal Facility (IWDF), Mt Walton East in 1992, thorough studies and investigations were undertaken to ensure that the site had suitable geological, meteorological, and hydrogeological characteristics. The site was also assessed for the presence of areas of environmental, economic, agricultural, or cultural importance. Studies in the following areas helped in the establishment of appropriate objectives and management plans for the site.

1.2 Aboriginal and Archaeological Significance

A study of ethnographic and archaeological sites at and near the IWDF was conducted in 1988 prior to the commissioning of the site. This included consultation with Aboriginal leaders in the region. The study concluded that there were no sites of Aboriginal or archaeological significance within a 15-kilometre radius of the site.

1.3 Flora and Fauna

Several flora and fauna surveys of the region have been undertaken since 1988. While no declared rare flora has been discovered at the site, some priority species have been identified. Measures are now in place to ensure these species are conserved.

1.4 Groundwater

The IWDF lies in an area where the regional water table is absent. Despite extensive drilling over the site, no groundwater has been encountered down to bedrock. Any water derived from rainfall either evaporates or infiltrates the colluvial sediments on the site. The infiltrating water eventually percolates to the top of the silcrete layer before either being taken up by plants, evaporating, or migrating slowly off site. Water migration off-site would eventually drain into the colluvial and alluvial sediments of the ancient drainage systems located on the east and west of the IWDF site. Groundwater in these drainage areas is generally saline-to-hypersaline and has no agricultural or human use.

In 1995, two monitoring bores were constructed to bedrock to investigate groundwater conditions adjacent to the existing radioactive waste and chemical waste disposal areas. These bores were dry at the time of construction. Subsequent monitoring has not found any groundwater in either of these monitoring bores. In 1999, six further monitoring bores were constructed down to bedrock in the general vicinity of the chemical and radioactive waste disposal area. In 2009, an additional monitoring bore was constructed down to bedrock in the vicinity of the 2008 disposal trench. Groundwater monitoring to date has not found any groundwater in any of these monitoring bores.

1.5 Geology

The IWDF lies in the central eastern portion of the Achaean Yilgarn Block, a tectonically stable, ancient craton comprising granitic rocks and intervening greenstone belts. These belts contain a variety of volcanic, metamorphic, and sedimentary rocks. The Yilgarn block generally has low seismic activity.

In geological terms, the IWDF site is typical of areas overlying deeply weathered granite domes. The profile generally comprises four main lithologies. From the surface these are:

1. Colluvial sand - comprises yellow brown quartz sand overlying nodular red brown clayey sand. It averages about 1.5 m thick.

2. Silcrete - comprises kaolinitic clay which has been variably indurated with silica to form a hard cap over underlying lithologies. This cap averages about 3 m thick.

3. Kaolinitic clay - comprises soft white kaolin weathered from preexisting granite. As a result, the clays contain relict quartz phenocrysts. This important profile houses the buried waste and is generally more than 15 m thick over the site. It is absent in several areas, especially where the bedrock is shallow. Elsewhere, it has a maximum thickness of 32.5 m.

4. Granitoid Basement - comprises a fine-to-medium grained leucocratic granite containing pegmatite and quartz veins. The basement topography varies over the site from 3.5 m to 47 m below the surface.

The lack of a groundwater table and the thickness of the kaolinitic clay profile are the key geological attributes of the site in terms of its function as an intractable waste repository. These characteristics preclude the transport of contaminants off-site.

2. PROPONENT HISTORY

Health Department of Western Australia (1992 to September 1996)

The IWDF was the initiative of the Health Department of Western Australia. They were responsible for establishing the IWDF to enable the disposal of low-level radioactive waste. This waste was collected over many years and was previously stored in the radioactive waste depository at the Radiation Health Section of the Department of Western Australia.

Although the Health Department was the legal proponent for the IWDF until around September 1996, the operational responsibility for the IWDF was transferred to the Environment portfolio in 1994.

Department of Environmental Protection WA (October 1996 to 30 June 1998)

Operations were undertaken directly by the Department of Environmental Protection (DEP), with the works performed by the DEP Waste Operations Team.

Waste Management (WA) (1 July 1998 to January 2005)

Following amendments to the *Environmental Protection Act 1986* (EP Act) which took effect on 1 July 1998, Waste Management WA, “WM (WA)”, a body corporate of the then DEP, became the proponent for operation of the IWDF under the EP Act. The IWDF was owned and operated by WM (WA) on behalf of the Western Australian Government. The IWDF site was operated under Ministerial Direction, and was therefore monitored by the EPA.

WM (WA) was the operator of the IWDF. Senior officers in the DEP, working for WM (WA), managed the IWDF site.

WM (WA) did not require a licence or other authorisations as conferred by the EP Act, to undertake a waste management operation at the IWDF. It was taken that WM (WA) complied with all the provisions of the EP Act. However, the standard environmental and regulatory approvals were required in relation to the specifics of each waste management operation. WM (WA) was also obliged to perform operations under the directions of the Minister of the Environment.

WM (WA) as the proponent for the IWDF accepted responsibility on behalf of government for:

- ongoing management of the wastes disposed of at the IWDF;
- acceptance of waste for disposal; and
- monitoring of the IWDF site for the operational and institutional control period.

Department of Housing and Works (February 2005 to January 2009)

In February 2005, responsibility for the IWDF was transferred to the Department of Housing and Works (DHW). DHW was subsequently designated as the proponent for the IWDF for the purposes of environmental approval under part IV of the *Environmental Protection Act 1986*.

Management Orders issued under the *Land Administrations Act 1997* vested the reserve upon which the IWDF is located with the Minister for Works care of the Department of Housing and Works. DHW as the proponent for the IWDF accepted responsibility on behalf of government for:

- ongoing management of the wastes disposed of at the IWDF;
- acceptance of waste for disposal; and
- monitoring of the IWDF site for the operational and institutional control period.

Department of Treasury and Finance, Building Management & Works (February 2009 – June 2011)

In February 2009, after a change of government in Western Australia, the 'Works' function of the Department of Housing and Works, was transferred to the Department of Treasury and Finance, Building Management and Works (DTF/BMW).

Responsibility for the management and operation of the IWDF was transferred to the DTF/BMW.

Department of Finance (July 2011- January 2022)

On 1 July 2011, the Department of Treasury and Finance was renamed to the Department of Treasury. At the same time, the State Revenue, Government Procurement, Building Management and Works and Shared Services functions of the Department of Treasury and Finance were transferred to the newly created Department of Finance.

Responsibility for the management and operation of the IWDF was transferred to the Department of Finance.

Minister for Works *(January 2022 – current)*

A request to change the nominated proponent from the Department of Finance to the Minister for Works C/- Department of Finance was submitted to the Department of Water and Environmental Regulation on 13 October 2021.

The request was approved by the Minister for the Environment on the 21st of January 2022.

The Minister for Works is the relevant body corporate with the statutory authority, as an agent of the Crown in right of the State, to carry out the functions relevant to the IWDF.

The Department of Finance is the Government agency responsible for assisting the Minister for Works in the administration of the Public Works Act 1902 (WA).

3. SITE LICENCE AND REGISTRATION INFORMATION

3.1 Environmental Licence

The IWDF is licensed by the Western Australian Department of Water and Environmental Regulation (DWER), previously the Department of Environment Regulation (DER), under Part V of the *Environmental Protection Act 1986*. The IWDF is categorised as a Prescribed Premises - Category 66 Class V intractable landfill site.

The IWDF Environmental Licence L8190/2007/2 (issued 16 August 2022) includes twelve conditions. These conditions can be seen in Appendix A.

3.2 Management Orders

Management Orders issued under the *Land Administrations Act 1997* vest the reserves that the IWDF, and its 100 km IWDF access road, resides on, with the Minister for Works.

3.3 Radiological Council Registration

The IWDF is required under the *Radiation Safety Act 1975* to be registered with the Radiological Council as premises in which radioactive substances are used, stored, or manufactured. The registration is usually issued for a period of three years.

The RC registration RS 13/2011 20590 for 13 July 2023 to 8 February 2026 names Ms Jodi Cant, Director General, Department of Finance, as the registrant. Stuart Parr is named as the Radiological Council approved Radiation Safety Officer for the IWDF.

The conditions, restrictions, and limitations of the renewed registration have been updated as seen in Appendix B.

3.4 Permit to Possess Nuclear Material

Australia has enacted the *Nuclear Non-Proliferation (Safeguards) Act 1987* to ensure that international obligations are met under the Nuclear Non-Proliferation Treaty (NPT). This Act is only concerned with nuclear materials such as uranium, thorium, and plutonium.

As there are small quantities of thorium and uranium disposed at the IWDF, the facility is required to have a ‘Permit to Possess Nuclear Material’. This permit (PN207) requires Finance to report the following annually to ASNO:

- its inventory of nuclear materials; and
- a description of each building containing nuclear materials.

The ASNO PN207 Permit (which expires 30 November 2024) is included in this document as Appendix C.

4. SUMMARY OF DISPOSAL OPERATIONS AT THE IWDF

Since 1992, fourteen disposal cells have been established at the IWDF. A summary of wastes disposed of within each cell, and their dimensions, is provided below.

92RS01 - Radioactive waste, Health Department

The waste comprised numerous small radioactive sources. This included a variety of teaching, research, hospital, and industrial wastes held in store by the Radiation Health Section of the Health Department of Western Australia. The waste was packaged into 60L drums that were filled with cement slurry. The 60L drums were then placed in 205L steel drums that were filled with concrete to remove voids. A total of 66 x 205L drums, and a one-metre-long cylinder, were disposed of at the IWDF. The waste packages were disposed of by progressively concreting them in place in a 2m diameter, 28m deep shaft, located in the Radioactive Waste Disposal Area. The waste is located 5.8m below ground level.

94RS01 - Radioactive waste, Health Department

The waste consisted of numerous small radioactive items held in store by the Radiation Health Section of the Health Department of Western Australia. The waste was packaged into 60L steel drums backfilled with cement slurry. The drums were then placed into 205L steel drums that were backfilled with cement to remove voids. A total of 69 x 205L steel drums were then progressively concreted into place in a 27m deep, 2m diameter shaft, located in the Radioactive Waste Disposal Area. The waste is located 5.8m below ground level.

94RT01 - Radium contaminated equipment, CSBP and Farmers Ltd

The waste consisted of process equipment contaminated with radium. The contaminated equipment originated from CSBP & Farmers Ltd and was transported to the IWDF in three 6m long shipping containers. The void spaces in the shipping containers were filled with cement slurry at the IWDF. Disposal was in a 40-metre-long, 3-meter-wide, and 8-metre-deep trench. This trench is located in the Radioactive Waste Disposal Area, with the waste located 4.5m below ground level.

94NRT01 - Pesticides, Health Department

The waste consisted of household pesticides stockpiled by the Pest Control Unit of the Health Department of Western Australia. The waste was packaged into 18 x 205L steel drums. These drums were then backfilled with cement slurry to preclude voids. The drums were disposed of in a 3.5-metre-long, 2.5-metre-wide and 4-metre-deep trench. This trench is situated in the Chemical and Radioactive Waste Disposal Area. The waste resides 2.8m below ground level.

94NRT02 - Arsenic waste, Department of Agriculture

Waste consisted of arsenical sheep dip wastes stockpiled by the Department of Agriculture after its use was banned in Western Australia. The waste was packaged in 219 x 205L steel drums. The waste was then disposed of in an 18-metre-long, 5-metre-wide, and 5-metre-deep trench in the Chemical and Radioactive Waste Disposal Area. The waste is located 3.8m below ground level.

96NRT01 - Contaminated soil, Department of Agriculture

Waste consisted of soil contaminated with the organochlorine pesticide dichlorodiphenyltrichloroethane (DDT) and toluene. Soil became contaminated following the rupture of a 20,000L tank at the Wongan Hills Agricultural Research Station, operated by the then Agriculture Western Australia.

Some bulk waste contaminated with DDT and toluene was also disposed of in the trench. This bulk waste included personal protective equipment worn by people working on the packaging and disposal operation. Also included was contaminated concrete from the floor of a shed that was in the path of the spill, as well as tarpaulins used to cover the spill area to prevent rainwater incursion before site remediation occured.

The waste was packaged in 1,012 two-tonne capacity bulka bags and disposed of in a 55-metre-long, 8-metre-wide, 8-metre-deep trench. This trench is located in the Chemical and Radioactive Waste Disposal Area. The waste resides 4.5m below ground level.

97NRT01 - Arsenic trioxide, Kanowna Belle Gold Mines

Waste consisted of arsenic trioxide generated as a by-product of gold extraction by Kanowna Belle Gold Mines. The waste was packaged into 986 bulka bags, weighing on average 0.65 tonne. Arsenic levels in the waste averaged 25% and were all below 70%.

The waste was disposed of in a trench in the Chemical and Radioactive Waste Disposal Area that was 9.5m deep, 80m long and 9m wide. The waste is located 6.0m below ground level.

97NRT02 - Arsenic waste, Wesfarmers CSBP

Waste consisted of arsenic generated as a by-product of the vetrocoke process in the production of ammonia by Wesfarmers CSBP Ltd, at its fertiliser and chemical facility in Kwinana.

The waste was packaged in 1,662 x 220L high-density polyethylene (HDPE) drums placed within bulka bags, and 308 x 60L HDPE drums (with three drums per bulka bag). Used personal protective equipment and materials from the packaging activities were placed in 37 bulka bags and also buried in the trench.

Composite and random samples indicated that the arsenic concentration in the waste ranged from 1.5% to 33.6%. The waste was disposed in a 14.3-metre-deep trench in the Chemical and Radioactive Waste Disposal Area. The trench base dimensions were approximately 55m long and 7m wide. The waste is located 9.0m below ground level.

98NRT01 - Arsenic trioxide waste, Kanowna Belle Gold Mines

Arsenic trioxide waste generated as a by-product of gold extraction by Kanowna Belle Gold Mines. The waste was packaged into 748 bulka bags, weighing on average 0.65 tonne. Arsenic levels in the waste ranged from 2% to 50% arsenic (average 27%). The waste was disposed of in the Chemical and Radioactive Waste Disposal Area, in a 12.4-metre-deep trench with base

dimensions of approximately 42m long and 12m wide. The waste is located 8.0m below ground level.

98NRT02 - PCB contaminated soil, Stephenson and Ward Site

The waste comprised polychlorinated biphenyl (PCB) contaminated soil from the remediation of the Stephenson and Ward incinerator site in Welshpool. The waste was packaged into 103 bulka bags weighing 1.2 to 2.0 tonnes. PCB concentrations in the waste varied between 59 to 9,200 milligrams per kilogram. The waste was disposed of in the Chemical and Radioactive Waste Disposal Area, in a 12.4-metre-deep trench with base dimensions of approximately 13m long and 8.5m wide. The waste is located 7.5m below ground level.

2000RT01 - Radioactive and chemical waste, various waste owners

This 2000 disposal at the IWDF involved the burial of 2,905.8 cubic metres of radioactive and non-radioactive wastes, originating from twelve different companies and government agencies. The waste was disposed of in the Chemical and Radioactive Waste Disposal Area.

Excavation began at the site in early January, with the construction of a specifically designed disposal trench. The trench measured 56m long, 12m wide and 13m deep.

Acceptance of chemical wastes commenced in early March and was completed by mid-April. The first consignment of waste consisted of 1,483 bulka bags of arsenic powder, and 96 bulka bags of used filters and arsenic-contaminated PPE from Kanowna Belle Gold Mines. Following this, 192 x 205L drums of arsenic sludge from vetrocoke processes from Wesfarmers CSBP, 20 x 205L steel drums of vanadium powder and 6 x 205L drums of arsenic trioxide and dried ferric/calcium arsenate sludge from AMMTEC Pty Ltd were disposed. Arsenic contaminated wastes packaged in 23 x 205L drums, one hazspill drum, and three steel bins of arsenic were also accepted from Agriculture Western Australia. In addition to this, 240 x 205L steel drums, packaged in steel bins from Nufarm Pty Ltd, were also disposed. This waste consisted of mixed organic chemicals originating from pesticide manufacturing.

Following the burial of all the chemical wastes, 64 x 205L steel drums of low-level radioactive waste were disposed of. A specially constructed clay barrier separated the radioactive and chemical waste.

The Health Department made up most of the radioactive waste consignment with 50 x 205L drums of exit signs and gauge sources. The rest of the waste consignment was made up from the following sources:

- The Department of Conservation and Land Management (2 x 205L drums of soil moisture gauge sources);
- Radiation Safety Services (4 x 205L drums of industrial gauge sources);
- Simsmetal (1 x 205L drum of contaminated scrap metal);
- Agriculture Western Australia (4 x 205L drums of soil moisture gauge sources);
- North Ltd (1 x 205L drum containing XRF instrument source); and
- Advanced Manufacturing Technology Centre (2 x 205L industrial gauge sources).

Construction of the water shedding dome for the trench was completed in early June. The waste is located 8.0m below ground level.

2002RT01 - Radioactive and chemical waste, various waste owners

The 2002 disposal was conducted between April 2002 and October 2002. This disposal involved the burial of radioactive and non-radioactive wastes, originating from six different companies and government agencies.

The chemical and low-level radioactive wastes were co-disposed in a trench, designated Trench 2002RT01, in the Chemical and Radioactive Waste Disposal Area. The chemical waste consisted of:

- 21 x 6m and 1 x 12m sea containers and 92 x 205L drums of arsenic trioxide contaminated solids from the decommissioning of plant at Wesfarmers' Kwinana Fertiliser Operation; and
- 30 x 205L drums of arsenic based products collected during the Chem Collect program.

Following burial of the chemical waste, a clay barrier was constructed to ensure separation of the radioactive waste from the chemical waste. 5 x 205L drums and one concrete encased safe containing low level radioactive waste were then placed in the trench. A multi-layer, compacted cap was then constructed to secure the waste.

The radioactive waste was packaged into 60L steel drums backfilled with cement slurry. The drums were then placed into 205L drums that were backfilled with cement to remove voids.

The disposal trench was constructed to a depth of 14.6m, a width of 12m and a length of 19m. Construction of the water shedding dome for the trench was completed in early October. The waste is located 9.2m below ground level.

2008RT01 - Radioactive and chemical waste, various waste owners

The 2008 disposal was conducted between January and October 2008. This disposal involved the burial of radioactive and non-radioactive wastes, originating from eleven different companies, private citizens, and government agencies.

The chemical and low-level radioactive wastes were co-disposed in a trench, designated Trench 2008RT01, in the Chemical and Radioactive Waste Disposal Area.

The chemical waste consisted of 3,564 flexible intermediate bulk containers (FIBCs) of arsenic trioxide fume waste generated as a by-product of tantalum processing from Talison Minerals in Greenbushes, Western Australia.

Following the burial of the chemical waste, a clay barrier was constructed to ensure separation of the radioactive waste from the chemical waste. 62 x 205L steel drums containing low level radioactive waste were then placed in the trench. A multi-layer, compacted cap was then constructed to secure the waste.

The radioactive waste was packaged into 60L steel drums backfilled with cement slurry. The drums were then placed into 205L steel drums that were backfilled with cement to remove voids.

The disposal trench was constructed to a depth of 14m, a width of 26m, and an overall length of 147m. Construction of the water shedding dome for the trench was completed in early October. The waste is located 8.5m below ground level.

2020NRT01 - Contaminated piping, Water Corporation

The 2020 disposal operation was conducted between February and June 2020. The chemical wastes, originating from the Water Corporation, were disposed in a trench designated 2020NRT01. This trench is located in the Chemical and Radioactive Waste Disposal Area.

Waste disposed consisted of:

- 451 x 205L steel drums and 29 x 1,000L intermediate bulk containers (IBCs) containing bituminous pipe coating contaminated with asbestos and creosote which included polycyclic aromatic hydrocarbons (PAHs) and polychlorinated biphenyls (PCBs);
- one sea container containing contaminated solids; and
- 1,200 lineal metres of pipe with bituminous pipe coating attached.

The disposal trench was constructed to a depth of 14m, a width of 26m, and an overall length of 73m. The waste is located 8.5m below ground level.

5. ENVIRONMENTAL, HEALTH & SAFETY AND QUALITY MANAGEMENT SYSTEM

5.1 Overview

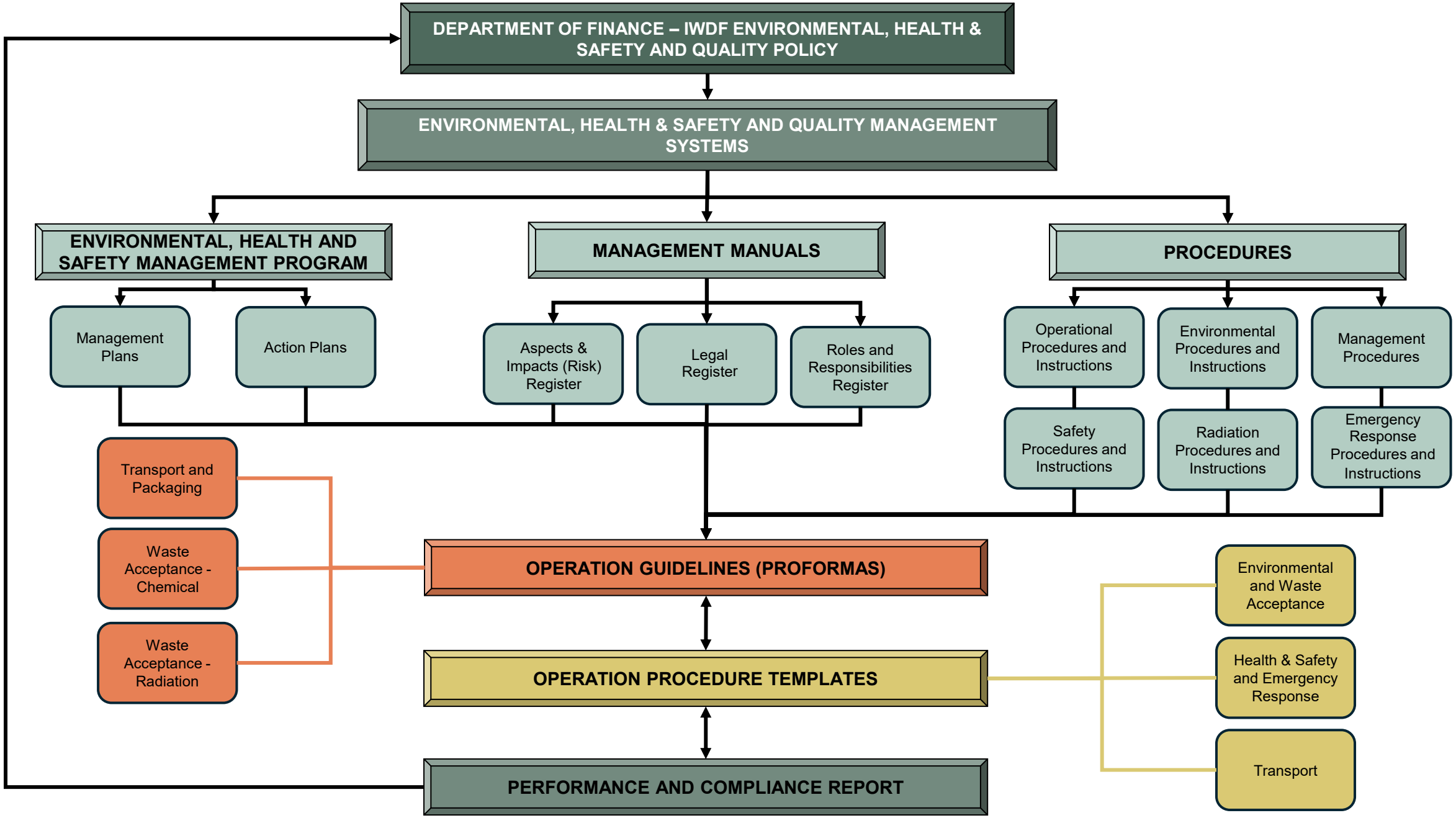
The IWDF Environmental, Health & Safety and Quality Management System (EHSQMS) is designed to identify areas of actual or potential environmental risk resulting from activities at the IWDF. The system then guides the formulation of procedures and objectives which minimise or eliminate these risks.

When correctly implemented, the EHSQMS will integrate environmental, quality and health and safety management into the IWDF's daily management and long-term planning. This is done to ensure that Finance maintains a high level of performance.

The Facility Management Contractor (FMC), on behalf of Finance, provide the resources required to achieve the IWDF management objectives.

The EHSQMS consists of the following components, as summarised in Figure 1.

FIGURE 1 Principal Environmental, Health and Safety Management System Documents



5.2 Management Manuals

There are two management manuals. These contain central information about the management of the IWDF and provide an overview of the system.

The Finance management manual (this manual) provides details on the IWDF site and an overview of the management system, including how its components are interconnected.

The Finance management manual also contains the three subcomponents detailed below:

a) Legal Register: The legal register details the major commonwealth and state legislation which the IWDF must adhere to.

b) Aspects and Impacts (Risk) Register: Identifies all aspects of activities at the IWDF and provides environmental, socio-political, legal and health and safety consequence and risk ratings for the impacts of each aspect.

c) *Roles and Responsibilities*: Details the responsibilities and activities of each position involved in the management of the IWDF. FMC roles are detailed more specifically in the FMC Organisational Structure section.

The FMC management manual highlights the FMC's status and details the structure of the FMC procedures. This manual also includes how these procedures interact with the Finance system.

5.3 Environmental, Health and Safety Management Program (EMP)

The EMP provides the basis for the establishment and maintenance of effective management programs to achieve the standards and targets of the IWDF. This includes enabling continual improvement in performance. It comprises of:

a) Management Plans: These management plans are summary documents which have been developed to provide high level management objectives and targets for the following aspects of the IWDF's activities:

- Flora and fauna
- Water
- Air quality
- Decommissioning and rehabilitation
- Health and safety
- Emergency response
- Radiation
- Transport

The management plans summarise the methods (i.e., procedures and operational controls) that are in place and must be maintained to achieve the on-going management goals.

b) Action Plans: These action plans detail Finance's specific improvement objectives, both long and short term, which strive for continual improvement in performance. They provide quantitative targets, timeframes, and personnel for achieving these objectives.

5.4 Procedures

a) Operation Guidelines: These are templates, which have been developed to manage the performance of specific tasks related to disposal operations. Guidelines for the following elements have been developed:

- Environmental;
- Waste Acceptance;
- Health and Safety & Emergency Response;
- Radiation;
- Packaging; and
- Transport.

b) Operation Procedure: When a disposal operation is planned, the operation procedure templates are completed so that they address the waste types and operation. Once completed and approved, the procedure templates become the operation procedures associated with that disposal operation.

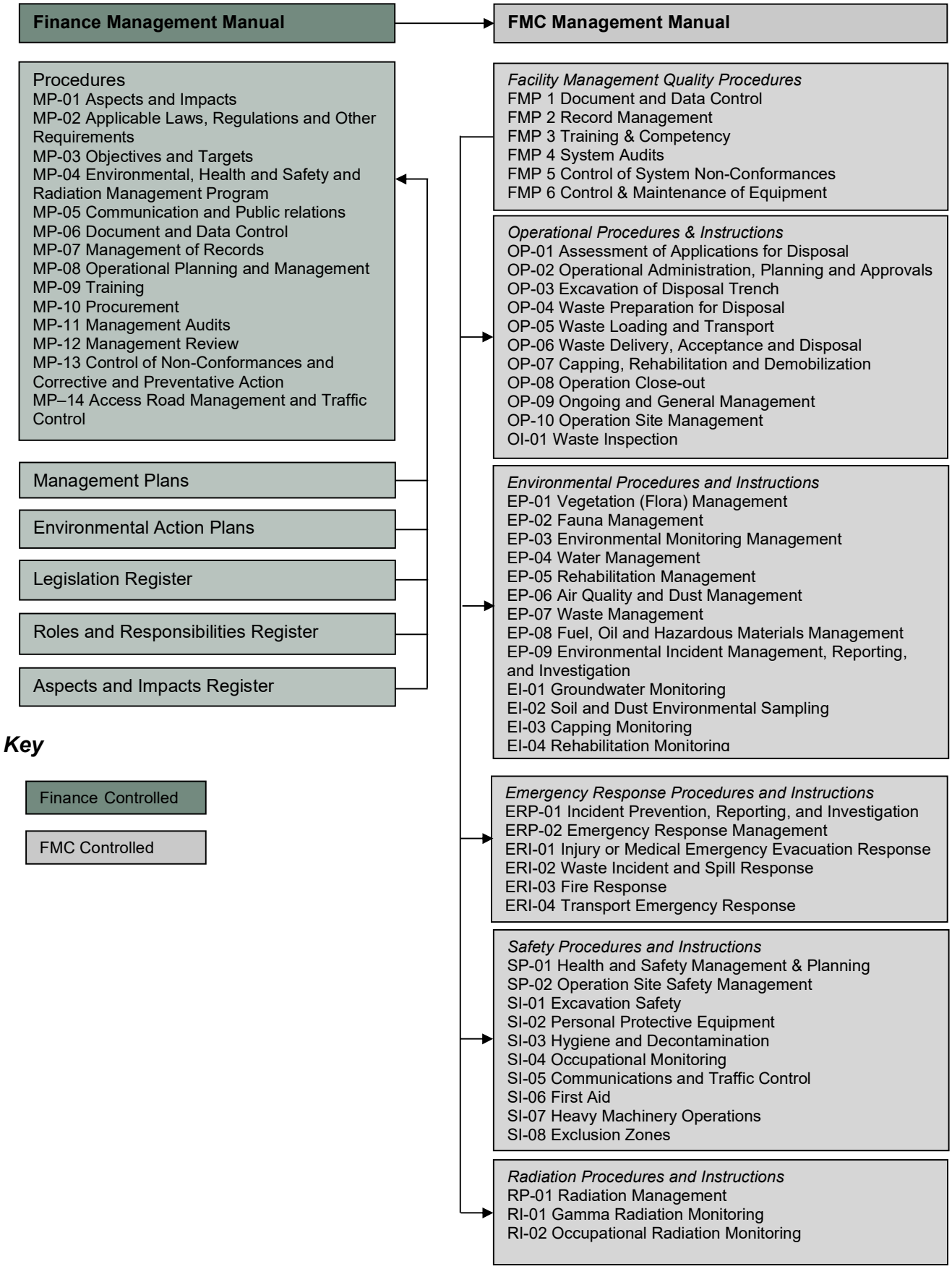
c) Procedures: Each procedure defines the purpose, scope and methodology of a set of systematic and related tasks. These procedures detail the "*who, what, where, when, how and why"* of each task to allow any employee to undertake them in the manner which Finance requires.

While each procedure is related to a specific activity or group of related activities, they are generally classified into six major groups:

- Management Procedures;
- Operational Procedures;
- Environmental Procedures;
- Health and Safety Procedures;
- Emergency Response Procedures; and
- Radiation Procedures.

The Management Procedures relate predominately to activities which are undertaken by Finance. However, the FMC also has Management Procedures. All other procedure types relate to tasks completed by the FMC. A list of all procedures, and who is responsible for their management, is detailed in Figure 2.

FIGURE 2 IWDF PROCEDURE STRUCTURE



5.5 Performance and Compliance Report

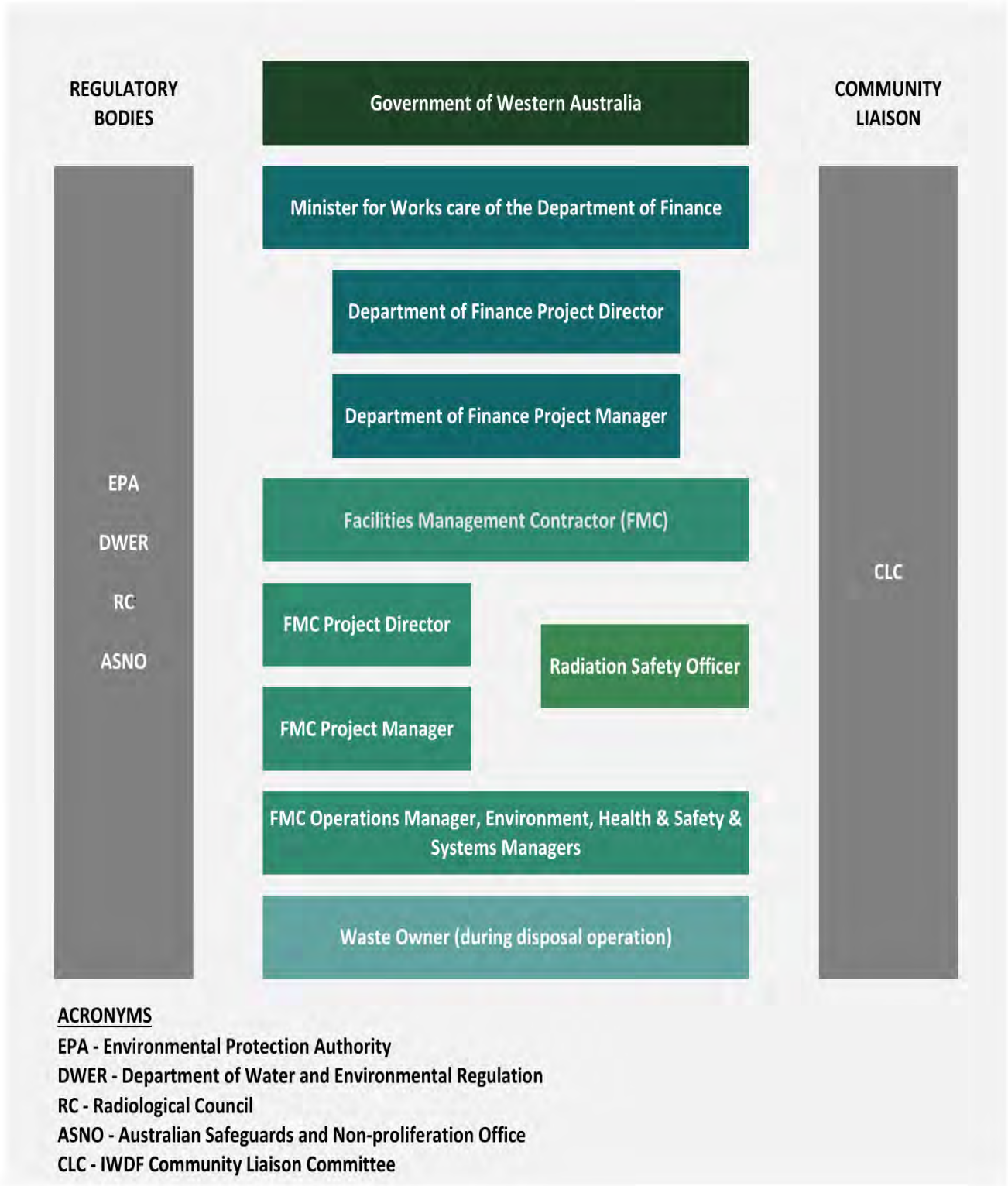
This is an **annual** report prepared by Finance for submission to relevant regulatory bodies. This includes the Environmental Protection Authority, the Department of Water and Environmental Regulation, as well as the Radiological Council.

The Performance & Compliance Report (PCR) summarises the compliance of the operation of the IWDF against many requirements for the reporting period. These include:

- Ministerial Statement No. 562;
- Permits;
- Registrations;
- Licences;
- Associated management plans;
- Other system requirements for the reporting period.

Governance of the IWDF is illustrated in Figure 3 overleaf.

FIGURE 3 IWDF GOVERNANCE STRUCTURE



Appendix A DWER Licence L8190/2007/2

Government of Western Australia
Department of Water and Environmental Regulation

Licence

Licence number	L8190/2007/2
Licence holder	Minister for Works C/- Department of Finance
ACN (if applicable)	NA
Registered business address	Djookanup, 16 Parkland Road Osborne Park WA 6017
DWER file number	2012/006884-1
Duration	18/08/2022 to 17/08/2042
Date of issue	16/08/2022
Premises details	Intractable Waste Disposal Facility BOORABBIN WA 6429 Crown Reserve No.42001 Lot 73 on Deposited Plan 217902 As defined by the coordinates in Schedule 1

Prescribed premises category description (Schedule 1, *Environmental Protection Regulations 1987*)	**Assessed production / design capacity**
Category 66: Class V intractable site	Not applicable

This licence is granted to the licence holder, subject to the attached conditions, on 16/08/2022 by:

Steve Checker
Digitally signed by Steve Checker
Date: 2022.08.16 09:37:44 +08'00'

STEVE CHECKER
SENIOR MANAGER WASTE INDUSTRIES
REGULATORY SERVICES
an officer delegated under section 20 of the *Environmental Protection Act 1986* (WA)

Licence history

Date	Reference number	Summary of changes
L8190/2007/1	18/02/2002	Licence issued
L8190/2007/1	11/02/2016	Amendment to licence expiry date
L8190/2007/1	29/04/2016	Amendment Notice 1: extension of licence expiry date
L8190/2007/1	09/02/2022	Amendment to licence expiry date
L8190/2007/2	16/08/2022	Licence re-issued

Interpretation

In this licence:

(a) the words 'including', 'includes' and 'include' in conditions mean "including but not limited to", and similar, as appropriate;

(b) where any word or phrase is given a defined meaning, any other part of speech or other grammatical form of that word or phrase has a corresponding meaning;

(c) where tables are used in a condition, each row in a table constitutes a separate condition;

(d) any reference to an Australian or other standard, guideline, or code of practice in this licence:

  (i) if dated, refers to that particular version; and

  (ii) if not dated, refers to the latest version and therefore may be subject to change over time;

(e) unless specified otherwise, any reference to a section of an Act refers to that section of the EP Act; and

(f) unless specified otherwise, all definitions are in accordance with the EP Act.

