



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

PERFORMANCE AND COMPLIANCE REPORT

INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST

JULY 2025 – JUNE 2026

SEPTEMBER 2026

Department of Housing and Works

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JULY 2025 – JUNE 2026

Prepared by Aurora Environmental

September 2026

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 2025 to 30 June 2026, 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 2025 and 30 June 2026 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
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 <i>Public Works Act 1902</i> (WA) in relation to the IWDF
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
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
OWEP	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

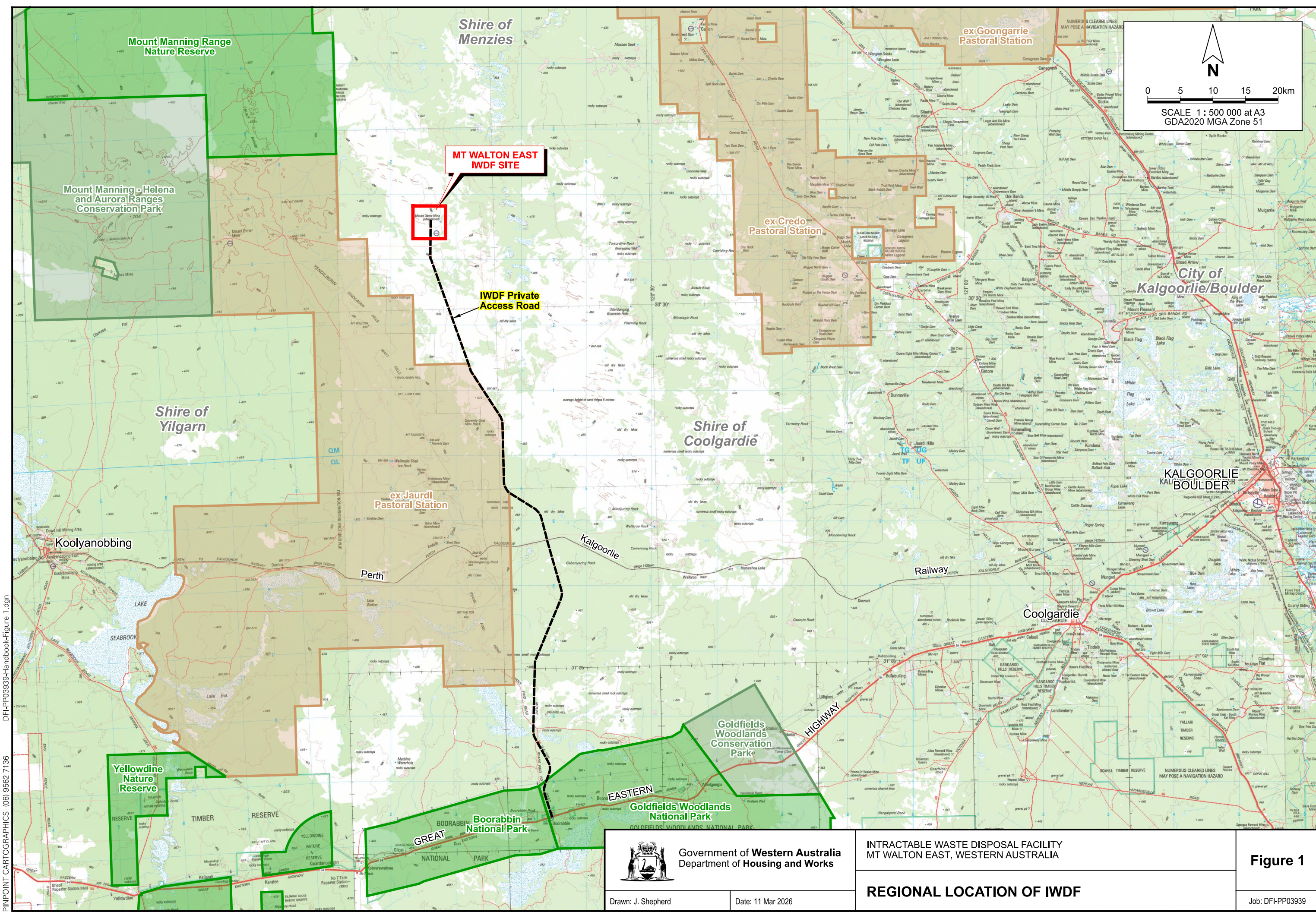
This Performance and Compliance Report (PCR) summarises the compliance of the operation of the IWDF against the requirements of:

- Ministerial Statement No. 562 (Appendix A).
- Radiological Council (RC) Registration RS 13/2011 20590 (there are two which apply to the reporting period both with the same designation) (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.



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.

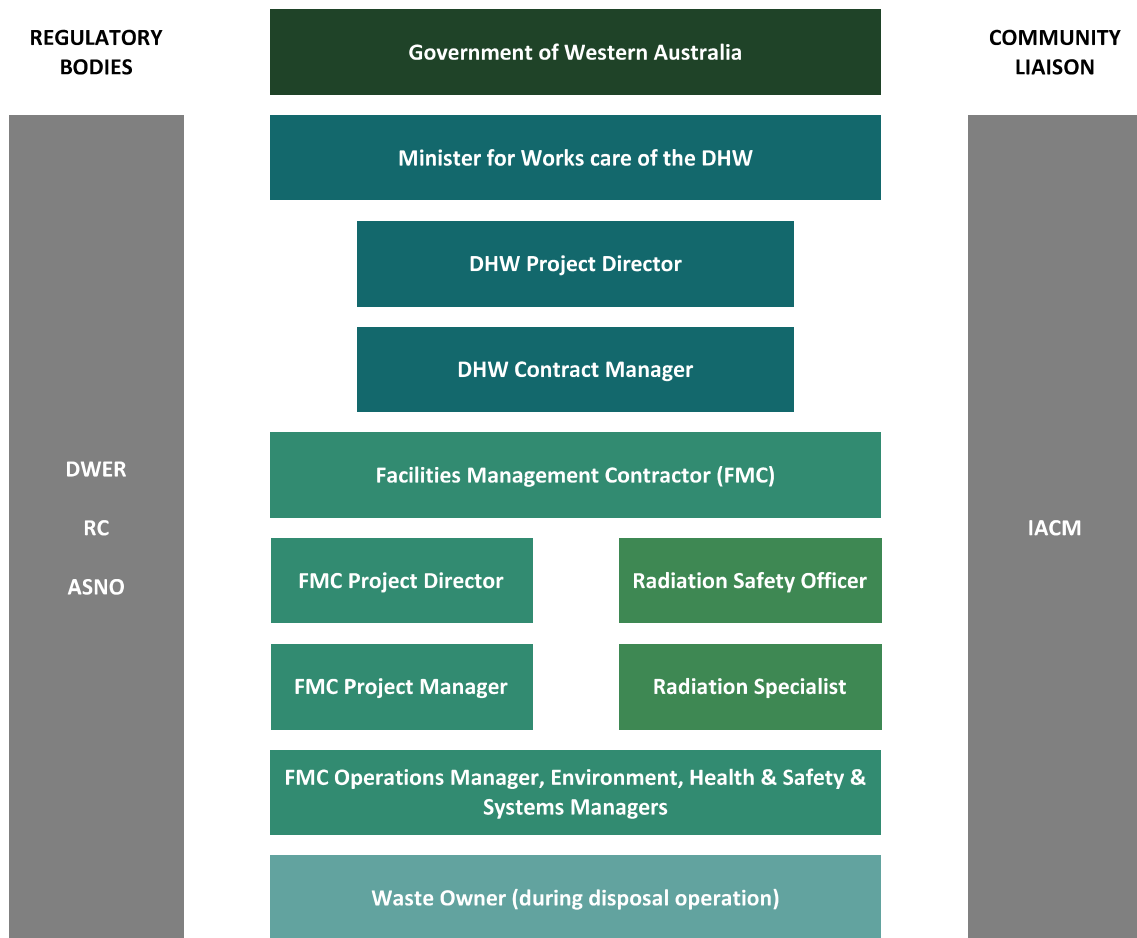
2.2 Facility Management Contractor

The Facility Management Contractor (FMC), with responsibility for the environmental and operational management of the IWDF, for the period 1 July 2025 to 30 June 2026 was Aurora Environmental.

2.3 IWDF Governance

The governance of the IWDF from 1 July 2025 to 30 June 2026 is illustrated in Figure 2 overleaf.

Figure 2
July 2025 – June 2026 IWDF Governance Structure



ACRONYMS

DHW - Department of Housing and Works

DWER - Department of Water and Environmental Regulation

RC - Radiological Council

ASNO - Australian Safeguards and Non-proliferation Office

IACM - IWDF Annual Community Meeting

2.4 Visits to the IWDF during the 2025 – 2026 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 2025 – 2026 Reporting Period

Date of Visit	Purpose of Visit	Name and Role of Visitor
13 – 16 Oct 2025	Facility and IWDF Access Road inspection and rehabilitation, capping, and groundwater monitoring. Inspection of fences and inspection and spraying of V-drains.	Mark Shepherd (FMC Project Director and Operations Manager) and Shayne Pittaway (FMC Technician).
4 – 6 May 2026	Facility and IWDF Access Road inspection, groundwater monitoring, inspection and spraying of V-drains, and inspection of fences. Removed five fire extinguishers for service. Testing and Tagging was undertaken by Forrest Electrical Services and the defibrillator was replaced with a new model. Visit from DHW personnel and an audit team from DWER.	Mark Shepherd (FMC Project Director and Operations Manager) and Scott Duffy (FMC Project Environmental Scientist). Erin Clinch (DHW IWDF Project Director) and Michelle Spencer (DHW IWDF Contract Manager). Kasup Ranasinghe (DWER Audit Team), Sally Heitman (DWER Audit Team) and Peter Taylor (DWER Audit Team).

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 2025 – 2026 Compliance Statement

No.	Condition	Compliance Status / Comment									
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 <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> </table>	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	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 2025 and May 2026. See Appendix G to show monitoring of V-drains on IWDF-Form-52.
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									

No.	Condition	Compliance Status / Comment
	Security fencing Ensure fencing for the demarcation of cells is maintained free of holes, breaks and other defects. N/A	In compliance – Fences checked during each site visit. See Appendix G to show monitoring of fences on IWDF-Form-52.
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.	N/A – No disposal operation occurred during the reporting period therefore no waste was accepted onto the premises.
3.	The Licence Holder must immediately recover or remove and dispose of spills of intractable waste outside of the disposal cells.	N/A – No disposal operation occurred during the reporting period therefore no spills of intractable waste occurred.
4.	The Licence Holder must ensure that Emergency Response Equipment is located on the premises for the duration of a waste disposal operation.	N/A – No disposal operation occurred during the reporting period.
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.	N/A – No disposal operation occurred during the reporting period.

No.	Condition	Compliance Status / Comment						
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 <table> <tr> <th>Waste Type¹</th><th>Parameter¹</th><th>Time Period¹</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); (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. </td><td>Each load arriving at the Premises</td></tr> </table>	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	N/A – No disposal operation occurred therefore no intractable waste was accepted or removed from the premises during the reporting period.
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 (Chief Executive Officer) in writing at least 1-month prior¹ 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 <i>Radiological Safety Act 1975</i>. 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	N/A – No disposal operation occurred therefore no intractable waste was delivered during the reporting period.						

No.	Condition	Compliance Status / Comment
	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.	In compliance. (a) In compliance – Site Visit Checklist records any maintenance undertaken (Appendix G). (b) N/A – No disposal occurred. (c) In compliance – No complaints related to alleged emissions were received during the annual period.
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 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.	In compliance. There were no complaints related to alleged emissions from the premises. See Appendix H for the Complaints Register.

No.	Condition	Compliance Status / Comment												
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 01/09/2026 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 <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>NA</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>	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	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.
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													

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. The Complaints Register is attached as Appendix H.

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), is for the registration period 17 February 2026 to 8 February 2029. The named registrant is Mr Mark Bryden, General Manager Operations, Department of Housing and Works. Mr Stuart Parr is the RC approved Radiation Safety Officer (RSO).

The previous RC registration, RS 13/2011 20590 (Standard Condition 203) applied to the site for the period 13 July 2023 to 8 February 2026 and named 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 compliance statement for the RC registration 13 July 2023 to 8 February 2026 (refer 3.4.1 below) shows that the site was 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) (NHMRC, 1993) may be applied in the transition to compliance with the *Code for Disposal Facilities for Solid Radioactive Waste (2018)* (RPS C-3) published by the Australian Radiation Protection and Nuclear Safety Agency (ARPANSA), until the Safety Case referenced in 2.3 of

Standard Condition 203 is approved. The Safety Case was approved on 24 December 2025, and the current RC registration came into effect on 8 February 2026. As a result, the IWDF Management Team (MT) have ensured compliance with RHS 35, as required by the previous registration (see Appendix I) and, where possible with the remainder of Standard Condition 203 as demonstrated in Table 3a below. Additionally, the MT ensured that post 8 February 2026 the site was in compliance with the current registration which includes Standard Condition 203 and the two attached Special Conditions (Table 3b).

3.4.1 Compliance Statement

Table 3a details DHW'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 3a
RC Registration of Premises 2025 – 2026 Compliance Statement 30 June 2025 – 8 February 2026

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 <i>Section 34 of the Act</i> ;	No disposal of radioactive waste during the reporting period.
2.2. All radiation management and safety are in accordance with the <i>Radiation Safety (General) Regulations</i> (1983), and the <i>Australian Code for Radiation Protection in Planned Exposure Situations</i> (RPS C-1) and <i>Code for Disposal Facilities for Solid Radioactive Waste</i> (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;	The Safety Case was approved on 24 December 2025. Review required prior to 24 December 2027.
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;	The Safety Case was approved on 24 December 2025. Review required prior to 24 December 2027.

Conditions, Restrictions and Limitations	Compliance Status / Comment
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 <i>Australian Safety Guide for the Predisposal Management of Radioactive Waste</i> (RPS 16), published by ARPANSA;	No disposal of radioactive waste during the reporting period.
2.6. Radiation safety management is undertaken by the approved <i>Radiation Safety Officer</i> (RSO), in accordance with the duties imposed under <i>Regulations 19(3)</i> ;	In compliance – all radiation safety management was undertaken by the approved RSO.
2.7. Transport of radioactive substances shall be in accordance with the <i>Radiation Safety (Transport of Radioactive Substances) Regulations 2002</i> and the <i>Code of Practice for the Safe Transport of Radioactive Materials</i> as adopted;	No disposal of radioactive waste during the reporting period.
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 DHW 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	In compliance – (RHS 35) was adhered to until the Safety Case was approved on 24 December 2025.

Conditions, Restrictions and Limitations	Compliance Status / Comment
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.	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.

Table 3b details DHW's compliance, for 8 February to 30 June 2026, with the conditions, restrictions and limitations as defined on the RC Registration RS 13/2011 20590 as issued 17 February 2026.

Table 3b
RC Registration of Premises 2025 – 2026 Compliance Statement 8 February – 30 June 2026

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 <i>Section 34 of the Act</i> ;	No disposal of radioactive waste during the reporting period.
2.2. All radiation management and safety are in accordance with the <i>Radiation Safety (General) Regulations</i> (1983), and the <i>Australian Code for Radiation Protection in Planned Exposure Situations</i> (RPS C-1) and <i>Code for Disposal Facilities for Solid Radioactive Waste</i> (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	

Conditions, Restrictions and Limitations	Compliance Status / Comment
required under RPS C-1 is reviewed at 2-yearly intervals and any revised documentation is submitted to the Radiological Council;	Safety Case approved 24 December 2025. Review required prior to 24 December 2027.
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;	Safety Case approved 24 December 2025. Review required prior to 24 December 2027.
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 <i>Australian Safety Guide for the Predisposal Management of Radioactive Waste</i> (RPS 16), published by ARPANSA;	No disposal of radioactive waste during the reporting period.
2.6. Radiation safety management is undertaken by the approved <i>Radiation Safety Officer</i> (RSO), in accordance with the duties imposed under <i>Regulations 19(3)</i> ;	In compliance – all radiation safety management was undertaken by the approved RSO.
2.7. Transport of radioactive substances shall be in accordance with the <i>Radiation Safety (Transport of Radioactive Substances) Regulations 2002</i> and the <i>Code of Practice for the Safe Transport of Radioactive Materials</i> as adopted;	No disposal of radioactive waste during the reporting period.
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 1.
2.10. Accurate records of all radioactive material disposed shall be maintained and archived in an approved manner; and	In compliance – The DHW 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	No disposal of radioactive waste during the reporting period. See also Special

Conditions, Restrictions and Limitations	Compliance Status / Comment
the Council, one year into commencement of operations and thereafter at two-yearly intervals.	Condition 2, audit only required 6 months after each disposal campaign.
SPECIAL CONDITIONS	
1. 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.
2. 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 DHW to submit an ASO316 form to ASNO, that describes approved building(s)/location(s) and a brief description of nuclear material contents. The Permit also requires DHW to provide the most up to date information for IAEA Guidance on Access to the remote IWDF site. On 30 January 2026, ASNO asked DHW to complete form ASO316 by 15 March 2026. This information was sent on 4 March 2026, including IAEA

Guidance on Access, with a response from ASNO acknowledging receipt of the submission on the same date (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 2026 for Department of Housing and Works was received on 17 June 2026 (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 2025 – 2026 Compliance Statement

Reporting Requirements	Compliance Status
<i>ASO310 Inventory Listing</i> 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 17 June 2026 – see Appendix L for ASNO acknowledgement of submission.
<i>ASO316 Description of each building</i> 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 4 March 2026. See Appendix K for a copy of the email acknowledging submission of form ASO316 to ASNO.
<i>PN207 – IAEA Guidance on Access</i> 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 4 March 2026. 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 first IWDF Annual Community Meeting (IACM) was held in this reporting period on 16 October 2025. The agenda for the meeting is provided in Appendix M.

Table 5
Statement 562 Ministerial Conditions and Proponent Commitments 2025 – 2026 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 <i>Environmental Protection Act 1986</i> .	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 <i>Environmental Protection Act 1986</i> 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 2025-2026 PCR will be submitted to the RC and the DWER and any changes required can be incorporated in the 2026-2027 PCR if requested. No changes were required after submission of 2024-2025 PCR.

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 <i>Radiation Safety (Transport of Radioactive Substances) Regulations 2002</i> and <i>Dangerous Goods Safety (Road and Rail Transport of Non-explosives) Regulations 2007</i> 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.
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 the reporting period.

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE- MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
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.
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 the reporting period	No disposal operation occurred during the reporting period.

NO	TOPIC	ACTION	TIMING / PHASE	TO REQUIRE- MENTS OF	ADVICE	MEASUREMENT / COMPLIANCE CRITERIA	STATUS	REFERENCE / COMMENT / EVIDENCE
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 the reporting period	No disposal operation occurred during the 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 the reporting period	No disposal operation occurred during the 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 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 the reporting period	No disposal operation occurred during the 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 in relation to radiation issues	Approved PCR	Not required during the reporting period	No disposal operation occurred during the reporting period; however, a PCR is 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 the reporting period; however, a PCR is 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 the reporting period	No disposal operation occurred during the 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 the reporting period	No disposal operation occurred during the 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 the reporting period	No disposal operation occurred during the 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) was held on 16 October 2025, which was within the 12 month period required in amended MS 562 and 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 the reporting period	No disposal operation occurred during the reporting period. Disposal cell sites are 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 the reporting period	No disposal operation occurred during the 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 DHW 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.

An updated IWDF EHSQMS has been developed and reviewed against the requirements of the relevant proponent commitments outlined in Schedule 2 of Ministerial Statement 562 (MS562) by the DWER and confirmed by the DWER as meeting the requirements on 9 June 2026.

4.2 Management Manuals and Procedures

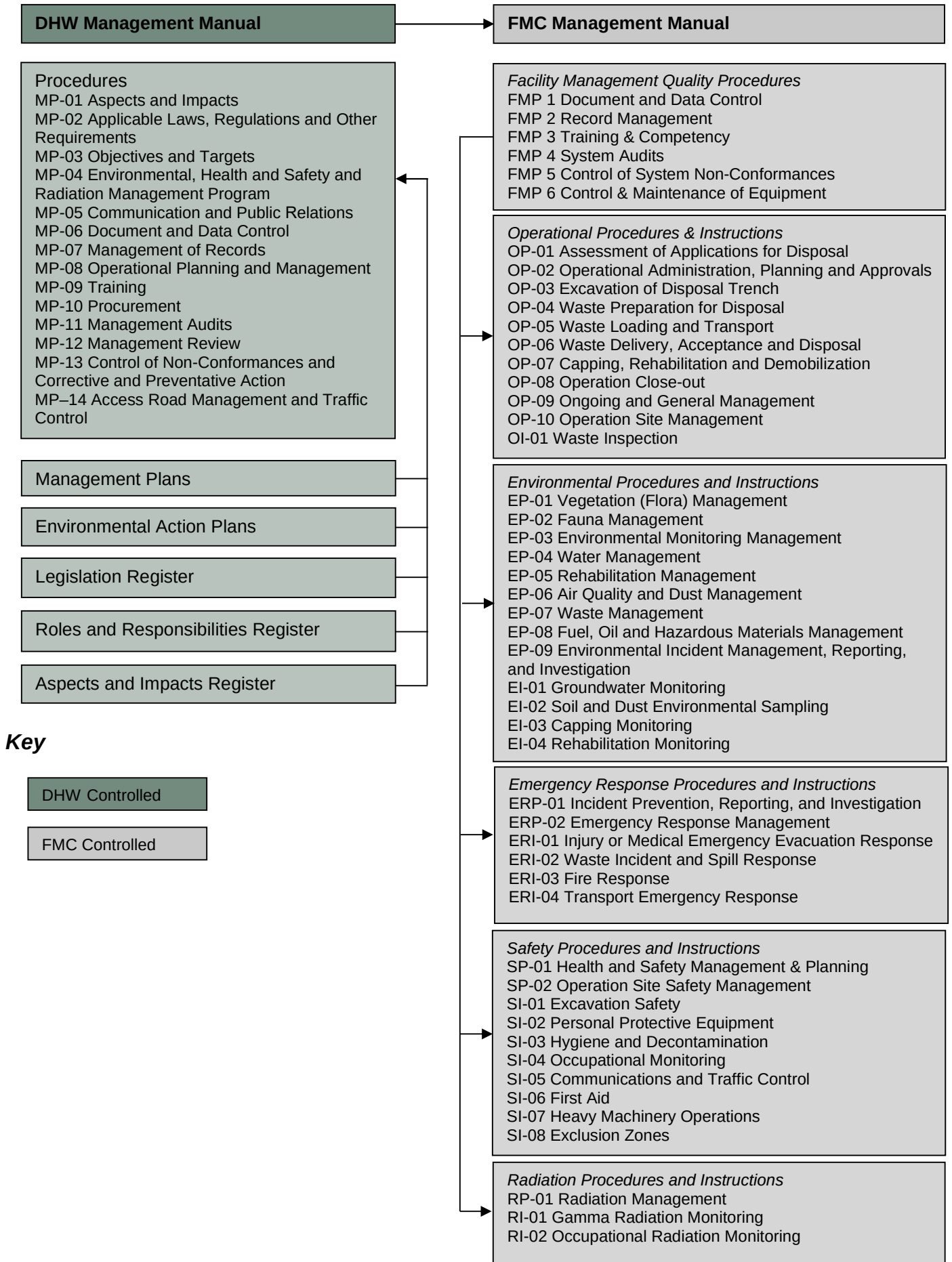
There are two management manuals which contain essential information about the management of the IWDF and provide an overview of the systems; these two manuals are provided as Appendix P and are described below.

DHW'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 DHW's system.

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

FIGURE 3 IWDF EHSQMS MANUALS, PROCEDURES STRUCTURE AND RELATIONSHIP



4.2.1 DHW Management System Compliance Audit

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

No non-compliances were recorded for the reporting period.

Table 6
DHW Environmental, Health and Safety and Quality Management System 2025 – 2026 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 2025 - 2026 register which was reviewed and modified in May 2026.
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 2026 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 2026. See Appendix Q, Revision 6.
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.	In compliance	The register was compiled in 2000 but is reviewed annually. 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 initially. However, for each disposal operation a legal agreement is produced to ensure all parties undertake their legal obligations.
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 December 2025. See Appendix R, Revision 4.
4.3	The FMC Project Manager shall consult the following sources during this review: - Government Gazette - Australasian Legal Information Institute (Austlii) for	In compliance	Review of IWDF Document Library demonstrated that legislation updates were retrieved from all available sources.