NOTE: This licence requires specific conditions to be met but does not provide any implied authorisation for other emissions, discharges, or activities not specified in this licence.

Licence conditions

Infrastructure and equipment

1. The licence holder must ensure that the site infrastructure and equipment listed in Table 1 and located at the corresponding infrastructure location is maintained and operated in accordance with the corresponding operational requirement set out in Table 1.

Table 1: Infrastructure and equipment requirements

Site infrastructure and equipment	Operational requirement	Infrastructure location
Groundwater monitoring bores	Maintain in operational condition.	Bores GM1-GM9 as depicted in schedule 1 Bore location Map and any future bores
Surface water management system	Ensure excavated V drains are maintained around cells, to aid surface drainage away from the water shedding clay dome.	N/A
Security fencing	Ensure fencing for the demarcation of cells is maintained free of holes, breaks and other defects.	N/A

Waste acceptance and disposal

2. The Licence Holder must only accept onto the premises waste of a waste type and waste description in accordance with the requirements of Ministerial Statement (MS) 562.

3. The Licence Holder must immediately recover or remove and dispose of spills of intractable waste outside of the disposal cells.

4. The Licence Holder must ensure that Emergency Response Equipment is located on the premises for the duration of a waste disposal operation.

Stormwater management

5. The Licence Holder must ensure that bunding is constructed to ensure that stormwater is diverted from areas of the Premises where waste is handled or stored.

Monitoring

6. The Licence Holder must record the total amount of waste accepted onto the premises or removed from the premises, for each waste type listed in Table 2, with the corresponding parameters listed in Table 2, and for each corresponding time period set out in Table 2.

Table 2: Waste accepted onto or removed from the premises

Waste Type[1]	Parameter[1]	Time Period[1]
Intractable Wastes	(a) time and date of delivery; (b) waste type; (c) total quantity of the waste package (in kilograms, tonnes, litres or cubic metres); (d) the name of the waste generator; (e) the origin and source location of waste; (f) the physical, chemical and/or radiological characteristics of the waste; (g) the name and contact details of the company transporting the waste to the Premises; and (h) the name of the driver and registration number of the delivery vehicle.	Each load arriving at the Premises

Records and reporting

7. The licensee shall notify the CEO in writing at least 1-month prior[1] to the delivery of waste to the Intractable Waste Disposal Facility Mt Walton East. The following information shall be included in the notification (where known):

(a) waste type(s) and quantities to be disposed;

(b) disposal dates; and

(c) status of approval under MS 562 and the Radiological Safety Act 1975.

Note 1: In the case of an emergency disposal event, where notice of disposal is not able to be provided to the CEO within the timeframe outlined in condition 7, the Licence Holder shall provide notification to the CEO as soon as possible (and no later than the end of the next working day) after becoming aware of the emergency disposal event.

8. The Licence Holder must maintain accurate and auditable books including the following records, information, reports, and data required by this licence:

(a) any maintenance of infrastructure that is performed in the course of complying with condition 1 of this licence;

(b) monitoring undertaken in accordance with condition 6 of this licence; and

(c) complaints received under condition 10 of this licence.

9. The books specified under condition 8 must:

(a) be legible;

(b) if amended, be amended in such a way that the original version(s) and any subsequent amendments remain legible and are capable of retrieval;

(c) be retained by the Licence Holder for the duration of the licence; and

(d) be available to be produced to an Inspector or the CEO as required.

10. The licence holder must record the following information in relation to complaints received by the licence holder (whether received directly from a complainant or forwarded to them by the Department or another party) about any alleged emissions

from the premises:

(a) the name and contact details of the complainant, (if provided);

(b) the time and date of the complaint;

(c) the complete details of the complaint and any other concerns or other issues raised; and

(d) the complete details and dates of any action taken by the licence holder to investigate or respond to any complaint.

11. The licence holder must:

(a) undertake an audit of their compliance with the conditions of this licence during the preceding annual period; and

(b) prepare and submit to the CEO by no later than 90 days after the end of that annual period an Annual Audit Compliance Report in the approved form.

12. The Licence Holder must submit to the CEO by no later than 90 days after the end of each annual period, an Annual Environment Report for that annual period for the conditions listed in Table 3, and which provides the information in accordance with the corresponding requirement set out in Table 3.

Table 3: Annual Environment Report

Condition	Requirement
-	A summary of any failure or malfunction of any pollution control equipment or any incidents that have occurred during the previous annual period and any action taken.
NA	Any Performance and Compliance Reports relating to the disposal of waste which were prepared during the previous annual period
Table 1	An updated map showing monitoring bore locations and designations where changes to bore infrastructure has occurred during the previous annual period.
6	Monitoring reports
10	A summary of complaints received during the previous annual period

Definitions

In this licence, the terms in Table 1 have the meanings defined.

Table 1: Definitions

Term	Definition
ACN	Australian Company Number
ASNO	Australian Safeguards and Non-Proliferation Office
Annual Audit Compliance Report (AACR)	means a report submitted in a format approved by the CEO (relevant guidelines and templates may be available on the Department's website).
annual period	a 12 month period commencing from 1 July until 30 June of the immediately following year.
books	has the same meaning given to that term under the EP Act.
CEO	means Chief Executive Officer of the Department. "submit to / notify the CEO" (or similar), means either: Director General Department administering the *Environmental Protection Act 1986* Locked Bag 10 Joondalup DC WA 6919 or: info@dwer.wa.gov.au
Department	means the department established under section 35 of the *Public Sector Management Act 1994* (WA) and designated as responsible for the administration of the EP Act, which includes Part V Division 3.
discharge	has the same meaning given to that term under the EP Act.
emission	has the same meaning given to that term under the EP Act.
Emergency Response Equipment	Fire extinguishers, non-portable water tanks and other equipment approved by EPA for each disposal.
EP Act	*Environmental Protection Act 1986* (WA)
EP Regulations	*Environmental Protection Regulations 1987* (WA)
FMC	The Facility Management Contractor
IWDF	Intractable Waste Disposal Facility
licence	refers to this document, which evidences the grant of a licence by the CEO under section 57 of the EP Act, subject to the specified conditions contained within.

Term	Definition
licence holder	refers to the occupier of the premises, being the person specified on the front of the licence as the person to whom this licence has been granted.
OEWP	Operation Environmental and Waste Acceptance Procedures
Performance and Compliance Report	Report on the results of operation-specific activities carried out at IWDF.
RCWA	Radiological Council of Western Australia. The independent statutory authority appointed under the *Radiation Safety Act 1975* in Western Australia.
premises	refers to the premises to which this licence applies, as specified at the front of this licence and as shown on the premises map (Figure 1) in Schedule 1 to this licence.
prescribed premises	has the same meaning given to that term under the EP Act.
waste	has the same meaning given to that term under the EP Act.

END OF CONDITIONS

Schedule 1: Maps

Premises map

The boundary of the prescribed premises is shown in the map below (Figure 1).

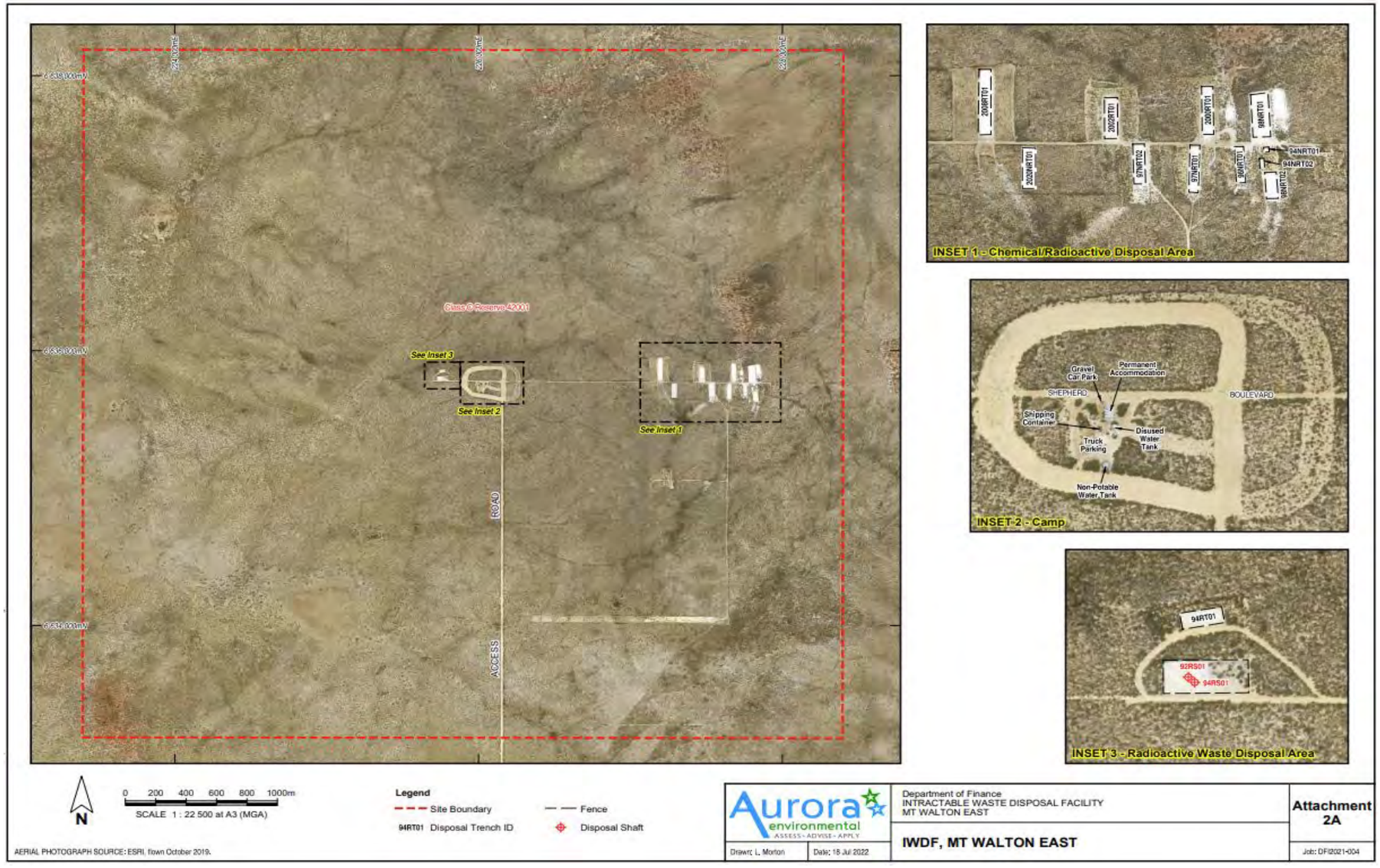


Figure 1: Map of the boundary of the prescribed premises

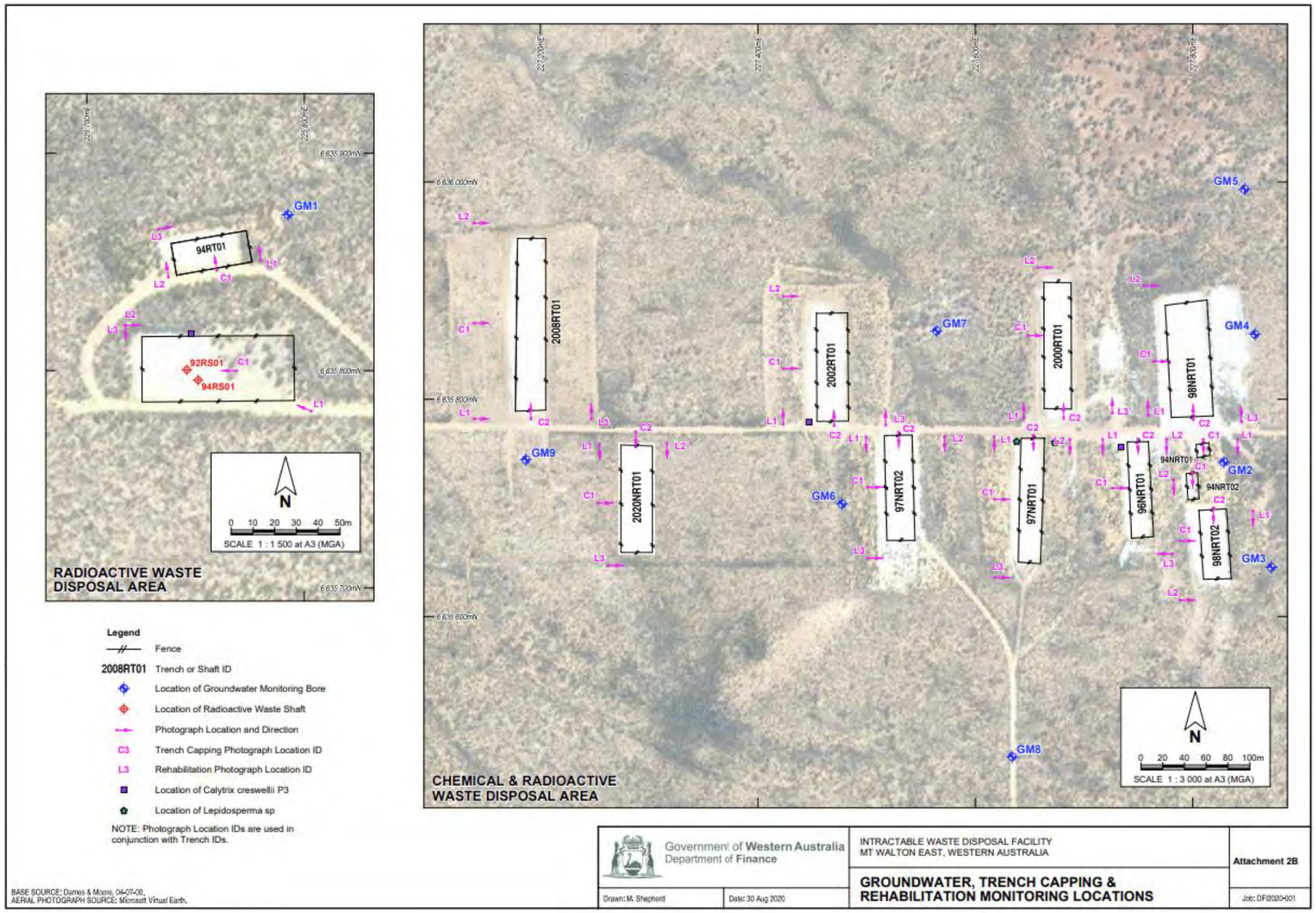


Figure 2: Groundwater monitoring location

Schedule 2: Premises boundary

The premises boundary is defined by the coordinates in Table 2.

Table 2: Premises boundary coordinates (GDA94)

Easting *Longitude (x)*	**Northing** *Latitude (y)*	**Zone**
120.12237	*-30.356576*	*NW*
120.174352	*-30.357766*	*NE*
120.172991	*-30.402860*	*SE*
120.120979	*-30.401658*	*SW*

Appendix B Radiological Council Registration RS 13/2011 20590

Government of **Western Australia**
RADIOLOGICAL COUNCIL

Address all correspondence to
The Secretary

Your ref
Our ref 20590_230627ds | D-AA-295227
Enquiries D Surin 08 9222 0888

Ms Jodi Cant
Director General
Department of Finance
Attn: Ms Eleanor Hopkins, IWDF Project Director
Locked Bag 11
CLOISTERS SQUARE WA 6850

Dear Ms Hopkins

RADIATION SAFETY ACT

Thank you for your application for renewal of registration of the Mount Walton East Intractable Waste Disposal Facility (IWDF). The application has been approved and your registration certificate is enclosed.

As you are aware, Officers of the Radiological Council have been liaising with the Department of Finance, your approved Radiation Safety Officer and Aurora Environmental regarding the regulation of the IWDF and the transition from historically applying the *Code of practice for the near-surface disposal of radioactive waste in Australia (1992)* (RHS 35) to the current Australian *Code for Disposal Facilities for Solid Radioactive Waste (2018)* (RPS C-3). As part of this, draft safety case documentation was prepared and submitted to the Council; this is still under consideration.

Standard condition 203, *Disposal of low-level radioactive waste*, has now been applied to your registration under Section 36 of the Radiation Safety Act. This replaces the previous standard condition 114, *Disposal of radioactive waste at the Intractable Waste Disposal Facility (IWDF), Crown Reserve 42001*.

Special conditions have also been applied to your registration as follows –

1. The *Code of practice for the near-surface disposal of radioactive waste in Australia (1992)* (RHS 35) may be applied in the transition to compliance with the Australian *Code for Disposal Facilities for Solid Radioactive Waste (2018)* (RPS C-3) until the Safety Case referenced in 2.3 of Standard Condition 203 is approved.

2. The reporting of radioactive material received to the registered premises as required by Section 38 of the Radiation Safety Act may be made within 14 days of a campaign disposal, in place of the 'monthly' basis prescribed in 2.9 of Standard Condition 203.

Letters: Locked Bag 2006 PO Nedlands WA 6009
Email: radiation.health@health.wa.gov.au
Telephone: (61 8) 9222 0888
www.radiologicalcouncil.wa.gov.au

3. An independent auditor is required to be appointed by 2.11 of Standard Condition 203; however, due to the campaign disposal nature of the facility and in place of two-yearly intervals, the report will be required six months after a disposal campaign.

The third condition is in response to your letter of 1 May 2023 (your reference 06047401) which was considered at the Council's 302nd meeting on 13 June 2013. Council agreed to your proposal with the exception that the report from the independent auditor will be required within 6 months from a disposal campaign

The standard and special conditions form part of your registration and are attached to the certificate.

Should you have any queries in relation to this matter, please contact this office.

Yours faithfully

Ms H Upton
Secretary, Radiological Council

Encl. Certificate of Registration

FORM RS12
WESTERN AUSTRALIA

RADIATION SAFETY ACT 1975

CERTIFICATE OF REGISTRATION* OF PREMISES
in which
RADIOACTIVE SUBSTANCES
are to be used, stored or manufactured

It is hereby certified that the premises referred to in this certificate have been registered under the Radiation Safety Act 1975 for the radioactive substances and purpose(s) specified below. The registration* is subject to all applicable regulations under the Act and to any conditions, restrictions or limitations that are specified below or in any attachments.

1. Name and address of the registrant

MS JODI CANT
DIRECTOR GENERAL
DEPARTMENT OF FINANCE
ATTN: MS ELEANOR HOPKINS
LOCKED BAG 11
CLOISTERS SQUARE W A 6850

2. Location of premises subject to registration*

IWDF, MT WALTON EAST, CROWN RESERVE 42001, ~100 KM NORTH OF GT EASTERN HWY BOORABBIN W A 6429

3. Particulars of the radioactive substances to be used, stored, manufactured or otherwise dealt with on the premises *(See Note a). These particulars, where applicable, are given on attached supplementary sheet(s)*

4. Approved radiation safety officer(s). *(The registrant must appoint the person(s) named below in writing and inform them in writing of their duties and responsibilities. See also Note b).*

PARR MR STUART RADIOACTIVE SUBSTANCES -

5. Conditions, restrictions or limitations *(See Note c)* Cond 203.

SEE ATTACHED CONDITIONS

6. Purpose(s) applied to the registration*

DISPOSAL OF RADIOACTIVE WASTE

Notes

a) **Prior notice in writing** must be given to the Radiological Council of material changes. This includes changes affecting the type, form, maximum activity, use or purpose of the radioactive substances as well as any proposed changes to the structure, ventilation or drainage which may differ from information previously supplied and on which approval for this registration may be based. Failure to provide proper notification is an offence under section 38 of the Act.

b) Although the radiation safety officer has specified duties in the regulations, the registrant is responsible for ensuring that those duties are performed and that the use, storage or manufacture of the radioactive substances complies with the Act and regulations. Failure to do so is an offence.

c) **The registrant must ensure compliance** with any conditions imposed on this registration under section 36 of the Act. A requirement may be imposed for the **conditions to be displayed** in a location accessible to all radiation workers.

13 JUL 2023

Date

Secretary, Radiological Council

This Certificate is not valid until signed by the Secretary of the Radiological Council.

REGISTRATION* NO: RS 13/2011 20590 EXPIRY DATE: 08 Feb 2026

*** and/or Exemption from Registration if indicated in Item 6**

RADIATION SAFETY ACT

CONDITIONS, RESTRICTIONS AND LIMITATIONS (SECTION 36)

DISPOSAL OF LOW-LEVEL RADIOACTIVE WASTE

1. This Registration is for the disposal of low-level radioactive waste.

2. The Registrant is directed to ensure that –

DISPOSAL PERMITS

2.1 prior to radioactive waste being accepted for final disposal, a disposal permit must be granted by the Radiological Council in accordance with *Section 34 of the Act*;

REQUIRE COMPLIANCE WITH AUSTRALIAN CODE, RPS C-1 AND RPS C-3

2.2 all radiation management and safety are in accordance with the *Radiation Safety (General) Regulations (1983)*, and the *Australian Code for Radiation Protection in Planned Exposure Situations* (RPS C-1) and *Code for Disposal Facilities for Solid Radioactive Waste* (RPS C-3) published by the Australian Radiation Protection and Nuclear Safety Agency (ARPANSA);

2.3 the Safety Case and, where relevant, the information in the supporting Safety Assessment required under RPS C-1 is reviewed at 2-yearly intervals and any revised documentation is submitted to the Radiological Council;

RADIATION MANAGEMENT PLAN

2.4 the approved Radiation Management Plan, which forms part of the Safety Case, is implemented and reviewed at 2-yearly intervals with any revisions submitted to the Radiological Council for approval;

PREDISPOSAL MANAGEMENT

2.5 all radioactive waste to be disposed of shall be conditioned and packaged in accordance with the approved Radiation Management Plan, with reference to the Australian *Safety Guide for the Predisposal Management of Radioactive Waste* (RPS 16), published by ARPANSA;

TECHNICAL EXPERTISE

2.6 radiation safety management is undertaken by the approved *Radiation Safety Officer* (RSO), in accordance with the duties imposed under *Regulations 19(3)*;

TRANSPORT

2.7 transport of radioactive substances shall be in accordance with the *Radiation Safety (Transport of Radioactive Substances) Regulations 2002* and the *Code of Practice for the Safe Transport of Radioactive Material* as adopted;

REPORTING

2.8 the Radiation Safety Officer (RSO) reports annually in writing to the Radiological Council, the results of radiation monitoring and other factors relating to human health and the environment for the receipt, handling and near-surface disposal of the radioactive waste;

2.9 the reporting under Section 38 of the Radiation Safety Act of material received to site and of material disposed may be conducted on a monthly campaign basis;

MAINTENANCE OF RECORDS

2.10 accurate records of all radioactive material disposed shall be maintained and archived in an approved manner and

INDEPENDENT AUDIT

2.11 an independent auditor with expertise in radioactive waste management shall be appointed to review all actions of the proponent required by these conditions and provide publicly available reports to the Council, one year into commencement of operations and thereafter at two-yearly intervals.

CONDITION NO: **203**

CERTIFICATE NO: **RS 13/2011 20590**

EXPIRES ON: **08 February 2026**

RADIATION SAFETY ACT

CONDITIONS, RESTRICTIONS AND LIMITATIONS (SECTION 36)

SPECIAL CONDITIONS

1. The Code of practice for the near-surface disposal of radioactive waste in Australia (1992) (RHS 35) may be applied in the transition to compliance with the Australian Code for Disposal Facilities for Solid Radioactive Waste (2018) (RPS C-3) until the Safety Case referenced in 2.3 of Standard Condition 203 is approved.

2. The reporting of radioactive material received to the registered premises as required by Section 38 of the Radiation Safety Act may be made within 14 days of a campaign disposal, in place of the 'monthly' basis prescribed in 2.9 of Standard Condition 203.

3. An independent auditor is required to be appointed by 2.11 of Standard Condition 203; however, due to the campaign disposal nature of the facility and in place of two-yearly intervals, the report will be required six months after each disposal campaign.

Appendix C ASNO Permit PN207

Australian Government
Australian Safeguards and Non-Proliferation Office

Permit issued under section 13 of the Nuclear Non-Proliferation (Safeguards) Act 1987

PERMIT TO POSSESS NUCLEAR MATERIAL

This Permit granted pursuant to Section 13 of the *Nuclear Non-Proliferation (Safeguards) Act 1987* ("the Act") authorises the Permit Holder to possess the *nuclear material* designated in Part 1, subject to *the Act* and any orders, directions or regulations made thereunder and to the restrictions and conditions set out in Parts 1, 2 and 3 hereunder. Under section 21 of *the Act*, this Permit does not make it lawful for the Permit Holder to do any act or thing that, apart from *the Act*, is unlawful under another law of the Commonwealth or under a law of a State or Territory.

In this Permit, unless the contrary intention appears, words and phrases have the same meaning as in *the Act*. Terms in italics have specialised meanings, which are defined in Section 5 of the Class L2 Compliance Code.

The Compliance Code is an integral part of this Permit.

PART 1

1.	**NAME**	**Minister for Works C/- Department of Finance (Western Australia)**
	ABN/ACN	**99 593 347 728**
2.	**ADDRESS**	
2.1.	**Physical Address**	**Department of Finance, Djookanup, 16 Parkland Road, OSBORNE PARK WA 6017**
2.2.	**Postal Address**	**Department of Finance, Locked Bag 11, Cloisters Square, PERTH WA 6850**
3.	**PERMIT NUMBER**	**PN207**
	Version	**4**
	Class	**L2**
4.	**DATES OF EFFECT**	
4.1.	**Commencement Date**	**30 November 2024**
4.2.	**Expiration Date**	**30 November 2029**

5. Chemical and isotopic composition and physical form of *nuclear material* in relation to which this Permit has effect ("the nuclear material")		6. Maximum amount that the Permit Holder may possess at any one time under this Permit	
Source Material		**Element Weight**	
5.1	Depleted uranium in any form.....	6.1	500 kilograms
5.2	Natural uranium in any form.....	6.2	500 kilograms
5.3	Thorium in any form	6.3	500 kilograms
Special Fissionable Material		**Isotope Weight**	
5.4	Uranium-235 (as enriched U) in any form	6.4	5 grams
5.5	Uranium-233 in any form.....	6.5	5 grams
5.6	Plutonium-239 in any form	6.6	5 grams

7. Permit History

Version	Date of Effect	Description
1	21/11/2011	Permit original issue
2	28/09/2018	Variation – Issue of permit using Class L2 template
3	30/10/2020	Variation – Extension to permit and minor language updates to paragraphs 8 to 13 and Compliance Code sections 1, 3 and 4. Definitions updated and moved to Compliance Code.
4	30/11/2024	This Variation—Extension to permit and minor language updates to paragraphs 8, 9 and 12 and Compliance Code sections 2 and 3. Update to postal address and wording of physical address. Update to wording of Appendix A.

This Variation of the Permit is issued on the 18th of November 2024.

Digitally signed by Geoffrey Shaw (Dr)
Date: 2024.11.18 15:27:05 +11'00'

Director General

8. **Authorised Use and Storage**

8.1. Not Applicable.

8.2. Not Applicable.

8.3. Storage.

9. **Locations for Which This Permit has Effect ("Approved Locations")**

9.1. **Use and storage at:**

9.1.1 None

9.2. **Use only at:**

9.2.1 None

9.3. **Storage only at**:

9.3.1 Intractable Waste Disposal Facility (IWDF), Mt Walton East, Crown Reserve 42001, Western Australia, (GPS coordinates at centre point Lat -30 22' 43" Long 120 8' 46").

9.4. The Approved Locations may be updated by a Form ASO112 – Application to Create or Remove an Approved Location, that is approved by the Director General.

9.5. Not Applicable.

10. **Transport for Which This Permit has Effect**

This Permit grants the Permit Holder permission to transport *nuclear material* to anywhere within Australia for amounts up to those specified in paragraphs 5 and 6.

PART 2

11. **Communications with the Director General**

11.1. The Permit Holder or *Designated Individual* shall submit all applications, notifications and reports to the *Director General* via the following means:

- ASNO's NUMBAT online database portal: (https://numbat.dfat.gov.au);
- EMAIL: nuclear.asno@dfat.gov.au;
- Australian Safeguards and Non-Proliferation Office
  RG Casey Building
  John McEwen Crescent
  Barton, ACT 0221; or
- as otherwise specified in writing by the *Director General.*

NOTE: A reference to the Director General in relation to applications, approvals, notification or reports under this Permit or its Compliance Code *includes the Director General and ASNO inspectors.*

12. **General Requirements**

The Permit Holder shall:

12.1. implement the requirements of the Compliance Code to provide nuclear material accounting and control and *nuclear security*;

12.2. submit applications, notifications and reports as specified in the Compliance Code*;* and

12.2.1 not commence any activity for which approval of the *Director General* is required, prior to the receipt of written approval from the *Director General*; and

12.2.2 carry out such activity in accordance with any requirements specified by the *Director General* in such approval;

12.3. maintain effective control over *nuclear material* and *Approved Locations*;

12.4. notify the *Director General*, where a *loss of control* or incident involving *nuclear material* has occurred;

12.5. not dispose of *nuclear material* without written approval, by Form ASO108–Application to Consume, Dilute or Dispose of Nuclear Material or Associated Item, from the *Director General*;

12.6. not transfer *nuclear material* to another person in Australia or aid, abet, counsel or procure such a transfer, unless the transferee is the holder of:

12.6.1 a current appropriate Permit to Possess Nuclear Material granted under section 13 of *the Act*; except for *nuclear material* to which Part II of *the Act* does not apply when in the possession of the transferee; or

12.6.2 a current appropriate Special Transport Permit granted under section 16 of *the Act*; except for *nuclear material* of a kind prescribed by the regulations for the purpose of sub-section 24(1) of *the Act*;

12.7. notify *ASNO* of any change to individuals in the following positions:

12.7.1 a *Permit Holder's Representative*; and

12.7.2 *Designated Individuals* (and alternates for continuous oversight) by submitting Form ASO214 – Notification of Designation of an Individual;

12.8. train all persons authorised by the Permit Holder to have access to *nuclear material* in the conditions of this Permit and the Permit Holder's procedures enabling it to meet these conditions; and

12.9. apply any special conditions as set out in Appendix A of this Permit.

13. Inspections by ASNO Inspectors and Agency Inspectors

13.1. The Permit Holder shall:

13.1.1 provide *inspector*(*s*) with an up-to-date *inventory* listing at the commencement of an inspection;

13.1.2 provide, within 2 hours of a request by *inspector*(*s*), copies of any other record(s), demonstrating that the Permit Holder has operated, and is operating, in compliance with this Permit and the Compliance Code;

13.1.3 ensure, at the time of each inspection, the presence of persons responsible for those areas being inspected and the necessary personnel responsible for handling the *nuclear material*;

13.1.4 make available, at the request of the *inspector*(*s*), equipment that the Permit Holder has available for measurement of the *nuclear material* and, the means and staff required for handling the *nuclear material*;

13.1.5 if requested, provide suitable office space at the *Approved Locations* to facilitate inspection functions; and

13.1.6 afford *inspector*(*s*) every assistance and comply with any reasonable request in order to achieve a relevant safeguards purpose.

13.2. To further the health and safety requirements under the current Work Health and Safety legislation, and relevant state and federal legislation, regulations and standards, the Permit Holder shall:

13.2.1 provide to the *inspector*(*s*) (and the *Director General*, on request) sufficient information, training, instruction or supervision in order to allow those *inspectors* to comply with any health and safety procedures applicable at the *Approved Locations* and carry out their duties at the *Approved Locations* without risk to their health or safety;

13.2.2 provide the *inspector*(*s*) with all necessary personal protective equipment in order to ensure, so far as reasonably practicable, their health and safety while carrying out duties at the *Approved Locations*;

13.2.3 respond promptly to any request for information by an *inspector*, *Agency inspector*, or an officer of *ASNO* acting on behalf of such an *inspector*, regarding the procedures or equipment referred to in paragraphs 13.2.1 and 13.2.2; and

13.2.4 take any other reasonable steps to ensure the health and safety of the *inspector*(*s*) while those *inspectors* are at the *Approved Locations*, including steps to comply with any applicable provisions of a radiation protection law or regulation of the jurisdiction in which the Permit Holder is located which applies to the Permit Holder (in whole or in part).

PART 3

14. **Inspections to be Permitted**

14.1. The Permit is granted on condition that the Permit Holder consents, for the purposes of sections 59 and 60 of *the Act*, to all inspections carried out including:

14.1.1 the entry by any *ASNO inspector* upon any land or upon or into any premises occupied by the Permit Holder and the exercise by that *inspector* of any relevant power for any relevant safeguards purpose;

14.1.2 the entry by any *ASNO inspector* upon any vessel, aircraft or vehicle in the control of the Permit Holder and the exercise by that *inspector* of any relevant power for any relevant safeguards purpose;

14.1.3 the entry by any *Agency inspector* upon any land or upon or into any premises occupied by the Permit Holder, and the exercise by that *Agency inspector* of any relevant power for the purposes of carrying out an inspection that the *Agency* has the right to make in accordance with the *Agency Agreement* and the *Additional Protocol*;

14.1.4 the entry by an *Agency inspector* upon any vessel, aircraft or vehicle in the control of the Permit Holder, and the exercise by that *Agency inspector* of any relevant power for the purposes of carrying out an inspection that the *Agency* has the right to make in accordance with the *Agency Agreement* and the *Additional Protocol*; and

14.1.5 the Permit Holder shall provide upon request of an *inspector* or *Agency inspector* access to any place within an *Approved Location* as soon as possible, and in any case within 2 hours of a request for such access.

14.2. An *inspector* or *Agency inspector* exercising any relevant power is required to comply with the provisions of section 64 of *the Act*.

NOTE: Subject to the Administrative Review Tribunal Act 2024 and to sub-section 22(8) of the Nuclear Non-Proliferation (Safeguards) Act 1987, application may be made to the Administrative Review Tribunal, by or on behalf of a person whose interests are affected by a decision by the Minister, pursuant to sub-section (2) of section 13 of the Act, imposing a condition or restriction on the grant of a Permit, for review of the decision.

Appendix A – Special conditions for Permit PN207

1. For nuclear material that has been stored below ground since before the 30 October 2020 in shaft 92RS01, shaft 94RS01, trench 2000RT01, trench 2002RT01 or trench 2008RT01 (or any other below ground location/s with no intention of retrieval as approved by the *Director General* in writing on a case-by-case basis), the following special conditions shall apply:
    a. Section 1.1.2 of the Compliance Code does not apply; and
    b. Section 2.1.2 of the Compliance Code is replaced by

    "securing inventory in a drum-in-drum structure where 60 litre drums are filled with cement-based grout and placed inside 200 litre drums filled with concrete, (or any other packaging structure as approved by the *Director General* on a case by case basis); and"
2. For any nuclear material that has not been stored below ground since before 30 October 2020, the conditions in the Compliance Code shall apply and in particular:
    a. the Permit Holder shall not receive or otherwise allow such nuclear material to arrive at an Approved Location prior to the receipt of written approval from the *Director General*; and
    b. the Permit Holder shall not place below ground or allow the placement below ground of such nuclear material prior to the receipt of written approval from the *Director General*.

Note: In accordance with section 3 of the Compliance Code, the Permit Holder shall use the forms listed in section 3.1 for the purposes of seeking the approval of the *Director General*.

– END OF PERMIT –

COMPLIANCE CODE FOR CLASS L2 PERMITS

Compliance Code History

Version	Date of Effect	Description
1	18/09/2015	Compliance Code first issue.
2	28/09/2020	New section 4.2, incorporation of definitions section, minor updates to various conditions.
3	28/08/2024	This variation—Sections renumbered, change to condition regarding approval of transfers of nuclear material, minor updates to other conditions.

Purpose

The purpose of this Compliance Code is to establish a standard set of requirements for the systems of *Nuclear Material Accounting and Control* and *Nuclear Security* for all Class L2 Permits to Possess Nuclear Material issued under section 13 of *the Act*. It also sets out forms for the submission of applications, notifications and reports.

Scope

This Compliance Code applies to Permits to Possess Nuclear Material issued under section 13 of *the Act* identified under paragraph 3 of the Permit as a Class L2 Permit. The requirements of the code apply to all *nuclear material* in the possession of the Permit Holder except *nuclear material* which is declared under section 11 of *the Act* as exempt from the application of Part II of *the Act*.

For the purpose of this Compliance Code, *nuclear security* will be taken to apply to *nuclear material* including *UOC*, but not to include other radioactive materials.