Section	Requirement	Status	Evidence / Comment
	- Commonwealth Legislation - Western Australian Legislation.		
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.
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 2026 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 DHW: - 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 DHW 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

Section	Requirement	Status	Evidence / Comment
			management objectives. See Appendix E for Management Plans.
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 2025 – 2026 Action Plans.
4.3.2	Improvement targets are detailed in the action plans.	In compliance	See Appendix T for 2025 – 2026 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 2025 – 2026 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 16 December 2025, and 19 June 2026. 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 16 December 2025 and 19 June 2026. 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 DHW 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	No complaints were received in this reporting period. See Appendix H.
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 DHW'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 DHW documents have been managed as specified in the Document Control Matrix.
4.3	Controlled documents have been registered on the DHW Records Management System.	In compliance	All controlled documents are registered on the DHW Records Management System.
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

Section	Requirement	Status	Evidence / Comment
			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 DHW server and are saved to DHW's Records Management System.
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 DHW corporate recordkeeping	In compliance	The DHW IWDF Project Director confirmed that critical correspondence is included in the DHW Records Management System.

Section	Requirement	Status	Evidence / Comment
	system. The following meta data will be captured within the electronic record: • Date; • Received by; and • File number.		
4.2.2	All critical, outgoing correspondence (including letters, critical emails, faxes, and documents) shall be entered onto the DHW corporate recordkeeping system database. At a minimum, the following information shall be recorded in the DHW corporate recordkeeping system: • Recipient details; • File number; • Author; • Subject; and • Date sent. A unique DHW 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.
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 DHW Records Management System IWDF file.	In compliance	The DHW Project Director has verbally confirmed that communications are appropriately stored.

Section	Requirement	Status	Evidence / Comment
	All IWDF files will then be stored in accordance with the Department of Housing and Works Record Keeping Policy.		
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 DHW 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 DHW 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 Housing and Works Retention and Disposal Schedule (approved by State Records Commission in April 2025) which includes all appropriate IWDF documents. See Appendix J for extract of IWDF records from R&D Schedule.
4.4.2	Archiving Schedule The Department of Housing and Works Retention and Disposal Schedule has been developed based on 4.4.1 and details the types of documents which must be retained.	In compliance	The Department of Housing and Works Retention and Disposal Schedule (approved by State Records Commission in April 2025) includes all appropriate IWDF documents. The DHW IWDF Project Director confirmed that the relevant IWDF content in the R&D schedule is

Section	Requirement	Status	Evidence / Comment
	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.		reviewed annually. See Appendix J for extract detailing IWDF records from R&D Schedule. See Appendix S MRM Minutes December 2025 Section 4.8 and June 2026 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 DHW IWDF Project Director and shall be in accordance with DHW procedures and documented in the State Records Commission approved Retention and Disposal Schedule.	In compliance	The Department of Housing and Works Retention and Disposal Schedule (approved by State Records Commission in April 2025) 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 Housing and Works 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 <i>State Records Act 2000</i>. Both the RC and DHW have legislated government archiving requirements under the <i>State Records Act 2000</i> 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 DHW.

Section	Requirement	Status	Evidence / Comment
4.4.5	Legal Deposit DHW is required to comply with the <i>Legal Deposit Act 2012</i> 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 2024-2025 PCR was submitted to the State Library on 15 October 2025.
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 two potential waste disposers during the reporting period. All other enquiries were only seeking to price check or ascertain if the IWDF was still operational.
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.

Section	Requirement	Status	Evidence / Comment
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 DWER 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 2025 and May 2026 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.
5.4	Waste Loading and Transport An inspection of the waste loading process has been completed. Where, under the contract, DHW undertakes the transport of waste, then the FMC shall organise transporters, develop the transport procedures,	N/A	No disposal operation occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
	and driver training, in accordance with Operational Procedure OP-05 Waste Loading and Transport.		
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 DWER.	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 waste disposers and made publicly available.	N/A	No disposal operation occurred during the reporting period.
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 Housing and Works Retention and Disposal Schedule (approved April 2025), a copy of the 2024 – 2025 PCR has been retained for archiving.

Section	Requirement	Status	Evidence / Comment
5.8.1	Ongoing Management The IWDF access road has been inspected every six months.	In compliance	Access road inspection occurred October 2025, and May 2026. See Appendix V for road inspection records.
5.8.2	Reports on the condition of the access road have been completed and forwarded to DHW.	In compliance	Access road inspection occurred October 2025, and May 2026 and were forwarded to DHW 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 2025 and May 2026. 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.
5.8.4	An IWDF Annual Community Meeting has been held.	In compliance	An IACM was held on 16 October 2025, which was held within one year of the approval date of the s.45C (20 October 2024) as the s.45C required an annual meeting to be held. See Appendix M for IACM agenda.
5.8.5	A representative of DHW shall attend the meeting and act as the Chairperson. A representative of the FMC shall attend the meeting.	In compliance	A DHW representative attended the IACM and acted as chairperson. A representative of the FMC attended the IACM and provided the information as indicated in Appendix M which also includes attendance information.

Section	Requirement	Status	Evidence / Comment
Procedure: MP-09 Training			
4.2	New Employee Induction All new DHW 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	One employee new to the IWDF project was inducted during the reporting period.
4.3	Identification of Training Requirements A competency plan has been developed for each position	In compliance	DHW undertakes Professional Development Plan assessments with staff three times every twelve months, which 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.
4.3	Prior to visiting the IWDF DHW personnel must complete the General Safety Induction as required by FMC Procedure FMP – 03.	In compliance	The auditor noted that two visitors to the site from DHW on 5 May 2026 had completed the General Safety

Section	Requirement	Status	Evidence / Comment
			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	DHW 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 DHW 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	DHW 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 (although it has been reorganized and subsequently was approved in June 2026) and no DHW contractors (other than the FMC) required an understanding of the IWDF Management System during the reporting period. However, four people attended the site with the FMC, one conducted test and tag work and three were auditors from the DWER. These people were provided a site introduction and directly supervised by the FMC on site, ensuring their safety and 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 there was one addition to the register for the reporting period.

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 DHW 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 DHW IWDF Project Director. For procurements valued less than \$50,000 including GST, conflicts of interest must be declared, on presentation of quotes to the DHW 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 DHW 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 DHW 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.

Section	Requirement	Status	Evidence / Comment								
7.1	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.	In compliance	Documentation has been sighted by the auditor showing that DHW and the FMC have followed and documented the appropriate steps to identify goods and services requirements.								
7.2	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.	Monetary Value	Minimum Competitive Requirements	Up to \$50,000	Direct sourcing	Between \$50,000 and \$250,000	Limited sourcing	Above \$250,000	Open advertisement	In compliance	Documentation has been sighted by the auditor showing that DHW and the FMC have met the minimum competitive requirements and kept the appropriate documentation.
Monetary Value	Minimum Competitive Requirements										
Up to \$50,000	Direct sourcing										
Between \$50,000 and \$250,000	Limited sourcing										
Above \$250,000	Open advertisement										

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 DHW 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 DHW 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 DHW 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 DHW 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.
7.7	Managing Contracts	In compliance	The FMC performance against the Contract Management Plan is provided at the MRMs. See Appendix S Section 15.2 in MRMs 23 and 24.

Section	Requirement	Status	Evidence / Comment
	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 DHW 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.		There was one short-term contract for Forrest Electrical to undertake test and tag onsite.
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 2025 and updated April 2026. See Appendix W.

Section	Requirement	Status	Evidence / Comment
4.3	Audit Planning		
4.3.1	Defining the Scope All audits on the DHW 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 23 and 24.
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.
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 23 and 24. See Appendix S.
4.4.1	The audit report has been forwarded to the DHW 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, System Audits. Following the preparation of an audit report the IWDF DHW Project Director shall meet with the FMC and their audit team to discuss the findings of the audit report. DHW will also undertake a regular review of the FMC performance. DHW 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. DHW 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 DWER 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 16 December 2025 and 19 June 2026. See Appendix S for MRM Meeting Minutes.

Section	Requirement	Status	Evidence / Comment
4.1	Personnel required to attend the meeting are: • IWDF Project Director – DHW; • IWDF Project Director – FMC; • IWDF Contract Manager – DHW; • IWDF Project Manager – FMC; and • IWDF Radiation Safety Officer (if needed).	In compliance	All roles were present at the December 2025 MRM except the RSO, who was unavailable. For the June 2026 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 meetings. See Appendix S for MRM Minutes detailing attendance.
4.2	Review Preparation The agenda and relevant background information was provided to all personnel prior to the Management Review Meeting.	In compliance	Agendas were provided, via email, to the Management Team on 9 December 2025 and 18 June 2026. See Appendix X for Meeting Agendas.
4.3	Issues to be Considered Management review meetings have addressed the suitability of DHW's 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; ▪ Continual improvement;	In compliance	See Appendix X for MRM Meeting Agendas.

Section	Requirement	Status	Evidence / Comment
	• 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.
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.

Section	Requirement	Status	Evidence / Comment
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 DHW IWDF Project Director.	N/A	There have been no new non-conformances in this reporting period.
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	There have been no new non-conformances in this reporting period. See Appendix S for MRM Minutes.
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 DHW IWDF Project Director.	N/A	No suggestion sheets were forwarded to the DHW IWDF Project Director.
4.4	Suggestion sheets have been reviewed and valid changes implemented.	N/A	No suggestion sheets were forwarded to the DHW 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 DHW IWDF Project Director.

Section	Requirement	Status	Evidence / Comment
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 2025 to June 2026 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 2025 – 2026 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 DHW 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 DHW 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 DHW. 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 DHW, 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 <i>Waste Acceptance Proforma and Packaging & Transport Proforma</i> 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 <i>Waste Inspection</i>).	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 DHW. 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 DHW.	In compliance	Where applicable, after discussion with DHW, 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 <i>Record Management</i>.) Assessment results shall be provided to DHW upon request. These may be incorporated into the <i>Operation Environmental and Waste Acceptance Procedures</i>.	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 DHW in accordance with the DHW cost codes. The FMC PM shall inform relevant subcontractors of the cost codes required by DHW.	In compliance	IWDF FMC task summary and cost projection, against agreed cost codes, for July 2026 – June 2027, was provided to DHW on 22 June 2026 and approved on 29 July 2026.

Section	Requirement	Status	Evidence / Comment
5.2	Tendering Upon request by DHW, 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 DHW, 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 AED at site was replaced in May 2026. Forrest Electrical undertook test and tagging in May 2026 and five fire extinguishers were removed in May 2026 to be tested and then returned at next visit if passed.
5.4	Community Liaison An IWDF Annual Community Meeting (IACM) shall be held once a year. A representative of DHW shall attend the meeting and act as the Chairperson. A representative of the FMC shall also attend the meeting.	In compliance	An IACM was held on the 16 October 2025 which satisfied the requirement of it being held within one year of the approval date of the s.45C (20 October 2024). The meeting was advertised and open to members of the public. A copy of the agenda sent on 9 October 2025 is given in Appendix M.
5.5	Update of Legislation The FMC Project Manager shall ensure that necessary legislative updates are incorporated into subsequent IWDF documentation, in accordance with DHW MP-02 <i>Applicable Laws, Regulations and Other Requirements</i> .	In compliance	The IWDF Legal Register was reviewed and updated in December 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 DHW 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 2025 and June 2026. 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 DHW. Site visits shall coincide with monitoring and maintenance requirements (see below), as a minimum. Site visits shall be recorded using a <i>Site Visit Checklist</i>, (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. 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 <i>monitoring schedule</i>. Monitoring (generally six-monthly) may include: • Groundwater monitoring (Environmental Procedure <i>EP-03 Environmental Monitoring Management</i> and Instruction <i>EI-01 Groundwater Monitoring</i>); • Radiological monitoring (Radiation Procedure <i>RP-01 Radiation Management</i> and Instruction <i>RI-01 Gamma Radiation Monitoring</i>); • Trench capping monitoring (Environmental Instruction <i>EI-03 Capping Monitoring</i>); and • Rehabilitation monitoring (Environmental Procedure <i>EP-05 Rehabilitation Management</i> and Instruction <i>EI-04 Rehabilitation Monitoring</i>).	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.
5.10	Site Investigations	In compliance	Review of available data and interview with the FMC Operations Manager confirmed

Section	Requirement	Status	Evidence / Comment
	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 DHW for further investigation.		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-40 and 42) at the IWDF undergo regular maintenance, in accordance with FMC Management Procedure <i>FMP-06 – Control and Maintenance of Equipment</i>. Equipment maintenance shall be recorded using IWDF-Form 40. The Operations Manager shall ensure that sufficient water, fuel, and food supplies are maintained at the site. The Operations Manager shall maintain a <i>Dangerous Goods Storage Record</i> 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 <i>Dangerous Goods Storage Records</i> for October 2025 and May 2026 (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 <i>FMP-02 – Record Management</i>). The FMC Project Manager shall ensure that results of all environmental and other monitoring are forwarded to DHW within one month of the monitoring event. All results are also included in the annual PCR. Letters or records shall be submitted to DHW detailing recommendations for additional investigations or site activities.	In compliance	Monitoring records were provided to DHW 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 Housing and Works policies for the IWDF and DHW Management Procedure <i>MP-06 Document & Data Control</i> .			
5.1	DHW Document Control Requirements DHW document control requirements are outlined in <i>DHW-MP-06 – Document and Data Control</i> . The FMC Systems Manager shall ensure that all DHW controlled documents, as defined in the <i>IWDF Document Control Matrix</i> (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 DHW 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 <i>FMC IWDF Document Control Matrix</i> . 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 DHW 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 <i>FMC IWDF Document Register</i> (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 <u>may</u> 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 DHW. 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 DHW shall be distributed as outlined in the <i>IWDF Document Control Matrix</i>.	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 <i>IWDF Document Control Matrix</i>. 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 <i>System Corrective Action Request</i>, 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 DHW, as shown in the <i>IWDF Document Control Matrix</i>. 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 DHW IWDF Project Director before they are provided to DHW. 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 <i>FMP-02 Record Management</i> .	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 Housing and Works policies for the IWDF and the DHW 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	DHW Record Control Requirements DHW record management requirements are outlined in <i>DHW-MP-07 – Management of Records</i>. Procedures for identifying records for retention, and their storage requirements, shall be adhered to, as defined in <i>DHW-MP-07 – Management of Records</i>. The Systems Manager shall ensure that all appropriate records are forwarded to DHW, as defined in the <i>DHW Archiving Schedule</i> (see MP-07).	In compliance	Review of monthly reports confirmed that all critical documents such as monitoring reports etc. were provided to DHW with the monthly reports. These reports were then recorded on the DHW Records Management System. All monitoring reports for the reporting period are also included in this PCR, which will be stored according to the DHW 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 <i>Document Register</i> (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 <i>Incoming Document Register</i> (IWDF-Form-23) and filed in a Project Correspondence File. All project-related outgoing correspondence shall be recorded on an <i>Outgoing Document Register</i> (IWDF-Form-24) and filed in the Project Correspondence File. 5.2.3 Chain of Custody A <i>Chain of Custody Record</i> (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 <i>Chain of Custody Register</i> (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 <i>IWDF Filing Index</i> (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 <i>IWDF Filing Index</i> (IWDF-Form-04 or equivalent), located in the FMC office. All site records that are not requested by the Systems Manager for forwarding to DHW for archiving, as defined in the <i>DHW Archiving Schedule</i> (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 DHW 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 DHW Policy statement for the IWDF Appendix M. 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 DHW (or delegate) is responsible for training FMC personnel involved in IWDF activities in the implementation of the DHW Policy, Manual and relevant DHW 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 <i>Competency Matrix</i> will identify the training requirements for all FMC personnel. This matrix will be used to undertake analysis of ongoing training needs. A <i>training schedule</i> 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 (<i>General Safety Induction, IWDF-Form-32</i>) 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 <i>Management System Induction Form (IWDF-Form-48)</i>, and if necessary (e.g., for large numbers of attendees), an <i>Attendance Sheet (IWDF-Form-25)</i>. The Systems Manager shall ensure that all FMC personnel are appropriately qualified and trained for their activities. Qualifications shall be recorded on a <i>Competency Plan for each FMC employee (IWDF-Form-12a)</i>.		Review of the IWDF Training Register showed there had been one new person (Scott Duffy) to undertake a site visit on behalf of the FMC. He completed the general safety induction prior to undertaking the site visit.
5.2	On-site Operation-Specific Training 5.2.1 Responsibilities	N/A	No disposal operation occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
	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 (<i>General Safety Induction Form, IWDF-Form-32</i>) • Waste preparation, packaging, and handling activities (<i>Waste Handling Safety Induction Form, IWDF-Form-33</i>) • Transport of waste to the IWDF (<i>Transport Induction Form, IWDF-Form-37</i>). 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 (<i>IWDF Induction Handbooks</i>) to accompany this procedure (FMP-03). They will also be updated on an operation-specific basis and stored on Operation project files. Visitors and short-term personnel (such as maintenance contractors) shall undergo specifically tailored training (<i>IWDF-Form-32</i>).		

Section	Requirement	Status	Evidence / Comment
	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 <i>Competency Matrix</i> will be developed to identify the training requirements for all FMC personnel and contractors. An <i>Operation Training Schedule</i> 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. 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 <i>Attendance Record (IWDF-Form-25)</i>. Competency tests shall be undertaken as part of all inductions to ensure that the induction has been effective.		

Section	Requirement	Status	Evidence / Comment
	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 <i>Operational Training Register (IWDF-Form-12b)</i>. 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 <i>System Audits</i>, and Safety Procedure SP-02 <i>Operation Site Safety Management</i>.		
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 DHW 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 DHW: • Level of implementation of the procedures • Effectiveness of the procedures • Maintenance of the procedures • Conformance with the requirements of the DHW Management System • Performance & compliance against Ministerial Conditions and Commitments.	In compliance	All applicable elements of the IWDF Management System were audited during this reporting period. See Appendix W for audit schedule.
5.2	Audit Frequency/Schedule	In compliance	See Appendix W for audit schedule.

Section	Requirement	Status	Evidence / Comment
	The scheduling of audits shall be determined by the FMC Project Manager and the FMC Systems Manager. This may be done using an <i>Audit Schedule</i> 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. DHW 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.		
5.3	Audit Scope The basic scope of system audits shall be defined in a <i>System Audit Checklist</i>. 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.
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.

Section	Requirement	Status	Evidence / Comment
5.5	Audit Reporting and Follow-up Audits shall be recorded on the <i>Audit Register (IWDF-Form-49)</i>. Non-conformances shall be recorded using <i>System Corrective Action Requests (CAR)</i> (IWDF-Form-10). Audit findings shall be documented in an <i>Audit Report</i> 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 DHW objectives and targets. A draft of the report shall be forwarded to the FMC Project Manager for review, prior to submission to DHW. A meeting shall then be held between the DHW 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 2026. This audit table comprises report results for this reporting period. Audit findings were provided to DHW as part of the draft PCR for the reporting period.
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.

Section	Requirement	Status	Evidence / Comment
6.	Records The FMC Systems Manager and auditor shall ensure that all system audit records are filed in accordance with FMP-02 <i>Record Management</i> .	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 DHW upon request.	In compliance	DHW 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. 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 <i>ERP-01 Incident Prevention, Reporting and Investigation</i> .	N/A	No new non-conformances were identified during the reporting period.

Section	Requirement	Status	Evidence / Comment
5.2	Reporting of System Non-Conformances When a system non-conformance is identified a <i>System Corrective Action Request</i> (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 <i>System CAR Register</i> (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 <i>Document and Data Control</i>.	N/A	No IWDF FMC system non-compliances were identified during reporting period.
5.4	Management Review All CARs and their implementation shall be reported at IWDF Management Review Meetings, in accordance with DHW Management Procedure MP-12 <i>Management Review</i>.	In compliance	No new non-compliances were identified during the reporting period.

Section	Requirement	Status	Evidence / Comment
6.	Records The FMC Systems Manager shall ensure that all records are filed in accordance FMP-02 <i>Record Management</i> .	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 DHW upon request and are discussed at IWDF Management Review meetings.	In compliance	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 <i>Equipment Maintenance and Calibration List</i> (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.	In compliance	Equipment Maintenance and Calibration List (IWDF-Form-40) were completed prior to the use of water monitoring equipment during October 2025 and May 2026 water monitoring events.

Section	Requirement	Status	Evidence / Comment
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 DHW, or the FMC, shall be calibrated by the user of the equipment. The calibration method and history of each piece of equipment shall be recorded using the <i>Equipment Maintenance and Calibration List</i> (IWDF-Form-40). 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 2025 and May 2026 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 <i>Control of System Non-Conformances</i>.	N/A	Interview with Operations Manager and a review of documentation confirmed that no equipment failed calibration/checking.
5.4	Other Equipment Maintenance All equipment shall be maintained to ensure a safe working environment. The Operations Manager shall ensure that DHW- or FMC-owned equipment used in IWDF activities, and that requires maintenance, is recorded on the <i>Equipment Maintenance and Calibration List</i> (IWDF-Form-40). Separate lists may be produced on an operation-specific basis.	In compliance	Equipment Maintenance and Calibration List (IWDF-Form-40) were completed prior to the use of water monitoring equipment during October 2025 and May 2026 water monitoring events.

Section	Requirement	Status	Evidence / Comment
	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 the <i>Equipment Maintenance and Calibration List</i> (IWDF-Form-40). Records provided by a maintenance contractor should be attached to this list. The maintenance of contractor-owned equipment shall be the responsibility of the contractor.		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 <i>Record Management</i> .	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 DHW upon request.	In compliance	The Operations Manager was the primary user of the monitoring equipment during the reporting period. DHW 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.			

Section	Requirement	Status	Evidence / Comment
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 DHW, 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.
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: • Firebreaks – these are exempt under the <i>Environmental Protection (Clearing of Native Vegetation) Regulations 2004</i> as they are required by another law, the <i>Bush Fires Act 1954</i> • New disposal trenches and surrounding areas required for vehicle access • Other areas of development as approved by the Operations Manager.	N/A	No clearing occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
	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 as part of the continual Management System Review. No clearing occurred during the reporting period.
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.	In compliance	Weed Identification Kit was reviewed October 2025. It was reviewed again in June 2026 as part of the on-going Management System Review.

Section	Requirement	Status	Evidence / Comment
	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).		
5.5	Rehabilitation Management of rehabilitation of cleared areas is detailed in Environmental Procedure <i>EP-05 Rehabilitation Management</i> .	In compliance	See Appendix N for October rehabilitation monitoring.
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 <i>EP-06 Air Quality and Dust Management</i> .	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 <i>FMC Management Procedure FMP-02 Record Management</i>).	N/A	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 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 <i>EP-09 Environmental Incident Management, Reporting, and Investigation</i> . 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.

Section	Requirement	Status	Evidence / Comment
6.2	External Reporting Vegetation management shall be reported to DHW, upon their request.	In compliance	DHW 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.
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.	N/A	No clearing occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
	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.		
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 <i>EP-09 Environmental Incident Management, Reporting, and Investigation</i>	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.
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.

Section	Requirement	Status	Evidence / Comment
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 <i>EP-07 Waste Management</i> . 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 <i>EP-05 Rehabilitation Management</i> .	In compliance	See Appendix N for October rehabilitation monitoring.
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 <i>EP-06 Air Quality and Dust Management</i> .	N/A	No disposal operation occurred during the reporting period.

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 <i>FMC Management Procedure FMP-02 Record Management</i>).	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 <i>EP-09 Environmental Incident Management</i> . 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 DHW upon their request.	In compliance	DHW confirmed that all requested management reports were provided in a timeframe agreed upon with the FMC.
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 <i>schedules</i> . The FMC Project Manager and Environment Manager shall ensure that monitoring undertaken by the FMC is undertaken in accordance with the DHW schedules.	In compliance	Monitoring records verify that all monitoring required during the reporting period was undertaken according to the schedule.

Section	Requirement	Status	Evidence / Comment
	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 <i>Environmental Instruction EI-01</i>. 5.2.2 Radiation Monitoring Procedures for ongoing radiation monitoring are given in <i>Radiation Instruction RI-01</i>. Ongoing environmental gamma radiation monitoring will be undertaken every 5 years.		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.

Section	Requirement	Status	Evidence / Comment
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 <i>Environmental Instruction EI-01</i>. 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 <i>Radiation Instruction RI-01</i>. 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 <i>Environmental Instruction EI-02</i> with reference to the <i>Operation Environmental and Waste Acceptance Procedures (OEWPs)</i> 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 <i>Environmental Instruction EI-02</i> with reference to the <i>Operation Environmental and Waste Acceptance Procedures (OEWPs)</i> 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 <i>Environmental Instructions EI-01, 02 and Radiation Instruction RI-01</i> with reference to the <i>Operation Environmental and Waste Acceptance Procedures (OEWP)</i> 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 <i>FMC Management Procedure FMP-06 Control and Maintenance of Equipment</i> .	In compliance	Equipment Maintenance and Calibration List (IWDF-40) were completed prior to the use of water monitoring equipment during October 2025 and May 2026 water monitoring events.
5.6	Review of Monitoring Program The monitoring program shall be reviewed twice yearly, as part of the DHW Management Review Meetings (DHW 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 <i>FMC Management Procedure FMP-02 Record Management</i>). 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 DHW Project Manager within 14 days of monitoring (or within 14 days of receipt of monitoring results). If abnormalities or exceedances are identified, the DHW Project Manager shall be informed as soon as practicable. Monitoring results shall be reported in the <i>Performance & Compliance Report</i> .	In compliance	All monitoring results were provided to DHW 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 DHW 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.
5.3	Operation Weather Reporting and Surface Water Management	N/A	No disposal operation occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
	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).		