1. **Nuclear Material Accounting and Control (NMAC) System**

1.1. The Permit Holder shall:

1.1.1 keep an *inventory* listing of *nuclear material* up-to-date;

1.1.2 label all physical batches and containers of *nuclear material* on the Permit Holder's *inventory*, with unique identification markings in a way that enables timely matching with batch numbers assigned by *ASNO*;

1.1.3 maintain organisational arrangements enabling the Permit Holder to determine the precise location of any material on the Permit Holder's *inventory* in less than 2 hours;

1.1.4 keep records of transfers of *nuclear material*;

1.1.5 conduct a Physical Inventory Taking (stocktake) not more than thirty (30) days prior to and no later than 30 June each year (or other dates as may be designated by *ASNO* in advance), of any *nuclear material* on the *inventory*;

1.1.6 maintain organisational arrangements to detect any *loss of control* of *nuclear material* listed on the *inventory* within 7 days; and

1.1.7 retain records of holdings and transfers of *nuclear material* for a period of 5 years.

1.2. Given the low safeguards significance of material covered by Class L2 Permits, the Permit Holder is not required to develop formal written NMAC procedures.

2. Security Measures

2.1. The Permit Holder shall maintain security measures for preventing the theft, loss or unauthorised handling of *nuclear material* and its associated records, including:

2.1.1 restricting access to *nuclear material* to persons who need to access such material;

2.1.2 securing *nuclear material* in a lockable room or container or, for *nuclear material* incorporated into equipment, securing the equipment; and

2.1.3 maintaining documentary records associated with the Permit conditions (e.g. defined access list, log in/out sheet).

2.2. The Permit Holder shall promptly notify *the Director General* within 2 hours of detection of each incident under Form ASO201 of:

2.2.1 a *loss of control* including actual, attempted or suspected theft, loss or compromise of *nuclear material*;

2.2.2 an unauthorised access to *nuclear material*; or

2.2.3 a failure of the security measures.

3. Reports, Notifications and Requests for Approvals

3.1. The Permit Holder or *Designated Individual* shall report to, notify or apply to the *Director General* as appropriate for each activity or item listed in section 4.

3.2. Each such report, notification or application shall be made by completing the specified forms listed in section 4 or using other formats as approved by *ASNO*.

3.3. The reports, notifications or applications shall be delivered to the *Director General* in accordance with the reporting requirements specified on the respective form.

3.4. The Permit Holder shall provide an annual report (as at 30 June) to *ASNO* and submit the report by the 5th of July of the same year (or other dates as may be designated by *ASNO* in advance), including:

3.4.1 Physical Inventory Taking as described in section 1.1.5, including the location of each item of *nuclear material*; and

3.4.2 All *inventory* changes that occurred during the reporting period.

3.5. Obtain *ASNO* approval, by Form ASO106 Application to Transfer Material (Import, Export Or Domestic Transfer), for all international or domestic transfers and receipts of *nuclear material* in accordance with the reporting timeframes and forms.

3.6. If requested by *ASNO*, the Permit Holder shall provide *inventory* reporting on any *nuclear material* subject to a prescribed international agreement in a manner specified in writing by *ASNO*.

4. ASNO Forms

The Permit Holder shall use the forms listed in sections 4.1–4.3 available at www.dfat.gov.au/asno, as amended from time to time or the equivalent on *ASNO*'s online portal (the NUMBAT database portal https://numbat.dfat.gov.au).

4.1. Application Forms

APPLICATION FORMS TO CONDUCT CERTAIN ACTIONS:[1]	TIMEFRAME LIMITS FOR APPLICATIONS, NOTICE OR REPORTING:[2, 3]	FORM TO USE:
Application to Transfer Material (Import, Export or Domestic Transfer)	– 7 day notice	ASO106
Application to Consume, Dilute or Dispose of Nuclear Material or Associated Item [4]	– 7 day notice	ASO108
Application to Create or Remove an Approved Location	– 7 day notice	ASO112
Application to Vary Disposition of Material Such That it will Become Unavailable for Verification	– 14 day notice	ASO128

4.2. Notification Forms

NOTIFICATION IS REQUIRED FOR: [1]	TIMEFRAME LIMITS FOR APPLICATIONS, NOTICE OR REPORTING:[2]	FORM TO USE:
Notification of an Incident	– Report incidents by phone within 2 hrs. of detection – submit form within 4 hrs.	ASO201
Notification of Designation of an Individual		ASO214
Notification of Change to Permit Holder's Particulars	– Within 10 days of effect of change	ASO231

4.3. Report Forms

REQUIRED REPORTS:[1]	TIMEFRAME LIMITS FOR APPLICATIONS, NOTICE OR REPORTING:[2]	FORM TO USE:
Report on Incident Investigation	– Within 10 days of initial notification	ASO303
Inventory Listing (Nuclear Materials and Associated Materials)	– 5 days after the physical inventory taking date set in 1.1.5	ASO310
Ledger Page	– Report monthly transactions or – 5 days after the physical inventory taking date set in 1.1.5	ASO311
Description of each building at an approved Location	– 15th of March every year	ASO316

[1] Each report, notification or application should be made by the *Permit Holder's Representative* or by a *Designated Individual* as notified under ASO214, responsible for compliance with that application requirement.
[2] Refer to related form for detailed timeframe requirements. All days refer to consecutive business days.
[3] For events requiring approval forms, the event must not take place before *ASNO* approval is granted.
[4] *Nuclear material* may only be disposed of in such a way that the *nuclear material* will become practicably irrecoverable.

Definitions

(the) **Act**	The *Nuclear Non-Proliferation (Safeguards) Act 1987*.
Additional Protocol	The Protocol Additional to the Agency Agreement (INFCIRC/217/Add.1) that entered into force on 12 December 1997.
(the) **Agency**	The International Atomic Energy Agency (IAEA).
Agency Agreement	The Agreement between Australia and the International Atomic Energy Agency for the Application of Safeguards in Connection with the Treaty on the Non-Proliferation of Nuclear Weapons (INFCIRC/217), being the Agreement which was signed on behalf of Australia on 10 July 1974, a copy of which is set out in Schedule 3 of *the Act*.
Approved Locations	Locations for which this permit has effect as described in Paragraph 9.
ASNO	The Australian Safeguards and Non-Proliferation Office.
Designated Individual(s)	Individual(s) to whom the *Permit Holder's Representative* delegates some of the responsibility and authority with respect to compliance with this Permit.
Director General	The Director General of the Australian Safeguards and Non-Proliferation Office.
Inspector	A person appointed an inspector or a person declared an Agency inspector, pursuant to section 57 of *the Act*.
Inventory	The entire physical stock of *nuclear material*, irrespective of its form or usefulness, held by the Permit Holder.
Loss of Control (of material)	The Permit Holder has lost the ability to apply the Permit conditions (on a continuous basis) to *nuclear material* including UOC or associated items (including technology, material or equipment).
Nuclear fuel cycle-related research and development activities	Those activities which are specifically related to any process or system development aspect of any conversion of *nuclear material*, enrichment of *nuclear material*, nuclear fuel fabrication, reactors, critical facilities, reprocessing of nuclear fuel, processing (not including repackaging or conditioning not involving the separation of elements, for storage or disposal) of intermediate or high-level waste containing plutonium, or high enriched uranium or uranium-233. It does not include activities related to theoretical or basic scientific research or to research and development on industrial radioisotope applications, medical, hydrological and agricultural applications, health and environmental effects and improved maintenance.

Nuclear Material	*Source* and *special fissionable material* the same as in *the Act* but for the purposes of this Permit excludes material that has been deemed by *ASNO* as practicably irrecoverable (Schedule 3, Article 11 of *the Act*) or material that is the subject of an exemption or termination declaration under section 11 of *the Act*.
Nuclear Security	The prevention of, detection of, and response to, criminal or intentional unauthorised acts involving or directed at *nuclear material*, nuclear facilities and associated items. NOTE: *The Act* refers to physical security, which in relation to the protection of *nuclear material*, is defined as nuclear security or physical protection consistent with IAEA guidance material, and for the protection of associated items, as protective security consistent with the Australian Physical Security Policy Framework (PSPF).
Permit Holder's Representative	The representative of the Permit Holder (i.e. the organisation) who will take responsibility and sign documents on behalf of the organisation. This person must be in a position with sufficient authority to ensure all Permit conditions are met.
Source Material and **Special Fissionable Material**	The same as in Schedule 1 of *the Act.*
UOC	Uranium ore concentrates.

NOTE: Subject to the Administrative Review Tribunal Act 2024 and to sub-section 22(8) of the Nuclear Non-Proliferation (Safeguards) Act 1987, application may be made to the Administrative Review Tribunal, by or on behalf of a person whose interests are affected by a decision by the Minister, pursuant to sub-section (2) of section 13 of the Act, imposing a condition or restriction on the grant of a Permit, for review of the decision.

FACILITY MANAGEMENT CONTRACTOR
IWDF SYSTEM MANUAL
INTRACTABLE WASTE DISPOSAL FACILITY

This Manual represents the organisational structure and procedures adopted by the Facility Management Contractor (FMC) for the operation and management of the Intractable Waste Disposal Facility (IWDF), Mount Walton East, on behalf of the Department of Finance.

Unless otherwise agreed, this Manual remains the property of the Department of Finance.

The Manual is intended to provide an overview of the IWDF organisational structure and the structure of the FMC Management System. This Manual should be read in conjunction with the relevant procedures and the Department of Finance System Manual.

Rev	Date	Description	Prepared by:	Checked by:	Approved by:
0C	6/08/01	Draft	LMC	DFP, MJS	
1	10/01/08	Revision 1	LM	MS	MJS
2	29/05/08	Revision 2	LM	GB	MJS
3	02/04/09	Revision 3	LM	RH	
4	12/05/10	Review only	LM	MJS	MJS
5	14/09/11	Review and change of Proponent name	LM	MJS	MJS
6	3/09/12	Review & update FMC	LM	MJS	MJS
7	12/08/13	Review & update Figure 1 & TOC	LM	MJS	MJS
8	11/09/14	Correction Fig 2, & update Fig 1	LM	MJS	MJS
9	26/09/15	Update to Fig 1a & 1b	LM	MJS	LM
10	22/10/16	Review – no changes	LM	MJS	LM
11	04/10/17	Review – no change	LM	MJS	LM
12	21/11/18	Update to personnel chart, reformat, renaming of BMW manual	LM	MJS	LM
13	19/11/19	Rebranding, Update to personnel chart	LM	MJS	LM
14	24/02/21	BMW changed to Finance, FMC PM changed to Mark Shepherd	LM	MJS	LM
15	02/11/21	Minor formatting changes	LM	MJS	LM
16	03/12/22	Update to figures 1a and b and 3	LM	MJS	LM
17	17/07/24	Update to Figures 1a, 1b, 2, and 3. Minor grammatical changes throughout.	CJG	MJS	MJS

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FACILITY MANAGEMENT CONTRACTOR
IWDF PROCEDURES MANUAL

1. INTRODUCTION

1.1 BACKGROUND

The Department of Finance (Finance) is responsible for carrying out waste management operations at the Intractable Waste Disposal Facility (IWDF), Mt Walton East. A Facility Management Contractor (FMC) is engaged by Finance to undertake operational management of the IWDF on their behalf, including management of sub-contractors.

1.2 ENVIRONMENTAL HEALTH AND SAFETY MANAGEMENT SYSTEM

The IWDF Environmental, Health & Safety and Quality Management System (EHSQMS) is a management system designed to identify areas of actual or potential environmental and health & safety risks resulting from activities at the IWDF. The system then guides the formulation of procedures and objectives which minimise or eliminate these risks. The EHSQMS strives to integrate environmental management into the IWDF's daily management, long-term planning and other management systems. This is done to ensure Finance maintains a high level of environmental performance.

The structure of the EHSQMS is given in the *Finance System Manual*.

This Manual represents the organisational structure and procedures adopted by the FMC for the operation and management of the IWDF, on behalf of Finance. This Manual should be read in conjunction with the relevant FMC procedures and with the Finance System Manual.

2. ORGANISATION & RESPONSIBILITIES

2.1 FACILITY MANAGEMENT CONTRACTOR STATUS

Aurora Environmental is currently engaged as the FMC for the IWDF.

2.2 RESPONSIBILITIES

The major tasks and responsibilities of the principal positions within the FMC are detailed in the *FMC Functional and Personnel Charts (Figures 1a and 1b)*.

Further details on competencies, authorities, and responsibilities of FMC personnel are addressed in the FMC Management Procedure FMP-03 Training & Competency.

Figure 1a FMC Functional Chart

FMC FUNCTIONAL CHART						
			Project Director **Project Manager** (Principal Contact)	**Support Staff** Word processing etc.		
Operational Management	**Engineering Management**	**Administration, Systems & Reporting Management**	**Technical Subcontractors**	**Health & Safety Management**	**Environmental Management**	**Radiation Management**
Excavation	Geotechnical design	Environmental, health & safety & quality management system	Surveyors	Safety Officer / Nurse	Environmental planning	Radiation monitoring
Backfilling	Disposal Cell design	Quality assurance	Chemical analysis	Personnel protective equipment	Environmental monitoring	Radiation safety assessment
Site infrastructure (design & maintenance)	Geotechnology	Hazard evaluation (transport & disposal)	Flora, rehabilitation and fauna assessment		Site Surveys	Radiation safety case
Traffic monitoring	Hydrogeology	Disposal approvals	Technical illustration		Environmental approvals	Approvals – radioactive waste
Site security	Geophysics	Disposal reporting			Chemical analyses and interpretation	Packaging / conditioning radioactive waste
Geology	Excavation stability assessment	Performance & compliance reporting			Community reporting & information	Radiation physics & safety
Community liaison	Geotechnical testing – capping	Training			Community liaison	
Hazardous waste management • Inspection/ waste quality review • Preparation • Packaging • Transport		Admin & financial management, costing & reporting				
Disposal		Operational & system auditing Waste inventory / database				

Figure 1b FMC Personnel Chart

FMC PERSONNEL CHART						
			Project Director Mark Shepherd **Project Manager** Mark Shepherd			
Operations Manager Mark Shepherd **Alternative** Greg Milner	**Engineering Manager** TBA **Alternative** TBA	**Administration, Systems & Reporting Manager** Mark Shepherd **Alternative** TBA **Assistant** Cameron Garside	**Technical Subcontractors** Pinpoint Drafting Colin Reeves McMullan Nolan Surveyors Analytical Reference Laboratories PGV Environmental Paul van der Moezel **Support Staff** Aurora Environmental **Technical Assistant** Shayne Pittaway	**Health & Safety Manager** TBA **Safety Officer/ Nurse** TBA	**Environment Manager** Greg Milner **Alternative** Mark Shepherd	**Radiation Manager** Stuart Parr **Radiation Specialist** Ping Liu

3. IWDF PROCEDURES

3.1 STRUCTURE OF THE IWDF PROCEDURES

The Facility Management Contractor IWDF Procedures system comprises the following:

- Manual (this document).
- Procedures Index.
- FMC Management Procedures.
- Operational Procedures and Instructions.
- Environmental Procedures and Instructions.
- Radiation Procedures and Instructions.
- Safety Procedures and Instructions.
- Emergency Response Procedures and Instructions.
- Forms.
- Information Sheets.
- Induction Handbooks.

These procedures and instructions define the purpose, scope, and methodology of operational activities associated with the operational management of the IWDF.

Each **Procedure** defines the who, what, where, when, how, and why of operational activities to allow them to be undertaken in a manner acceptable to Finance and in accordance with the IWDF policy statement.

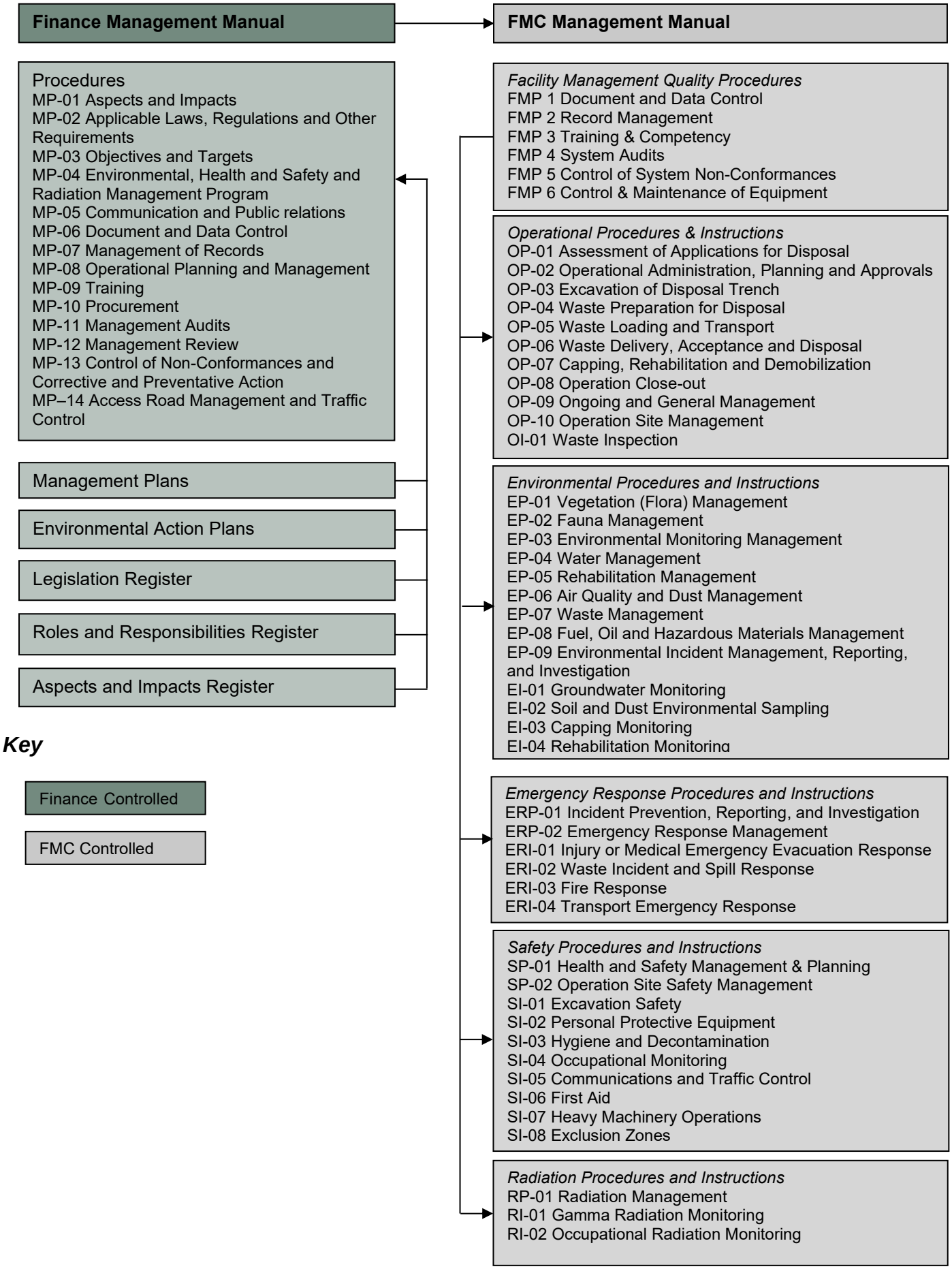
Each **Instruction** provides more specific actions regarding the way in which a particular task or activity should be undertaken.

This system is available electronically.

A flowchart depicting the structure of these procedures and their relationship with the Finance Management Procedures is provided in **Figure 2**.

The context of these procedures in relation to the Finance IWDF Management System is given in Figure 1 of the *Finance System Manual*.

FIGURE 2 IWDF SYSTEMS STRUCTURE



3.2 FINANCE MANAGEMENT PROCEDURES

These procedures define the management of IWDF activities undertaken directly, or coordinated, by Finance, including:

- Identification and management of issues (MP-01 Aspects & Impacts, MP-02 Applicable Laws, Regulations and Other Requirements, MP-03 Objectives & Targets, MP-04 Environmental, Health and Safety and Radiation Management Program);

- System management (MP-06 Document and Data Control, MP-07 Management of Records, etc.); and

- Operational management (MP-08 Operational Planning and Management).

These include specification of FMC responsibilities. These specifications have been addressed in the development of the FMC procedures, with reference to applicable Finance Management Procedures, where appropriate.

3.3 FMC MANAGEMENT PROCEDURES

These procedures define the system management of IWDF activities. This includes document control (FMP-01), record control (FMP-02), training (FMP-03), auditing (FMP-04), control of non-conformances (FMP-05) and equipment control (FMP-06). Many of these procedures are based on requirements specified in similar Finance Management Procedures and. To address these requirements, procedures specific to FMC activities are required. Many of the FMC procedures relate to specific FMC personnel (i.e., other than Finance staff) and the additional physical locations in which FMC activities are carried out.

In cases where Finance procedures exist, but there is no specific FMC Management procedure, the involvement/responsibility of the FMC is either minimal or fully specified in the Finance Management Procedure.

3.4 OPERATIONAL PROCEDURES AND INSTRUCTIONS

These procedures and instructions define operational management of IWDF activities, including specific tasks during the phases of a disposal operation (OP-01 to OP-08 and OP-10) and ongoing management (OP-09). The procedures should act as the first point of reference for operational activities. They refer to more specific environmental, radiation, safety, and emergency response procedures, where further details are required.

The roles, responsibilities, and tasks associated with the management of a disposal operation are given in a flowchart presented in Figure 3 – located at end of this manual.

3.5 ENVIRONMENTAL PROCEDURES AND INSTRUCTIONS

These procedures define methods for the effective environmental management of IWDF activities. They address the management of environmental issues identified in the the

Aspects and Impacts Register and the Environmental, Health and Safety Management Program for the IWDF (see the Finance System Manual). These procedures provide additional information relevant to the Operational Procedures.

3.6 RADIATION PROCEDURES AND INSTRUCTIONS

These procedures define the specific procedures and instructions related to management of radioactive wastes which are to be disposed at the IWDF. The Radiation Procedure RP-01 Radiation Management addresses the radiation-specific aspects of the operational phases identified in Operational Procedures OP-01 to OP-09.

3.7 SAFETY PROCEDURES AND INSTRUCTIONS

These procedures define the health and safety management of IWDF activities. They address the management of health & safety issues identified in the Health & Safety Management Plan (see the Finance System Manual).

3.8 EMERGENCY PROCEDURES AND INSTRUCTIONS

These procedures define the emergency response management of IWDF activities. They address the management of emergency issues identified in the Emergency Response Management Plan (see the Finance System Manual).

3.9 IWDF FORMS

A series of forms provide proformas for the recording of information and data related to IWDF activities. These forms are referenced in appropriate procedures and work instructions. They reside in a central location within the electronic system (or in some cases are appended to the procedures themselves).

3.10 INFORMATION SHEETS

A series of sheets provide reference information for key IWDF activities, such as emergency response (e.g., fire, waste spill, injury) and site rules. These sheets are referenced in appropriate procedures and work instructions. They reside in a central location within the electronic system. The sheets can be used as posters at strategic site locations and are also included in induction handbooks.

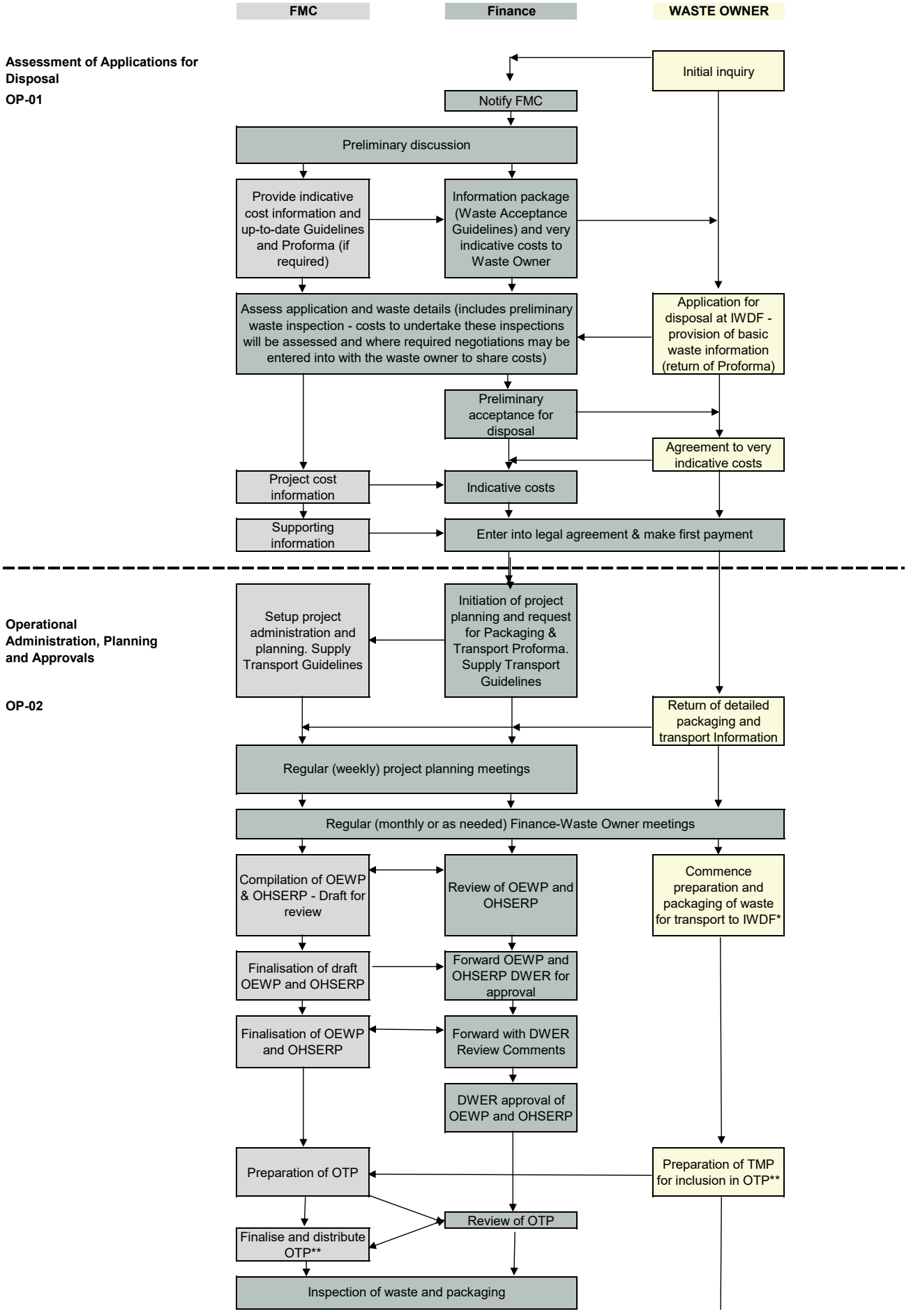
3.11 INDUCTION HANDBOOKS

A series of proformas have been developed for the presentation of procedures and safety information related to IWDF activities. They comprise summaries of key operational procedures (e.g., decontamination) and utilise existing Information Sheets, where available. They reside in a central location within the electronic system.

3.12 OPERATION PROCEDURES

In addition to IWDF procedures, Operation Procedures must be referred to during disposal operations (e.g., Operation Environmental Procedures). These documents are generated on an operation-by-operation basis following applicable guidelines (see the Finance System Manual), and include reference to waste-specific quantities, hazards, and controls. These are referred to in many IWDF procedures and instructions.

Intractable Waste Disposal Facility - Mt Walton East
Waste Disposal Operation
Typical Sequence of Activities



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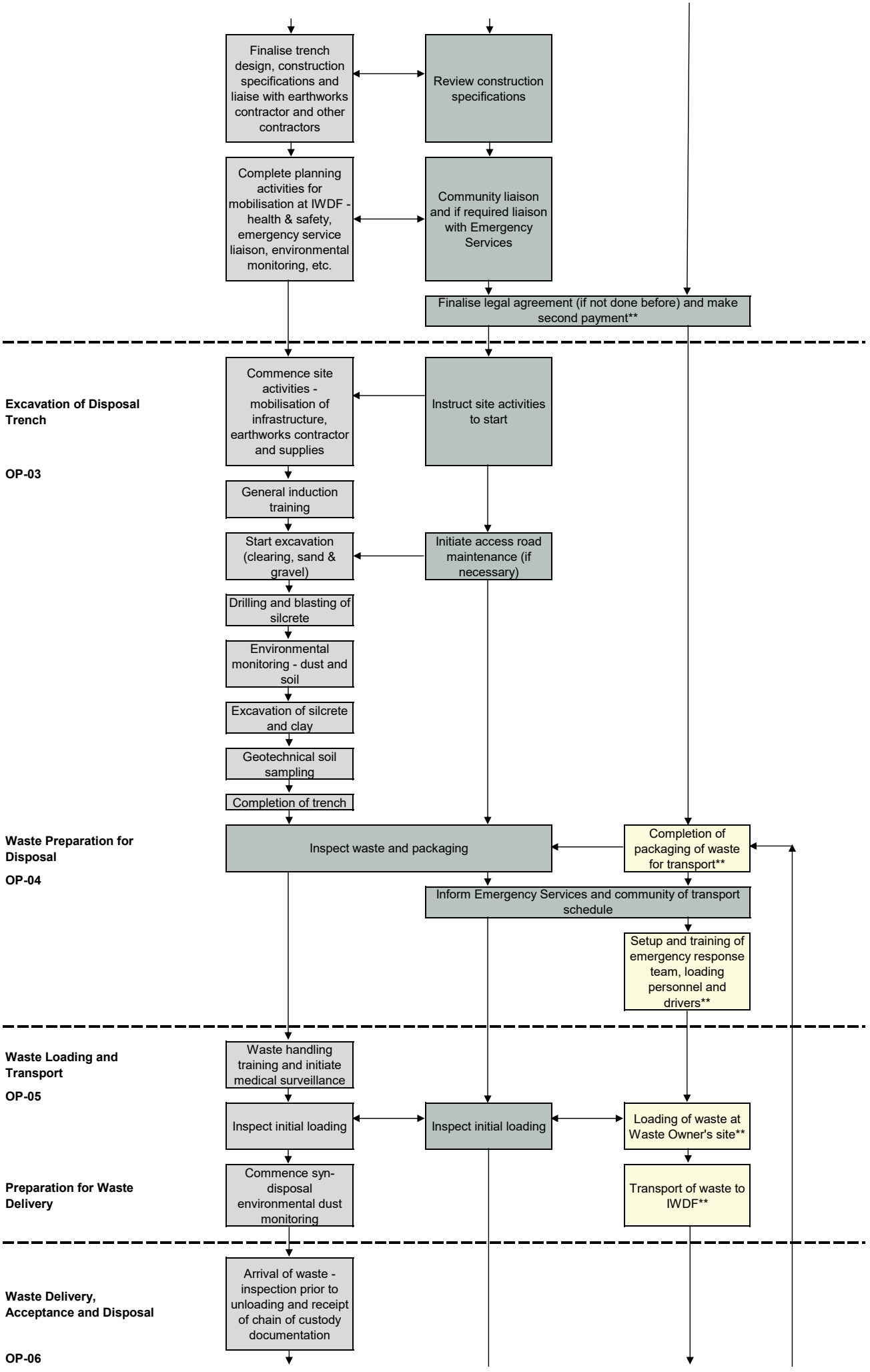

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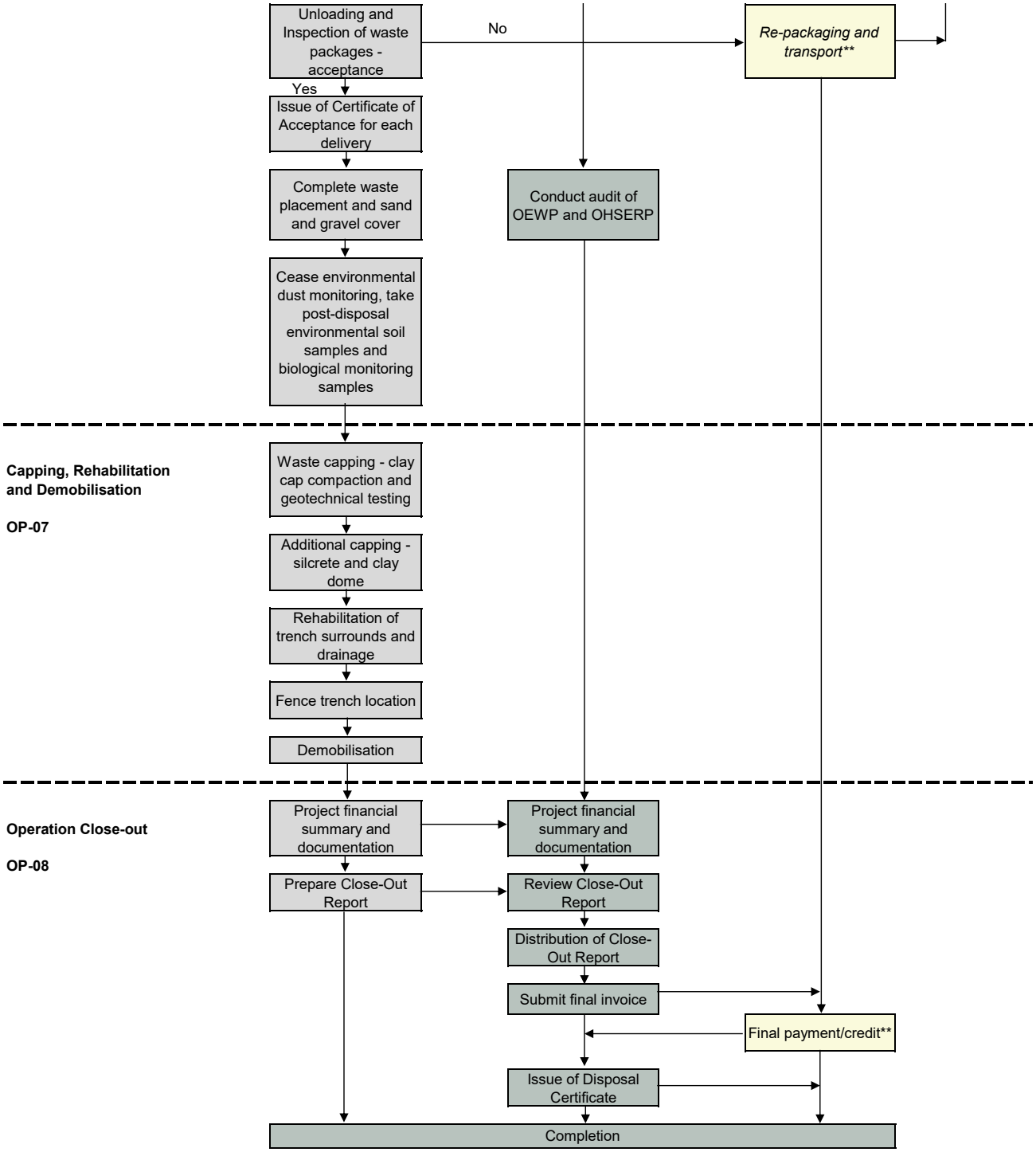

Notes:

*	Packaging can be undertaken by Finance for small consignments of radioactive wastes
**	Transport of small consigments of chemical waste may be undertaken by Finance with a one-off payment to be completed subsequent to packaging, but prior to transport
#	Approval from the Radiological Council is required if radioactive waste
DWER	Department of Water and Environmental Regulation
Finance	Department of Finance
FMC	Facility Management Contractor
OEWP	Operation Environmental and Waste Acceptance Procedures
OTP	Operation Transport Procedures
OHSERP	Operation Health & Safety and Emergency Response Procedures

APPENDIX Q

2024 – 2025 Aspects and Impacts (Risk) Register

Aspects and Impacts (Risk) Register - IWDF Mt Walton East

Risk Matrix

Likelihood	Consequence				
	1	2	3	4	5
5	Significant Risk	Significant Risk	High Risk	High Risk	High Risk
4	Medium Risk	Significant Risk	Significant Risk	High Risk	High Risk
3	Low Risk	Medium Risk	Significant Risk	High Risk	High Risk
2	Low Risk	Low Risk	Medium Risk	Significant Risk	High Risk
1	Low Risk	Low Risk	Medium Risk	Significant Risk	Significant Risk

Likelihood

Likelihood	Descriptor
1	Very rare. Never heard of in industry. Incident is incredibly unlikely but may occur under exceptional circumstances at the IWDF during a disposal operation or ongoing management.
2	Rare. Heard of in industry. Incident is unlikely but could occur at the IWDF during a disposal operation or ongoing management.
3	Infrequent. Happened several times in industry or has happened previously at the IWDF. Incident could occur at the IWDF during a disposal operation or ongoing management.
4	Frequent. Happened several times per year or per disposal operation at the IWDF. Incident will probably occur in most circumstances at the IWDF during a disposal operation or ongoing management.
5	Continual. Happened daily during ongoing management of the IWDF or during a disposal operation. Incident is expected to occur in almost all circumstances at the IWDF during a disposal operation or ongoing management

Consequence

Consequence	Descriptor	Environmental	Socio-political	Legal Compliance	Health and Safety
1	Insignificant	Minimal impact on the environment	Little or no community/media interest	Unlikely to be of interest to regulators	No injuries, or loss and damage of property
2	Minor	Short term impact only, to a limited area	Minor local community interest. Perhaps special interest group attention	Requires routine incident report to regulators	Requires first aid treatment
3	Severe	Medium term impact or large area of impact	Rising community concern and local action, media interest. Complaints submitted to government or regulatory institutions	Breach of license or legal infringement, fines possible, non-approval of disposal operation. Regulators provided with comprehensive incident report and updated following the implementation of in-house corrective actions	Requires medical treatment
4	Major	Extensive and significant impact on the environment	High community concern, broad media interest, loss of community confidence and state action	Regulators involved in incident response and provide instruction or guidance for actions, high level discussions, large fine, non-approval of disposal operation.	Results in extensive human exposure or injury
5	Catastrophic	Extensive, significant impact with long term effect on the environment	Public outcry, national action, ongoing national and/or international media interest, irreparable damage to government reputation	Possible court action resulting in huge fines or jail	Results in death

Aspects and Impacts (Risk) Register - IWDF Mt Walton East

Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
		Impact					Impact			
		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
All	Bushfire	High	Medium	Medium	High	Regular firebreak maintenance. Maintenance procedures and records of all site fire extinguishers. Emergency response instructions, procedures, and information sheets. Tellus firetruck on standby (along with trained personnel) if necessary.	Significant	Medium	Medium	Significant
All	Cold Stress	Low	Low	Low	Medium	Regular weather checks. Long sleeves to be worn on site at all times. PPE to be worn when conducting site activities in the cold (e.g., gloves, high-vis jumpers and vests). Heaters are installed in all site facilities and vehicles. Regular breaks to warm up when conducting site activities at low temperatures. First aid officer and emergency response procedures available onsite.	Low	Low	Low	Low
All	Drivers become fatigued	Medium	Significant	Significant	High	All IWDF vehicles to have primary and secondary drivers so that the load can be shared. Vehicles must stop for 10 minutes for every 2 hours driven. Site safety procedures include driver fatigue. All activities are scheduled so that there is no time pressure and drivers are allowed to rest in between periods of extended driving.	Low	Medium	Medium	High
All	Electrocution or electric shock due to incorrect usage of electrical appliances or equipment	Low	Medium	Significant	High	All electrical equipment is tested and tagged annually. Electrical work conducted only by licensed electricians. Residual Current Devices (RCDs) installed where necessary and tested regularly. First Aid Officer and equipment on site.	Low	Medium	Medium	Significant
All	Employee conducting site activities whilst under the influence of drugs or alcohol	Low	Significant	Significant	High	Illicit drugs are prohibited on the IWDF Reserve. Prescription drugs must be confidentially advised on the Medical Advice Form at the Site Office. At the start of site works, all personnel must blow 0.00 on the alcohol breathalyser. Any persons on site suspected of consuming drugs will be confined to the camp area and removal from site will be arranged. Alcohol is prohibited during the completion of site works.	Low	Low	Low	Medium
All	Employee has allergic reaction onsite	Low	Medium	Significant	High	Employee medical forms include allergies. First aid equipment on site and in IWDF vehicles. Regular communication procedures for personnel completing remote or isolated work. Enclosed footwear must be worn at all times on site. All employees with allergies will carry their Epipen. First aid training and emergency response procedures available onsite. First Aid Officer onsite during disposal operations.	Low	Low	Low	Medium
All	Employee is struck by lightning	Low	Medium	Medium	High	Site activities to cease during storm events where lightning looks likely. Regular weather checks before scheduled site activities. Personnel to remain in vehicle or inside if caught in a storm event. First aid officer and emergency response procedures/equipment available onsite.	Low	Low	Low	Significant

Aspects and Impacts (Risk) Register - IWDF Mt Walton East

Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
		Impact					Impact			
		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
All	Failing to update the community on IWDF activities	Low	Medium	Medium	Low	Annual community meetings. Notices provided to all local councils if a disposal operation is being planned or is about to commence. Annual publication of the PCR.	Low	Low	Low	Low
All	Food poisoning	Low	Low	Low	Significant	Ensure food is stored appropriately when travelling to and from site (travel with refrigeration to guarantee the food does not spoil during travel and before consumption). Hot food should not be brought to site. Upon arriving on site, transfer all foods requiring refrigeration or unique storage conditions to their appropriate locations. Food must be stored separately from all other supplies during waste handling activities. Return food to refrigerators or storage containers at the end of breaks and site activities. First aid officer and emergency response procedures/equipment available onsite.	Low	Low	Low	Medium
All	Heat Stress	Low	Significant	High	High	Regular breaks required during periods of extended work under the sun. Rotation of pesonnel when completing work outside. Regular hydration (4-8L across the workday) is encouraged. Sun protection must be worn (hat, sunscreen, sunglasses and long-sleeved shirts). Airconditioners have been installed in all site facilities and in all IWDF vehicles.	Low	Medium	Medium	Significant
All	Lack of, or misleading, communication between the FMC and Finance that results in poor-quality or delayed project deliverables	Low	Significant	Significant	Medium	OEOMs, MRMs, regular general contact via email and phone. Meeting agendas provided to all attendees in advance of the meetings. Minutes recorded at all meetings. System audits and management procedures.	Low	Low	Medium	Low
All	Personnel are injured by heavy machinery whilst it is operating	Low	Low	Significant	Significant	All personnel to receive appropriate training to ensure they are qualified for the job. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Appropriate separation distances to be maintained between operating machinery and other personnel. Use of PPE (helmets, eye protection, respirators, etc if necessary).	Low	Low	Significant	Significant
All	Slip/trip/fall resulting in injury	Low	Significant	High	High	Enclosed footware to be worn at all times. Exclusion zones. Site inductions to be completed by all employees. Attention to terrain e.g., gravel, concrete pads, and steep slopes. First aid equipment and emergency response procedures available on site and their location is made known to all personnel. First aid officer onsite.	Low	Medium	Medium	Significant

Aspects and Impacts (Risk) Register - IWDF Mt Walton East

Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
		Impact					Impact			
		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
All	Road accident	Low	Medium	Significant	High	A maximum speed limit of 40 km/h is set for the exclusion zone for all vehicles, including heavy machinery. A maximum speed limit of 80 km/h is set for all other areas. Normal caution is appropriate at the site, especially near turn-offs and around buildings (where there are pedestrians). The speed limit for the site access road is 80 km/h. Road and weather conditions should be considered in establishing a safe speed, which may be specified by the Operations Manager. Care in driving on the access road is required during wet weather as the surface may become slippery and soft. During wet weather an assessment of the road will be undertaken and the road may be closed. Road closure will be indicated at entry to the road by a 'road closed' sign. Driving on side tracks is discouraged at all times, regardless of the weather conditions. First aid procedures will be made available to personnel where necessary. All vehicles must travel with a satellite phone, food, water and first aid equipment.	Low	Medium	Significant	Significant
All	Smoking in close proximity to ignition sources resulting in bushfire	Significant	Significant	Significant	Significant	Smoking is prohibited in all domestic facilities (including TV rooms, kitchens, and offices). Designated smoking areas will be identified before the beginning of any site activity. Smoking is also prohibited in Exclusion Zones (disposal trench and surrounds), especially during waste handling. Cigarettes must be extinguished completely. Firefighting equipment available on site and regularly checked. Tellus firetruck on standby (along with trained personnel) if necessary.	Medium	Medium	Medium	Medium
All	Smoking in close proximity to ignition sources resulting in equipment or facility fire	Low	Low	Significant	High	Smoking is prohibited in all domestic facilities (including TV rooms, kitchens, and offices). Designatured smoking areas will be identified before the beginning of any site activity. Smoking is also prohibited in Exclusion Zones (disposal trench and surrounds), especially during waste handling. Cigarettes must be extinguished completely. Firefighting equipment available on site and regularly checked. Tellus firetruck on standby (along with trained personnel) if necessary.	Low	Low	Low	Low
All	Snake/scorpion/spider bite	Low	Medium	Medium	High	Enclosed footwear and long sleeves worn at all times when navigating the site (particularly at night), no matter how short the travel distance. Gaiters are also recommended. Immediately report sightings of these animals to the Operations Manager to coordinate their relocation. WA Poisons Information Centre available to be called on 13 11 26 in the event of a bite, poisoning, or suspected poisoning. First aid facilities available on site. Emergency response instructions, procedures, and information sheets. Site inductions.	Low	Medium	Medium	Significant

Aspects and Impacts (Risk) Register - IWDF Mt Walton East

Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
		Impact					Impact			
		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
All	Vehicle collision with local flora or fauna	Medium	Low	Low	Medium	Driving is prohibited offroad or on disused vehicle tracks. Speed limits enforced on all site roads. Driving at night is discouraged unless given express authority by IWDF Project Director. All vehicles equipped with bullbars.	Medium	Low	Low	Medium
Assessment and preparation of waste	Disposal of substance which could be recycled, reduced, or re-used OR disposal of waste not generated in WA.	Low	Significant	High	Low	Completion of Waste Acceptance Proformas. Appropriate review of completed Waste Acceptance Proformas. Ongoing liason with waste owners. EPA and DWER approval of Operation Environmental Waste Acceptance Procedures. Best practice reviews and annual review of appropriate government legislation. Radiological Council and ASNO to approve the disposal of radioactive wastes.	Low	Medium	Significant	Low
Assessment and preparation of waste	Radiation dose to personnel packaging and loading the waste	Medium	Significant	Medium	Medium	Personnel involved in waste packaging will have to undergo appropriate training and display their accreditation before commencing works. Packaging supervision by the RSO and dose monitoring. Secondary containment on all wastes (packaging). Exclusion zones and access control will be established to restrict movement around the area where waste is being packaged. Use of PPE.	Low	Low	Low	Low
Assessment and preparation of waste	Human error resulting in drum with a higher activity than expected being disposed of or incompatible/unsuitable chemicals being disposed of	Low	Medium	Medium	Significant	Completion of Waste Acceptance Proformas. Appropriate review of completed Waste Acceptance Proformas. Ongoing liason with waste owners. Waste inspections and spot checks to waste owner's sites. Packaging and Transport Guidelines. Radioactive waste is almost exclusively packaged by the FMC. If radioactive waste, packaging supervision by the RSO (following approval from the Radiological Council and ASNO).	Low	Low	Low	Medium
Assessment and preparation of waste	Incomplete solidification of waste	Medium	Medium	Medium	Low	Waste inspections and spot checks to waste owner's sites. Ongoing liason with waste owners. Packaging and Transport Guidelines. Radioactive waste is almost exclusively packaged by the FMC. If this is not the case, the RSO will supervise the packaging of all radioactive waste.	Low	Medium	Medium	Low
Assessment and preparation of waste	Loss of containment of radioactive waste resulting in radiation dose to worker	Low	Low	Low	Low	Personnel involved in waste packaging will have to undergo appropriate training and display their accreditation before commencing works. Packaging supervision by the RSO and dose monitoring. Secondary containment on all wastes (packaging). Exclusion zones and access control will be established to restrict movement around the area where waste is being packaged. Emergency Response Procedures and training. Use of PPE.	Low	Low	Low	Low

Aspects and Impacts (Risk) Register - IWDF Mt Walton East

Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
		Impact					Impact			
		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
Assessment and preparation of waste	Spill due to failure of packaging or accident during preparation of waste	Medium	Medium	Medium	Low	Personnel involved in waste packaging will have to undergo appropriate training and display their accreditation before commencing works. The RSO will supervise the packaging of radioactive waste and conduct dose monitoring where necessary. Secondary containment on all wastes (packaging). Exclusion zones and access control will be established to restrict movement around the area where waste is being packaged. Emergency Response and Spill Procedures and training. Use of PPE.	Medium	Medium	Medium	Low
Transportation of waste	Breakdown of support vehicle	Low	Low	Low	Low	Support vehicles accompany trucks when the IWDF is directly responsible for the transport of waste to site. They carry spill kits and the RSO if necessary . All IWDF support vehicles must have a full service history and undergo regular servicing and maintenance. More than one IWDF support vehicle will accompany the convoy of waste trucks during travel to the IWDF.	Low	Low	Low	Low
Transportation of waste	Breakdown of vehicle transporting waste to the IWDF	Low	Medium	Low	Low	Operation Transport Guidelines. Packaging and Transport Guidelines. Liason with the transport contractor to provide additional waste transport vehicles in the event that one breaks down or becomes inoperable. The waste trailer will then be disconnected from the broken prime mover and connected to a replacement vehicle so that transportation can continue.	Low	Medium	Low	Low
Transportation of waste	Radiation dose to driver	Medium	Significant	Medium	Medium	Operation Transport Guidelines. Packaging and Transport Guidelines. OHSERP Guidelines. Radioactive waste will be placed as far away from the driver as possible to minimise the radiation dose during transport. Suitable PPE will be worn and dose constraint monitoring may be conducted. All radioactive waste will have primary and secondary containment (packaging). Radiation Transport Licences will be required for all transport personnel, otherwise they will be accompanied by the RSO or another qualified FMC personnel.	Low	Medium	Low	Low
Transportation of waste	Fuel leaking from waste transport vehicle or IWDF vehicle during transportation of waste to the IWDF	Low	Low	Low	Low	All IWDF support vehicles must have a full service history and undergo regular servicing and maintenance. Fuel gauges will be monitored during transport of waste to the IWDF to help identify if fuel is leaking from vehicles. The driver's of waste transport vehicles will regularly inspect their loads during driving breaks to identify leaks. Operation Transport Guidelines. Packaging and Transport Guidelines. OHSERP Guidelines.	Low	Low	Low	Low

Aspects and Impacts (Risk) Register - IWDF Mt Walton East

Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
		Impact					Impact			
		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
Transportation of waste	IWDF support vehicle catches fire	Low	Medium	Medium	Significant	Emergency Response vehicles to accompany the convoy of trucks carrying intractable waste to the IWDF. Emergency response and waste-specific training and procedures. Operation Transport Guidelines. Packaging and Transport Guidelines. OHSERP Guidelines. Use of PPE. All IWDF support and emergency response vehicles are to be equipped with satellite phone, UHF radio, first aid kit, emergency contact details and procedures, and are able to transport a stretcher. Emergency Response Team (ERT) to accompany the convoy or be on standby. Safety Data Sheets available for the types of waste being transported.	Low	Low	Low	Significant
Transportation of waste	IWDF support vehicle involved in accident	Low	Medium	Medium	Significant	Emergency Response vehicles to accompany the convoy of trucks carrying intractable waste to the IWDF. Emergency response and waste-specific training and procedures. Operation Transport Guidelines. Packaging and Transport Guidelines. OHSERP Guidelines. Use of PPE. All IWDF support and emergency response vehicles are to be equipped with satellite phone, UHF radio, first aid kit, emergency contact details and procedures, and are able to transport a stretcher. Emergency Response Team (ERT) to accompany the convoy or be on standby. Safety Data Sheets available for the types of waste being transported.	Low	Low	Low	Significant
Transportation of waste	Loss of containment of radioactive waste resulting in radiation dose to worker	Low	Low	Low	Low	Personnel involved in waste transportation will have to undergo appropriate training and display their accreditation before commencing works. Transport supervision by the RSO and other qualified FMC personnel. Dose monitoring if necessary. Secondary containment on all wastes (packaging) and radioactive waste to be solidified. Emergency Response Procedures and training. Use of PPE.	Low	Low	Low	Low
Transportation of waste	Spillage of waste during transportation of waste to the IWDF	Medium	Significant	Significant	Low	Emergency Response vehicles to accompany the convoy of trucks carrying intractable waste to the IWDF. Emergency response and waste-specific training and procedures. Operation Transport Guidelines. Packaging and Transport Guidelines. OHSERP Guidelines. Use of PPE. All IWDF support and emergency response vehicles are to be equipped with satellite phone, UHF radio, first aid kit, emergency contact details and procedures, and are able to transport a stretcher. Emergency Response Team (ERT) to accompany the convoy or be on standby. Safety Data Sheets available for the types of waste being transported. Spill-response procedures, equipment (decontamination and containment) and training. All radioactive and chemical waste will be packaged with primary and secondary containment, and solidified, to minimise the possibility of spillage or leakage.	Low	Medium	Medium	Low

Aspects and Impacts (Risk) Register - IWDF Mt Walton East

Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
		Impact					Impact			
		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
Transportation of waste	Truck carrying waste catches fire	Medium	Significant	Significant	Significant	Emergency Response vehicles to accompany the convoy of trucks carrying intractable waste to the IWDF. Fire emergency response and waste-specific training and procedures. Operation Transport Guidelines. Packaging and Transport Guidelines. OHSERP Guidelines. Use of PPE. All IWDF support and emergency response vehicles are to be equipped with satellite phone, UHF radio, first aid kit, emergency contact details and procedures, and are able to transport a stretcher. Emergency Response Team (ERT) to accompany the convoy or be on standby. Safety Data Sheets available for the types of waste being transported. Spill-response procedures and training. All radioactive and chemical waste will be packaged with primary and secondary containment, and solidified, to minimise the possibility of spillage or leakage.	Low	Medium	Medium	Significant
Transportation of waste	Truck carrying waste involved in accident	Medium	Significant	Significant	Significant	Emergency Response vehicles to accompany the convoy of trucks carrying intractable waste to the IWDF. Transport accident emergency response and waste-specific training and procedures. Operation Transport Guidelines. Packaging and Transport Guidelines. OHSERP Guidelines. Use of PPE. All IWDF support and emergency response vehicles are to be equipped with satellite phone, UHF radio, first aid kit, emergency contact details and procedures, and are able to transport a stretcher. Emergency Response Team (ERT) to accompany the convoy or be on standby. Safety Data Sheets available for the types of waste being transported. Spill-response procedures and training. All radioactive and chemical waste will be packaged with primary and secondary containment, and solidified, to minimise the possibility of spillage or leakage.	Low	Medium	Significant	Significant
Transportation of waste	Unavailability of vehicles capable of transporting waste	Low	Medium	Low	Low	Liason with transport contractor to have additional waste transport vehicles on standby. Have multiple transport contractors who are capable of transporting waste to the IWDF. Plan the transportation phase of a disposal operation well in advance.	Low	Medium	Low	Low
Transportation of waste	Waste transport personnel found to not have correct training or accreditation	Low	Significant	High	Low	Waste-specific training and site induction forms must be completed by all personnel involved in site activities. All truck drivers must display a current heavy vehicle licence corresponding to the size/nature of vehicle they are driving. Copy of accreditation to be provided prior to contract being awarded. Operation Transport Guidelines. Packaging and Transport Guidelines. Radiation Transport Licences will be required for all transport personnel, otherwise they will be accompanied by the RSO or another qualified FMC personnel.	Low	Significant	Significant	Low

Aspects and Impacts (Risk) Register - IWDF Mt Walton East

Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
		Impact					Impact			
		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
Transportation of waste	Waste transport vehicles not permitted on the access road due to heavy rainfall	Low	Medium	Medium	Low	Plan the transportation phase of a disposal operation during weeks or seasons when minimal/no rainfall is expected. Regularly check local weather reports in the leadup to transporting waste to the IWDF. Monitoring the condition of the access road during site visits. The Operations Manager shall also ensure that confirmation, prior to transport, has been received from the IWDF Site Manager that the IWDF access road is trafficable. A large truck bay has been constructed at the southern end of the access road to allow up to five trucks to safely wait off the road. Trucks will remain there until weather and road conditions improve. Trucks carrying waste shall only travel on the access road during daylight hours (or as directed by the Operations Manager).	Low	Low	Low	Low
Trench Construction	Breakdown of heavy machinery or equipment during trench construction	Low	Medium	Medium	Low	Liason with appropriate contractor to have additional heavy machinery on standby. Have multiple contractors who are capable of providing the IWDF with necessary heavy machinery and operators. Plan the trench construction phase of a disposal operation well in advance. Regular safety checks of machinery to ensure they are safe and remain operable.	Low	Low	Low	Low
Trench Construction	Clearance of Declared Rare Fauna (DRF) or Priority Species	Medium	Low	Low	Low	Regular review of the Flora and Weed Identification Kits. Consult with a botanist when clearing is proposed. Priority species are identified and clearance in those areas is avoided as much as possible. Removed vegetation and topsoil is stockpiled.	Low	Low	Low	Low
Trench Construction	Construction specifications not adhered to (e.g., trench not large enough, waste not buried deep enough, incorrect drilling configuration for explosives)	Medium	Significant	Significant	Medium	Trench design originally approved by the EPA. Trench design regularly reviewed by technical consultants to ensure it is still state-of-the-art. Liason with the Radiological Council and other institutions to determine the depth that waste needs to be buried at. Liaison with waste owners to determine the total quantity of waste to be disposed of and thus the size of trench required. Collaboration with blasting contractor to determine the optimal drilling and blasting configuration. Records of excavation stability are kept on site and the trench stability is regularly checked by a geologist or geotechnical engineer. Removed vegetation and topsoil is stockpiled nearby for revegetation.	Low	Medium	Medium	Low
Trench Construction	Debris falling into the trench during construction resulting in damage to equipment or personnel	Medium	High	High	High	Appropriate windrow and operational bunding construction around the trench. Stability of trench regularly checked by a geologist or geotechnical engineer. Dust minimisation techniques. Continual monitoring of weather conditions (wind and rain). Use of PPE. Safety Manager present at all times. All personnel to receive appropriate training to ensure they are qualified for the job. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Appropriate separation distances to be maintained between operating machinery and other personnel.	Low	Low	Low	Medium

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Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
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		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
Trench Construction	Debris from drill rig operation resulting in damage to equipment or personnel	Low	Low	Significant	Significant	Appropriate windrow and operational bunding construction around the trench. Stability of trench regularly checked by a geologist or geotechnical engineer. Dust minimisation techniques. Continual monitoring of weather conditions (wind and rain). Use of PPE. Safety Manager present at all times. All personnel to receive appropriate training to ensure they are qualified for the job. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Appropriate separation distances to be maintained between operating drill rig and other personnel.	Low	Low	Low	Low
Trench Construction	Dust generation due to drill rig operation	Low	Low	Low	Medium	Dust suppression regularly conducted. Trench perimeter and roads consistently wetted to reduce dust formation. Use of PPE (eye protection and masks if necessary). Buffer between construction zone and trench office. Trench office positioned so that wind will blow dust and debris in the opposite direction (Trench office typically positioned south of trench as prevailing wind direction is south/south-westerly). Drill rig operator to remain in enclosed cabin when drilling.	Low	Low	Low	Low
Trench Construction	Dust generation during trench construction	Significant	Significant	Significant	Significant	Dust suppression regularly conducted. Trench perimeter and roads consistently wetted to reduce dust formation. Use of PPE (eye protection and masks if necessary). Buffer between construction zone and trench office. Trench office positioned so that wind will blow dust and debris in the opposite direction (Trench office typically positioned south of trench as prevailing wind direction is south/south-westerly). All operators of heavy machinery to remain in their enclosed cabins when conducting site activities.	Low	Low	Low	Low
Trench Construction	Excessive noise generation from excavators or heavy machinery	Medium	Medium	Medium	Significant	All heavy machinery equipped with mufflers and other noise minimisation equipment. Operators to remain in their cabins during site activities and wear hearing protection if necessary. Other personnel to maintain a safe distance from heavy machinery in operation and wear appropriate PPE (ear plugs or other hearing protection in accordance with Australian Standards). Site activities only to occur during daylight hours unless otherwise specified by the IWDF Project Director or Finance.	Low	Low	Low	Low

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Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
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		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
Trench Construction	Fume or dust inhalation when working in close proximity to excavators or heavy machinery	Medium	Significant	Significant	Significant	Trench perimeter and roads consistently wetted to reduce dust formation. Use of PPE (eye protection and respirators/masks if necessary). All personnel to receive appropriate training to ensure they are qualified for the job. Constant feedback between IWDF Safety Manager and personnel in the trench regarding fume generation and odours. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Appropriate separation distances to be maintained between operating machinery and other personnel. Shift rotation to ensure no personnel is working close to fume or dust sources for prolonged periods of time.	Low	Low	Low	Low
Trench Construction	Generation of confined spaces or hazardous atmospheres whilst operating in the trench	Low	Low	Medium	Significant	Trenches remain open at the top at all times until capping. Stability of trench regularly checked by a geologist or geotechnical engineer. Constant feedback between IWDF Safety Manager and personnel in the trench regarding fume generation and odours. Use of PPE (eye protection, respirators, etc if necessary). All personnel to receive appropriate training to ensure they are qualified for the job. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Appropriate separation distances to be maintained between operating machinery and other personnel.	Low	Low	Low	Low
Trench Construction	Heavy machinery falling into trench from surrounding area	Low	Medium	High	High	Appropriate windrow and operational bunding construction around the trench. Stability of trench regularly checked by a geologist or geotechnical engineer. Use of PPE. Safety Manager present at all times. All personnel to be appropriately licensed. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Appropriate separation distances to be maintained between operating heavy machinery and other personnel.	Low	Medium	Significant	Significant
Trench Construction	Limited trench ingress or egress during an emergency	Low	Medium	Significant	High	Emergency Response Team (ERT) present or on standby. Stability of trench regularly checked by a geologist or geotechnical engineer. Use of PPE. Emergency Response, Safety, and Operational Procedures and Instructions. Establishment of an exclusion zone and movement/communication procedures to ensure trench ramp is never blocked completely or for prolonged periods of time. Placement of a large industrial ladder at the oposite side of the trench to the ramp so that there is another access point.	Low	Medium	Significant	Significant

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		Impact					Impact			
		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
Trench Construction	Personnel found to not have correct training or accreditation	Low	Significant	High	Low	Appropriate IWDF training and site induction forms must be completed by all personnel involved in site activities. Contractors must display a current licence or permit corresponding to the type of activity they are expected to complete during this phase of the disposal operation (e.g., working at heights). All operators of heavy machinery must display a current licence corresponding to the size/nature of machine they are operating. Operational Procedures and Instructions.	Low	Significant	Significant	Low
Trench Construction	Personnel get too close to drill rig whilst it is operating	Low	Low	Significant	Significant	All personnel to receive appropriate training to ensure they are qualified for the job. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Appropriate separation distances to be maintained between operating machinery and other personnel. Use of PPE (helmets, eye protection, respirators, etc if necessary).	Low	Low	Significant	Significant
Trench Construction	Trench cave-in or collapse	Low	Significant	High	High	Appropriate windrow and operational bunding construction around the trench to minimise amount of personnel working in close proximity to trench boundaries. Stability of trench regularly checked by a geologist or geotechnical engineer. Use of PPE. Safety Manager present at all times. Emergency Response Team onsite or on standby. All personnel to receive appropriate training to ensure they are qualified for the job. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Safety Procedures and Insutrctions as well as Operational Procedures and Instructions. OHSERP Guidelines and Emergency Response Procedures.	Low	Significant	Significant	Significant
Trench Construction	Unavailability of heavy machinery	Low	Medium	Low	Low	Liason with relevant trench construction contractors to have additional heavy machinery/equipment on standby. Have multiple contractors who are capable of providing the IWDF with heavy machinery/equipment and qualified operators. Plan the trench construction phase of a disposal operation well in advance.	Low	Medium	Low	Low
Trench Blasting	Dust generation and inhalation from silcrete blasting	Significant	Significant	Significant	High	Liaison with the blasting contractor to determine the separation distance between the blast and personnel. Typically, all personnel will be relocated to the site camp prior to detonation (this results in a 1.5-2km buffer between people and the explosion). Site activities will recommence near the trench following approval from the Operations Manager and after allowing sufficient time for the dust to settle.	Significant	Significant	Significant	Significant
Trench Blasting	Explosives used in silcrete blasting triggers a bushfire	Significant	Significant	Significant	Significant	Regular firebreak maintenance. Maintenance procedures and records of all site fire extinguishers. Emergency response instructions, procedures, and information sheets. Emergency Response Team and vehicles either onsite or on standby. Tellus firetruck on standby (along with trained personnel) if necessary.	Medium	Medium	Medium	Medium

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Trench Blasting	Falling debris from silcrete blasting causing damage to equipment or personnel	Significant	High	High	High	Liaison with the blasting contractor to determine the separation distance between the blast and personnel/equipment. Typically, all personnel and equipment will be relocated to the site camp prior to detonation (this results in a 1.5-2km buffer between people and the explosion). Immovable infrastructure such as trench office will have been established and positioned far away from the expected blast radius before this phase of the disposal operation is scheduled to occur. Site activities will recommence near the trench following approval from the Operations Manager and after allowing sufficient time for the dust to settle. Emergency Response Team and vehicles onsite or on standby. Safety, Operational, and Emergency Response Procedures/Instructions. Use of PPE.	Significant	Significant	Significant	Significant
Trench Blasting	Premature or unplanned detonation of the explosives used in silcrete blasting	Low	Medium	High	High	Liaison with the blasting contractor to determine the safest method of preparing the explosives. Only suitably qualified contractors or personnel will be allowed to work in or near the trench during the blasting phase of the disposal operation. Multi-layer detonation initiation sequence to greatly reduce the likelihood of unplanned detonation. Establishment of vehicle/personnel movement and communication procedures. Emergency Response Team and vehicles onsite or on standby. Safety, Operational, and Emergency Response Procedures/Instructions. Use of PPE.	Low	Medium	Significant	Significant
Trench Blasting	Unplanned vehicle/electrical fire caused by explosives used during the blasting of silcrete.	Low	Low	Significant	High	Liaison with the blasting contractor to determine the separation distance between the blast and personnel/equipment. All personnel and equipment will be relocated to the site camp prior to detonation (this results in a 1.5-2km buffer between people and the explosion). Immovable infrastructure such as trench office will have been established and positioned far away from the expected blast radius before this phase of the disposal operation is scheduled to occur. Site activities will recommence near the trench following approval from the Operations Manager and after allowing sufficient time for the dust to settle. Emergency Response Team and vehicles onsite or on standby. Safety, Operational, and Emergency Response Procedures/Instructions. Use of PPE. Site firefighting equipment is regularly serviced and the location of such equipment is made apparent to all personnel involved in site activities. Tellus firetruck on standby (along with trained personnel) if necessary.	Low	Low	Significant	Significant

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		Impact					Impact			
		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
Unloading and Placement of Waste	Breakdown of heavy machinery during waste unloading and placement	Low	Medium	Low	Low	Liason with appropriate contractor to have additional heavy machinery on standby. Have multiple contractors who are capable of providing the IWDF with necessary heavy machinery and operators. Plan the waste unloading and placement phase of a disposal operation well in advance. Regular safety checks of machinery to ensure they are safe and remain operable.	Low	Medium	Low	Low
Unloading and Placement of Waste	Debris falling into the trench during unloading and placement of waste causing damage to equipment and personnel	Medium	High	High	High	Appropriate windrow and operational bunding construction around the trench. Stability of trench regularly checked by a geologist or geotechnical engineer. Dust minimisation techniques. Continual monitoring of weather conditions (wind and rain). Use of PPE. Safety Manager present at all times. All personnel to receive appropriate training to ensure they are qualified for the job. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Appropriate separation distances to be maintained between operating machinery and other personnel.	Low	Low	Low	Medium
Unloading and Placement of Waste	Dust generation due to operation of heavy machinery	Medium	Medium	Medium	Medium	Dust suppression regularly conducted. Trench perimeter and roads consistently wetted to reduce dust formation. Use of PPE (eye protection and masks if necessary). Buffer between construction zone and trench office. Trench office positioned so that wind will blow dust and debris in the opposite direction. Unless not practicable, the trench office positioned south of trench as prevailing wind direction is south/south-westerly. All operators of heavy machinery to remain in their enclosed cabins when conducting site activities.	Low	Low	Low	Low
Unloading and Placement of Waste	Excessive noise generation from excavators or heavy machinery	Medium	Medium	Medium	Medium	All heavy machinery equipped with mufflers and other noise minimisation equipment. Operators to remain in their cabins during site activities and wear hearing protection if necessary. Other personnel to maintain a safe distance from heavy machinery in operation and wear appropriate PPE (ear plugs or other hearing protection in accordance with Australian Standards). Site activities only to occur during daylight hours unless otherwise specified by the IWDF Project Director or Finance.	Low	Low	Low	Low
Unloading and Placement of Waste	Radiation dose to personnel unloading and placing radioactive waste into the trench	Medium	Significant	Medium	Medium	Personnel involved in waste unloading/placement will have to undergo appropriate training and display their accreditation before commencing works. Packaging supervision by the RSO and dose constraint monitoring. Secondary containment on all wastes (packaging). Exclusion zones and access control will be established to restrict movement around the area where waste is being unloaded/placed. Use of PPE.	Low	Low	Low	Low

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Unloading and Placement of Waste	Fume or dust inhalation when working in close proximity to excavators or heavy machinery	Medium	Significant	Significant	Significant	Trench perimeter and roads consistently wetted to reduce dust formation. Use of PPE (eye protection and respirators/masks if necessary). All personnel to receive appropriate training to ensure they are qualified for the job. Constant feedback between IWDF Safety Manager and personnel in the trench regarding fume generation and odours. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Appropriate separation distances to be maintained between operating machinery and other personnel. Shift rotation to ensure no personnel is working close to fume or dust sources for prolonged periods of time.	Low	Low	Low	Low
Unloading and Placement of Waste	Generation of confined spaces or hazardous atmospheres whilst operating in the trench close to heavy machinery	Low	Low	Medium	Significant	Trenches remain open at the top at all times until capping. Stability of trench regularly checked by a geologist or geotechnical engineer. Constant feedback between IWDF Safety Manager and personnel in the trench regarding fume generation and odours. Use of PPE (eye protection, respirators, etc if necessary). All personnel to receive appropriate training to ensure they are qualified for the job. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Appropriate separation distances to be maintained between operating machinery and other personnel. Depending on the waste being disposed of, it may be necessary to conduct specific concentration testing (e.g., for arsenic waste).	Low	Low	Low	Low
Unloading and Placement of Waste	Heavy machinery falling into trench from surrounding area	Low	Medium	High	High	Appropriate windrow and operational bunding construction around the trench. Stability of trench regularly checked by a geologist or geotechnical engineer. Use of PPE. Safety Manager present at all times. All personnel to receive appropriate training to ensure they are qualified for the job. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Appropriate separation distances to be maintained between operating heavy machinery and other personnel.	Low	Medium	Significant	Significant
Unloading and Placement of Waste	Limited trench ingress or egress during an emergency	Low	Medium	Significant	High	Emergency Response Team (ERT) present or on standby. Stability of trench regularly checked by a geologist or geotechnical engineer. Use of PPE. All personnel to receive appropriate training to ensure they are qualified for the job. Emergency Response, Safety, and Operational Procedures and Instructions. Establishment of an exclusion zone and movement/communication procedures to ensure trench ramp is never blocked completely or for prolonged periods of time. Placement of a large industrial ladder at the oposite side of the trench to the ramp so that there is another access point.	Low	Medium	Significant	Significant

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		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
Unloading and Placement of Waste	Loss of containment of radioactive waste resulting in radiation dose to worker	Low	Low	Low	Low	Personnel involved in waste unloading/placement will have to undergo appropriate training and display their accreditation before commencing works. Packaging supervision by the RSO and dose constraint monitoring. Secondary packaging of all wastes to prevent puncture of waste containers during unloading and placement in the disposal trench (e.g., forklift prongs piercing waste container when picking up the waste). Waste is solidified. Exclusion zones and access control will be established to restrict movement around the area where waste is being unloaded/placed. Use of PPE.	Low	Low	Low	Low
Unloading and Placement of Waste	Spill due to failure of packaging or accident during unloading or placement of waste	Low	Low	Low	Medium	Emergency Response Team and vehicles to remain onsite or be on standby during this phase of the disposal operation. Emergency response and waste-specific training and procedures. Packaging and Transport Guidelines. OHSERP Guidelines. Use of PPE. Safety Data Sheets available for the types of waste being disposed of. Spill-response procedures, equipment (decontamination and containment) and training. All radioactive and chemical waste will be packaged with primary and secondary containment to minimise the possibility of spillage or leakage. The RSO and other qualified FMC personnel will supervise waste unloading and placement at all times.	Low	Low	Low	Medium
Unloading and Placement of Waste	Trench cave-in or collapse	Low	Significant	High	High	Appropriate windrow and operational bunding construction around the trench to minimise amount of personnel working in close proximity to trench boundaries. Stability of trench regularly checked by a geologist or geotechnical engineer. Use of PPE. Safety Manager present at all times. Emergency Response Team onsite or on standby. All personnel to receive appropriate training to ensure they are qualified for the job. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Safety Procedures and Insutrctions as well as Operational Procedures and Instructions. OHSERP Guidelines and Emergency Response Procedures.	Low	Significant	Significant	Significant
Unloading and Placement of Waste	Unavailability of vehicles capable of unloading and placing waste	Low	Medium	Low	Low	Liason with relevant contractors to have aditional waste unloading and placement equipment on standby. Have multiple contractors who can provide the IWDF with machinery and qualified operators capable of unloading and placing the waste in the disposal trench. Plan the waste unloading and placement phase of a disposal operation well in advance.	Low	Medium	Low	Low