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 <i>FMC Management Procedure FMP-02 Record Management</i>). 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 <i>Construction Specifications (CS)</i>.	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 <i>in situ</i> 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. 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 <i>Operation Construction Specifications (CS)</i>.	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.
5.5	Monitoring of Rehabilitation	In compliance	See Appendix N for records of October 2025 rehabilitation monitoring.

Section	Requirement	Status	Evidence / Comment
	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 <i>Environmental Instruction EI-04, Rehabilitation Monitoring</i> .		
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 DHW.	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 <i>FMC Management Procedure FMP-02 Record Management</i>). 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.
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.			

Section	Requirement	Status	Evidence / Comment
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.
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. Due for re-check in April 2027.

Section	Requirement	Status	Evidence / Comment
5.3	Storage and Disposal of Fuel and Waste Oil Management of hydrocarbons (fuels and oils) is detailed in Environmental Procedure <i>EP-08 Fuel, Oil & Hazardous Materials Management</i> .	In compliance	See Appendix Y for the October 2025 and May 2026 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 <i>FMC Management Procedure FMP-02 Record Management</i>). Waste management shall be reported to DHW, upon their request.	In compliance	See Appendix Y for the October 2025 and May 2026 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 <i>Dangerous Goods Safety (Storage and Handling of Non-explosives) Regulations 2007</i> 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 <i>Dangerous Goods Safety (Storage and Handling of non-explosives) Regulations 2007 and AS 1940:2017</i>. An inventory of dangerous goods stored at the site shall be maintained, using <i>IWDF-Form-51 Dangerous Goods Storage Record</i>. This record shall be updated upon delivery of fuels and oils, and at the beginning and end of each disposal operation.	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. The FMC Operations Manager verified that Safety Data Sheets (SDSs) were

Section	Requirement	Status	Evidence / Comment
	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 <i>Safety Data Sheets (SDS)</i> for all fuels, oils and other hazardous materials are available at the site office.		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 <i>Safety Data Sheets (SDS)</i> 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 <i>ERP-01 Incident Prevention, Reporting and Investigation</i> and <i>ERI-02 Waste/Spill Incident Response Procedures</i>. 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 <i>Safety Data Sheets (SDS)</i> 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 <i>FMC Management Procedure FMP-02 Record Management</i>). Fuel and oil management shall be reported to DHW, upon their request. Spills shall be reported in accordance with Environmental Procedure <i>ERP-01 Incident Prevention, Reporting and Investigation</i>	In compliance	See Appendix Y for the October 2025 and May 2026 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 <i>Sampling/Groundwater Monitoring Record Form</i> (IWDF-Form-03b).	In compliance	See Figure 4 of this PCR for appropriately named monitoring locations and Appendix F for groundwater monitoring records.
5.2	Monitoring Locations	In compliance	See Figure 4 of this PCR.

Section	Requirement	Status	Evidence / Comment
	The monitoring bore locations are recorded on a <i>Monitoring Location Figure</i> , which shall be updated as new locations are added.		
5.3	Monitoring Schedule The FMC Project Manager shall coordinate all groundwater monitoring through yearly monitoring <i>schedules</i>. 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 <i>Monitoring Register IWDF-Form-39</i>.	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 <i>FMC Management Procedure FMP-06 Control and Maintenance of Equipment</i>. 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 <i>Sampling/Groundwater Monitoring Record Form</i> (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 <i>Sampling/Groundwater Monitoring Record Form</i> (IWDF-Form-03b). If water is present: - The water level shall be measured and reported on the <i>Sampling/Groundwater Monitoring Record Form</i> (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 <i>Chain of Custody Record</i> (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 <i>IWDF-Form-21 Groundwater Analysis Register</i> which is held by the FMC Environment Manager. The water analyses shall be interpreted using the relevant values from the <i>Department of Water and Environmental Regulation Contaminated Site Assessment Criteria</i> or as otherwise determined by the Environment Manager or Radiation Safety Officer, or in the <i>Operation Environmental and Waste Acceptance Procedures</i>. If any components are detected above recognised background (or previous monitoring) concentrations, DHW 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 <i>FMC Management Procedure FMP-02 Record Management</i>. Copies of all Sampling/Groundwater Monitoring Record Forms shall be provided to the DHW 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 DHW 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 DHW Project Manager within 14 days of monitoring (or within 14 days of receipt of monitoring results). If abnormalities or exceedances are identified, the DHW Project Manager shall be informed as soon as practicable. Monitoring results shall be reported in the <i>Performance and Compliance Report</i>.	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 <i>Capping Monitoring Record Form</i> (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 <i>Monitoring Location Figure</i>, 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 <i>FMC Management Procedure FMP-02 Record Management</i>). 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 DHW Project Manager shall be informed as soon as practicable. Monitoring results shall be reported annually in the <i>Performance and Compliance Report</i>.	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 DHW 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 <i>Rehabilitation Monitoring Record Form</i> (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 2025. Botanist deemed the revegetation/rehabilitation of all pre-2008 cells to be complete and no longer requiring monitoring. Next inspection 2034.
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 reseeded.	In compliance	Rehabilitation monitoring results for 2025 have been reviewed and compared with previous results. It was concluded that the rehabilitation is progressing well.
6.	Records and Reporting Records of monitoring activities shall be documented and placed on file (as per <i>FMC Management Procedure FMP-02 Record Management</i>). 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 DHW Project Manager within 14 days of receipt of monitoring results. If abnormalities or exceedances are identified DHW shall be informed as soon as practicable. Monitoring results shall be reported annually in the <i>Performance and Compliance Report</i>.	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 DHW 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 <i>Assessment of Applications for Disposal</i>. 5.2.2 On receipt of a general query, DHW 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) DHW/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 DHW. 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 <i>Gamma Radiation Monitoring</i>. 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 <i>Record Management</i>). Radiation management issues shall be reported to the FMC Project Manager & DHW, 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 <i>Control and Maintenance of Equipment</i>. 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 ($\mu\text{Gy/h}$) 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 $\mu\text{Gy/h}$), 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 <i>Gamma Radiation Monitoring Form</i>. 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 $\mu\text{Gy/h}$ 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 $\mu\text{Gy/h}$), 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. Results shall be recorded on the <i>Gamma Radiation Monitoring Form</i>. The means of 3 (three) one-minute counts are to be recorded at each location.	In compliance	Gamma radiation monitoring was completed in the 2022 reporting period and will be undertaken again in 2027.

Section	Requirement	Status	Evidence / Comment
	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 $\mu\text{Gy/h}$ 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 $\mu\text{Gy/h}$), 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 <i>FMP-02 Record Management</i>.	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 DHW Project Manager. The RSO on behalf of the Department of Housing and Works 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 <i>Personal (Worker) Radiation Monitoring Form – PRM5</i>, and <i>Personal (Public) Radiation Monitoring Form – PRM6</i>. 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 DHW 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 2026 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 2026 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 <i>Personal Protective Equipment</i>). • Engagement of a site nurse/paramedic or senior first aid officer (see Safety Instruction SI-06 <i>First Aid</i>). 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 <i>Occupational Monitoring</i>).	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 <i>Radiation Management</i>). - Selection and purchase of applicable PPE (see Safety Instruction SI-02 <i>Personal Protective Equipment</i>).		
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 <i>FMP-02 Record Management</i>). Operation documents shall be compiled, reviewed, and reported as outlined in Section 5.2 of FMC Management Procedure <i>FMP-01 Document and Data Control</i>. Health and safety management issues shall be reported to DHW 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. Starlink was used during the reporting period supporting site data connection.

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 <i>Operation Emergency Contact numbers</i> 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.		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 <i>FMP-02 Record Management</i>. 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 (<i>OPs, EPs, SPs, ERPs</i>).		General information.
5.3	Emergency Response Emergency Response Procedures shall be implemented for major incidents in accordance with <i>ERP-02 Emergency Response Management</i>.	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 <i>Near Miss/Accident/Incident/Exposure Report (IWDF-Form-06)</i> which shall be completed and registered (<i>IWDF Form-07</i>). Copies of all incident/accident reports shall be forwarded to the FMC and DHW 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 DHW 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 DHW within 7 days of the emergency, or as agreed with DHW. 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 DHW IWDF Project Director shall provide a copy to WorkSafe Western Australia if notifiable injuries had been incurred, under the <i>Work Health and Safety Act 2020</i> and associated Regulations.		
5.6	Corrective and Preventative Actions Corrective actions shall be identified and implemented to prevent recurrence of the	In compliance	No new non-conformances were identified during the reporting period.

Section	Requirement	Status	Evidence / Comment
	incident. Corrective and Preventative actions shall be documented on the <i>Near Miss/Incident/Accident/Exposure Report (IWDF-Form-06)</i> , and on a CAR (for system or procedural actions, IWDF-Form-10).		
6.	Records and Reporting Incident reports shall be placed on file (as per <i>FMP-02 Record Management</i>). Incidents shall be reported in the <i>Annual Performance and Compliance Report</i> .	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 contacted from the portable satellite phone. The limitations of the vehicle should be considered in relation to emergency procedures requiring evacuation of injured personnel.	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
	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 <i>IWDF Emergency Contact List</i> document. Operation-specific contact details are compiled as part of the <i>Operation Transport Procedures</i> (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 <i>Transport Emergency Response</i>.	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 <i>Site Plan</i> 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 <i>State Personnel and Visitor Logbook</i>.	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 <i>Emergency Response Procedure Information Sheet</i>. 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 (<i>Emergency Procedure Information Sheets</i>). These emergency procedures are outlined in more detail in Emergency Response Instructions ERI-01, <i>Injury or Medical Emergency Evacuation Response</i>, ERI-02 <i>Waste Incident and Spill Response</i>, and ERI-03 <i>Fire Response</i>. 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.
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 <i>Incident Prevention, Reporting, and Investigation</i>.	N/A	No emergency incidents occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
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 DHW 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.
6.	Records and Reporting Emergencies shall be reported and recorded in accordance with ERP-01 <i>Incident Prevention, Reporting, and Investigation</i> .	N/A	No emergency incidents occurred during the reporting period.

Section	Requirement	Status	Evidence / Comment
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 2025 to June 2026

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.
		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 and 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 rehabilitation scenarios process and costs every 5 years. Latest review December 2023.	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
		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 Figure 3 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 2024 – 2025 PCR for Botanical Report.
		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.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
		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 2026).	In compliance	Priority flora identification kit was reviewed prior to the October 2025 monitoring event. However, no changes were required. Last reviewed June 2026.
		Weed identification kit to be regularly reviewed (to be reviewed October 2026).	In compliance	The Weed Management Plan and identification kit was reviewed in October 2025. However, no changes were required.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
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 <i>Work Health and Safety Act, 2020</i> (WHS Act), and accompanying regulations.	In compliance	The <i>Work Health and Safety Act 2020</i> (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 2026.
		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.
		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.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
		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 are not due for replacement now until 2029 or 2030. Fire extinguishers were also serviced (where necessary) in December 2025. 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.
		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.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
		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.
		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.
		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 <i>Radiation</i>	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
		<i>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.</i>		The IWDF Safety Case and associated Safety Assessments were approved on 24 December 2025, however audit is not required as no disposal operation took place in the reporting period.
		If waste is transported by the proponent, then compliance with the <i>Radiation Safety (Transport of Radioactive Substances) Regulations (2002), Code for the Safe Transport of Radioactive Material (ARPANSA RPS C-2 Rev.1 2019)</i> , and the <i>Code of Practice for the Safe Transport of Radioactive Material (ARPANSA RPS 2)</i> , 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.
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.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
		Waste shall be packaged, labelled, and transported in accordance with the OTP, as well as applicable dangerous goods and radioactive legislation. A DHW 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.
		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.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
		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 2025, and May 2026. 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.
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.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
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 DHW office in Perth.
		Respond efficiently to complaints and undertake appropriate corrective actions.	In compliance	No complaints were received during the reporting period.
		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	DHW 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 April 2025. See Appendix J.
		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	An IWDF Annual Community Meeting (IACM) was held on 16 October 2025, see Appendix M for agenda.
		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 16 December 2025 and 19 June 2026. See Appendix S for Minutes.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
		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.
		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 2024–2025 PCR was made available to the RC and the DWER (and the EPA through DWER) in September 2025. 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/departments-of-housing-and-works/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	No CARs were raised during the reporting period.
		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.