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Unloading and Placement of Waste	Vehicle unloading or placing waste in the disposal trench involved in accident	Medium	Significant	High	High	Emergency Response vehicles to remain near the trench during this phase of the disposal operation. Emergency response and waste-specific training and procedures. OHSERP Guidelines. Use of PPE. All IWDF support and emergency response vehicles are to be equipped with satellite phone, UHF radio, first aid kit, emergency contact details and procedures, and are able to transport a stretcher. Emergency Response Team (ERT) to remain on site or be on standby. Safety Data Sheets available for the types of waste being disposed of. Spill-response procedures, equipment (decontamination and containment) and training. All radioactive and chemical waste will be packaged with primary and secondary containment to minimise the possibility of spillage or leakage. Establishment of vehicle movement and communication procedures. Establishment of Exclusion Zones and speed limits.	Low	Medium	Significant	Significant
Unloading and Placement of Waste	Vehicle unloading or placing waste in the disposal trench catches fire	Medium	Significant	High	High	Emergency Response vehicles to remain near the trench during this phase of the disposal operation. Emergency response and waste-specific training and procedures. OHSERP Guidelines. Use of PPE. All IWDF support and emergency response vehicles are to be equipped with satellite phone, UHF radio, first aid kit, emergency contact details and procedures, and are able to transport a stretcher. Emergency Response Team (ERT) to remain on site or be on standby. Safety Data Sheets available for the types of waste being disposed of. Spill-response procedures, equipment (decontamination and containment) and training. All radioactive and chemical waste will be packaged with primary and secondary containment to minimise the possibility of spillage or leakage. Site firefighting equipment regularly serviced and the location of this equipment is made known to all personnel conducting site activities. Tellus firetruck on standby (along with trained personnel) if necessary.	Low	Medium	Medium	Significant
Unloading and Placement of Waste	Waste handling personnel found to not have correct training or accreditation	Low	Significant	High	Low	IWDF training register. Appropriate IWDF training and site induction forms must be completed by all personnel involved in site activities. Contractors must display a current licence or permit corresponding to the type of activity they are expected to complete during this phase of the disposal operation (e.g., working at heights or working with particular chemicals). Training will also be required for personnel handling and unloading the waste, including how to correctly use waste-specific PPE. All operators of heavy machinery must display a current licence corresponding to the size/nature of machine they are operating. Operational Procedures and Instructions.	Low	Significant	Significant	Low

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		Impact					Impact			
		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
Trench Backfilling and Capping	Breakdown of heavy machinery or equipment during trench backfilling and capping	Low	Low	Low	Low	Liason with appropriate contractor to have additional heavy machinery/equipment on standby or spare parts on site. Have multiple contractors who are capable of providing the IWDF with necessary heavy machinery and operators. Plan the trench backfilling and capping phase of a disposal operation well in advance. Regular safety checks of machinery to ensure they are safe and remain operable.	Low	Low	Low	Low
Trench Backfilling and Capping	Construction specifications not adhered to (e.g., the trench cap is not thick enough or uniform)	Significant	Significant	Significant	Significant	Trench cap design originally approved by the EPA. Trench cap design regularly reviewed by technical consultants to ensure it is still state-of-the-art. Liaison with the Radiological Council and other institutions to determine the required thickness of each cap layer. Operational Procedures and Instructions. Trench backfilling and capping logs and reports must be routinely completed during this phase of the disposal operation. IWDF training register and site inductions to ensure all personnel involved in backfilling/caping are qualified and suitably trained in the IWDF's standard operating procedures. Once the trench has been completed, annual trench cap erosion and rehabilitation monitoring completed in the spring months.	Medium	Medium	Medium	Low
Trench Backfilling and Capping	Debris falling into the trench during backfilling and capping causing equipment to damage and personnel	Medium	High	High	High	Appropriate windrow and operational bunding construction around the trench. Stability of trench regularly checked by a geologist or geotechnical engineer. Dust minimisation techniques. Continual monitoring of weather conditions (wind and rain). Use of PPE. Safety Manager present at all times. All personnel to receive appropriate training to ensure they are qualified for the job. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Appropriate separation distances to be maintained between operating machinery and other personnel.	Low	Low	Low	Medium
Trench Backfilling and Capping	Dust generation due to operation of heavy machinery	Medium	Medium	Medium	Medium	Dust suppression regularly conducted. Trench perimeter and roads consistently wetted to reduce dust formation. Use of PPE (eye protection and masks if necessary). Buffer between construction zone and trench office. Trench office positioned so that wind will blow dust and debris in the opposite direction (Trench office typically positioned south of trench as prevailing wind direction is south/south-westerly). All operators of heavy machinery to remain in their enclosed cabins when conducting site activities.	Low	Low	Low	Low

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Trench Backfilling and Capping	Significant erosion of trench caps	Significant	Medium	Medium	Low	Trench caps and clay domes are monitored for erosion and subsidence every 6 months during the site visits. Photographs of each trench cap are taken from multiple locations and included in the monitoring report following the spring site visit. If subsidence is identified, a mitigation strategy will be developed based on the nature of the subsidence and the waste that was disposed of in the trench. Strategies will likely involve the removal of topsoil and other layers and concreting the area where subsidence is occuring.	Medium	Low	Low	Low
Trench Backfilling and Capping	Excessive noise generation from excavators or heavy machinery	Medium	Medium	Medium	Medium	All heavy machinery equipped with mufflers and other noise minimisation equipment. Operators to remain in their cabins during site activities and wear hearing protection if necessary. Other personnel to maintain a safe distance from heavy machinery in operation and wear appropriate PPE (ear plugs or other hearing protection in accordance with Australian Standards). Site activities only to occur during daylight hours unless otherwise specified by the IWDF Project Director or Finance.	Low	Low	Low	Low
Trench Backfilling and Capping	Fume or dust inhalation when working in close proximity to excavators or heavy machinery	Medium	Significant	Significant	Significant	Trench perimeter and roads consistently wetted to reduce dust formation. Use of PPE (eye protection and respirators/masks if necessary). All personnel to receive appropriate training to ensure they are qualified for the job. Constant feedback between IWDF Safety Manager and personnel in the trench regarding fume generation and odours. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Appropriate separation distances to be maintained between operating machinery and other personnel. Shift rotation to ensure no personnel is working close to fume or dust sources for prolonged periods of time.	Low	Low	Low	Low
Trench Backfilling and Capping	Generation of confined spaces or hazardous atmospheres whilst operating in the trench close to heavy machinery	Low	Low	Medium	Significant	Trenches remain open at the top at all times until capping. Stability of trench regularly checked by a geologist or geotechnical engineer. Constant feedback between IWDF Safety Manager and personnel in the trench regarding fume generation and odours. Use of PPE (eye protection, respirators, etc if necessary). All personnel to receive appropriate training to ensure they are qualified for the job. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Appropriate separation distances to be maintained between operating machinery and other personnel. Depending on the waste being disposed of, it may be necessary to conduct specific concentration testing (e.g., for arsenic waste).	Low	Low	Low	Low

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		Impact					Impact			
		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
Trench Backfilling and Capping	Heavy machinery falling into trench from surrounding area	Low	Medium	High	High	Appropriate windrow and operational bunding construction around the trench. Stability of trench regularly checked by a geologist or geotechnical engineer. Use of PPE. Safety Manager present at all times. All personnel to receive appropriate training to ensure they are qualified for the job. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Appropriate separation distances to be maintained between operating heavy machinery and other personnel.	Low	Medium	Significant	Significant
Trench Backfilling and Capping	Limited trench ingress or egress during an emergency	Low	Medium	Significant	High	Emergency Response Team (ERT) present or on standby. Stability of trench regularly checked by a geologist or geotechnical engineer. Use of PPE. All personnel to receive appropriate training to ensure they are qualified for the job. Emergency Response, Safety, and Operational Procedures and Instructions. Establishment of an exclusion zone and movement/communication procedures to ensure trench ramp is never blocked completely or for prolonged periods of time. Placement of a large industrial ladder at the oposite side of the trench to the ramp so that there is another access point.	Low	Medium	Significant	Significant
Trench Backfilling and Capping	Personnel get too close to heavy machinery whilst it is operating	Low	Low	Significant	Significant	All personnel to receive appropriate training to ensure they are qualified for the job. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Appropriate separation distances to be maintained between operating machinery and other personnel. Use of PPE (helmets, eye protection, respirators, etc if necessary).	Low	Low	Significant	Significant
Trench Backfilling and Capping	Trench cave-in or collapse	Low	Significant	High	High	Appropriate windrow and operational bunding construction around the trench to minimise amount of personnel working in close proximity to trench boundaries. Stability of trench regularly checked by a geologist or geotechnical engineer. Use of PPE. Safety Manager present at all times. Emergency Response Team onsite or on standby. All personnel to receive appropriate training to ensure they are qualified for the job. Establishment of an exclusion zone and movement/communication procedures. First aid equipment and facilities nearby or on standby. Safety Procedures and Insutrctions as well as Operational Procedures and Instructions. OHSERP Guidelines and Emergency Response Procedures.	Low	Significant	Significant	Significant
Trench Backfilling and Capping	Unavailability of vehicles capable of backfilling and capping trench (e.g., rollers)	Low	Medium	Low	Low	Liason with relevant contractors to have aditional trench backfilling and capping equipment on standby. Have multiple contractors who can provide the IWDF with machinery and qualified operators capable of backfilling and capping the disposal trench. Plan the trench backfilling and capping phase of a disposal operation well in advance.	Low	Medium	Low	Low

Aspects and Impacts (Risk) Register - IWDF Mt Walton East

Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
		Impact					Impact			
		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
Trench Backfilling and Capping	Machinery backfilling or capping trench is involved in accident	Medium	Significant	Significant	Significant	Emergency Response vehicles to remain near the trench during this phase of the disposal operation. Emergency response and waste-specific training and procedures. OHSERP Guidelines. Use of PPE. All IWDF support and emergency response vehicles are to be equipped with satellite phone, UHF radio, first aid kit, emergency contact details and procedures, and are able to transport a stretcher. Emergency Response Team (ERT) to remain on site or be on standby. Safety Data Sheets available for the types of waste being disposed of. Spill-response procedures, equipment (decontamination and containment) and training. All radioactive and chemical waste will be packaged with primary and secondary containment to minimise the possibility of spillage or leakage. Establishment of vehicle movement and communication procedures. Establishment of Exclusion Zones and speed limits.	Low	Medium	Significant	Significant
Trench Backfilling and Capping	Machinery backfilling or capping the disposal trench catches fire	Medium	Significant	Significant	Significant	Emergency Response vehicles to remain near the trench during this phase of the disposal operation. Emergency response and waste-specific training and procedures. OHSERP Guidelines. Use of PPE. All IWDF support and emergency response vehicles are to be equipped with satellite phone, UHF radio, first aid kit, emergency contact details and procedures, and are able to transport a stretcher. Emergency Response Team (ERT) to remain on site or be on standby. Safety Data Sheets available for the types of waste being disposed of. Spill-response procedures, equipment (decontamination and containment) and training. All radioactive and chemical waste will be packaged with primary and secondary containment to minimise the possibility of spillage or leakage. Site firefighting equipment regularly serviced and the location of this equipment is made known to all personnel conducting site activities. Tellus firetruck on standby (along with trained personnel) if necessary.	Low	Medium	Medium	Significant
Monitoring	Failing to visit the site to conduct monitoring	Medium	Significant	Significant	Low	Annual monitoring schedule. Monitoring logs, records and reports. Environmental procedures and instructions. Regular general contact between Finance and the FMC via email and phone. Annual community meetings. System audits. Management Review Meetings (MRMs). Monthly Ongoing Environmental and Operational Management Meetings (OEOMs).	Low	Medium	Medium	Low

Aspects and Impacts (Risk) Register - IWDF Mt Walton East

Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
		Impact					Impact			
		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
Monitoring	Monitoring equipment breaking or not working properly	Medium	Significant	Significant	Low	Environmental procedures and instructions. Equipment regularly tested and calibrated (regardless of whether it is owned by the FMC or sourced from a contractor). Results of testing and calibration recorded and reported to Finance. FMC personnel trained in the use of monitoring equipment. Backup monitoring equipment either on standby or brought to site as well. Regular general contact between Finance and the FMC via email and phone. Site visits for ongoing management and monitoring organised well in advance.	Low	Low	Low	Low
Monitoring	Monitoring personnel not trained in the use of equipment	Medium	Significant	Significant	Low	Environmental procedures and instructions. FMC personnel trained in the use of monitoring equipment. IWDF staff training schedule and register regularly updated. Monitoring logs, records, and reports. Regular general contact between Finance and the FMC via email and phone. Site visits for ongoing management and monitoring organised well in advance.	Low	Low	Low	Low
Monitoring	Revegetation of disposal area not sufficient	Medium	Low	Medium	Low	Annual trench revegetation and rehabilitation monitoring completed in the spring months. This includes density, height, and diversity of vegetation as well as the presence of weeds. Rehabilitation inspection by a botanist every 10 years. Formulation of a seeding plan if necessary.	Medium	Low	Medium	Low
Monitoring	Unavailability of monitoring equipment or contractors	Low	Medium	Low	Low	Liason with monitoring equipment providers (if equipment is not owned by Finance or the FMC). Keep a record of multiple monitoring equipment providers who have the appropriate equipment available for hire. Plan the site visits for ongoing monitoring well in advance. If monitoring is required during a disposal operation, ensure that appropriate equipment is available for the whole duration of the disposal operation.	Low	Low	Low	Low
Emergency Response	Breakdown of IWDF emergency response vehicle	Low	Medium	Significant	High	All IWDF vehicles must have a full service history and undergo regular servicing and maintenance. In the absence or failure of the IWDF 4WD vehicle, an equally equipped alternative will be available on site during a disposal operation. Emergency vehicles are equipped with satellite phone, UHF radio, first aid kit, emergency contact details and procedures, and are able to transport a stretcher. Emergency vehicles are either on standby or kept on site, in the vicinity of the active trench, during disposal operations. In the event of an emergency and the simultaneous unavailability of the IWDF vehicles, Tellus will dispatch their ambulance/ firetruck (including personnel) to assist in emergency response activities. The airstrip at Mt Dimer is also available for use by the IWDF in the event of an emergency. Internet access and mobile phone connection established in all site facilities through Starlink.	Low	Medium	Significant	Significant

Aspects and Impacts (Risk) Register - IWDF Mt Walton East

Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
		Impact					Impact			
		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
Emergency Response	Emergency Response Team unaware of nearby first aid or spill response facilities and equipment	Medium	Medium	Significant	High	All members of the Emergency Response Team are required to have received appropriate first aid and emergency response training (this training is recorded and renewed according to the staff training register/schedule). Members of the ERT are also required to complete waste-specific training prior to the commencement of disposal operations. Safety and emergency response procedures available to all IWDF personnel (including safety data sheets). If necessary, Tellus have also agreed to dispatch their ambulance/ firetruck (including highly-trained personnel) to assist in emergency response activities. The airstrip at Mt Dimer is also available for use by the IWDF in the event of an emergency. Internet access and mobile phone connection established in all site facilities through Starlink.	Low	Medium	Medium	Significant
Emergency Response	Inability to contact emergency response personnel or facilities in the event of an incident, resulting in delayed or inadequate treament	Medium	Medium	Significant	High	Emergency vehicles are equipped with a satellite phone, UHF radio, and emergency contact details and procedures. Internet access and mobile phone connection established in all site facilities through Starlink.	Low	Medium	Medium	Significant
Emergency Response	Inadequately supplied or poorly maintained IWDF emergency response vehicles	Low	Medium	Significant	High	All IWDF support vehicles must have a full service history and undergo regular servicing and maintenance. Emergency vehicles are equipped with satellite phone, UHF radio, first aid kit, emergency contact details and procedures, and are able to transport a stretcher. This equipment is regularly checked by the FMC before the vehicles are transported to site. These emergency vehicles are either on standby or kept on site, in the vicinity of the active trench, during disposal operations. If necessary, Tellus have also agreed to dispatch their ambulance/ firetruck (including personnel) to assist in emergency response activities. The airstrip at Mt Dimer is also available for use by the IWDF in the event of an emergency. All members of the Emergency Response Team are required to have received appropriate first aid and emergency response training (this training is recorded and renewed according to the staff training register/schedule).	Low	Medium	Medium	Significant

Aspects and Impacts (Risk) Register - IWDF Mt Walton East

Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
		Impact					Impact			
		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
Emergency Response	Injured personnel receiving delayed or inadequate treatment due to nearby emergency departments being unaware of disposal activities at the IWDF	Low	Medium	Significant	High	Nearby emergency response facilities informed of the nature of injuries expected at the site, including the nature of wastes previously disposed of, or about to be disposed of, at the IWDF. These facilities are also notified when a disposal operation is scheduled to commence. Internet access and mobile phone connection established in all site facilities through Starlink. Safety Data Sheets (SDS) provided to all general site and emergency response personnel.	Low	Medium	Medium	Significant
Emergency Response	Lack of operable emergency response equipment on site	Low	Medium	Significant	High	Site first aid, spill response, and firefighting equipment regularly checked and serviced.The location of all emergency response equipment is included in all site inductions and training. Emergency vehicles are equipped with satellite phone, UHF radio, first aid kit, emergency contact details and procedures, and are able to transport a stretcher. This equipment is regularly checked by the FMC before the vehicles are transported to site. These emergency vehicles are either on standby or kept on site, in the vicinity of the active trench, during disposal operations. If necessary, Tellus have also agreed to dispatch their ambulance/ firetruck (including personnel) to assist in emergency response activities. The airstrip at Mt Dimer is also available for use by the IWDF in the event of an emergency. All members of the Emergency Response Team are required to have been trained in the use of emergency response equipment (this training is recorded and renewed according to the staff training register/schedule).	Low	Medium	Significant	Significant
Emergency Response	Poor or delayed response to emergency due to Emergency Response Team (ERT) being insufficiently trained	Medium	Medium	Significant	High	The ERT shall comprise the Site Manager, Safety Manager, First Aid Officer, Environment Manager, and the Contractor Supervisor, under the management of the Operations Manager (or the Safety Manager if the Operations Manager is unavailable). All members of the Emergency Response Team are required to have received appropriate first aid and emergency response training (this training is recorded and renewed according to the staff training register/schedule). Members of the ERT are also required to complete waste-specific training prior to the commencement of disposal operations. Safety and emergency response procedures available to all IWDF personnel (including safety data sheets). If necessary, Tellus have also agreed to dispatch their ambulance/ firetruck (including highly-trained personnel) to assist in emergency response activities. The airstrip at Mt Dimer is also available for use by the IWDF in the event of an emergency. Internet access and mobile phone connection established in all site facilities through Starlink.	Low	Medium	Medium	Significant

Aspects and Impacts (Risk) Register - IWDF Mt Walton East

Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
		Impact					Impact			
		Environmental	Socio-political	Legal	Health & Safety		Environmental	Socio-political	Legal	Health & Safety
Emergency Response	Unavailability of access road resulting in delayed evacuation or medical assistance	Low	Medium	Significant	High	Emergency Contact Details and procedures available on site. IWDF emergency vehicles are also equipped with these documents, as well as a satellite phone, UHF radio, and are able to transport a stretcher. This allows for the coordination of medical evacuation if neccessary (nearby emergency facilities and the Royal Flying Doctor Service). In the event of an emergency and the simultaneous unavailability of the IWDF access road, the airstrip at Mt Dimer is available for use by the IWDF. An agreement with Tellus will also see them dispatch their ambulance/ firetruck (including personnel) if necessary to assist in emergency response activities. Internet access and mobile phone connection established in all site facilities through Starlink.	Low	Medium	Medium	Significant
Auditing and Reviewing	Non-compliance with an element of the Management System	Significant	High	High	High	System audits. Management Review Meetings (MRMs). Monthly Ongoing Environmental and Operational Management Meetings (OEOMs). Meeting agendas provided to all attendees in advance of the meetings and minutes recorded at all meetings. Management procedures. Monitoring records, reports, and logs. Annual publication of the Performance and Compliance Report (PCR). Liasion with relevant government bodies and independent authorities (Radiological Council, DWER etc). Management System backed up on both Finance and FMC file serves. Archiving and Retention and Disposal Schedules. Regular general contact between Finance and the FMC via email and phone. Annual community meetings.	Low	Medium	Medium	Medium

APPENDIX R

2024 – 2025 IWDF Legal Register

Dangerous Goods	**Australian Code for the Transport of Dangerous Goods by Road & Rail (ADG Code) 7.9 Edition 2024**
	EP-08 Fuel, Oil and Hazardous Material Management
	OP-05 Waste Loading and Transport
	Packaging and Transport Guidelines
	Waste Acceptance Guidelines - Chemical Waste
	Waste Acceptance Guidelines - Radioactive Waste
	Dangerous Goods Safety (General) Regulations 2007
	OP-05 Waste Loading and Transport
	Dangerous Goods Safety (Storage and Handling of Non-explosives) Regulations 2007
	EP-08 Fuel, Oil and Hazardous Materials Management
	Dangerous Goods Safety Act 2004
	Packaging and Transport Guidelines
Environmental Protection	**Biodiversity Conservation Act 2016**
	EP-01 Vegetation (Flora) Management
	Bush Fires Act 1954
	EP-01 Vegetation Management
	DWER 2021 Guidelines: Assessment and Management of Contaminated Sites
	EI-01 Groundwater Monitoring
	EI-02 Soil and Dust Environmental Sampling
	Environmental Protection (Clearing of Native Vegetation) Regulations 2004
	EP-01 Vegetation Management
	Environmental Protection (Controlled Waste) Regulations 2004
	OP-05 Waste Loading and Transport
	Packaging and Transport Guidelines
	Environmental Protection Act 1986
	EP-03 Environmental Monitoring Management
	EP-04 Water Management
	EP-06 Air Quality and Dust Management
	EP-07 Waste Management
	Intractable Waste Disposal Facility Safety Case
	OP-03 Excavation Safety
	Land Administration Act 1997
	Intractable Waste Disposal Facility Safety Case
	Landfill Waste Classification and Waste Definitions 1996 (as amended 2019) Environmental Protection Act 1986
	Intractable Waste Disposal Facility Safety Case
	Packaging and Transport Guidelines
	Waste Acceptance Guidelines - Chemical Waste
	Waste Acceptance Guidelines - Radioactive Waste

Health and Safety	**Code of Practice: First Aid in the Workplace 2022 (DEMIRS)**
	SI-06 First Aid
	Confined Spaces: Code of practice 2022 (DEMIRS)
	Management Plan 1 - Air Quality
	SI-01 Excavation Safety
	Work Health and Safety Act 2020
	ERI-01 Injury or Medical Emergency Evacuation Response
	ERP-01 Incident Prevention, Reporting, and Investigation
	ERP-02 Emergency Response Management
	Management Plan 5 - Health and Safety
	SI-01 Excavation Safety
	SI-02 Personal Protective Equipment
	SI-03 Hygiene and Decontamination
	SI-04 Occupational Monitoring
	SI-05 Communications and Traffic Control
	SI-06 First Aid
	SI-07 Heavy Machinery Operations
	SI-08 Exclusion Zones
	SP-01 Health and Safety Management and Planning
	SP-02 Operation Site Safety Management

Radiation	**Code for Disposal Facilities for Solid Radioactive Waste (2018) Radiation Protection Series C-3**
	Intractable Waste Disposal Facility Operations Safety Assessment
	Intractable Waste Disposal Facility Post-Closure Safety Assessment
	Intractable Waste Disposal Facility Safety Case
	Management Plan 6 - Radiation
	OP-02 Operational Administration, Planning and Approvals
	OP-07 Capping, Rehabilitation and Demobilisation
	RP-01 Radiation Management
	Waste Acceptance Guidelines - Chemical Waste
	Waste Acceptance Guidelines - Radioactive Waste
	Code for Radiation Protection in Planned Exposure Situations (2020) RPS C-1 (Rev.1)
	Intractable Waste Disposal Facility Safety Case
	Management Plan 6 - Radiation
	RI-02 Occupational Radiation Monitoring
	RP-01 Radiation Management
	Code for the Safe Transport of Radioactive Material, RPS C-2 (Rev. 1) 2019
	Intractable Waste Disposal Facility Safety Case
	OP-05 Waste Loading and Transport
	Packaging and Transport Guidelines
	RP-01 Radiation Management
	Waste Acceptance Guidelines - Radioactive Waste
	Code of Practice and Safety Guide for Radiation Protection and Radioactive Waste Management in Mining and Mineral Processing (2005) RPS 9
	Intractable Waste Disposal Facility Operations Safety Assessment
	Intractable Waste Disposal Facility Post-Closure Safety Assessment
	Intractable Waste Disposal Facility Safety Case
	Code of Practice for the Safe Transport of Radioactive Material (2008) ARPANSA RPS 2. NOW SUPERSEDED BUT STILL REFERRED TO BY WA REGULATIONS 1983 AND 2002
	Management Plan 6 - Radiation
	OP-05 Waste Loading and Transport
	RP-01 Radiation Management
	Code of Practice for the Security of Radioactive Sources (2019) RPS 11
	Intractable Waste Disposal Facility Safety Case

Radiation	**Fundamentals for Protection Against Ionising Radiation (2014) ARPANSA RPS F-1**
	Intractable Waste Disposal Facility Safety Case
	RI-02 Occupational Radiation Monitoring
	Guide for Radiation Protection in Existing Exposure Situations (2017) ARPANSA RPS G-2
	Intractable Waste Disposal Facility Safety Case
	RI-02 Occupational Radiation Monitoring
	Nuclear Non-Proliferation (Safeguards) Act 1987
	Intractable Waste Disposal Facility Safety Case
	Radiation Safety (General) Regulations 1983
	Intractable Waste Disposal Facility Post-Closure Safety Assessment
	Intractable Waste Disposal Facility Safety Case
	Management Plan 6 - Radiation
	RI-02 Occupational Radiation Monitoring
	RP-01 Radiation Management
	Waste Acceptance Guidelines - Radioactive Waste
	Radiation Safety (Transport of Radioactive Substances) Regulations 2002
	Management Plan 6 - Radiation
	OP-05 Waste Loading and Transport
	RP-01 Radiation Management
	Radiation Safety Act 1975
	Intractable Waste Disposal Facility Safety Case
	RP-01 Radiation Management
	Waste Acceptance Guidelines - Radioactive Waste

State Legislation (Western Australia)

Commonwealth Legislation

Air Quality	**AS 3640-2009 Workplace atmospheres - Method for sampling and gravimetric determination of inhalable dust** RI-02 Occupational Radiation Monitoring RP-01 Radiation Management
	AS/NZS 3580.1.1: 2016 Methods for Sampling and Analysis of Ambient Air - Guide to siting air monitoring equipment. Management Plan 1 - Air Quality
	AS/NZS 3580.10.1: 2016 Methods for Sampling and Analysis of Ambient Air - Determination of particulate matter - Deposited matter - Gravimetric method EI-02 Soil and Dust Environmental Sampling Management Plan 1 - Air Quality
	AS/NZS 3580.9.13:2022 Methods for Sampling and Analysis of Ambient Air - Determination of suspended particulate matter - PM2.5 continuous direct mass method using a tapered element oscillating microbalance monitor Management Plan 1 - Air Quality
Dangerous Goods	**AS 1940-2017/Amdt 2:2021 The Storage and Handling of Flammable and Combustible Liquids** EP-08 Fuel, Oil and Hazardous Materials Management **AS 2400.1-1995 (R2016) Packaging - Glossary of Terms** Packaging and Transport Guidelines
	SAA/SNZ HB 76:2010 Dangerous Goods - Initial Emergency Response Guide Packaging and Transport Guidelines
PPE	**AS/NZS 1270:2002 (Rec: 2014) Acoustics - Hearing protectors** SI-02 Personal Protective Equipment
	AS/NZS 1337.1:2010/Amdt 2:2018 Personal eye protection, Part 1: Eye and face protectors for occupational applications SI-02 Personal Protective Equipment
	AS/NZS 1715:2009 Rul 1:2023 Selection, use and maintenance of respiratory protective equipment. SI-02 Personal Protective Equipment
	AS/NZS 1716:2012 Respiratory protective devices SI-02 Personal Protective Equipment
	AS/NZS 1801:2024 Occupational protective helmets SI-02 Personal Protective Equipment
	AS/NZS 2161.1:2016 Occupational protective gloves SI-02 Personal Protective Equipment
	AS/NZS 2210.1:2010 Safety, protective and occupational footwear - Guide to selection, care and use (Pending revision) SI-02 Personal Protective Equipment
	AS/NZS 1801:1997/Amdt 1:1999 Occupational protective helmets (pending revision) SI-02 Personal Protective Equipment

APPENDIX S

2024 – 2025 Management Review Meetings Minutes

Government of **Western Australia**
Department of **Finance**

MANAGEMENT REVIEW MEETING
INTRACTABLE WASTE DISPOSAL FACILITY, MT WALTON EAST

MINUTES

Date:	5 December 2024	
Time:	9.30 am to 12:45 pm	
Venue:	Board Room, Dilhorn House, 2 Bulwer St, Perth 6000	
Attendance:	Eleanor Hopkins (EH):	Finance IWDF Project Director
	Tegan Gibson (TG):	Finance IWDF Contract Manager
	Mark Shepherd (MS):	FMC Project Director
	Cameron Garside (CG):	Graduate Environmental Scientist
	Ping Liu (PL):	Radiation Specialist
Apologies:	Nil	
Meeting Number:	**21**	

1. Open and Welcome

TG welcomed those present at the 21st IWDF Management Review Meeting (MRM).

MS introduced Ping Liu as the new Aurora Radiation Specialist.

TG circulated, via email, the draft agenda seeking input on 21 November 2024 and the final agenda was circulated to all participants at the start of the meeting.

2. Minutes of the Previous Meeting

The draft minutes of the previous MRM meeting held, 24 June 2024, were emailed to those present at the meeting on 28 June 2024. The draft minutes were accepted as a true and accurate record of the meeting with the final minutes issued to attendees on 23 July 2024.

A copy of the draft 24 June 2024 MRM minutes was sent, via email, to the Community Liaison Committee (CLC) on 10 July 2024 with a hardcopy made available to Jan McLeod, also on 10 July 2024. It was noted that future MRM minutes would be made available to the community as an attachment to the annual Performance and Compliance Report (PCR) published on WA.gov.au in September each year.

3. Business Arising from Previous Meeting

3.1 Update of Finance Management Manual

EH advised the Finance Management Manual is being reviewed as part of the IWDF Management System review and has been amalgamated into a single IWDF Management Manual with roles and responsibilities assigned to distinguish between tasks to be

undertaken by the Department of Finance and those by the FMC. The manual will also distinguish between disposal operation and general environmental management tasks. Refer item 4.

3.2 Risk Workshop (MS)

MS reported that a risk workshop was undertaken on 14 November 2024 to review the Aspects and Impacts Register. Refer item 4.4.2. for full detail.

3.3 Staff Training

Refer item 12.

3.4 IWDF Safety Assessments and Safety Case

Refer item 13.1.

3.5 Provide the FMC with a consolidated draft of Ministerial Statement 0562

Finance provided the FMC with a consolidated draft on 24 June 2024.

4. IWDF Management Systems

MS reported that a review of the IWDF Management System was underway with consolidation of documents to reduce duplication, review responsibilities, and improve oversight by both Finance and the FMC.

MS reported that all the document control matrices and registers were reviewed and updated, where required, just prior to the MRM.

Refer Attachment 1 for summary of proposed changes, noting these are subject to approval.

Action: Finance to follow up with DWER to understand whether approval is required for changes to the management system.

4.1 Environmental, Health & Safety and Quality Policy Review

The Environmental, Health & Safety and Quality Policy was reviewed for suitability in line with the required review period. The policy was considered fit for purpose by the Management Team with minor updates made to the reference of the Standards as each of the ISO Standards had been amended this year. The policy will remain with this minor change until the next review period.

It was noted that in the Quality Policy the FMC Project Manager reports to the FMC Project Director.

The Finance Project Manager title has been changed from Finance Project Manager to Finance Contract Manager

4.2 IWDF Management Plans

MS reported that a review of the Management Plans was undertaken on 3 December 2024 (Revision 31). Some minor formatting changes were made to the Management Plans document and a summary of the technical changes made to plans is provided in the table below.

Management Plan	Version	Review Date	Change
1	31	3/12/2024	Currency check of all AS / NZS standards referenced in this Air Quality Management Plan.
2A	31	3/12/2024	Change to the next date a botanist will review the status of IWDF vegetation (2034).
5	31	3/12/2024	Update to the status of the fire extinguisher replacement program. “Most of the fire extinguishers were replaced in October 2024. The remaining fire extinguishers were removed from site in October 2024 and will be replaced during the first site visit of 2025”.
7	31	3/12/2024	Update to the name of DEMIRS, previously DMIRS.
6, 7, and 9	31	3/12/2024	Replacement of EPA with DWER for all reporting requirements.
6 and 10	31	3/12/2024	Removal of Community Liaison Committee and replaced with Annual Community Meetings.

4.3 Management Manuals

MS reported the FMC and Finance Management Manuals were reviewed and for consistency the same introduction that is used in the handbook has been included in the amalgamated Management Manual.

As the handbook contains information on previous disposal operations this duplication of information has been removed from the Management Manual.

4.4 Registers

4.4.1 Legislative and Other Requirements Register

CG reported that the Legislative and Other Requirements Register was audited as part of the PCR and annual review. The following new legislation was introduced into the Legal Register and superseded documents were removed.

- Australian Code for the Transport of Dangerous Goods by Road and Rail Edition 7.9, 2024 (was previously Edition 7.8).

CG also advised an additional column had been added to the register to identify the relevant documents within the IWDF Management System that reference the legislation so that, moving forward, any required updates can be made efficiently.

4.4.2 Aspects and Impacts Register

Discussion on renaming the Aspects and Impacts Register to IWDF Risk Register was held and it was agreed this name would better reflect the purpose of the document, however it will be necessary to check that this would comply with the requirements of the Standard.

The IWDF management team held a risk workshop on 14 November 2024. In this workshop all existing risks were reviewed, and the following changes were agreed:

- Socio-political category of the consequences matrix was adjusted to reference the reputation of the Government.
- The Health and Safety Hazards Register, a management program requirement of the Environmental Health & Safety Management Plan (Revision 29), was consolidated into the Risk Register.
- A review of risk ratings was undertaken with amendments made as required.
- A residual risk rating matrix was included.
- Risks were split into those apply to ongoing management, disposal operations and both.

Following this workshop the draft revised risk register was circulated to the management team on 3 December 2024 for review.

A final review by Finance remains outstanding before the document can be finalised.

4.5 Finance EHSMS and Procedures

The Finance EHSMS and Procedures are being reviewed as part of the IWDF Management System Review detailed in item 4 above. A summary of the proposed changes to Finance Forms, including proposed amalgamation with similar FMC Forms, is provided in Attachment 1. This is part of the ongoing MANS improvement project.

4.6 FMC EHSMS & FMC Procedures

The FMC EHSMS and Procedures are being reviewed as part of the IWDF Management System Review detailed in item 4 above. A summary of the proposed changes to FMC Forms is provided in Attachment 1. This is part of the ongoing MANS improvement project.

4.7 Performance and Compliance Reporting (PCR)

On 19 September 2024 the DWER was notified that, in accordance with Condition 11 of DWER Licence L8190/2007/2, the 2023-24 Performance and Compliance Report (PCR) for the Intractable Waste Disposal Facility (IWDF), Mt Walton East was available for download from the WA.gov.au website via the link provided. The 2023 – 2024 PCR also included the Annual Environment Report which was required under Condition 12 of the Licence.

On 19 September 2024, the Radiological Council was provided the link to the 2023- 24 PCR for the IWDF, Mt Walton East.

CLC members were emailed the link to the PCR on 3 October 2024. Jan McLeod was provided with a hard copy of the PCR at the 8 November CLC meeting.

A legal deposit was submitted to the State Library on 19 November 2024.

4.8 Annual Review of Finance R&D Schedule

Submission of the updates to the IWDF Retention and Disposal Schedule was made to the Finance Records Management team on 25 November 2024. These minor updates reflect the following changes:

- The Department of Energy, Mines, Industry Regulation and Safety (DEMIRS) now includes Energy.
- Changed the approving body of the management system to the Department of Water and Environmental Regulation (DWER) from the Environmental Protection Agency as per amendments to Ministerial Statement 562.
- The Safety Case, Safety Assessment and Post Closure Safety Assessment have been added to the License and Permits section.

Once the database has been finalized Finance will make a submission to the Department of Finance Enterprise Architecture Team for inclusion of the database in the Business Services ICT Catalogue.

5. Action Plans

5.1 Performance against 2024 – 2025 Action Plan to date

MS reported that to date performance against the 2024 – 2025 Action Plans was good. The outstanding actions are provided on the table below.

Action Plan	Improvement Target	Action	Responsibility	Required Completion Date	Status
3 – Emergency Response	Centralise all emergency response procedures, instructions, and information sheets so that they can be quickly accessed in the event of an emergency.	Consolidate the emergency response procedures, instructions, and information sheets into one document (without a loss of detail).	Management Team	End of Q1 2025	Revised emergency response instruction provided to Finance for review on the 16th of July 2024. Resent to Finance following December MRM.