MP No	Title	Management Program Requirements	Compliance Status	Evidence / Comment / Suitability
				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 (DHW 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 DHW'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 2025 - 2026 reporting period are included as Appendix T.

4.4 IWDF Safety Assessments and Safety Case

The IWDF Safety Assessments and Safety Case were approved by the RC on the 24 December 2025.

The three documents that were approved were:

- 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 refers to the OSA, PCSA, supporting deterministic and probabilistic assessments and historical safety assessments for siting, design, and construction of the IWDF.

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 2025 rehabilitation monitoring showed that vegetation growth around the 2020NRT01 disposal cell continues to progress satisfactorily. Other areas are growing well to moderately well. See Appendix N for rehabilitation monitoring records.

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).

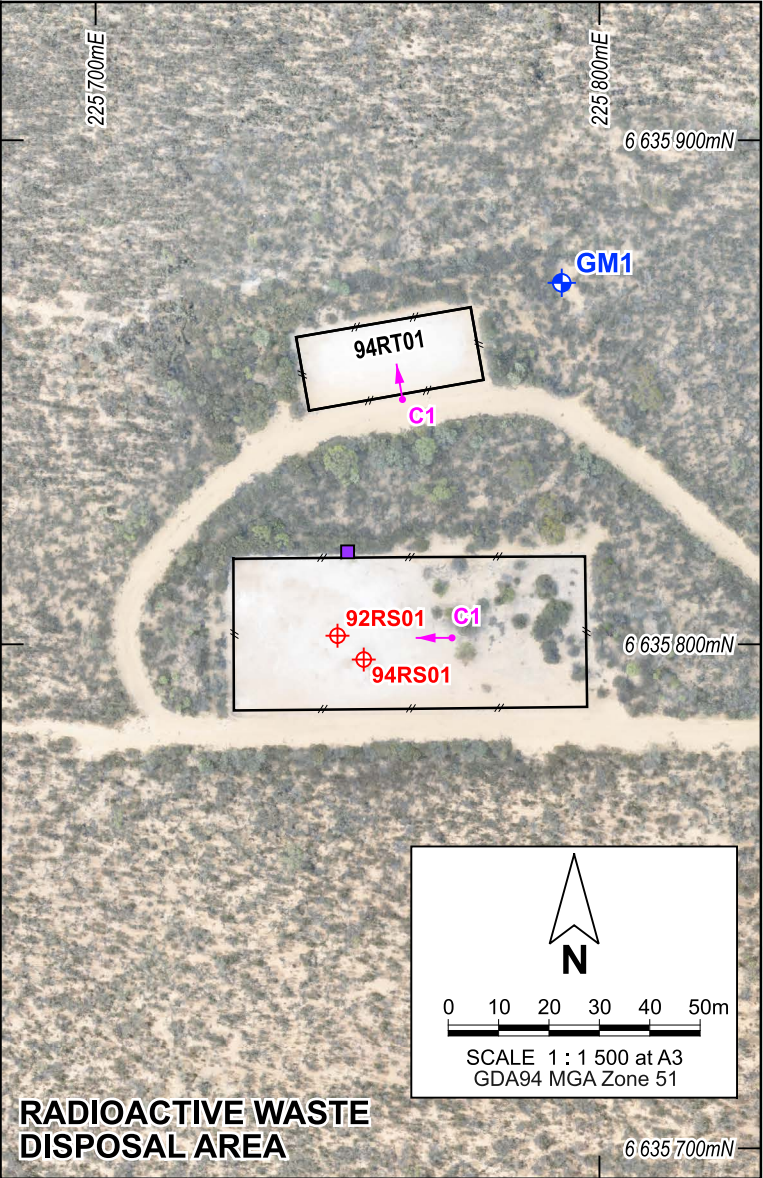
The most recent capping monitoring was completed in October 2025. No significant capping issues were reported. See Appendix O for Capping Monitoring Report.

5.3 Groundwater Monitoring

Groundwater monitoring was completed in October 2025 and May 2026. 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 2025, and May 2026 groundwater monitoring records are provided as Appendix F.

DFI-PP03939-trench layout.dgn
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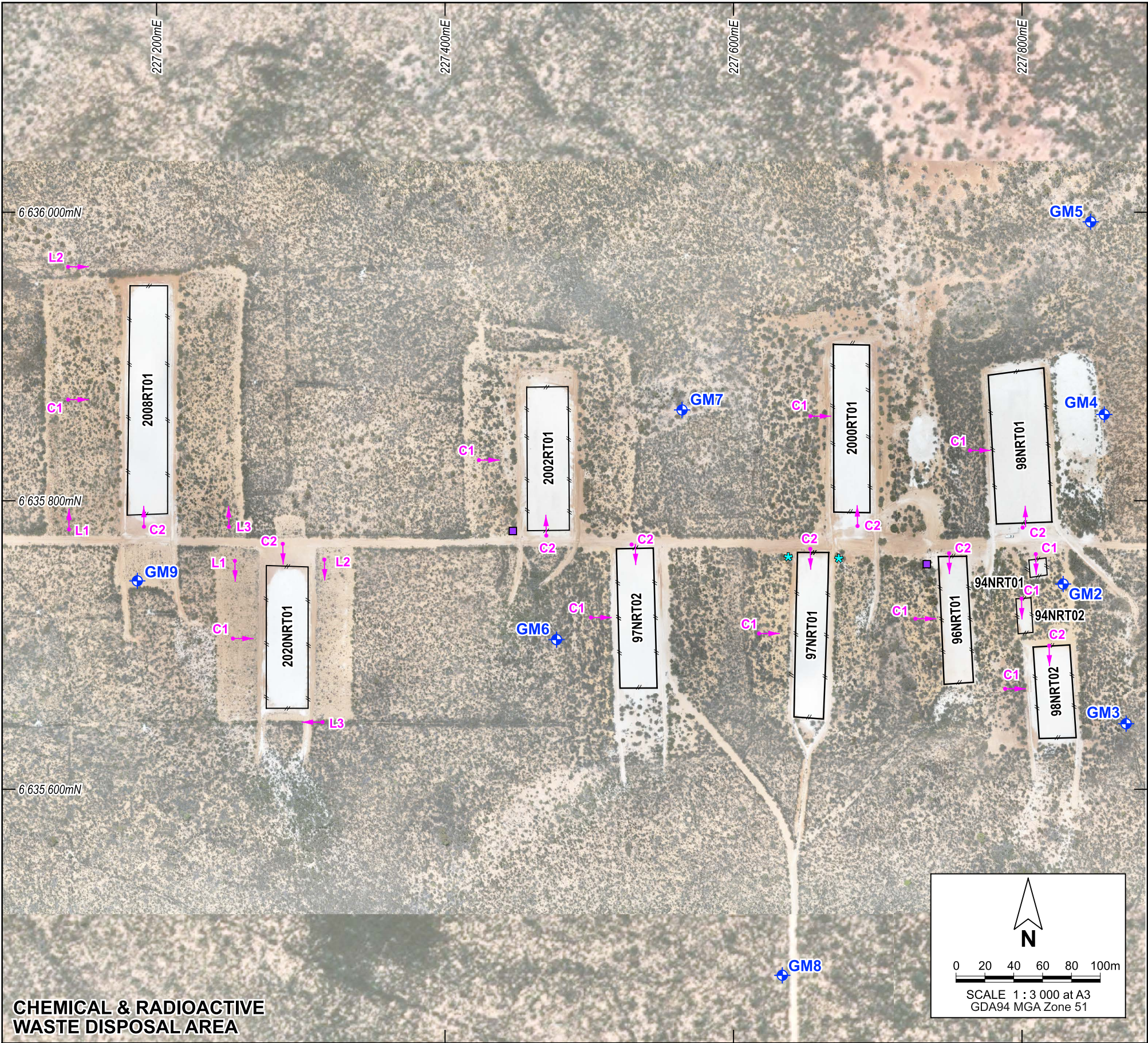


**RADIOACTIVE WASTE
DISPOSAL AREA**

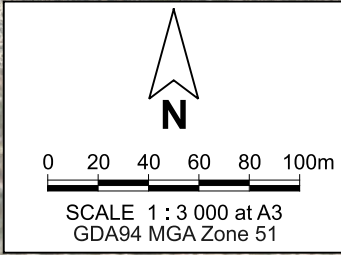
Legend

- //— Fence
- 2008RT01** Trench or Shaft ID
- ◆ Location of Groundwater Monitoring Bore
- ⊕ Location of Radioactive Waste Shaft
- Photograph Location and Direction
- C1** 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.



**CHEMICAL & RADIOACTIVE
WASTE DISPOSAL AREA**



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

Drawn: M. Shepherd

Date: 28 Jan 2026

INTRACTABLE WASTE DISPOSAL FACILITY
MT WALTON EAST, WESTERN AUSTRALIA

**GROUNDWATER, TRENCH CAPPING &
REHABILITATION MONITORING LOCATIONS**

Figure 4

Job: DFI-PP03939

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 06 May 2026. 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 May 2026

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
13/10/25 to 17/10/25	Unreadable
04/05/26 to 06/05/26	*M

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

Results are not yet available for the 2025 - 2026 reporting year as the TLD from the October 2025 monitoring period was unreadable, either due to an error in transport or the laboratory. Data from the May monitoring period have not yet been returned from the laboratory. 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 to date have been 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



MINISTER FOR THE ENVIRONMENT;
LABOUR RELATIONS

Statement No.

000562

**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

- 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.

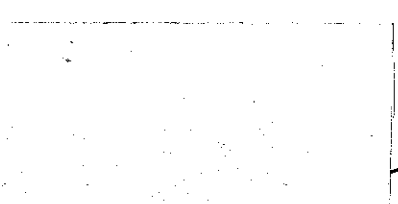
4 Commencement

- 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)

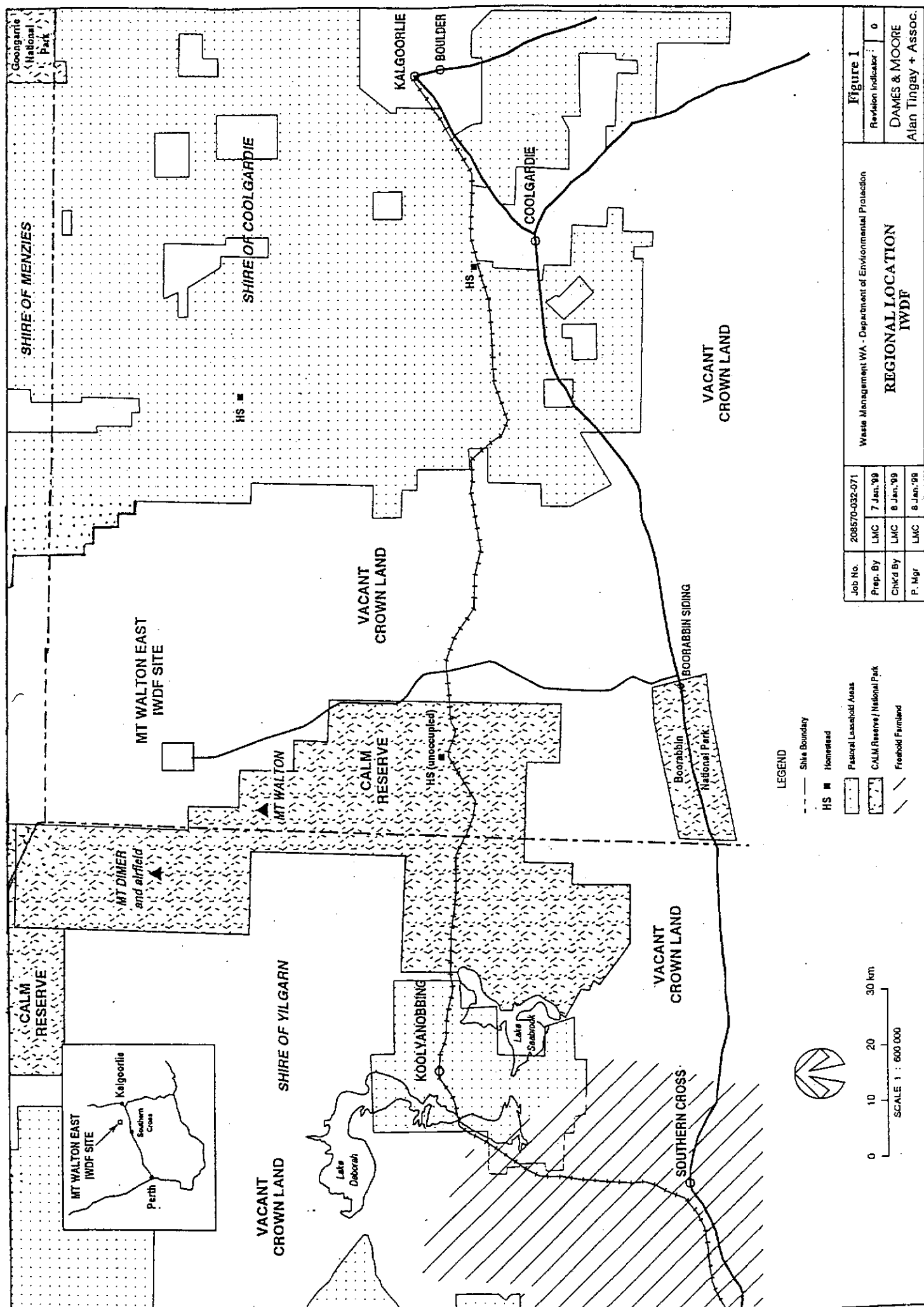


Figure 1. Site location.

**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	<u>Environ- mental Management Plans</u> 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 stakeholder review at least 6 months prior to decommissioning.)	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 Environmental 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 REQUIRE- MENTS OF	ADVICE	MEASURE- MENT/ 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	Radio-logical 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	<u>Operational Procedures</u> 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	Radio-logical 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	<u>Performance and Compliance Report</u>	(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 relation 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 REQUIRE- MENTS OF	ADVICE	MEASURE- MENT/ 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	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.	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.

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

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 20 th 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 REQUIREMENTS 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 REQUIREMENTS 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 REQUIREMENTS 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 20 th of October 2024.

APPENDIX B

Radiological Council Registration RS 13/2011 20590

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

MR MARK BRYDEN
GENERAL MANAGER OPERATIONS
DEPARTMENT OF HOUSING AND WORKS
ATTN: MS ERIN CLINCH, IWDF PROJECT DIRECTOR
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 LOW-LEVEL 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.

17 FEB 2026

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 2029

* 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 2029

RADIATION SAFETY ACT

CONDITIONS, RESTRICTIONS AND LIMITATIONS (SECTION 36)

SPECIAL CONDITIONS

- 1. 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.**
- 2. 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.**

CERTIFICATE NO: RS 13/2011 20590

EXPIRES ON: 08 February 2029



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.

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

A handwritten signature in dark ink, appearing to read 'H. Upton', with a stylized flourish at the end.

Ms H Upton
Secretary, Radiological Council

Encl. Certificate of Registration

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.**

CERTIFICATE NO:

RS 13/2011 20590

EXPIRES ON:

08 February 2026

APPENDIX C

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



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, <i>Environmental Protection Regulations 1987</i>)	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 prior¹ 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 <i>Environmental Protection Act 1986</i> Locked Bag 10 Joondalup DC WA 6919 or: info@dwer.wa.gov.au
Department	means the department established under section 35 of the <i>Public Sector Management Act 1994</i> (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	<i>Environmental Protection Act 1986</i> (WA)
EP Regulations	<i>Environmental Protection Regulations 1987</i> (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 <i>Radiation Safety Act 1975</i> 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).

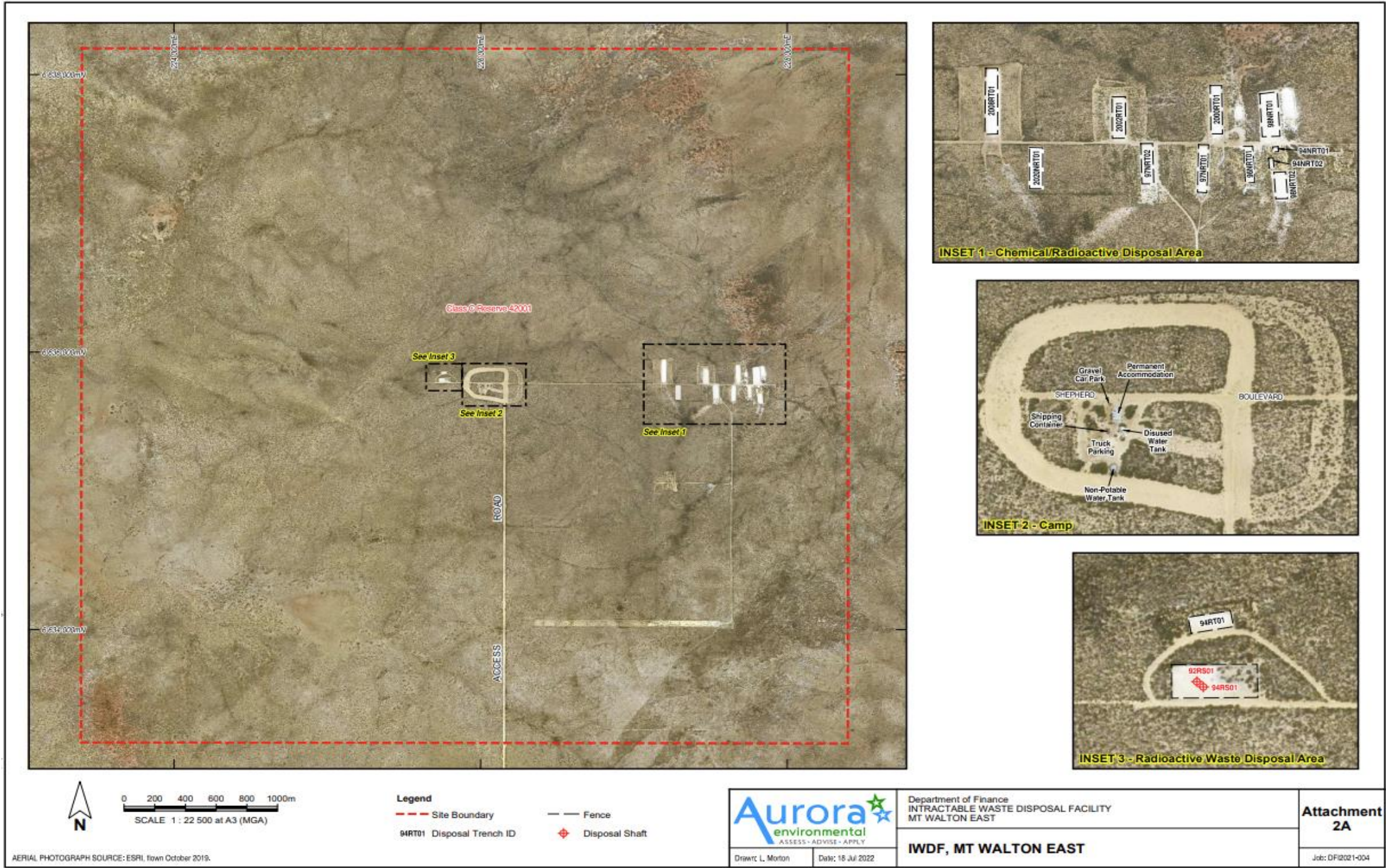


Figure 1: Map of the boundary of the prescribed premises

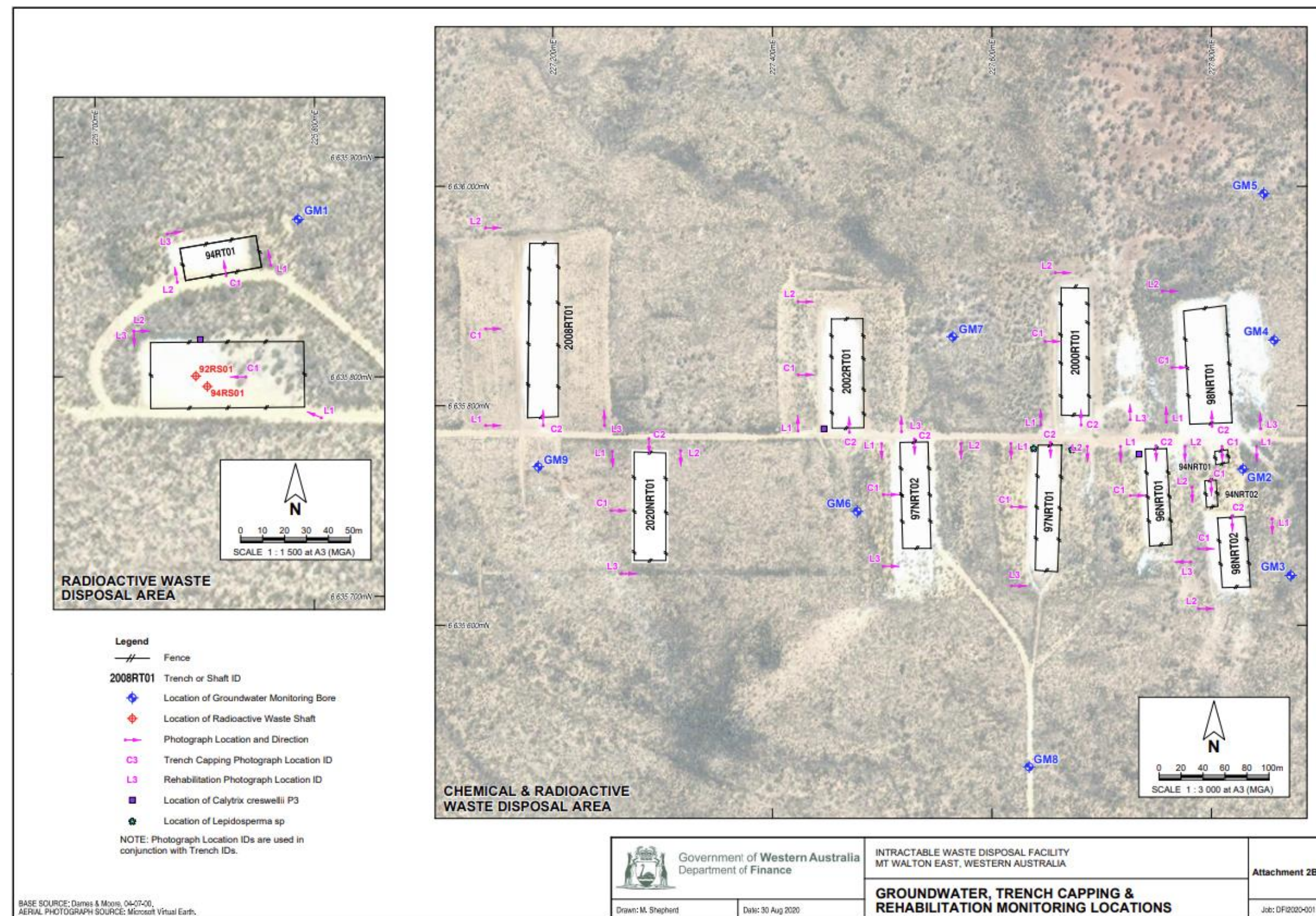


Figure 2: Groundwater monitoring location

Schedule 2: Premises boundary

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

Table 2: Premises boundary coordinates (GDA94)

Easting <i>Longitude (x)</i>	Northing <i>Latitude (y)</i>	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 <i>nuclear material</i> 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 <i>Nuclear Non-Proliferation (Safeguards) Act 1987</i> .
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 <i>the Act</i> .
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 <i>Permit Holder's Representative</i> 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 <i>the Act</i> .
Inventory	The entire physical stock of <i>nuclear material</i> , 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 <i>nuclear material</i> 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 <i>nuclear material</i> , enrichment of <i>nuclear material</i> , 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	<i>Source and special fissionable material</i> the same as in <i>the Act</i> but for the purposes of this Permit excludes material that has been deemed by ASNO as practicably irrecoverable (Schedule 3, Article 11 of <i>the Act</i>) or material that is the subject of an exemption or termination declaration under section 11 of <i>the Act</i> .
Nuclear Security	The prevention of, detection of, and response to, criminal or intentional unauthorised acts involving or directed at <i>nuclear material</i> , nuclear facilities and associated items. NOTE: <i>The Act</i> refers to physical security, which in relation to the protection of <i>nuclear material</i> , 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 <i>the Act</i> .
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

2025 – 2026 IWDF Management Plans



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. These management plans are to be reviewed and updated biannually by the IWDF Management Team (MT).

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 will be conducted in any 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-01: Groundwater Monitoring.
- Flora identification kit (significant flora) – located within EHSQMS General Site Information.
- 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 2026).