Action Plan	Improvement Target	Action	Responsibility	Required Completion Date	Status
4 - Flora and Fauna	Centralise all environmental instructions so that they can be easily accessed during site monitoring visits.	Consolidate the four six-monthly environmental instructions into one document (without a loss of detail).	Management Team	End of Q1 2025	Revised environmental monitoring instructions provided to Finance for review on the 16th of July 2024. Resent to Finance following December MRM.
5 – Health and Safety	Formulate a procedure for systematically checking the safety and operability of all IWDF site assets.	Review Physical Assets register and Strategic Asset Plan. Develop a list of site assets that need to be checked during each site visit to confirm that they remain functional.	Finance IWDF Project Director, FMC Systems Manager, Management Team	End of Q1 2025.	TG to commence on this action at the beginning of 2025
6 - Radiation	Completed procedure for providing public access.	Draft a detailed procedure for allowing public access to the waste registers (chemical & radioactive).	Finance Project Director	3 months after database completed	Will commence following the completion of the Waste Inventory Database.
6 – Radiation	Finalised Waste Inventory Database made publicly available	Update and/or complete chemical and radioactive records in the database and publish the records	FMC Systems Manager	End of Q4 2024	The radioactive and chemical records are 100% complete. The FMC has undertaken a review of the waste

Action Plan	Improvement Target	Action	Responsibility	Required Completion Date	Status
					inventory database and minor changes are being processed.
11 – Review of Management	Improved access and linkage of management system documents. Consolidate document storage to reduce the repetition and duplication of information.	Review management system documents to look at opportunities for improvement to modernise the way system information is accessed and linked. Identify opportunities to combine similar documents and remove redundant information.	FMC Systems Manager, Management Team	30 June 2025	Ongoing

6. Compliance Audits Internal and External

6.1 Ministerial Statement

A six-monthly compliance audit against Ministerial Statement 562 was completed. No non-compliances have been recorded to date.

6.2 Licence, Permit and Registration

No auditing for the 2024 - 2025 reporting period has yet occurred.

6.3 Finance Management System

No auditing for the 2024 - 2025 reporting period has yet occurred.

6.4 FMC Management System

Four FMC Management Procedures were audited in July 2024 with no non-compliances recorded. Five Safety Management Procedures were audited in July 2024 with no non-compliances recorded. Finally, two Emergency Response Procedures were also audited in July 2024 with no non-compliances recorded.

6.5 Management Plans

No auditing for the 2024 - 2025 reporting period has yet occurred.

6.6 Ongoing Suitability of Management Plans

There is an active review being undertaken of the Management Plans to consolidate, modernise and reduce duplication. This is part of the comprehensive IWDF Management System review that has commenced and is referred to at agenda item 4.

6.7 Liaison with National and International Intractable Waste Management Facilities

MS reported that the websites for similar facilities in Spain, France, Finland, Japan and the United Kingdom have been reviewed over the last six months to ensure that any changes to the operational processes for these facilities is considered against the current operational processes for the IWDF and, if appropriate, changes are made to the procedures for the IWDF to ensure continual improvement and best practice. No changes to IWDF procedures have been required over the past six months as a result of this review.

7. Non-conformance and Corrective Action Requests

There is one open Corrective Action Request (CAR 007) from recent audits. CAR 007 was initially raised in June 2022 and is related to the number of CLC meetings held during the audit period. As the S.45C request to amend Ministerial Statement 562 has been finalised and the CLC has been replaced with an annual community meeting, it was agreed this CAR could be finalised.

There was also CAR 009, relating to the review of complaints and there being no independent arbiter, which was initially raised 6 October 2023 following the receipt of a complaint from community member Jan McLeod dated 13 September 2023. However following a discussion by the IWDF Management Team, it was agreed that a CAR was not required as the complaint was not in relation to the IWDF management system. As a result, CAR 009 has not progressed. Following the CLC Meeting on 25 July 2024, it was decided for completeness and record keeping purposes that CAR 009 should be finalised, and this occurred on 5 August 2024.

Action: Finance to finalise CAR 007.

8. Electronic Document Library

MS reported that the Electronic Document Library has been updated to include the latest two monitoring reports for environment and the latest two monitoring reports for radiation. MS also reported that the following documents have been included in the document library:

- Complaints Register
- Drone footage
- PCR

9. Guidelines – Updates and Changes

The following guidelines were reviewed and updated on the 4th of December 2024:

- Chemical Waste Acceptance Guidelines (Revision 18)
- Radioactive Waste Acceptance Guideline (Revision 21)

Updates include:

- New Australian Dangerous Goods Code

- Fax removed
- Glossary streamlined
- Includes details for the Aurora Radiation Specialist
- Added “other than similar burial options” to the waste acceptance criteria of the IWDF.

Action: CG to provide updated guidelines to Finance.

10. Monitoring

10.1 Groundwater Monitoring

Groundwater monitoring was undertaken in October 2024 and no groundwater has been detected in any of the monitoring bores. Next groundwater monitoring is scheduled for April 2025.

10.2 Capping Monitoring

Capping monitoring was last completed in October 2024 with no capping issues reported. Next capping monitoring is scheduled for October 2025.

10.3 Rehabilitation Monitoring (Annual)

Rehabilitation monitoring was last completed in October 2024. Next rehabilitation monitoring is scheduled for October 2025.

At the October 2024 site visit the 10-yearly flora and vegetation survey was undertaken by a botanist. This report will be provided in early 2025.

10.4 Dose Constraint Monitoring

Thermo-Luminescent Dosimeter (TLD) badges have been issued to MS, with one control placed at the site office, to monitor whole body dose exposures during site monitoring activities. This monitoring encompasses nine separate site visits to undertake surveillance and monitoring of the site. Dose exposure data is available for April 2021 to April 2024.

Results returned a dose exposure that was below the Minimum Detection Level (MDL) of 0.01 mSv for each quarter. A public dose constraint has been set for the IWDF of 0.3 mSv/year in line with International Atomic Energy Agency (IAEA) and Australian Radiation Protection and Nuclear Safety Agency (ARPANSA) guidance. Dose exposures were well below the dose constraint.

It should be noted that the TLD badge dose accumulation has only been recorded for the quarterly periods that encompass the dates of the site visits and therefore the potential public dose exposures are expressed in the Table below.

Period of Site Visit	Dose Exposure (mSv)

30/03/21 to 01/04/21	0.01
31/08/21 to 02/09/21	0.01
22/09/21 to 23/09/21	
11/11/21 to 14/11/21	*M
04/04/22 to 06/04/22	*M
17/10/22 to 20/10/22	*M
17/05/23 to 19/05/23	0.09
16/10/23 to19/10/23	*M
16/04/24 to 18/04/24	*M

*M: dose exposure below the minimum measurable quantity for the monitoring period.

11. IWDF Infrastructure

11.1 Access Road - Current Condition Report

MS reported that the Access Road, as assessed October 2024, was in good condition.

11.2 Firebreaks

Inspection of the firebreak during the April 2024 monitoring visit concluded clearing of the firebreak should be undertaken and this was completed on 8 November 2024 by Tellus Holdings. MS will monitor and spraying operations will be undertaken as required.

11.3 Site Infrastructure Maintenance

At the October 2024 site visit, minor works were undertaken including:

- 4 x fire extinguishers returned
- Additional fire extinguisher & post put in near generator
- Extra fire extinguisher hanger outside the kitchen
- New water purification system installed
- New lockbox installed for gate key
- Plastic plumbing replaced and shade cloth installed to prevent future deterioration of shower elbow
- Replaced 6 x cement plinths with stainless steel plinths and plaques
- Two Stop signs replaced with new signs and posts cemented
- T-junction sign installed.

Clearing of the fire break was scheduled, however the contractor called in sick and was rescheduled to 8 November 2024. At this site visit the following minor works were undertaken:

- Installation of new signage (2 x stop signs and 1 x T-junction sign)
- Graded firebreak
- Removed rubbish from west side of sea container
- Removed disused 1000l above ground diesel tank

The October 2024 site visit identified the following maintenance items to be addressed at the April 2025 site visit.

- Replacement of the door handle to the kitchen
- Aluminum strips to repair damaged doors at the camp to be installed.

12. Staff Training

The following staff training has occurred since July 2024:
Four Finance staff members on 10 September 2024:

- Tegan Gibson (IWDF Contract Manager), Eleanor Hopkins (IWDF Project Director), Erin Clinch (Regional Governance and Risk Coordinator) and Kudzi Chigwanda (Project Director Ethical Procurement Frameworks)

One FMC staff member on 5 November 2024:

- Ping Liu (Radiation Specialist)

13. Radioactive Issues

13.1 IWDF Safety Assessments and Safety Case

MS reported that the safety case had been re-submitted to the Radiation Health Unit (RHU) some time ago. MS spoke with Duncan Surin (DS) from the RHU in December 2024 and DS advised he will not be able to review the Safety Case in time for submission to the February 2025 council meeting.

13.2 ASNO permit

TG reported that the ASNO PN207 Permit to Possess Nuclear Material has been renewed and the new permit expires on 30 November 2029.

14. Communications

14.1 Community Liaison Committee

Since the July 2024 MRM, two CLC meetings have been held, one on 25 July 2024 and one on 8 November 2024.

Following the review of Ministerial Statement 0562 (refer to item 14.4) there will be no further CLC meetings, instead community engagement will occur via an annual community meeting and when there is a disposal operation.

Finance will liaise with DWER to understand the timeframe for the first community meeting which will be held in 2025.

14.2 Complaints

EH stated that 2 complaints had been received by Finance from CLC Member Jan McLeod on 30 October 2024. These complaints relate to the following:

1. Draft changes to MS 562 received in May and June from DWER were not made available to the CLC.
2. Finance refused to discuss potential waste streams from nuclear subs, nuclear power, lithium batteries and solar panels etc. that may be deposited at the IWDF

All complaints have been captured in the IWDF Complaints Register and a response to Ms. McLeod's complaints has been mailed to Ms. McLeod from the General Manager Operations dated 27 November 2024.

Ms. Mcleod raised her complaints at the CLC Meeting dated 8 November 2024.

The IWDF Management Team considered whether a Corrective Action Request was required, and it was deemed not necessary as the complaints were not in relation to the IWDF management system.

14.3 Finance IWDF website content - status update

Handbook:
Updates to the handbook have been made to reflect the changes to the Community Liaison Committee and add contact details for the Finance email address and reiterate that the community are welcome to ask questions on the IWDF at any time.

Brochure:
Updates to the brochure have been proposed including editing for reader clarity.

Website:
TG reported that 'and only' has been removed from the website in the context of the IWDF being the first long-term disposal site for intractable waste generated in Western Australia.

14.4 Ministerial Statement 0562 Review

EH provided an overview of the amendments to Ministerial Statement 562.

The Chair of the Environmental Protection Authority approved the Notice of amendment to implementation conditions approved under section 45C of the Environmental Protection Act 1986 on 20 October 2024.

Finance was advised of this on 21 October 2024 by the Department of Water and Environmental Regulation.

A summary of the amendments are:

OVERVIW OF APPROVED CHANGES TO MINISTERIAL STATEMENT 562

1. Update the proponent name from Waste Management WA to the Minister for Works c/- Department of Finance.

2. Change the approval authority from the Environmental Protection Authority (EPA) to Department of Water and Environmental Regulation (DWER).

3. Removal of approval of transport operational procedures, prior to each disposal operation.
   – Note: While transport operational procedures will still be prepared for each disposal operation, separate approval is not considered necessary, as this is governed by legislation.

4. Removal of requirement to advertise operational procedures, prior to each disposal operation.
   – Note: The proponent will make the operational procedures publicly available by publishing a notice on the IWDF webpage advising copies of the operational procedures are available on request.

5. Removal of requirement to advertise the performance and compliance report (PCR).
   – Note: Finance has and will continue to publish PCRs on its public IWDF web page.

6. Removal of requirement to publish location data of waste disposed of at the IWDF.
   – Note: Concerns have been raised by the Radiological Council of Western Australia in relation to the inclusion of information identifying individual source details at specific locations. Location data is captured in the IWDF database and will be available to regulatory bodies, but it is not considered necessary for the general public to have access.

7. Removal of the requirement to maintain the CLC, and instead convene a community meeting once per year and each time there is a disposal operation.
   – Note: Meetings may be combined where both events are scheduled to occur in close succession. Attendance and participation at these meetings will be open to all members of the public and not be limited by membership.

Action: FMC will review changes and capture them in the audit table for the PCR.

15. FMC Performance

15.1 Performance Against FMC 2024 - 2025 Estimated Costs

MS reported that performance against the 2024-2025 FMC cost estimate had two potential cost estimate overruns for the preparation of the database and the review of the management system. MS will undertake a review of costs to date and this review will be reported to EH within the context of the budgeted amounts with overrun estimated. The extra costs could be attributed to the extended timeframe for preparation of the database and the additional visit to site in November to facilitate the grading of the fire break and removal of rubbish.

15.2 FMC Performance Against Finance Contract Management Plan

TG reported that performance against the contract management plan had been good.
EH acknowledged the work on the management system is excellent and it is great that the database is finally finished. Key maintenance activities have been undertaken on the site and this work ensures the IWDF remains suitably managed moving forward.

EH added that new staff have integrated well into the management team. EH commented that the contract review of BMW0344919 and the resulting five-year extension is reflective of this performance.

16 Other Business

16.1 Disposal Applications

MS stated that whilst several enquiries have been received since June 2024, no new applications to dispose of waste have been received since the last MRM.

16.2 IWDF File Notification Areas

EH advised nil File Notification Area (FNA) requests had been received in relation to Reserve 42001 on which the IWDF facility was located.

17 Next Meeting

To be scheduled for June 2025.

Government of **Western Australia**
Department of **Finance**

Attachment 1

FMC Forms			
Form Number	**Form Title**	**Drafted changes (subject to approval)**	**Outcome of Proposed Change**
1	Chain of Custody Record	Replacement of Leanne Morton's email address with that of Mark Shepherd. Department of Finance, Building Management and Works changed to Department of Finance.	
2	Chain of Custody Register	Removal of space within "Project No." heading.	
3A	Sampling Record Form	Widening of "Sampling Time*" and "Sample Destination" columns. Shortening of "Sample No." column to ensure table fits on one page.	
3B	Sampling/Groundwater Monitoring Record Form	Update to project number and name. Font streamlined across the form for consistency.	
4	Filing Index	Minor grammatical changes. **Form removal is proposed.**	
6	Near Miss / Incident / Accident / Exposure Report	Minor grammatical changes. BMW changed to Finance.	
7	Near Miss / Incident / Accident / Exposure Report Register	Restructuring of "Report No." naming convention to increase clarity.	
10	System Corrective Action Request	Capitalisation of all words within the "Note" section (contains all acronyms used in this form).	
11	System Correction Action Request Register	Restructuring of "CAR No." naming convention to increase clarity.	
12A	Competency Plan	Addition of a dotted line to allow person completing the form to describe their position. **Form removal is proposed.**	
12B	Operation Training / Competency Plan	Centred all headings. Abbreviated Occupational Health and Safety to OH&S. **Form removal is proposed.**	

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Attachment 1

FMC Forms			
Form Number	**Form Title**	**Drafted changes (subject to approval)**	**Outcome of Proposed Change**
13	Waste Delivery Register	Addition of a cell border to separate Vehicle Registration sub-headings. Acceptance Certificate words written in full rather than shortened.	
16	Document Register	All headings centred. Addition of underscores to page numbering. **Form removal is proposed.**	
17	Verification/Review Record	Part 3 of form made larger to fit signatures. Addition of unique methods to Part 2. **Form removal is proposed.**	
18	Capping Field Test Record	Restructuring of "** Format of Location No:" section to enhance clarity.	
19A	Capping Method Record	"Geotechnical Testing*" column made wider. Date of signatures shifted right to allow room the signatures themselves.	
19B	Capping Thickness Record	Thickness added to the name of multiple headings. Date of signatures shifted right to allow room the signatures themselves.	
20	Waste Placement Record	Minor grammatical changes to the checklist. **Form removal is proposed.**	
21	Groundwater Analysis Register	Form made landscape. **Form removal is proposed.**	
23	Incoming Document Register	Removal of date received column. Restructuring of supporting "Note" section. Restructuring of "Document Identification No." naming convention to increase clarity. **Form removal is proposed.**	

Government of **Western Australia**
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Attachment 1

FMC Forms			
Form Number	**Form Title**	**Drafted changes (subject to approval)**	**Outcome of Proposed Change**
24	Outgoing Document Register	Removal of date sent column. Restructuring of supporting "Note" section. Restructuring of "Document Identification No." naming convention to increase clarity. **Form removal is proposed.**	
25	IWDF Attendance Sheet	"Type of Training/Meeting" options shifted left to make room for a description of other options.	
26	Contract Variation Record	Minor changes to where original copy of this document is stored and who receives a copy of the completed form.	
27A	Safety (Inspection) Record	Addition of "(tick)" to relevant headings to guide how a user is to complete the form. "Exposure" written as the full word and NA changed to N/A.	
27B	Safety Briefing Minutes	"Personnel Present" included in minutes rather than just "Present". "Recorder" changed to "Transcriber" as it is deemed more appropriate.	
28	Excavation Safety Record	"Signature:" written before the dotted line instead of afterwards. Addition of "(tick)" to relevant checklist headings to guide how a user is to complete the form.	
29	Contract Variation Register	Restructuring of "Contract Variation No." naming convention to increase clarity. **Form removal is proposed.**	
30	Safety Audit Checklist	Changing of OS&H to OHS. Minor grammar changes. **Form removal is proposed.**	
31	(Field and Note) Record Sheet	Addition of underscores to page numbering.	

Government of Western Australia
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Attachment 1

FMC Forms			
Form Number	**Form Title**	**Drafted changes (subject to approval)**	**Outcome of Proposed Change**
32	General Safety Induction Form	Minor grammatical changes throughout. Removal of duplicate words and bolding of crucial checklist items.	
33	Waste Handling Safety Induction Form	Reformatting of the “To be completed by Trainee” section to allow room for user input.	
35	Transport Incident Questionnaire	Minor grammatical changes to most questions. Update to the name of IWDF-Form-06 which is referenced at the bottom of this form.	
36	Emergency Response Team Contact Details	Centring of ERT Member bold headings. Minor changes to all ERT member role descriptions.	
37	Waste Transport Induction Form	Alignment of headings. All key checklist items capitalised and bolded. Minor grammatical changes throughout.	
38A	Rehabilitation Monitoring Record	Removal of “Photo No.” column as only one photo is taken at each location. Removal of all pre 2002 information as these locations are no longer monitored.	
38B	Capping Monitoring Record	Update to Project No. Addition of 2020NRT01 to list of trenches.	
39	Monitoring Register	Removal of “Year” column. Groundwater monitoring form updated from IWDF Form 03 to IWDF Form 03b.	
40	Equipment Maintenance & Calibration List	Widening of columns which state if maintenance or calibration is needed. “Details” column split into two columns: “Date of Test” and “Test Results”.	

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Attachment 1

FMC Forms			
Form Number	**Form Title**	**Drafted changes (subject to approval)**	**Outcome of Proposed Change**
41	Maintenance and Calibration Register	Addition of underscores to page number. **Form removal is proposed.**	
42	Emergency Response Equipment Checklist	Minor grammatical changes e.g., addition of dashes for consistency. Update to Australian Dangerous Goods Code (now Edition 7.8 instead of 7.7).	
43	Medical Advice Form	Minor grammatical changes; repositioning words and including commas.	
44	IWDF Mt Walton East Access Road Condition Report	Formatting changes. Creation of a new key and splitting of form over two pages.	
45	Packaging and Loading Checklist	Minor grammatical changes. BMW updated to Finance.	
46	Transport Chain of Custody Form (Dangerous Goods Shipping Document)	Addition of dotted lines where input from person completing the form is required. BMW changed to Finance.	
47	Vehicle Checklist	Minor grammatical changes. **Form removal is proposed.**	
48	Management System Induction Form	Minor grammatical changes. Trainee acknowledgement pledge split into two sentences for clarity. **Form removal is proposed.**	
49	Audit Register	Capitalising both “Operation/Project” and “Audit No.” headings.	
50	Audit Schedule	“W/E” changed to “Week Ending”. Inclusion of a line specifying who approved the audit schedule. **Form removal is proposed.**	

Attachment 1

FMC Forms			
Form Number	**Form Title**	**Drafted changes (subject to approval)**	**Outcome of Proposed Change**
51	Dangerous Goods Storage Record	Aligning text within the table and other minor formatting updates.	
52	Site Visit Checklist	Addition of dashes to Form IDs for consistency. IWDF-Form-3a and 3b added to comments for groundwater monitoring row.	
53	Waste Inspection Record	Minor grammatical changes to improve readability.	
54	Weekly Inspection Checklist	Addition of dashes to Form IDs for consistency. **Form removal is proposed.**	
55	Finance Waste Assessment Record	Removal of unnecessary capital letters. Addition of DWER and RC to list of institutions who will be sent a copy of the completed form (within a formal report). **Form removal is proposed.**	

FINANCE Form	**FMC Form(s)**	**Drafted changes (subject to approval)**	**Outcome of Proposed Change**
Competency Plans	IWDF-Form-12a Competency Plan	Remove both forms	
Corrective Action Request Template	IWDF-Form-10 System Corrective Action Request	The Finance version of the form is used in previous CARs. Replace IWDF-Form-10 with the Finance Form and rename it.	
Employee Induction Sheet	IWDF-Form-32, -33, -37, and -48	Remove the Finance form as it is covered in IWDF Forms 32, 33, and 37. IWDF-Form-48 is redundant, and its removal has already been proposed.	
Finance-MF-05-1 Complaint Form	N/A	Include this Finance form in the IWDF Form List and rename it. Currently the numbers 5,8,9,15,22 have no associated IWDF Form.	

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Attachment 1

FINANCE Form	FMC Form(s)	Drafted changes (subject to approval)	Outcome of Proposed Change
Finance-MF-06-1 Document Register	IWDF-Form-16 Document Register	Remove both as they are never used.	
Finance-MF-06-3 Project Document Register	N/A	Remove this form as it is never used.	
Finance-MF-08-1 Certificate of Acceptance	N/A	Include this Finance form in the IWDF Form List and rename it. Currently the numbers 5,8,9,15,22 have no associated IWDF Form.	
Finance-MF-08-2 Disposal Certificate	N/A	Same as above	
Finance-MF-11-1 Internal Management Audit Schedule	IWDF-Form-50 Audit Schedule	The Finance form is currently used in the PCR. Replace IWDF-Form-50 with the Finance version.	
Finance-MF-11-2 Audit Report Log	IWDF-Form-49 Audit Register	IWDF-Form-49 has to be sighted annually for the PCR. Remove the Finance form.	
Finance-MF-11-4 CAR Log	IWDF-Form-11 System Corrective Action Register	The Finance form is currently used during ongoing management of the IWDF. Replace IWDF-Form-11 with the Finance version.	
Finance-MF-12-1 Procedure Template	N/A	Remove this form as it is never used.	
Finance-MF-12-2 IWDF Management System Suggestion Form	N/A	Remove this form as there is already a Complaint Form in use.	
Finance-MF-16-3 Training Record Sheet	N/A	Remove this form as there is already the Staff Training Schedule 2020 and this is updated as necessary when new training is completed.	

Government of **Western Australia**
Department of **Finance**

MANAGEMENT REVIEW MEETING
INTRACTABLE WASTE DISPOSAL FACILITY, MT WALTON EAST

MINUTES

Date:	12 June 2025	
Time:	9.30 am to 1.55pm	
Venue:	Board Room, Dilhorn House, 2 Bulwer St, Perth 6000	
Attendance:	Eleanor Hopkins (EH):	Finance IWDF Project Director
	Tegan Gibson (TG):	Regional Governance and Risk Coordinator
	Michelle Spencer (MSp)	Finance IWDF Contract Manager
	Mark Shepherd (MS):	FMC Project Director
	Cameron Garside (CG):	Graduate Environmental Scientist
Apologies:		
Meeting Number:	**22**	

1. Open and Welcome

EH welcomed those present at the 22nd IWDF Management Review Meeting (MRM).

EH introduced Michelle Spencer as the new Finance IWDF Contract Manager.

EH circulated, via email, the draft agenda seeking input on 4 June 2025 and the final agenda was circulated to all participants on 11 June 2025

2. Minutes of the Previous Meeting

The draft minutes of the previous MRM meeting held, 5 December 2024, were emailed to those present at the meeting on 16 December 2024. The draft minutes were finalized and accepted as a true and accurate record on 19 December 2024.

3. Business Arising from Previous Meeting

3.1 DWER approval for changes to the Management System

EH advised the management system review was nearing completion and subject to consideration of materiality, the updated IWDF Management System may be submitted to DWER for review.

3.2 CAR 007

CAR 007 was resolved and closed out. Refer to agenda item **7: Non-conformance and Corrective Action Requests,** for further details below.

3.3 Updates to Chemical and Radioactive Waste Acceptance Guidelines

Refer to agenda item **9: Guidelines – Updates and Changes,** for further details below.

3.4 Community Meeting

Refer to agenda item **14.1: IWDF Annual Community Meeting (IACM),** for further details below.

3.5 Audit table updates due to amendments to MS 0562

MS advised the audit table was updated following the outcome of the Section 45C amendments to MS562. This updated audit table will be included in the PCR for this year.

4. IWDF Management Systems

4.1 IWDF Management System Review Update

EH advised a comprehensive review of the IWDF Management System is due for completion by the end of June 2025. A summary of the 149 reviewed documents is available at Attachment 1 still to be included.

Finance has conducted a review of the IWDF Management System provided by the FMC, and the queries identified during the review were subsequently discussed and resolved. Based on the discussion, MSp will forward the forms to CG and he will go through the review comments and update the documents accordingly.

There was a discussion on whether the titles of Management Plans and Management Procedures should be updated to better distinguish between the two and provide clarity about what each addresses. The Management Team agreed this would be useful, however so as not to delay finalisation of the management review, it was decided to retain the current names for now.

The Management Team discussed the proposed removal of MP-12, EH raised concern that this document outlines the timeframes for when management system review documentation including action plans and management plans must be reviewed and that this is important to capture as the management system exchanges hands over time. CG stated that the timeframes were referenced on the management and action plans themselves. EH confirmed her preference that the requirement be captured in an overarching policy or procedure document, and perhaps new procedure MP-04 Management System Review and Auditing could be utilised for this purpose.

CG will check if the Management & Action Plan contain the relevant review period details. EH is tasked with reviewing MP04 to verify whether it outlines Management & Action Plan review requirements.

MSp advised the MANS system documents have been transitioned to SharePoint, providing convenient and up-to-date access for both Finance and the FMC. At the end of

each financial year the MANS will be archived by the FMC and a copy will be uploaded to the Finance record management system.

Due to the WA Government Reform, the Department of Finance will become the Department of Housing and Works from 1 July 2025. This name change and the follow-up actions will be discussed and reviewed in the next MRM.

Action: Finance to finalise MANS review spreadsheet and email to CG as well as place remaining MANS documents in Teams with Finance comments for finalisation by CG by 30 June 2025.

CG to ensure Management Plans and Actions Plans contain review period.

EH to review MP-04 to determine capture of management system review period timeframe.

4.2 IWDF Management Systems documents not captured within item 4.1

All MANS documents were discussed at 4.1 and captured in attachment 1.

4.3 Environmental, Health & Safety and Quality Policy

The Environmental, Health & Safety and Quality Policy was reviewed for suitability in line with the required review period. The policy was considered fit for purpose by the Management Team and will remain unchanged until the next review period.

4.4 Performance and Compliance Reporting (PCR) July 2024 to June 2025

MS reported that the PCR is progressing, and MS has no concerns to date. To capture all necessary elements within the required deadlines, EH has created a PCR timeline for the 2024/25 period. MS is on target for the PCR to be completed on time.

TG noted that to meet the 90-day submission requirement for the Annual Environment Report, which is Condition 12 of the Licence, the Performance Compliance Report (PCR) must be submitted to DWER by 28 September 2025.

A draft of the PCR is due to the IWDF Project Director by 31 July 2025 to enable adequate time for review by all stakeholders with the final due to DWER by 28 September 2025.

Action: PCR to be submitted to DWER by 28 September 2025.

4.5 Disposal applications – new and updates to existing applications

MS stated that whilst several enquiries have been received since December 2024, no new applications to dispose of waste have been submitted.

4.6 IWDF Database

EH reported that the database was finalized and published on 6 February 2025. The Public Access Procedure for data from the IWDF Waste Database Register was approved by Finance's delegated authority on 3 June 2025.

TG consulted with the Records Team (Business Applications) and confirmed that the Waste Database is included in the Business Services Catalogue – ICT. To comply with record management requirements an extract of the database will be made and filed on an annual basis. EH noted the importance of the database system being designed to evolve over time as ICT advances.

It was agreed that a Waste Database Guideline is required and will be incorporated into the Management System. Following discussion on the positioning of the Database Guideline within the Management System, it was decided to introduce a new procedure—MP-09: IWDF Database Guideline.

Finance currently holds the draft guideline, which will need to be expanded upon and once completed, submitted to State Records as part of the annual extract.

Action: FMC is to implement the new guideline titled MP-09: IWDF Database Guideline into the Management System once finalised.

4.7 Annual Review of Finance R&D Schedule

A review of the IWDF Retention and Disposal Schedule was undertaken. All items, except for Advice – File Notification Areas, are required as per State Archives. One suggestion for improvement was made to the Schedule which is the inclusion of the Waste Database.

TG stated she has liaised with the Records Services team to determine appropriate record keeping for the database, ongoing determination of final strategy to be captured in the database guideline. Additionally, due to the WA Government Reform there will be some changes to the names of Departments and these changes will be reflected in the Retention and Disposal Schedule, for example, references to Finance will be updated to reflect the change of name to Department of Housing and Works.

Action: R&D Schedule to be updated to include IWDF Database and changes to Department names.

5. Action Plans

5.1 Performance against 2024 – 2025 Action Plan

MS reported that to date performance against the 2024 – 2025 Action Plans was good. The outstanding actions are provided in the table below.

Government of Western Australia
Department of Finance

Action Plan	Improvement Target	Action	Responsibility	Required Completion Date	Status
3	Centralise all emergency response procedures, instructions, and information sheets so that they can be quickly accessed in the event of an emergency.	Consolidate the emergency response procedures, instructions, and information sheets into one document (without a loss of detail).	Management Team	End of Q1 2025	Completed 31/3/25
4	Centralise all environmental instructions so that they can be easily accessed during site monitoring visits.	Consolidate the four six-monthly environmental instructions into one document (without a loss of detail).	Management Team	End of Q1 2025	Completed 31/3/25
5	Formulate a procedure for systematically checking the safety and operability of all IWDF site assets.	Review Physical Assets register and Strategic Asset Plan. Develop a list of site assets that need to be checked during each site visit to confirm that they remain functional.	Finance IWDF Project Director, FMC Systems Manager, Management Team	End of Q2 2025.	Still in progress
6a	Develop procedure for providing public access to IWDF database.	Draft a detailed procedure for allowing public access to the waste registers (chemical & radioactive).	Finance Project Director	3 months after database completed (6th of May 2025)	Completed 3/6/25
6b	Finalised Waste Inventory Database made publicly available	Update and/or complete chemical and radioactive records in the database and publish the records	FMC Systems Manager	End of Q4 2024	Waste Inventory Database completed on the 22nd of December 2024.

					Waste Inventory Database officially published on the 6th of February 2025.
11	Improved access and linkage of management system documents. Consolidate document storage to reduce the repetition and duplication of information.	Review management system documents to look at opportunities for improvement to modernise the way system information is accessed and linked. Identify opportunities to combine similar documents and remove redundant information.	FMC Systems Manager, Management Team	30 June 2025	Completed 12 June 2025

5.2 Draft 2025 – 2026 Action Plans

It was agreed that the following actions will be added to the actions plans:

Action Plan	Action
11	Preparation of the draft 2025 – 2026 Action Plan.
11	Implement new MP09 - Public Access Procedure Guideline

6. Compliance Audits Internal and External

6.1 Ministerial Statement

A six-monthly compliance audit against Ministerial Statement 562 is underway. No non-compliances have been recorded to date.

6.2 Licence, Permit and Registration

No non-compliances have been recorded to date.

6.3 Finance Management System

No non-compliances have been recorded to date.

6.4 FMC Management System

No non-compliances have been recorded to date.

6.5 Management Plans

No non-compliances have been recorded to date. Minor technical changes have been made to each of the eleven Management Plans as delineated below.

Management Plan	Version	Review Date	Change
1	32	05/06/2025	- EI-02 reference changed to EI-01 following update to MANS structure. - Currency check of all AS/NZS standards references in Air Quality Management Plan.
2A	32	05/06/2025	- EI-04 reference changed to EI-01 following update to MANS structure.
2B	32	05/06/2025	- Change to the next date a botanist will review the health and growth of IWDF vegetation (2034).
3	32	05/06/2025	- ERI-01, -02, and -03 reference changed to ERI-01 following update to MANS structure. - ERI-04 reference changed to ERI-02 following update to MANS structure. - MP-13 reference changed to MP-05 following update to MANS structure.
5	32	05/06/2025	- Update to the status of the fire extinguisher replacement program. “All site fire extinguishers were replaced in either October 2024 or April 2025”. - Removal of IWDF Form 12 a from list of referenced forms following update to MANS structure and deletion of this form. - IWDF Form 12 b reference changed to IWDF Form 12 following update to MANS structure.
6	32	05/06/2025	- Addition of compliance requirement with the Code for the Safe Transport of Radioactive Material (ARPANSA RPS C-2 Rev.1 2019) during waste transport by the proponent.
7	32	05/06/2025	- ERI-04 reference changed to ERI-02 following update to MANS structure.
8	32	05/06/2025	- EI-01 name changed from Groundwater Monitoring to Physical Environment Monitoring following update to MANS structure. - Removal of IWDF Form 21: Groundwater Analysis Register from list of referenced forms following update to MANS structure and deletion of this form.

Management Plan	Version	Review Date	Change
9	32	05/06/2025	- Removal of MP-08 Operational Planning and Management from the list of relevant documents as this procedure is no longer part of MANS. - Removal of IWDF Form 55 from list of referenced forms following update to MANS structure and deletion of this form.
10	32	05/06/2025	- Renumbered MP-05 Communication and Public Relations to MP-06 following update to the MANS procedure structure. - Renamed MP-07 Management of Records to MP-02 Record Management following update to the MANS procedure structure.
11	32	05/06/2025	- Changes to the names of the Finance Management Procedures and FMC Management Procedures to reflect those implemented as part of the new MANS. - Changes to the names of the Finance and FMC forms to reflect those implemented as part of the new MANS.

6.6 Ongoing Suitability of Management Plans

MS advised that ongoing review undertaken over the past six months, and the subsequent applicable changes made to the various system documents indicate that whilst the Management Plans are suitable there is room for improvement with regards to consolidation, modernisation and reducing duplication. This is part of the comprehensive IWDF Management System review that has commenced and is referred to at agenda item 4.

CG has played a key role in reviewing and updating standards within the Plans, renaming procedures, removing obsolete forms, consolidating FMC and Finance forms, and updating the fire extinguisher program to April and October.

6.7 Liaison with National and International Intractable Waste Management Facilities

MS reported that the websites and reports for similar facilities in Spain, France, Finland, Japan, the United Kingdom and United States have been reviewed over the last six months to ensure that any changes to the operational processes for these facilities is considered against the current operational processes for the IWDF and, if appropriate, changes are made to the procedures for the IWDF to ensure continual improvement and best practice. No changes to IWDF procedures have been required over the past six months as a result of this review. MS also reviewed reports on transport vessels and confirmed that no updates are required to the IWDF procedures.

7. Non-conformance and Corrective Action Requests

CAR 007 was initially raised in June 2022 and is related to the number of CLC meetings held during the audit period. CAR007 was finalised by MS, IWDF Project Director on the 12 June 2025.

8. Electronic Document Library

MS reported that the Electronic Document Library has been updated to include the latest monitoring reports.

MS also reported that the following documents have been included in the document library:

- Correspondence up to the 2025 financial year
- The latest Complaints Register
- The drone footage of the facility
- The PCR for 2023/24
- The international reports (as listed above) have been added to the Document Library.

9. Guidelines – Updates and Changes

The following guidelines were reviewed in June 2025 and distributed with appropriate updates on the 2nd of July 2025.

- Chemical Waste Acceptance Guidelines (Revision 19)
- Radioactive Waste Acceptance Guideline (Revision 22)

1. The Radiation Safety (General) Regulations 1983, Radiation Safety Act 1975, and the Code for Disposal Facilities for Solid Radioactive Waste 2018 were added to the reference lists as these were omitted in previous revisions despite being directly referred to in-text.

2. The MS562 reference was updated to reflect the amendments and approved changes following the Section 45C on the 20th of October 2024.

3. All branding was changed from the Department of Finance to the Department of Housing and Works in both documents.

Action: CG to provide the updated Guidelines

10. Monitoring

10.1 Groundwater Monitoring

Groundwater monitoring was undertaken in April 2025, and no groundwater was detected in any of the monitoring bores. Next groundwater monitoring is scheduled for October 2025.

10.2 Capping Monitoring

Capping monitoring was last completed in October 2024 with no capping issues reported. Next capping monitoring is scheduled for October 2025.

10.3 Rehabilitation Monitoring (Annual)

Rehabilitation monitoring was last completed in October 2024. Next rehabilitation monitoring is scheduled for October 2025.

10.4 Rehabilitation Monitoring (10 yearly)

During the October 2024 site visit, the 10-yearly flora and vegetation survey was conducted. MS submitted the final report to Finance on 21 May 2025. The survey identified no rare or endangered species, only Priority 3 species. The report noted that the condition of the vegetation was better than expected. Given the findings and the 20-year monitoring history, further routine monitoring may no longer be necessary. However, continued observation of the 2008 and 2020 trenches is recommended.

10.5 Dose Constraint Monitoring

Thermo-Luminescent Dosimeter (TLD) badges have been issued to MS with one control placed at the site office to monitor whole body dose exposures during site monitoring activities. This monitoring encompasses separate site visits to undertake surveillance and monitoring of the site. Dose exposure data is available for the April 2021 to November 2024 period.

Results returned a dose exposure that was below the Minimum Detection Level (MDL) of 0.01 mSv for each quarter. A public dose constraint has been set for the IWDF of 0.3 mSv/year in line with International Atomic Energy Agency (IAEA) and Australian Radiation Protection and Nuclear Safety Agency (ARPANSA) guidance. Dose exposures were well below the dose constraint.

It should be noted that the TLD badge dose accumulation has only been recorded for the quarterly periods that encompass the dates of the site visits and therefore the potential public dose exposures are expressed in the Table below.

Period of Site Visit	Dose Exposure (mSv)
30/03/21 to 01/04/21	0.01
31/08/21 to 02/09/21	0.01
22/09/21 to 23/09/21	
11/11/21 to 14/11/21	*M
04/04/22 to 06/04/22	*M
17/10/22 to 20/10/22	*M
17/05/23 to 19/05/23	0.09
16/10/23 to19/10/23	*M
16/04/24 to 18/04/24	*M
15/10/24 to 18/10/24	*M
6/11/24 to 8/11/24	*M
14/4/25 to 16/4/25	Results to follow

*M: dose exposure below the minimum measurable quantity for the monitoring period.

MS advised that the TLD badge dose results for April have not been provided to the laboratory as they are quarterly badges and will only be sent for analysis after June 30 2025. These will be provided to Finance when they become available and will be reported at the next MRM.

11. IWDF Infrastructure

11.1 Firebreaks

During the April 2025 monitoring visit, MS inspected the firebreak and reported that it was in satisfactory condition. MS outlined that even with spraying there is the eventual requirement for clearing the fire break through grading. It was agreed that herbicide spraying every six months should be discontinued, as it contributes to fuel load through dead weed accumulation. Instead, the current practice of grading will be continued every two years to maintain the firebreak. The next grading of the firebreak is due to occur in November 2026. MS noted this does not impact the requirement for spraying the V-drains of disposal cells.

11.2 Site Infrastructure Maintenance

At the April 2025 site visit, minor works were undertaken including:

- Replaced the 4.5kg extinguishers with 2 x new ones.

It was noted that:

- Potable water was more than half full
- Non-potable water was empty
- Need globes for camp buildings
- Had to jumpstart generator off the vehicle (as new battery is required)
- Mobile Satphone used

As discussed in the MRM:

- Camp building door handles will be monitored and replaced as required
- During the next scheduled visit, the FMC will install aluminum strips to repair damaged camp doors.
- The signs were good, and the plinths were also in good condition.
- In the October site visit MS will inspect for any rust under the camp buildings.

12. Staff Training

12.1 Training delivered

The following staff training has occurred since December 2024:

One Finance staff member on 27 May 2025:

- Michelle Spencer (IWDF Contract Manager)

This training has been captured in the training register.

Action: MS to send through the updated training register.

12.2 Training requirements

A review of the training register was undertaken with no training requirements noted as being required.

13. Radioactive Issues

13.1 IWDF Safety Assessments and Safety Case

MS reported that there are no radioactive issues. Duncan Surin from Radiological Council advised on 4 June 2025 that he is going to review the Safety Case. The Safety Case was submitted in May 2024 containing the amendments requested from the Radiological Council. Due to ongoing resourcing availability, the Radiation Health Unit is yet to review the updates. Management Team to continue following up.

The Radiological Council registration is due for renewal on 8 February 2026. The renewal application forms will be sent to Finance two months prior to expiry. The impact of the Safety Case and Safety Assessment not being approved by Radiological Council prior to the renewal will be monitored in the monthly management meetings.

14. Communications

14.1 IWDF Annual Community Meeting (IACM)

The first IWDF Annual Community Meeting will be held in the early evening on 16 October 2025 at the Goldfields Art Centre.

Amongst other things, the meeting will provide an overview of the facility, updates on the monitoring site visits, waste enquiries, the waste database, a summary of the botany survey and an update on the Management System review.

14.2 Complaints

EH advised no complaints had been received since the last MRM.

14.3 Finance IWDF website content - status update

EH advised updated copies of the IWDF Handbook and Brochure have been reviewed as part of the Management System review.

The current handbook available on the webpage was last updated in December 2023. Now that the Management System (MANS) review has been completed, CG will proceed with updating the handbook. Once finalised, it will be submitted to Finance for publication on the webpage.

Further updates to the handbook will follow, reflecting the outcomes of the completed MANS review once these are approved by DWER (if required). Publication was previously delayed pending the finalisation of this review.

The brochure was updated in June 2025 and will be submitted to Finance for publication. Revisions included grammatical corrections and formatting adjustments to ensure consistency throughout the document.

15. FMC Performance

15.1 Performance Against FMC 2024 - 2025 Estimated Costs

MS reported that performance against the 2024–2025 FMC cost estimate was accurate and potentially slightly under budget, attributed to the amended budget. Overall, performance remained aligned with the approved budget. The variation to the budget was attributed to the implementation of the MANS system, an additional site visit for maintenance and updates to the Database.

15.2 FMC Performance Against Finance Contract Management Plan

TG reported strong performance against the Contract Management Plan. Key achievements included:

- Finalisation of the database, enhancing data accessibility.
- Completion of the Management System review, ensuring alignment with current operational standards.
- Successful integration of new staff into the management team.

Collaboration across teams was highlighted as a key factor in the overall success.

16 Other Business

16.1 IWDF File Notification Areas

EH advised Nil File Notification Area (FNA) requests had been received in relation to Reserve 42001 on which the IWDF facility was located.

17 Next Meeting

To be scheduled for 11th December 2025.

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Document List - MANS Review					
OLD Document Name			Current Document Name		
Form No.	Existing Finance Document	Existing FMC Document	IWDF Document	Outcome	Changes
01 - Document Control Matrices					
	Finance-MF-06-2 Document Control Matrix V11	FMC Document Control Matrix V13	IWDF MANS Document Control Matrix V3	Consolidated Finance and FMC documents	Replaced
02 - Management & Policy Manuals					
	Management Manual Rev 20	FMC Management Manual	IWDF Management and Policy Manual V3 **Includes** - Appendix A Typical Sequence of Activities	Consolidated Finance and FMC documents	Replaced
03 - Forms					
1		Chain of Custody Record	IWDF Form 01 Chain of Custody Record Revision 7	Minor version control	Yes
2		Chain of Custody Register	IWDF Form 02 Chain of Custody Register Revision 7	Minor version control	Yes
3A		Sampling Record Form	IWDF Form 03a Sampling Record Revision 7	Minor version control	Yes
3B		Sampling/Groundwater Monitoring Record Form	IWDF Form 03b Sampling, Groundwater Record Revision 10	Minor version control	Yes
4		Filing Index		Removed - Supersceeded by modernised record keeping	Removed
5	Finance-MF-05-1 Complaint Form			Remove - modern practices, complaints will be received via email or written letter. Form not required.	Removed
6		Near Miss / Incident / Accident / Exposure Report	IWDF Form 06 Near Miss,Incident Report Revision 7	Minor version control	Yes
7		Near Miss / Incident / Accident / Exposure Report Register	IWDF Form 07 Near Miss,Incident Register Revision 7	Minor version control	Yes
8	Finance-MF-08-1 Certificate of Acceptance		IWDF Form 08 Certificate of Acceptance Revision 2	Renamed Finance MF-08-1 to IWDF-Form-08	Renamed
9	Finance-MF-08-2 Disposal Certificate		IWDF Form 09 Certificate of Disposal Revision 2	Renamed Finance MR-08-2 to IWDF-Form-09 May 2025	Renamed
10	Corrective Action Request Template	System Corrective Action Request	IWDF Form 10 Corrective Action Request Revision 8	Replaced with DoF Corrective Action Request Template and renamed to IWDF-Form-10	Replaced
11	Finance-MF-11-4 CAR Log	System Correction Action Request Register	IWDF Form 11 System Corrective Action Request Register Revision 8	Replaced with DoF CAR Log and renamed to IWDF-Form-11	Replaced
12A	Competency Plans	Competency Plan		Removed - information is covered by Form 12B	Removed
12B		Operation Training / Competency Register	IWDF Form 12 Operation Training Register Revision 7	Renamed to IWDF-Form 12	Renamed
13		Waste Delivery Register	IWDF Form 13 Waste Register Revision 7	Minor version control	Yes
16	Finance-MF-06-1 Document Register	Document Register		Removed - Supersceeded by modernised record keeping	Removed
17		Verification/Review Record		Removed - Supersceeded by modernised record keeping	Removed
18		Capping Field Test Record	IWDF Form 18 Capping Field Test Record Revision 7	Minor version control	Yes
19A		Capping Method Record	IWDF Form 19a Capping Method Revision 7	Minor version control	Yes
19B		Capping Thickness Record	IWDF Form 19b Capping Thickness Revision 7	Minor version control	Yes

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20		Waste Placement Record		Removed - Info covered in Chain of Custody record & not a regulatory requirement.	Removed
21		Groundwater Analysis Register		Removed - Info covered in IWDF Form 3b & Chain of Custody record	Removed
23		Incoming Document Register		Removed - Supersceeded by modernised record keeping	Removed
24		Outgoing Document Register		Removed - Supersceeded by modernised record keeping	Removed
25		IWDF Disposal Induction Attendance Sheet	IWDF Form 25 IWDF Disposal Induction Attendance Sheet Revision 7	Minor version control	Yes
26		Contract Variation Record	IWDF Form 26 Contract Variation Revision 7	Minor version control	Yes
27A		Safety (Inspection) Record	IWDF Form 27a Safety (Inspection) Record Revision 7	Minor version control	Yes
27B		Safety Briefing Minutes	IWDF Form 27b Safety Briefing Minutes Revision 7	Minor version control	Yes
28		Excavation Safety Record	IWDF Form 28 Excavation Safety Record Revision 7	Minor version control	Yes
29		Contract Variation Register	IWDF Form 29 Contract Variation Register Revision 7	Minor version control	Yes
30		Safety Audit Checklist	IWDF Form 30 Safety Audit Checklist Revision 7	Minor version control	Yes
31		(Field and Note) Record Sheet		Removed - Agreed that field notes will be recorded on the relevant form used.	Removed
32		General Safety Induction Form	IWDF Form 32 General Induction Revision 10	Inclusion of Finance staff and subcontractor induction requirements	Yes
33		Waste Handling Safety Induction Form	IWDF Form 33 Waste Handling Safety Induction Form Revision 7	Minor version control	Yes
35		Transport Incident Questionnaire	IWDF Form 35 Transport Incident Questionnaire Revision 7	Minor version control	Yes
36		Emergency Response Team Contact Details	IWDF Form 36 ERT Contact Details Revision 7	Minor version control	Yes
37		Waste Transport Induction Form	IWDF Form 37 Waste Transport Induction Revision 7	Minor version control	Yes
38A		Rehabilitation Monitoring Record	IWDF Form 38a Rehabilitation Monitoring Record Revision 11	Pre-2008 cells removed as these cells have been rehabilitated (2024 botanist survey)	Yes
38B		Capping Monitoring Record	IWDF Form 38b Capping Monitoring Record Revision 10	Minor version control	Yes
39		Monitoring Register	IWDF Form 39 Monitoring Register Revision 7	References to forms re-prioritised. Removed reference to Form 21 as has been removed.	Yes
40		Equipment Maintenance & Calibration List	IWDF Form 40 Equipment Maintenance & Calibration List Revision 8	Reference to form 41 removed as the form removed.	Yes
41		Maintenance and Calibration Register		Removed - Contents are already captured in IWDF Form 40	Removed
42		Emergency Response Equipment Checklist	IWDF Form 42 ER Equipment Checklist Revision 9	Version Control update and reference to Dangerous Goods Code changed to 7.9	Yes
43		Medical Advice Form	IWDF Form 43 Medical Advice Form Revision 7	Minor version control	Yes
44		IWDF Mt Walton East Access Road Condition Report	IWDF Form 44 Road Condition Report Revision 8	Minor version control	Yes
45		Packaging and Loading Checklist	IWDF Form 45 Packaging & Loading Checklist Revision 7	Minor version control	Yes
46		Transport Chain of Custody Form (Dangerous Goods Shipping Document)	IWDF Form 46 Transport Chain of Custody Revision 7	Minor version control	Yes
47		Vehicle Checklist	IWDF Form 47 Vehicle Checklist Revision 7	Minor version control	Yes
48		Management System Induction Form	IWDF Form 48 Management System Induction Form Revision 7	Minor version control	Yes

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49	Finance-MF-11-2 Audit Report Log	Audit Register	IWDF Form 49 Audit Register Revision 7	FMC document used with minor version control and renamed IWDF Form 49	Yes
50	Finance-MF-11-1 Internal Management Audit Schedule	Audit Schedule	IWDF Form 50 Internal Management Audit Schedule Revision 7	Replaced with DoF MF-11-1 Internal Management and renamed to IWDF-Form-50	Replaced
51		Dangerous Goods Storage Record	IWDF Form 51 DG Storage Record Revision 9	V8 Issued 22 May 25	No
52		Site Visit Checklist	IWDF Form 52 Site Visit Checklist Revision 13	V12 Issued 22 May 25	No
53		Waste Inspection Record	IWDF Form 53 Waste Inspection Record Revision 8	V7 Issued 22 May 25	No
54		Weekly Inspection Checklist	IWDF Form 54 Weekly Inspection Checklist Revision 8	V7 Issued 22 May 25	No
55		Finance Waste Assessment Record		Removed - Duplication of Waste Acceptance Guidelines and Waste Acceptance Proforma	Removed
	Employee Induction Sheet			Removed - This form is covered in IWDF Forms 32,33,& 37	Removed
	Finance-MF-06-3 Project Document Register			Removed - Supersceeded by modernised record keeping	Removed
	Finance-MF-12-1 Procedure Template			Removed - Form not consistent with current procedure format	Removed
	Finance-MF-12-2 IWDF Management System Suggestion Form			Remove form - modern practices, complaints will be received via email or written letter. Form not required.	Removed
	Finance-MF-16-3 Training Record Sheet			Removed - Already the Staff Training Schedule 2020	Removed
04 - Procedures					
04-01 - Disposal Operation Procedures & Instructions					
		OP-01 Assessment of Applications for Disposal	OP-01-Assessment Revision 15	Annual review and references updated	Annual Review
		OP-02 Operational Administration, Planning and Approvals	OP-02 Planning Revision 16	Annual review and references updated	Annual Review
		OP-03 Excavation of Disposal Trench	OP-03-Excavation Revision 16	Annual review and references updated	Annual Review
		OP-04 Waste Preparation for Disposal	OP-04-Waste Prep for Disposal R16	Annual review and references updated	Annual Review
		OP-05 Waste Loading and Transport	OP-05-Waste Load & Trans Revision 16	Annual review and references updated	Annual Review
		OP-06 Waste Delivery, Acceptance and Disposal	OP-06-Waste Del, Accep and Disp R17	Annual review and references updated	Annual Review
		OP-07 Capping, Rehabilitation and Demobilization	OP-07-Capping, Rehab and Demob Revision 15	Annual review and references updated	Annual Review
		OP-08 Operation Close-out	OP-08-Operation Close-Out Revision 14	Combined OP-08 and OP-09 and now called OP-08-Operation Close-Out Revision 14	Combined
		OP-09 Ongoing & General Management			
		OP-10 Operation Site Management	OP-09 Operation Site Management Revision 2	Name change from OP-10 Operation Site Management to OP-09 Site Management	Yes
		OI-01 Waste Inspection	OI-01-Waste Inspection Revision 16	Annual review and references updated	Annual Review
04-02 - Management Procedures					
	MP-01 Aspects and Impacts			Risk Register has been established and relevent information with respect to risk and aspect ratings is included within that document. A separate procedure is superfluous.	Removed
	MP-02 Applicable Laws, Regulation snad other requirements			Captured in Legal Register, relevant info from this MP added to Legal register document.	Removed

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	MP-03 Objectives and Targets			Captured in Action Plans and Management Plans, additional procedure is superfluous	Removed
	MP-04 Environmental Health and Safety and Radiation Management			Captured in Action Plans and Management Plans, additional procedure is superfluous	Removed
	MP-06 Document and Data Control	FMP-01 Document and Data Control	MP-01 Document and Data Control Revision 2	Combined both DoF & FMC docs - New document MP-01 Document and Data Control	Combined
	MP-07 Management of Records	FMP-02 Record Management	MP-02 Record Management Revision 2	Combined both DoF & FMC docs - New document MP-02 Record Management	Combined
	MP-09 Training	FMP-03 Training and Competency	MP-03 Training & Competency Revision 2	Combined both DoF & FMC docs - New document MP-03 Training and Competency	Combined
	MP-11 Management Audits	FMP-04 System Audits	MP-04 Management System Review and Auditing Revision 2	Combined MP11, MP12 & FMP04 - New document MP-04 Management System Review and Auditing	Combined
	MP-12 Management Review				
	MP – 13 Control of non-confirmances and corrective and preventative action	FMP-05 Control of Non-Conformances	MP-05 Control of Non-Conformances Revision 2	Combined both DoF & FMC docs - New document MP-05 Control of Non-Confirmances	Combined
	MP-05 Communications and Public Relations		MP-06 Communication and Public Relations Revision 2	New document title MP-06 Communications and Public Relations	Yes
	MP-10 Procurement		MP-07 Procurement Revision 2	New document title MP-07 Procurement	Yes
	MP-08 Operational Planning and Management		MP-08 Ongoing Site Management Revision 2	Combined with OP-09	Combined
	MP-14 Access Road Management & Traffic Control	-		To be incorporated into the IWDF Road Management system	Removed
04-03 - Environmental Procedures & Instructions					
		EP-01 Vegetation (Flora) Management	EP-01-Vegetation Management Revision 16	Annual review and updates	Annual Review
		EP-02 Fauna Management	EP-02-Fauna Management Revision 15	Annual review and updates	Annual Review
		EP-03 Environmental Monitoring Management	EP-03-Enviro Monitoring Mgt R16	Annual review and updates	Annual Review
		EP-04 Water Management	EP-04-Water Management Revision 15	Annual review and updates	Annual Review
		EP-05 Rehabilitation Management	EP-05-Rehabilitation Revision 17	Annual review and updates	Annual Review
		EP-06 Air Quality and Dust Management	EP-06-Air Quality and Dust Management Revision 16	Annual review and updates	Annual Review
		EP-07 Waste Management	EP-07-Waste Management Revision 17	Annual review and updates	Annual Review
		EP-08 Fuel, Oil and Hazardous Materials Management	EP-08-Fuel, Oil and Hazardous Materials Mgt R15	Annual review and updates	Annual Review
		EP-09 Environmental Incident Management, Reporting, and Investigation	EP-09-Environmental Incident Mgt Revision 12	Annual review and updates	Annual Review
		EI-01 Groundwater Monitoring	EI-01 Physical Environment Monitoring Rev 5	Replaced - consolidated to form EI-01 Physical Environment Monitoring	Replaced
		EI-02 Soil & Dust Sampling			
		EI-03 Capping Monitoring			
		EI-04 Rehabilitation Monitoring			
04-04 - Safety Procedures & Instructions					
		SP-01 Health and Safety Management & Planning	SP-01-Health & Safety Management Revision 17	Annual review and updates	Annual Review
		SP-02 Operation Site Safety Management	SP-02- Operation Site Safety Management Revision 15	Annual review and updates	Annual Review
		SI-01 Excavation Safety	SI-01-Excavation Safety Revision 17	Annual review and updates	Annual Review

ATTACHMENT 1

		SI-02 Personal Protective Equipment	SI-02-Personal Protective Equipment Revision 15	Annual review and updates	Annual Review
		SI-03 Hygiene and Decontamination	SI-03-Hygiene and Decontamination Revision 16	Annual review and updates	Annual Review
		SI-04 Occupational Monitoring	SI-04-Occupational Monitoring Revision 16	Annual review and updates	Annual Review
		SI-05 Communications and Traffic Control	SI-05-Communications & Traffic Control Revision 16	Annual review and updates	Annual Review
		SI-06 First Aid	SI-06-First Aid Revision 15	Annual review and updates	Annual Review
		SI-07 Heavy Machinery Operations	SI-07- Heavy Machinery Operations Revision 15	Annual review and updates	Annual Review
		SI-08 Exclusion Zones	SI-08- Exclusion Zones Revision 15	Annual review and updates	Annual Review
04-05 - Emergency Response Procedures & Instructions					
		ERP-01 Incident Prevention, Reporting, and Investigation	ERP-01-Incident Prev, Rep and Inv Revision 17	Annual review and updates	Annual Review
		ERP-02 Emergency Response Management	ERP-02-Emergency Response Management Revision 17	Annual review and updates	Annual Review
		ERI-01 Injury & Evac Response	ERI-01- Medical, Waste, and Fire ERP Revision 4	Documents ERI-01, ERI-02 & ERI-03 combined to create the new ERI-01	Combined
		ERI-02 Waste Incident & Spill Response			
		ERI-03 - Fire Response			
		ERI-04 Transport Emergency	ERI-02 Transport Emergency Response Revision 2	Renamed - was ERI-04 Transport Emergency, now ERI-02 Transport Emergency, review Finance comments	Yes
04-06 - Radiation Procedures & Instructions					
		RP-01 Radiation Management	RP-01-Radiation Management Revision 16	Annual review and updates	Annual Review
		RI-01 Gamma Radiation Monitoring	RI-01 Gamma Radiation Monitoring Revision 16	Annual review and updates	Annual Review
		RI-02 Occupational Radiation Monitoring	RI-02 Occupational Radiation Monitoring Revision 16	Annual review and updates	Annual Review
05 - Plans					
05-01 - Action Plans					
		Action Plans 2024 - 2025 V0.4	Action Plans 2025-2026 V0.1	Revised and updated	Yes
05-02 - Management Plans					
		Management Plans Revision 31	Management Plans Revision 33	Annual review and updates	Annual Review
06 - Registers					
		Aspets and Impacts Register Revision 12	IWDF Aspects and Impacts (Risk) Register Revision 4	Consolidated Aspects & Impacts and Health & Safety Hazards register	Combined
		Health and Safety Hazards Register Revision 2			
		IWDF Complaints Register V1	IWDF Complaints Register Revision 2	Revised and updated	Yes
		IWDF Legal Register Revision 3	IWDF Legal Register Revision 4	Revised and updated	Yes
		Roles and Responsibilities Revision 12	Roles and Responsibilities Revision 13	Annual review and updates	Yes
07 - Operation Guidelines					

ATTACHMENT 1

		Waste Acceptance Chemical v18	Waste Acceptance Guidelines - Chemical Revision 19	Revised and updated	Yes
		Waste Acceptance Radiation	Waste Acceptance Guidelines - Radioactive Revision 22	Revised and updated	Yes
		Packaging and Transport Guidelines	Packaging and Transport Guidelines Revision 12	Revised and updated	Yes

APPENDIX T

2024 – 2025 Action Plans

Government of **Western Australia**
Department of **Finance**

2024 – 2025 ACTION PLANS

Department of Finance (Finance) Action Plans detail specific improvement objectives for the continual improvement of the IWDF's management, and set quantitative targets, timeframes, and personnel for achieving these objectives.

The Action Plans are working documents and, through monthly review, new improvement objectives are established as others are achieved. The Action Plans are linked closely to the Management Plans, which provide detail on the management goals and targets and provide a basis for the identification of improvement objectives. Further details on objectives and targets and the development of Action Plans are detailed in MP-03 Objectives and Targets and MP-04 Environmental, Health and Safety Management Program.

ENVIRONMENTAL ACTION PLAN 1 - AIR QUALITY					
Environmental, Health and Safety, and Quality Policy Statement: Take all practical steps to minimise the impact of the site & operational activities on the environment, and the community, and ensure the protection of the health and safety of the public and the IWDF personnel by appropriate training of all personnel.					
Improvement Target	***Action***	***Responsibility***	***Required Completion Date***	***Actual Completion Date***	***Records / status update***
Improvement Objective:					

ENVIRONMENTAL ACTION PLAN 2 - REHABILITATION AND DECOMMISSIONING					
Environmental, Health and Safety, and Quality Policy Statement: Meet or exceed statutory requirements for all IWDF activities including transport, safety, public health & environmental protection by ensuring the adequacy of the EHSQMS, the policy and operational activities at the IWDF, through a process of **continual** review.					
Improvement Target	***Action***	***Responsibility***	***Required Completion Date***	***Actual Completion Date***	***Records / status update***
***Improvement Objective*:** Re-establish removed and disturbed habitats to their original level of species diversity and land use					

ENVIRONMENTAL ACTION PLAN 3 - EMERGENCY RESPONSE					
***Environmental, Health and Safety, and Quality Policy Statement*:** Meet or exceed statutory requirements for all IWDF activities including transport, safety, public health, and environmental protection by ensuring the adequacy of the EHSQMS, the policy, and operational activities at the IWDF, through a process of continual review. Take all practical steps to minimise the impact of the site and operational activities on the environment and the community and ensure the protection of the health and safety of the public and the IWDF personnel by appropriately training all personnel involved in the IWDF operations.					
Improvement Target	***Action***	***Responsibility***	***Required Completion Date***	***Actual Completion Date***	***Records/Status Update***
Improvement Objective: Increase the accessibility of emergency response procedures and instructions to site personnel. Reduce the likelihood of delayed, inadequate, or incorrect responses to emergency incidents.					
Centralise all emergency response procedures, instructions, and information sheets so that they can be quickly accessed in the event of an emergency.	Consolidate the emergency response procedures, instructions, and information sheets into one document (without a loss of detail).	Management Team	End of Q1 2025	**31st of March 2025**	Revised emergency response instruction provided to Finance for review on the 16th of July 2024. Resent to Finance on the 19th of December (following the MRM). Finance provided comments at the February OEOM. FMC has since reviewed, updated and documented the accepted changes for DWER (if necessary). Action closed at June MRM.

ENVIRONMENTAL ACTION PLAN 4 - FLORA AND FAUNA					
Environmental, Health and Safety, and Quality Policy Statement: Meet or exceed statutory requirements for all IWDF activities including transport, safety, public health and environmental protection by ensuring the adequacy of the EHSQMS, the policy and operational activities at the IWDF, through a process of continual review.					
Improvement Target	***Action***	***Responsibility***	***Required Completion Date***	***Actual Completion Date***	***Records/Status Update***
***Improvement Objective*:** Increase the accessibility of environmental instructions for personnel visiting the site to conduct ongoing monitoring. Reduce the likelihood of environmental damage or regulatory issues resulting from incomplete or incorrect environmental monitoring at the IWDF.					
Centralise all environmental instructions so that they can be easily accessed during site monitoring visits.	Consolidate the four six-monthly environmental instructions into one document (without a loss of detail).	Management Team	End of Q1 2025	**31st of March 2025**	Revised environmental monitoring instructions provided to Finance for review on the 16th of July 2024. Resent to Finance on the 19th of December (following the MRM). Finance provided comments at the February OEOM. FMC has since reviewed, updated and documented the accepted changes for DWER (if necessary). Action closed at June MRM.

ENVIRONMENTAL ACTION PLAN 5 - HEALTH AND SAFETY					
***Environmental, Health and Safety, and Quality Policy Statement*:** Meet or exceed statutory requirements for all IWDF activities including transport, safety, public health and environmental protection by ensuring the adequacy of the EHSQMS, the policy and operational activities at the IWDF, through a process of continual review. Take all practical steps to minimise the impact of the site and operational activities on the environment and the community and ensure the protection of the health and safety of the public and the IWDF personnel by appropriately training all personnel involved in the IWDF operations.					
Improvement Target	***Action***	***Responsibility***	***Required Completion Date***	***Actual Completion Date***	***Records/Status Update***
Improvement Objective: To confirm the ongoing adequacy of the IWDF EHSQMS by a process of continual review. Implement programs and strategies that ensure legislative compliance. To ensure all assets and infrastructure is maintained so that the IWDF remains a safe workplace.					
Formulate a procedure for systematically checking the safety and operability of all IWDF site assets.	Review Physical Assets register and Strategic Asset Plan. Develop a list of site assets that need to be checked during each site visit to confirm that they remain functional.	Finance IWDF Project Director, FMC Systems Manager, Management Team	End of Q2 2025.	**Still in progress.**	TG commenced on this action at the beginning of 2025. First draft completed at the end of Q1 2025, reviewed by the FMC Project Manager, and approved by the IWDF MT at the June MRM. As the number of site assets is constantly changing, this improvement target has been carried over into the 2025-2026 Action Plans.

ENVIRONMENTAL ACTION PLAN 6 - RADIATION					
Environmental, Health and Safety, and Quality Policy Statement: Use recognised current best practices for near surface disposal of hazardous and low-level radioactive wastes and to remain aware of international advances in technology.					
Improvement Target	***Action***	***Responsibility***	***Required Completion Date***	***Actual Completion Date***	***Records/Status Update***
Improvement Objective: to ensure public database is accurate and publicly available.					
Completed procedure for providing public access.	Draft a detailed procedure for allowing public access to the waste registers (chemical & radioactive).	**Finance Project Director**	3 months after database completed (6th of May 2025)	**Drafted and circulated on 17 April 2025. Public access procedure approved 3 June 2025.**	Work commenced on the 4th of February 2025 with a meeting between LM and Finance. Draft procedure completed and reviewed by MT during April OEOM. Guidelines yet to be developed.
Finalised Waste Inventory Database made publicly available	Update and/or complete chemical and radioactive records in the database and publish the records	FMC Systems Manager	End of Q4 2024	**Waste Inventory Database completed on the 22nd of December 2024. Waste Inventory Database officially published on the 6th of February 2025.**	The radioactive and chemical records are 100% complete. The FMC has undertaken a review of the Waste Inventory Database, and all changes have been processed. The Waste Inventory Database was completed on 22nd of December 2024 and was published on the IWDF website on the 6th of February 2025.

ENVIRONMENTAL ACTION PLAN 7- TRANSPORT

Environmental, Health and Safety, and Quality Policy Statement:
Meet or exceed statutory requirements for all IWDF activities including transport, safety, public health and environmental protection by ensuring the adequacy of the EHSQMS, the environmental policy and operational activities at the IWDF, through a process of continual review.

Improvement Target	*Action*	*Responsibility*	*Required Completion Date*	*Actual Completion Date*	*Records/Status update*
Improvement Objective:					

ENVIRONMENTAL ACTION PLAN 8 – WATER

***Environmental, Health and Safety, and Quality Policy Statement*:**
Meet or exceed statutory requirements for all IWDF activities including transport, safety, public health and environmental protection by ensuring the adequacy of the EHSQMS, the policy and operational activities at the IWDF through a process of continual review.

Improvement Target	*Action*	*Responsibility*	*Required Completion Date*	*Actual Completion Date*	*Records/Status update*
Improvement Objective:					

ENVIRONMENTAL ACTION PLAN 9 – WASTE ACCEPTANCE

Environmental, Health and Safety, and Quality Policy Statement:
Maintain strict adherence to the 'waste hierarchy' by ensuring no practically available reuse, recycling, treatment, destruction or alternative disposal options in Australia for all wastes accepted for disposal at the IWDF.

Improvement Target	*Action*	*Responsibility*	*Required Completion Date*	*Actual Completion Date*	*Records/Status update*
Improvement Objective: To ensure that there are no inadvertent barriers to appropriate waste being disposed at the IWDF.					

ENVIRONMENTAL ACTION PLAN 10 – COMMUNITY LIAISON

Environmental, Health and Safety, and Quality Policy Statement:
Liaise directly with the community on all operational activities & outcomes & ensure that all disposal details & monitoring /auditing records are both publicly available & securely stored for future reference.

Improvement Target	*Action*	*Responsibility*	*Required Completion Date*	*Actual Completion Date*	*Records/Status update*
Improvement Objective: To ensure that information about the IWDF is readily available to the community & the community has every opportunity to learn of IWDF operations					

ENVIRONMENTAL ACTION PLAN 11 - REVIEW OF MANAGEMENT					
Environmental, Health and Safety, and Quality Policy Statement: Use recognised current best practices for near surface disposal of intractable & low-level radioactive wastes & to remain aware of international advances in technology. Meet or exceed statutory requirements for all IWDF activities including transport, safety, public health & environmental protection by ensuring the adequacy of the EHSQMS, the policy & operational activities at the IWDF, through a process of continual review.					
Improvement Target	***Action***	***Responsibility***	***Required Completion Date***	***Actual Completion Date***	***Records / status update***
***Improvement Objective*:** To ensure that the Management Order, Licensing and Registrations and all system procedures are up to date. Increase the usability of the IWDF Management System.					
Improved access and linkage of management system documents. Consolidate document storage to reduce the repetition and duplication of information.	Review management system documents to look at opportunities for improvement to modernise the way system information is accessed and linked. Identify opportunities to combine similar documents and remove redundant information.	FMC Systems Manager, Management Team	30 June 2025	**12 June 2025.**	A folder titled "Management System Files for Finance to Review" was distributed to the project team on the 19th of December 2024. This folder contained all documents reviewed, updated and created by the FMC as part of this Improvement Target during 2024. Finance's review of these documents was completed by the end of February 2025. New MANS reviewed in its entirety at MRM on the 12th of June 2025. Technical changes were completed before end of FY and new MANS will be uploaded to joint IWDF Teams Server in the second half of 2025.

Revision	Date	Description	Prepared by:	Checked by:	Approved by:
0.1	21/06/24	Draft 2024-2025 Action Plans prepared	MJS	MT	MT
0.2	17/07/24	Populated with plans as agreed at June 2024 Management Review Meeting	MJS	MT	MT
0.3	17/09/2024	Update to the Record/Status and Required Completion Date of the Waste Inventory Database finalisation task.	CJG	MJS	MJS
0.4	5/12/2024	Update to the Record/Status and Required Completion Date of all tasks following discussions at the December MRM.	CJG	MJS	MJS
0.5	28/1/2025	Update to the Record/Status and Required Completion Date of all tasks following discussions at the January OEOM.	CJG	MJS	MJS
0.6	25/2/2025	Update to the Record/Status and Required Completion Date of all tasks following discussions at the February OEOM.	CJG	MJS + MT	MJS + MT
0.7	25/3/2025	Update to the Record/Status and Required Completion Date of all tasks following discussions at the March OEOM.	CJG	MJS + MT	MJS + MT
0.8	1/05/2025	Update to the Record/Status and Required Completion Date of all tasks following discussions at the April OEOM.	CJG	MJS	MJS
0.9	30/6/25	Update to the Record/Status of the Site Asset and Management System Improvement Targets following the end of the 2024-25 Financial Year.	CJG	MJS	MJS

APPENDIX U

2024 – 2025 Document Control Matrix

INTRACTABLE WASTE DISPOSAL FACILITY

IWDF DOCUMENT CONTROL MATRIX

*** IWDF Management team consists of Finance IWDF Project Director and the FMC Project Director**

DOCUMENT TYPE	DOCUMENT EXAMPLE	DOCUMENT PREPARER	DOCUMENT REVIEWER	DOCUMENT APPROVER	DOCUMENT CONTROLLER	DOCUMENT DISTRIBUTION	DOCUMENT LOCATION
Environmental Management System – FMC Procedures	Management Manuals, including the Aspects and Impacts (Risk) Register, Roles and Responsibilities Register, and the Legal Register)	Systems Manager	FMC Project Manager	DWER, IWDF Management Team	FMC Systems Manager	Finance, FMC, RSO, Earthworks Contractor	Management System
	Environmental, Health & Safety and Quality Policy (EHSQP)	IWDF Management Team	FMC Project Manager	DWER, IWDF Management Team	FMC Systems Manager	Finance, FMC, RSO, Earthworks Contractor	Management System
	Operational Procedures (& instructions)	Operations Manager, Systems Manager	FMC Project Manager	DWER, IWDF Management Team	FMC Systems Manager	Finance, FMC, RSO, Earthworks Contractor	Management System
	Environmental Procedures (& instructions)	Environmental Manager, Systems Manager	FMC Project Manager	DWER, IWDF Management Team	FMC Systems Manager	Finance, FMC, RSO, Earthworks Contractor	Management System
	Radiation Procedures (& instructions)	Radiation Safety Officer, Radiation Specialist, Systems Manager	FMC Project Manager	DWER, IWDF Management Team	FMC Systems Manager	Finance, FMC, RSO, Earthworks Contractor	Management System
	Safety Procedures (& instructions)	Safety Manager, Systems Manager	FMC Project Manager	DWER, IWDF Management Team	FMC Systems Manager	Finance, FMC, RSO, Earthworks Contractor	Management System
	Management Procedures	Systems Manager	FMC Project Manager	DWER, IWDF Management Team	FMC Systems Manager	Finance, FMC, RSO, Earthworks Contractor	Management System
Safety Assessments	Operations Safety Assessment	RSO, Radiation Specialist	Finance, FMC	Radiological Council	FMC Systems Manager	Finance, FMC, RSO, Radiological Council	Management System
	Post Closure Safety Assessment	RSO, Radiation Specialist	Finance, FMC	Radiological Council	FMC Systems Manager	Finance, FMC, RSO, Radiological Council	Management System
Safety Case	Facility Safety Case	RSO, Radiation Specialist	Finance, FMC	Radiological Council	FMC Systems Manager	Finance, FMC, RSO, Radiological Council	Management System

INTRACTABLE WASTE DISPOSAL FACILITY

DOCUMENT TYPE	DOCUMENT EXAMPLE	DOCUMENT PREPARER	DOCUMENT REVIEWER	DOCUMENT APPROVER	DOCUMENT CONTROLLER	DOCUMENT DISTRIBUTION	DOCUMENT LOCATION
Guidelines	Operation Environmental and Waste Acceptance (Reporting) Guidelines	Systems Manager, Operations Manager, Environment Manager	FMC Project Manager	FMC IWDF Project Director	Finance & FMC Systems Managers	Finance, FMC	Management System
	Waste Acceptance Guidelines – Chemical and Radioactive	Systems Manager, Operations Manager, RSO and Radiation Specialist for Radioactive Guidelines	FMC Project Manager	FMC IWDF Project Director	Finance & FMC Systems Managers	Finance, FMC	Management System
	Packaging and Transport Guidelines	Systems Manager, Transport Coordinator, Operations Manager	FMC Project Manager	FMC IWDF Project Director	Finance & FMC Systems Managers	Finance, FMC	Management System
	Operation Packaging and Transport (Reporting) Guidelines	Systems Manager, Transport Coordinator, Operations Manager	FMC Project Manager	FMC IWDF Project Director	Finance & FMC Systems Managers	Finance, FMC	Management System
	Operation Health and Safety and Emergency Response (Reporting) Guidelines	Systems Manager, Health & Safety Manager	FMC Project Manager	Finance IWDF Project Manager	Finance & FMC Systems Managers	Finance, FMC	Management System
Disposal Operation Procedures	Operation Environmental and Waste Acceptance Procedures (OEWP)	Systems Manager, Environmental Manager, Operations Manager	FMC Project Manager	Finance IWDF Project Manager	Finance & FMC Systems Managers	Finance, FMC, DWER, Radiological Council (if radioactive waste), DEMIRS	Management System

INTRACTABLE WASTE DISPOSAL FACILITY

DOCUMENT TYPE	DOCUMENT EXAMPLE	DOCUMENT PREPARER	DOCUMENT REVIEWER	DOCUMENT APPROVER	DOCUMENT CONTROLLER	DOCUMENT DISTRIBUTION	DOCUMENT LOCATION
Disposal Operation Procedures	Operation Transport Procedures (OTP)	Systems Manager, Transport Coordinator, Operations Manager	FMC Project Manager	Finance IWDF Project Manager	Finance & FMC Systems Managers	Finance, FMC, Radiological Council (if radioactive waste), DEMIRS	Management System
	Operation Health & Safety and Emergency Response Procedures (OHSERP)	Systems Manager, Health & Safety Manager	FMC Project Manager	Finance IWDF Project Manager and DWER	FMC Systems Manager	Finance, FMC, DWER, Radiological Council (if radioactive waste)	Management System
	Construction Specifications	Systems Manager, Engineering Manager	FMC Project Manager	Finance IWDF Project Manager and DWER	FMC Systems Manager	Finance, FMC, DWER, Radiological Council (if radioactive waste)	Management System
Compliance Reports	Annual Performance and Compliance Report (PCR)	Systems Manager, Operations Manager	FMC Project Manager	IWDF Management Team, DWER & Radiological Council	FMC Systems Manager	Finance, FMC, Radiological Council, Community, DWER, State Library (legal deposit)	Management System
	Disposal Operation Close-Out Report	Systems Manager, Operations Manager	FMC Project Manager	IWDF Management Team, DWER & Radiological Council	FMC Systems Manager	Finance, FMC, Radiological Council, Community, DWER, State Library (legal deposit)	Management System
General Information about IWDF	Information Handbook	Systems Manager, Operations Manager	FMC Project Manager or Director	IWDF Management Team	FMC Systems Manager	General public, State Library (legal deposit)	Management System
	Information Brochure (2 page)	Systems Manager, Operations Manager	FMC Project Manager or Director	IWDF Management Team	FMC Systems Manager	General public, State Library (legal deposit)	Management System
Contracts	Joint Cost Sharing Agreements etc	Finance IWDF Project Manager	Finance IWDF Project Director	Finance IWDF Project Director	Finance IWDF Project Manager	Finance, FMC and Relevant Contractors	Finance Records, Management System
Project Correspondence	Letters, Emails	Finance IWDF Project Manager	Finance IWDF Project Director	Finance IWDF Project Manager or Director	Finance IWDF Project Manager	Finance, FMC, Community and Relevant Contractors	Finance Records, Management System

INTRACTABLE WASTE DISPOSAL FACILITY

DOCUMENT TYPE	DOCUMENT EXAMPLE	DOCUMENT PREPARER	DOCUMENT REVIEWER	DOCUMENT APPROVER	DOCUMENT CONTROLLER	DOCUMENT DISTRIBUTION	DOCUMENT LOCATION
Other Quality Critical Correspondence	Non-project letters, Emails	Finance IWDF Project Manager	Finance IWDF Project Director	Finance IWDF Project Manager or Director	Finance IWDF Project Manager	Finance, FMC, Community and Relevant Contractors	Finance Records, Management System
Quotes and Requests for Tender	IWDF Site Management	Finance IWDF Project Manager, FMC	Finance IWDF Project Manager	Finance IWDF Project Manager or Director	Finance IWDF Project Manager	Finance, FMC and Relevant Contractors	Finance Records, Management System
Ministerial Documents	Ministerial Briefings	Finance IWDF Project Manager, FMC Project Manager	Finance IWDF Project Manager or Director	Finance IWDF Project Manager or Director	Finance IWDF Project Manager	Finance, FMC	Finance Records, Management System
Test and Monitoring Results	Monitoring Results	FMC Project Manager, FMC Environmental Manager, RSO/Radiation Specialist	FMC Project Director	FMC Project Director	FMC Project Manager	Finance, FMC, Community, DWER or Radiological Council (if necessary)	Management System
Key Studies and Reports	Fauna or Flora Surveys	FMC Project Manager, FMC Project Director, FMC Environmental Manager, RSO/Radiation Specialist, Specialist consultants	FMC Project Manager or Director	FMC Project Manager or Director	FMC Project Manager	Finance, FMC, Community, DWER or Radiological Council (if necessary)	Management System
Figures, Drawings, Designs	Location Maps, Trench Designs etc.	Consultants, FMC Project Manager	FMC Project Director	FMC Project Director	FMC Project Director	Finance, FMC, Community, DWER or Radiological Council (if necessary)	Management System
Referrals to Regulatory Authorities for Project or Waste Disposal Approval	Letter to DWER, Radiological Council	FMC Project Manager, FMC Project Director	Finance IWDF Project Manager	Finance IWDF Project Manager	Finance IWDF Project Manager	Finance, FMC, DWER or Radiological Council (if necessary)	Management System

INTRACTABLE WASTE DISPOSAL FACILITY

DOCUMENT TYPE	DOCUMENT EXAMPLE	DOCUMENT PREPARER	DOCUMENT REVIEWER	DOCUMENT APPROVER	DOCUMENT CONTROLLER	DOCUMENT DISTRIBUTION	DOCUMENT LOCATION
Legislative Documents (as specified in the Legal Register)	*Environmental Protection Act 1986*	N/A	N/A	N/A	FMC Project Manager	Finance, FMC	Management System

APPENDIX V

2024 – 2025 Access Road Condition Reports

IWDF MT WALTON EAST ACCESS ROAD CONDITION REPORT

ODOMETER START 83221

ODOMETER FINISH 83319

DATE 15/10/2024

DRIVER MJS

IWDF-FORM-44

KEY:	
Trafficable	T
Soft - L Vehicles Only	S
Un-trafficable	U

	kms	kms		circle one	NOTES*
highway					
	0	100	*sand*	T S U	
	1	99	*sand*	T S U	
	2	98	*sand*	T S U	
	3	97	*sand*	T S U	
	4	96	*sand*	T S U	
powerline	5	95	*sand*	T S U	
	6	94	*sand*	T S U	
	7	93	*sand*	T S U	
	8	92	*clay*	T S U	
	9	91	*s + gr*	T S U	ROAD IN EXCELLENT CONDITION
	10	90	*s + gr*	T S U	
x-road	11	89	*sand*	T S U	
	12	88	*sand*	T S U	
wash	13	87	*gravel*	T S U	
wash	14	86	*sand*	T S U	
	15	85	*sand*	T S U	
	16	84	*sand*	T S U	
	17	83	*sand*	T S U	
wash (2)	18	82	*sand*	T S U	
	19	81	*sand*	T S U	
	20	80	*sand*	T S U	
	21	79	*sand*	T S U	
floodway	22	78	*sand*	T S U	
	23	77	*sand*	T S U	
	24	76	*sand*	T S U	
	25	75	*sand*	T S U	
wash	26	74	*s + gr*	T S U	
	27	73	*sand*	T S U	
	28	72	*sand*	T S U	
	29	71	*sand*	T S U	
	30	70	*sand*	T S U	
	31	69	*sand*	T S U	
wash	32	68	*sand*	T S U	
	33	67	*sand*	T S U	
	34	66	*sand*	T S U	
	35	65	*sand*	T S U	
	36	64	*clay*	T S U	
wash	37	63	*sand*	T S U	
	38	62	*sand*	T S U	
	39	61	*sand*	T S U	
	40	60	*sand*	T S U	
	41	59	*sand*	T S U	
	42	58	*sand*	T S U	
wash	43	57	*clay*	T S U	
	44	56	*clay*	T S U	WELL MAINTAINED
wash	45	55	*clay*	T S U	
railway	46	54	*clay*	T S U	
	47	53	*sand*	T S U	
	48	52	*sand*	T S U	
wash	49	51	*gravel*	T S U	
	50	50	*sand*	T S U	
	51	49	*sand*	T S U	
	52	48	*sand*	T S U	
	53	47	*sand*	T S U	
	54	46	*sand*	T S U	
	55	45	*sand*	T S U	
	56	44	*sand*	T S U	ROAD PAST TRUCK ENTRY POINT SOMEWHAT RUTTED AND IN NEED OF A GRADE
	57	43	*sand*	T S U	
	58	42	*sand*	T S U	
	59	41	*sand*	T S U	
	60	40	*clay*	T S U	
floodway	61	39	*clay*	T S U	
floodway	62	38	*clay*	T S U	
	63	37	*sand*	T S U	
	64	36	*sand*	T S U	
	65	35	*sand*	T S U	
	66	34	*sand*	T S U	
wash	67	33	*sand*	T S U	
	68	32	*sand*	T S U	
	69	31	*sand*	T S U	
wash	70	30	*sand*	T S U	
	71	29	*sand*	T S U	
floodway	72	28	*clay*	T S U	
	73	27	*clay*	T S U	
	74	26	*clay*	T S U	
wash	75	25	*s + gr*	T S U	
	76	24	*s + gr*	T S U	
	77	23	*clay*	T S U	
wash	78	22	*gravel*	T S U	
	79	21	*clay*	T S U	
	80	20	*s + gr*	T S U	
	81	19	*s + gr*	T S U	
	82	18	*s + gr*	T S U	
	83	17	*s + gr*	T S U	
	84	16	*s + gr*	T S U	
	85	15	*s + gr*	T S U	
	86	14	*s + gr*	T S U	
	87	13	*s + gr*	T S U	
	88	12	*s + gr*	T S U	
	89	11	*s + gr*	T S U	
	90	10	*s + gr*	T S U	
wash	91	9	*gravel*	T S U	
	92	8	*clay*	T S U	
wash	93	7	*clay*	T S U	
	94	6	*s + gr*	T S U	
	95	5	*sand*	T S U	
	96	4	*s + gr*	T S U	
	97	3	*s + gr*	T S U	
	98	2	*s + gr*	T S U	
	99	1	IWDF	T S U	
	100	0	Camp	T S U	

*NOTES Water depth, blockage of drains, etc

Mt Walton East

IWDF MT WALTON EAST ACCESS ROAD CONDITION REPORT

ODOMETER START 15921

ODOMETER FINISH 16020

DATE 14/4/2025

DRIVER MJS

IWDF-FORM-44

KEY:	
Trafficable	T
Soft - L Vehicles Only	S
Un-trafficable	U

highway	kms	kms		circle one	NOTES*
	0	100	sand	T S U	
	1	99	sand	T S U	
	2	98	sand	T S U	
	3	97	sand	T S U	
	4	96	sand	T S U	
powerline	5	95	sand	T S U	
	6	94	sand	T S U	
	7	93	sand	T S U	
	8	92	clay	T S U	ROAD IN GOOD CONDITION
	9	91	s + gr	T S U	
	10	90	s + gr	T S U	
x-road	11	89	sand	T S U	
	12	88	sand	T S U	MUDDY IN PLACES WITH MINOR LIGHT VEHICLE RUTS
wash	13	87	gravel	T S U	
wash	14	86	sand	T S U	
	15	85	sand	T S U	
	16	84	sand	T S U	
	17	83	sand	T S U	
wash (2)	18	82	sand	T S U	
	19	81	sand	T S U	
	20	80	sand	T S U	
	21	79	sand	T S U	
floodway	22	78	sand	T S U	
	23	77	sand	T S U	
	24	76	sand	T S U	
	25	75	sand	T S U	
wash	26	74	s + gr	T S U	
	27	73	sand	T S U	
	28	72	sand	T S U	
	29	71	sand	T S U	
	30	70	sand	T S U	
	31	69	sand	T S U	
wash	32	68	sand	T S U	
	33	67	sand	T S U	
	34	66	sand	T S U	
	35	65	sand	T S U	
	36	64	clay	T S U	
wash	37	63	sand	T S U	
	38	62	sand	T S U	
	39	61	sand	T S U	
	40	60	sand	T S U	
	41	59	sand	T S U	
	42	58	sand	T S U	
wash	43	57	clay	T S U	
	44	56	clay	T S U	
wash	45	55	clay	T S U	
railway	46	54	clay	T S U	
	47	53	sand	T S U	

	kms	kms		circle one	NOTES*
railway	46	54	clay	T S U	
	47	53	sand	T S U	
	48	52	sand	T S U	
wash	49	51	gravel	T S U	
	50	50	sand	T S U	
	51	49	sand	T S U	
	52	48	sand	T S U	
	53	47	sand	T S U	
	54	46	sand	T S U	
	55	45	sand	T S U	
	56	44	sand	T S U	
	57	43	sand	T S U	
	58	42	sand	T S U	
	59	41	sand	T S U	ROAD IN VERY GOOD CONDITION
	60	40	clay	T S U	
floodway	61	39	clay	T S U	
floodway	62	38	clay	T S U	
	63	37	sand	T S U	SOME WATER LYING AROUND
	64	36	sand	T S U	
	65	35	sand	T S U	
	66	34	sand	T S U	
wash	67	33	sand	T S U	
	68	32	sand	T S U	
	69	31	sand	T S U	
wash	70	30	sand	T S U	
	71	29	sand	T S U	
floodway	72	28	clay	T S U	
	73	27	clay	T S U	
	74	26	clay	T S U	
wash	75	25	s + gr	T S U	
	76	24	s + gr	T S U	
	77	23	clay	T S U	
wash	78	22	gravel	T S U	
	79	21	clay	T S U	
	80	20	s + gr	T S U	
	81	19	s + gr	T S U	
	82	18	s + gr	T S U	
	83	17	s + gr	T S U	
	84	16	s + gr	T S U	
	85	15	s + gr	T S U	
	86	14	s + gr	T S U	
	87	13	s + gr	T S U	
	88	12	s + gr	T S U	
	89	11	s + gr	T S U	
	90	10	s + gr	T S U	
wash	91	9	gravel	T S U	
	92	8	clay	T S U	
wash	93	7	clay	T S U	
	94	6	s + gr	T S U	
	95	5	sand	T S U	
	96	4	s + gr	T S U	
	97	3	s + gr	T S U	
	98	2	s + gr	T S U	
	99	1	IWDF	T S U	
	100	0	Camp	T S U	

Mt Walton East

*NOTES Water depth, blockage of drains, etc

APPENDIX W

2024 – 2025 Internal Audit Schedule

INTERNAL MANAGEMENT AUDIT SCHEDULE
FINANCE-MF-11-1

X = Audit of procedure scheduled (if audit required)

X = Audit of procedure completed

PROCEDURE TO BE AUDITED	FINANCIAL YEAR: 2024 - 25											
	Jul 24	Aug 24	Sep 24	Oct 24	Nov 24	Dec 24	Jan 25	Feb 25	Mar 25	Apr 25	May 25	Jun 25
Ministerial Statement 562				X		X						X
FINANCE MANAGEMENT PROCEDURES												
MP-01 Aspects and Impacts											X	
MP-02 Applicable Laws, Regulations and other Requirements											X	
MP-03 Objectives and Targets											X	
MP-04 Environmental, Health and Safety Management Program											X	
MP-05 Communications and Public Relations											X	
MP-06 Document and Data Control											X	
MP-07 Management of Records											X	
MP-08 Operational Planning											X	
MP-09 Training											X	
MP-10 Procurement											X	
MP-11 Management Audits											X	

PROCEDURE TO BE AUDITED	FINANCIAL YEAR: 2024 - 25											
	Jul 24	Aug 24	Sep 24	Oct 24	Nov 24	Dec 24	Jan 25	Feb 25	Mar 25	Apr 25	May 25	Jun 25
MP-12 Management Review											X	
MP-13 Control of Non conformances and Corrective and Preventative Action											X	
MP-14 Access Road Management and Traffic Control											X	
MANAGEMENT PLANS												
1. Air Quality						X						X
2. Decommissioning and Rehabilitation						X						X
3. Emergency Response						X						X
4. Flora and Fauna						X						X
5. Health and Safety						X						X
6. Radiation						X						X
7. Transport						X						X
8. Water						X						X
9. Waste Acceptance						X						X
10. Community Liaison						X						X
11. Management Review						X						X
FMC MANAGEMENT PROCEDURES												
FMP 1 Document & Data Control											X	
FMP 2 Records Management	X										X	
FMP 3 Training & Competencies											X	
FMP 4 System Auditing & Compliance	X										X	

PROCEDURE TO BE AUDITED	FINANCIAL YEAR: 2024 - 25											
	Jul 24	Aug 24	Sep 24	Oct 24	Nov 24	Dec 24	Jan 25	Feb 25	Mar 25	Apr 25	May 25	Jun 25
FMP 5 Control of System non-conformances	X										X	
FMP 6 Control & Maintenance of Equipment	X										X	
FMC OPERATIONAL PROCEDURES & INSTRUCTIONS												
OP1 Assessment of Applications for Disposal											X	
OP 2 Planning Documentation & Approval for Disposal												X
OP 3 Excavation of Trench												X
OP 4 Waste Preparation for Disposal												X
OP 5 Waste Loading & Transport												X
OP 6 Waste Delivery Acceptance & Disposal												X
OP 7 Capping Rehabilitation & Demobilization												X
OP 8 Operation Close-out												X
OP 9 Ongoing & General Management of IWDF												X
OP 10 Operation Site Management											X	
OI 1 Waste Inspection											X	
FMC ENVIRONMENTAL PROCEDURES & INSTRUCTIONS												
EP 1 Vegetation Management												X
EP 2 Fauna Management												X
EP 3 Environmental Monitoring												X
EP 4 Water Management												X
EP 5 Rehabilitation Management												X
EP 6 Air Quality & Dust Management												X
EP 7 Site Waste Management												X
EP 8 Fuel Oil & Hazardous Materials Management												X

PROCEDURE TO BE AUDITED	FINANCIAL YEAR: 2024 - 25											
	Jul 24	Aug 24	Sep 24	Oct 24	Nov 24	Dec 24	Jan 25	Feb 25	Mar 25	Apr 25	May 25	Jun 25
EP 9 Environmental Incident Reporting												X
EI 1 Groundwater Monitoring						X			X		X	X
EI 2 Soil & Dust Sampling						X			X		X	X
EI 3 Capping Monitoring						X			X		X	X
EI 4 Rehabilitation Monitoring						X			X		X	X
RADIATION MANAGEMENT PROCEDURES & INSTRUCTIONS												
RP 1 Radiation Management												X
RI 1 Gamma Radiation Monitoring												X
RI 2 Occupational Radiation Monitoring												X
SAFETY MANAGEMENT PROCEDURES & INSTRUCTIONS												
SP 1 Health & Safety Management & Planning	X										X	
SP 2 Operation Site Safety Management											X	
SI 1 Excavation Safety	X										X	
SI 2 Personal protective Equipment											X	
SI 3 Hygiene & Decontamination	X										X	
SI 4 Occupational Monitoring	X										X	
SI 5 Communication & Traffic Control	X										X	
SI 6 First Aid											X	
SI 7 Heavy Machinery Operations											X	
SI 8 Exclusion Zones											X	
EMERGENCY RESPONSE PROCEDURES & INSTRUCTIONS												
ERP 1 Incident Prevention, Reporting & Investigation	X										X	
ERP 2 Emergency Response Management	X										X	
ERI 1 Injury & Evacuation Response						X			X		X	

PROCEDURE TO BE AUDITED	FINANCIAL YEAR: 2024 - 25											
	Jul 24	Aug 24	Sep 24	Oct 24	Nov 24	Dec 24	Jan 25	Feb 25	Mar 25	Apr 25	May 25	Jun 25
ERI 2 Waste Incident & Spill Response						X			X		X	
ERI 3 Fire Response						X			X		X	
ERI 4 Transport Emergency Response											X	

AUDIT SCHEDULE APPROVED: MJS DATE: June 2025 REVISION: 2

APPENDIX X

2024 – 2025 Management Review Meetings Agendas

Government of **Western Australia**
Department of **Finance**

IWDF MT WALTON EAST MANAGEMENT REVIEW MEETING

AGENDA

Date: Thursday 5 December 2024
Time: 9.30 am – *OEOM to be held after the MRM*
Venue: Board/Training Room, Aurora Environmental, Dilhorn House, 2 Bulwer St, Perth

1. Open and Welcome
1.1 Agenda Outline (EH)

2. Minutes of the Previous Meeting

3. Business Arising from Previous Meeting
3.1 Update of Finance Management Manual
3.2 Risk Workshop (MS)
3.3 Staff Training
3.4 IWDF Safety Assessments and Safety Case
3.5 Provide the FMC with a consolidated draft of Ministerial Statement 0562

4. IWDF Management Systems
4.1 Environmental, Health & Safety and Quality Policy Review (EH)
4.2 IWDF Management Plans - updates (MS)
4.3 Management Manuals – updates (MS)
4.4 Registers –updates Legal & Other Requirements and Aspects and Impacts registers (MS)
4.5 Finance EHSMS & Procedures (EH)
4.6 FMC EHSMS & FMC Procedures (MS)
4.7 Performance and Compliance Reporting (MS)
4.8 Annual Review of Finance R&D Schedule

5. Action Plans
5.1 Performance against 2024 – 2025 Action Plan (MS)

6. Compliance Audits Internal and External
6.1 Ministerial Statement (MS)
6.2 License, Permit and Registration (MS)
6.3 Finance Management System (MS)
6.4 FMC Management System (MS)
6.5 Management Plans (MS)
6.6 Ongoing Suitability of Management Plans (MS)
6.7 Liaison with National and International Intractable Waste Management Facilities (MS)

7. Non-conformance and Corrective Action Requests (MS)

8. Electronic Document Library
8.1 Recent updates and changes (MS)

9. Guidelines – Updates and Changes

10. Monitoring

10.1 Groundwater (MS)
10.2 Capping (annual) (MS)
10.3 Rehabilitation (annual) (MS)
10.4 Dose constraint monitoring – report on monitoring results to date (MS)

11. IWDF Infrastructure

11.1 Access Road current condition report (MS)
11.2 Firebreaks (MS)
11.3 Site Infrastructure maintenance (EH/MJS)

12 Staff Training

12.1 Training requirements (MS)

13 Radioactive Issues

13.1 IWDF Safety Assessments and Safety Case (MS)
13.2 ASNO Permit

14 Communications

14.1 Community Liaison Committee (EH)
14.2 Complaints (EH)
14.3 Finance IWDF website content - status update (EH)
14.4 Ministerial Statement 0562 Review (EH)

15 FMC Performance

15.1 Performance against FMC 2024 – 2025 estimated costs (MJS)
15.2 FMC Performance against Finance contract management plan (EH)

16 Other Business

16.1 Disposal applications – new and updates to existing applications (MS)
16.2 IWDF File Notification Areas (FNAs)

17 Next Meeting

To be scheduled for June 2025

Government of **Western Australia**
Department of **Finance**

IWDF MT WALTON EAST MANAGEMENT REVIEW MEETING

AGENDA

Date: Thursday 12 June 2025
Time: 9.30 am – *OEOM to be held after the MRM*
Venue: Board/Training Room, Aurora Environmental, Dilhorn House, 2 Bulwer St, Perth

1. Open and Welcome
1.1 Agenda Outline (EH)

2. Minutes of the Previous Meeting

3. Business Arising from Previous Meeting
3.1 DWER approval for changes to the Management System (EH)
3.2 Finalisation of CAR 007 (EH)
3.3 Updates to Chemical and Radioactive Waste Acceptance Proformas (MS)
3.4 Timeframe for Community Meeting (EH)
3.5 Audit table updates due to amendments to MS 0562 (MS)

4. IWDF Management
4.1 IWDF Management System Review Update (MS/EH)
4.2 IWDF Management Systems documents not captured within item 4.1(MS)
4.3 Environmental, Health & Safety and Quality Policy (EH)
4.4 PCR July 2024 to June 2025 (MS)
4.5 Disposal applications – new and updates to existing applications (MS)
4.6 IWDF Database

5. Action Plans
5.1 Performance against 2024 – 2025 Action Plan (MS)
5.2 Draft 2025 – 2026 Action Plan (MS)

6. Compliance Audits
6.1 Ministerial Statement (MS)
6.2 License, Permit and Registration (MS)
6.3 Finance Management System (MS)
6.4 FMC Management System (MS)
6.5 Management Plans (MS)
6.6 Ongoing Suitability of Management Plans (MS)
6.7 Liaison with National and International Intractable Waste Management Facilities (MS)

7. Nonconformance and Corrective and Preventative Actions (MS)

8. Electronic Document Library
8.1 Recent updates and changes (MS)

9. Guideline Review and Changes

10. Monitoring

10.1 Groundwater (MS)
10.2 Capping (annual) (MS)
10.3 Rehabilitation (annual) (MS)
10.4 Rehabilitation Monitoring (10 yearly)
10.5 Dose constraint monitoring – report on monitoring results to date (MS)

11. IWDF Infrastructure

11.1 Firebreaks (MS)
11.2 Site Infrastructure maintenance (EH/MS)

12 Staff Training Needs

12.1 Training delivered
12.2 Training requirements (MS)

13 Radioactive Issues

13.1 IWDF Safety Assessments and Safety Case (MS)

14 Communications

14.1 Annual Community Meeting (EH)
14.2 Complaints (EH)
14.3 Finance IWDF website content - status update (EH)

15 FMC Performance

15.1 Performance against FMC 2024 – 2025 estimated costs (MS)
15.2 FMC performance against Finance contract management plan (TG)

16 Other Business

16.1 IWDF File Notification Areas (FNAs)

17 Next Meeting

To be scheduled for December 2025

APPENDIX Y

2024 – 2025 Dangerous Goods Storage Inventory Records

INTRACTABLE WASTE DISPOSAL FACILITY
MT WALTON EAST, WESTERN AUSTRALIA

DANGEROUS GOODS STORAGE RECORD IWDF-FORM-51

Date: 18/10/2024	Completed by: MJS

Item (technical name)	UN No.	Class	Packaging Group	DG Factor	No. of Packages	Type of Packages	Total Volume (L)	Location	Storage Factor (Factor x vol.)	MSDS on site	Comments
Diesel tank bunded area											
DIESEL FUEL	–	3	(C1)	0.2	1	2000L AST	<100L	DTB AREA	20		
DIESEL FUEL	–	3	(C1)	0.2	1	GENERATOR	80L	DTB AREA	16		
DIESEL FUEL	–	3	(C1)	0.2	1	2000L SBST	500L	DTB AREA	100		
			Total volume manufactured products =			Total volume flammable (II) =			**Total SF** = 136	Total volume C1 & C2 = 680L	
Sea-container											
N/A											
			Total volume manufactured products =			Total volume flammable (II) =			**Total SF** =	Total volume C1 & C2 =	

SUMMARY – Compliance with Requirements Dangerous Goods Safety (Storage and Handling of Non-explosives) Regulations 2007 and DG Licence

Storage Factor for each storage area 1000 or less? (Yes)/No Details:

Is the current storage classed as minor storage?
(e.g., less than 250L flammable (petrol), 5,000L C1 & C2 (diesel and oil) and 250L manufactured product in any one storage area)? (Yes)/No Details:

If no to both, is there a DG licence for the site? (There should be, or changes are required) Yes/No Details:

IN[illegible]ACTABLE WASTE DISPOSAL FACILI[illegible]
MT WALTON EAST, WESTERN AUSTRALIA

DANGEROUS GOODS STORAGE RECORD IWDF-FORM-51

Date: 16/4/2025	Completed by: MJS

Item (technical name)	UN No.	Class	Packaging Group	DG Factor	No. of Packages	Type of Packages	Total Volume (L)	Location	Storage Factor (Factor x vol.)	MSDS on site	Comments
Diesel tank bunded area											
DIESEL FUEL	-	3	(C1)	0.2	1	GENERATOR	80L	DTB AREA	16		
DIESEL FUEL	-	3	(C1)	0.2	1	2000L SBST	410L	DTB AREA	82		
			Total volume manufactured products =			Total volume flammable (II) =			**Total SF** = 98	Total volume C1 & C2 = 490 L	
Sea-container											
N/A											
			Total volume manufactured products =			Total volume flammable (II) =			**Total SF** =	Total volume C1 & C2 =	

SUMMARY – Compliance with Requirements Dangerous Goods Safety (Storage and Handling of Non-explosives) Regulations 2007 and DG Licence

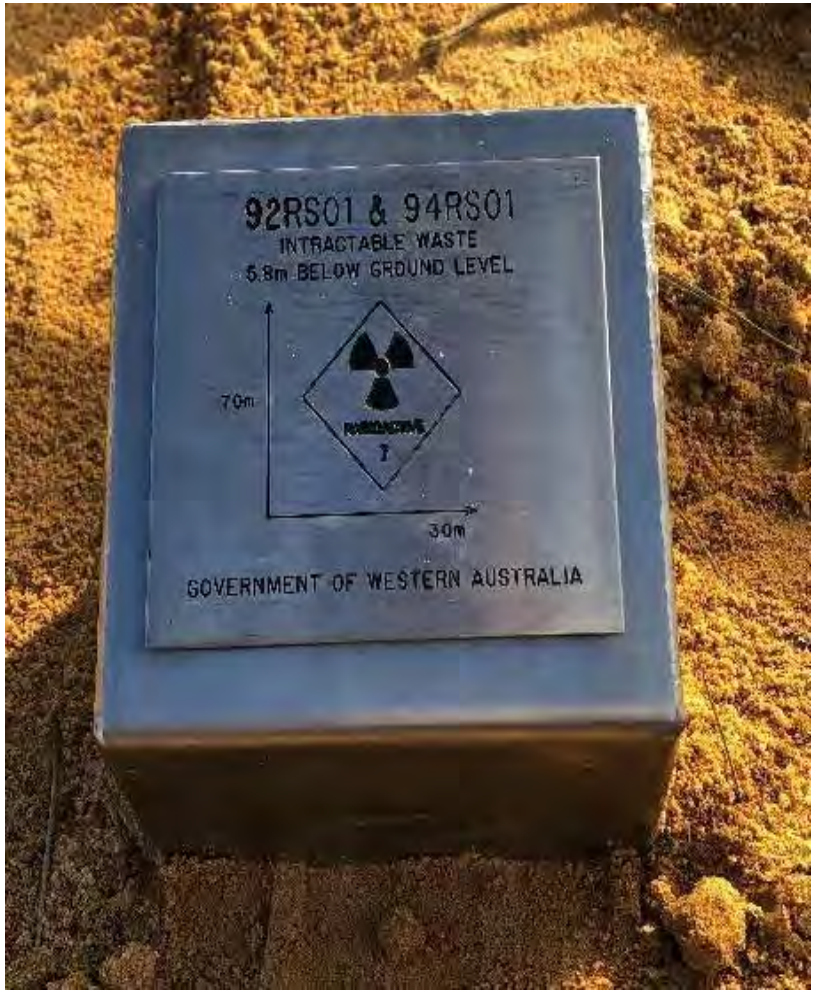
Storage Factor for each storage area 1000 or less? Yes/No Details:

Is the current storage classed as minor storage?
(e.g., less than 250L flammable (petrol), 5,000L C1 & C2 (diesel and oil) and 250L manufactured product in any one storage area)? Yes/No Details:

If no to both, is there a DG licence for the site? (There should be, or changes are required) Yes/No Details:

APPENDIX Z

Permanent Above Ground Disposal Cell Markers



92RS01 and 94RS01

94NRT01

94NRT02

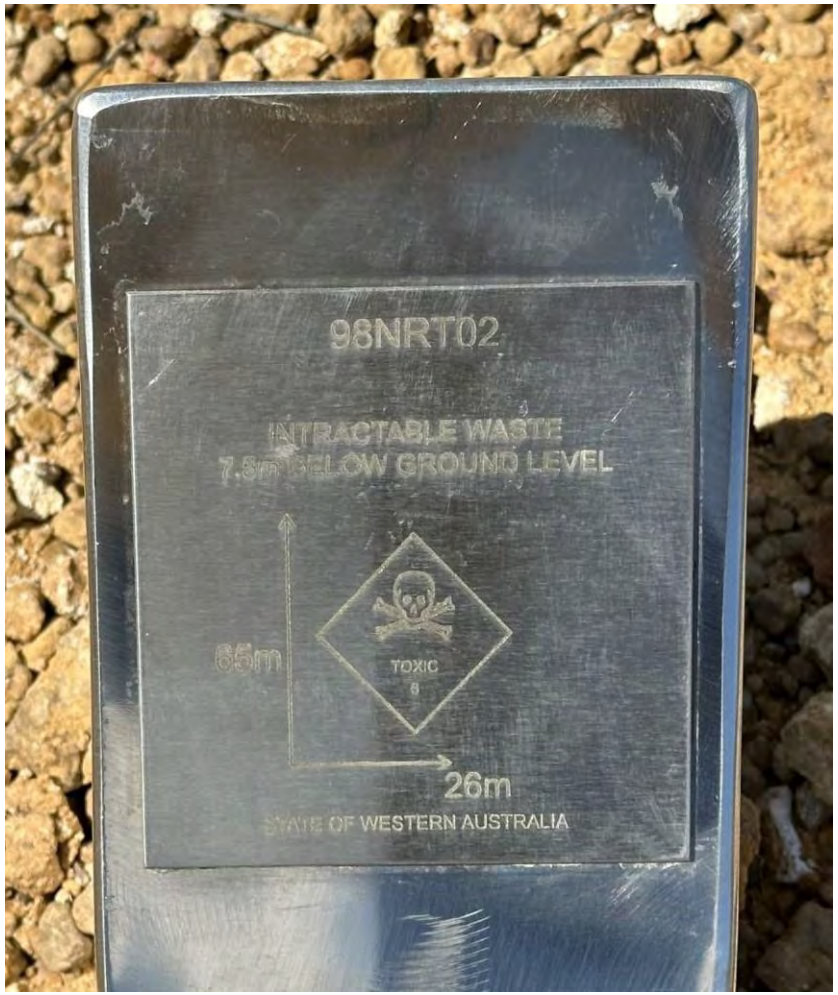
94RT01

96NRT01

97NRT01

97NRT02

98NRT01



98NRT02

2000RT01

2002RT01

2008RT01

2020NRT01
INTRACTABLE WASTE
8.5m BELOW GROUND LEVEL
96m
CHEMICAL
6
26m
STATE OF WESTERN AUSTRALIA

2020NRT01