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.

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.



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

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 2026.

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 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-05: Communications and Public Relations.
- 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)



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

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.

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 2026).
- Weed identification kit to be regularly reviewed (to be reviewed October 2026)

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.
- Monitoring Location Figure – showing location of photo points, monitoring bores and any priority flora – located within EHSQMS General Site Information.

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.

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



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

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.

Forms:

- IWDF Form 06: Near Miss Incident / Accident / Exposure Report
- IWDF Form 12: Operation Training / Competency 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 Incident Prevention, Reporting and Investigation

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.

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 will be 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.



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

- 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:

- Formally document analysis of the behaviour of the cement matrix.
- Appoint a RC approved independent auditor with expertise in radioactive waste management.

Relevant Documents and Procedures:

- Radioactive Waste Acceptance Guidelines and Proforma.
- 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 V8 December 2025, Post-Closure Safety Assessment V8 December 2025 and Facility Safety Case V8 December 2025.

Forms:

- IWDF Form 55: Worker Radiation Monitoring External Dose
- IWDF Form 56: Public Radiation Monitoring External Dose
- IWDF Form 57: Personal Radiation Monitoring Internal 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.
- Provide community members with information on each radiation monitoring report and independent audit report at annual community meetings. 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 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 Mines, Petroleum and Exploration (DMPE) and Department of Local Government, Industry Regulation & Safety (LGIRS), 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.
- Operational Procedure OP-05: Waste Loading and Transport.
- Operational Procedure OP-06: Waste Delivery, Acceptance and Disposal.



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

- Safety Instruction SI-05: Communications and Traffic Control.
- Safety Instruction SI-07: Heavy Machinery Operations.
- Waste Acceptance Guidelines and Proforma.

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.

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 03b: Sampling / Groundwater Monitoring Record
- IWDF Form 39: Monitoring Register



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

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.

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 at the IWDF unless prior conditioning is undertaken:
 - 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 and Proforma
- Radioactive Waste Acceptance Guidelines and Proforma
- 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 Procedure OP-06: Waste Delivery, Acceptance and Disposal
- Operational Instruction OI-1: Waste Inspection

Forms:

- IWDF Form 53: Waste Inspection 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.
- The community can voice their concerns and discuss these issues with the management of the IWDF.
- Community is kept informed regarding 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:

- Add a link to the Government web page for the IWDF to request available waste disposal information from the database.

Relevant Documents and Procedures:

- IWDF Waste Inventory Database
- Management Procedure: FMP-02 Record Management
- Management Procedure: MP-05 Communication and Public Relations
- IWDF Complaints Register
- DA 2011-049 Retention and Disposal Schedule for the Department of Housing and Works

Forms:

Nil – replaced by DA 2011-049 Retention and Disposal Schedule for the Department of Housing and Works.



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.

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.

Improvement Plan:

Submit annual Performance and Compliance Reports to the State Library to fulfil legal deposit requirements.

Relevant Documents and Procedures:

- IWDF Legal Register
- 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



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

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:

- DHW IWDF Project 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 following the implementation of the new Management System structure.	CJG	MJS + MT	MT
33	08/07/25	Updated branding from Finance to DHW	CJG	MJS + MT	MT
34	17/12/2025	Updated and edited all Management Plans. Currency check of all legislation and Australian Standards.	JWS	MJS + MT	MT
35	19/06/2026	Minor updates to Radiation, Waste Acceptance, and Community Liaison Management Plans.	JWS	MJS + MT	MT

APPENDIX F

2025 – 2026 Groundwater Monitoring Records

INTRACTABLE WASTE DISPOSAL FACILITY

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

Page 1 of 1

Project No.: DFI-PP03939 – 2025-26 IWDF Ongoing Management						Location of Retained Samples:			Sampled By: <u>SP + MJS</u>		
Site Name: Intractable Waste Disposal Facility, Mt Walton East									Operation/Project: Monitoring		
Location: IWDF									Date: <u>14/10/2025</u>		
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	<u>38.018</u>	<u>DRY</u>							<u>DRY</u>		
GM2	<u>40.657</u>	<u>DRY</u>							<u>DRY</u>		
GM3	<u>39.119</u>	<u>DRY</u>							<u>DRY</u>		
GM4	<u>30.074</u>	<u>DRY</u>							<u>DRY</u>		
GM5	<u>28.057</u>	<u>DRY</u>							<u>DRY</u>		
GM6	<u>25.901</u>	<u>DRY</u>							<u>DRY</u>		
GM7	<u>31.563</u>	<u>DRY</u>							<u>DRY</u>		
GM8	<u>31.404</u>	<u>DRY</u>							<u>DRY</u>		
GM9	<u>42.112</u>	<u>DRY</u>							<u>DRY</u>		

GENERAL COMMENTS: -

WATER PROBE TESTED: YES SIGNED: Mg Shepherd

Duplicate Sample Yes No N/A Field Blanks Yes No N/A Original to file. Copy to DHW IWDF Project Director within 14 days.

INTRACTABLE WASTE DISPOSAL FACILITY

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

Page 1 of 1

Project No.: DFI-PP03939 – 2025-26 IWDF Ongoing Management						Location of Retained Samples:			Sampled By: <u>SD + MJS</u>		
Site Name: Intractable Waste Disposal Facility, Mt Walton East									Operation/Project: Monitoring		
Location: IWDF									Date: <u>5/5/2026</u>		
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	<u>38.014</u>	<u>DRY</u>							<u>DRY</u>		
GM2	<u>40.665</u>	<u>DRY</u>							<u>DRY</u>		
GM3	<u>39.125</u>	<u>DRY</u>							<u>DRY</u>		
GM4	<u>30.075</u>	<u>DRY</u>							<u>DRY</u>		
GM5	<u>28.061</u>	<u>DRY</u>							<u>DRY</u>		
GM6	<u>25.906</u>	<u>DRY</u>							<u>DRY</u>		
GM7	<u>31.564</u>	<u>DRY</u>							<u>DRY</u>		
GM8	<u>31.402</u>	<u>DRY</u>							<u>DRY</u>		
GM9	<u>42.124</u>	<u>DRY</u>							<u>DRY</u>		

GENERAL COMMENTS:

WATER PROBE TESTED: YES SIGNED: MgDhepherdDuplicate Sample Yes No N/A Field Blanks Yes No N/A Original to file. Copy to DHW IWDF Project Director within 14 days.

APPENDIX G

2025 – 2026 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 DHW (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: <u>GROUNDWATER, REHABILITATION + CAPPING MONITORING + MAINTENANCE</u>		
Visitor/Inspector: <u>MJS</u>	Affiliation: <u>AURORA ENVIRONMENTAL</u>	
Other Visitors (at least one other person to be at site): <u>SP</u>		
Date: <u>13/10/2025 - 17/10/2025</u>		
Time Arrived: <u>1915</u>		Time Departed: <u>1145</u>
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	☒	
Water - non-potable	☒	<u>EMPTY U/S</u>
Food/provisions/domestic supplies	☒	<u>NEED NEW EXHAUST FAN IN KITCHEN</u>
Security		
Locks to all buildings intact	☒	<u>2 DOORS REPAIRED</u>
All trench fences intact & locked	☒	
All signs to fences intact/present	☒	
Infrastructure		
Fire extinguishers in place	☒	
Generator operational	☒	
Kitchen/toilet operational	☒	<u>LAST GAS BOTTLE GETTING LOW</u>
Weather station intact	☒	<u>U/S</u>
Phone & internet operational	☒	<u>MOBILE SAT PHONE USED</u>
Above ground markers intact	☒	
Maintenance		
Electrical tagging up to date	☒	<u>DUE NEXT VISIT</u>
Fire extinguishers checked	☒	
Generator serviced	☒	
Monitoring		
Groundwater monitoring	☒	IWDF-Form-3b (IWDF-Form-3a if necessary)
Capping monitoring	☒	IWDF-Form-38b
Rehabilitation monitoring	☒	IWDF-Form-38a
Radiation monitoring	☒	RI-01
Firebreaks/camp/access road/disposal cell V drains check	☒	<u>MINOR GROWTH ONLY IN DRAINS - SPRAYED</u>
Other (specify)	☒	<u>SIGNS ON ROAD CHECKED. NEED NEW DEFIB.</u>
Post-Visit Check		Time Departed: <u>0830</u>
Confirmed safe return: <u>YES</u>		Time: <u>1550</u>
Signed: <u>MJ Shepherd</u>		Date: <u>17/10/2025</u>

Original document to FMC Project Manager. Copy to DHW 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 DHW (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 V-DRAINS		
Visitor/Inspector: MJS	Affiliation: AURORA ENVIRONMENTAL	
Other Visitors (at least one other person to be at site): SD		
Date: 4/5/2026 - 6/5/2026		
Time Arrived: 1810		Time Departed: 0715
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 NEED DIESEL AT NEXT VISIT
Water - potable	☒	≥ ½ FULL
Water - non-potable	☒	U/S
Food/provisions/domestic supplies	☒	FLYSPRAY, D/W DETERGENT + SPRAY + WIPE NEEDED
Security		
Locks to all buildings intact	☒	
All trench fences intact & locked	☒	
All signs to fences intact/present	☒	
Infrastructure		
Fire extinguishers in place	☒	REMOVED 5 FOR SERVICING
Generator operational	☒	~580 hrs NEXT SERVICE 700 hrs
Kitchen/toilet operational	☒	NEED GAS + 4 BOTTLES REMOVED
Weather station intact	☒	U/S
Phone & internet operational	☒	MOBILE SAT USED
Above ground markers intact	☒	
Maintenance		
Electrical tagging up to date	☒	DONE THIS VISIT
Fire extinguishers checked	☒	INSPECTED ALL
Generator serviced	☒	DUE NEXT YEAR
Monitoring		
Groundwater monitoring	☒	IWDF-Form-3b (IWDF-Form-3a if necessary)
Capping monitoring	☒	IWDF-Form-38b
Rehabilitation monitoring	☒	IWDF-Form-38a
Radiation monitoring	☒	RI-01
Firebreaks/camp/access road/disposal cell V drains check	☒	SOME FINES IN DRAINS - SOME TO BE CLEARED NEXT TIME FIREBREAK DONE, SPRAYING DONE
Other (specify)	☒	
Post-Visit Check		Time Departed: 0700
Confirmed safe return: YES		Time: 1510
Signed: MQ Shepherd		Date: 6/5/2026

Original document to FMC Project Manager. Copy to DHW IWDF Project Manager.

APPENDIX H

2025 – 2026 Complaints Register

OFFICIAL
IWDF Complaints Register

Complaint Number	Date	Complainant Name	Complaint Area:	Complaint Description	Action Taken	Outcome
1A	13/09/2023	J. McLeod	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	J. McLeod	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	J. McLeod	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	J. McLeod	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	J. McLeod	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	J. McLeod	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	J. McLeod	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	J. McLeod	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	J. McLeod	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 (2023-
2026) RS 13/2011 20590 Cond 203**

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.**

CERTIFICATE NO:

RS 13/2011 20590

EXPIRES ON:

08 February 2026

APPENDIX J

Extract from Department of Housing and Works Retention and Disposal Schedule

Extract from Department of Finance Retention and Disposal Schedule 2023-023 – matters relating directly to the Intractable Waste Disposal Facility, Mt Walton East

No	Function/Activity	Description	Disposal Action
1	ADVICE	Refer also to General Retention and 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 the DEMIRS for this process.	Retain 7 years after date of last action, then Destroy.
2.4	Vesting Orders / Reserve Management Orders	Placing control of reserved Crown Land with the Department (under the Land Administration Act 1997)	Retain as State archives
3	ACQUISITION/DISPOSAL	Refer also to General Retention and Disposal Authority for State Government Information	
3.1	Waste Disposal	Records relating to the disposal of radioactive/chemical/hazardous waste at the Mount Walton East Intractable Waste Disposal Facility. For disposal of other hazardous material e.g. asbestos refer to General Retention and Disposal Authority for State Government	Retain as State archives

		Information.	
6	COMPLIANCE	Refer also the General Retention and 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 Department of Water and Environmental Management (DWER). While not certified, the management system does meet 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.	Retain as State archives
7	CONSTRUCTION / CAPITAL WORKS SURVEYS	Refer also to General Retention and 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 the Construction Files e.g. surveys relating to the radioactive site at Mt Walton East. Refer also to General Retention and Disposal Authority for State Government Information.	Retain as State archives

19	LICENCES AND PERMITS	Records relating to licences, permits or registrations issued to or from the Department of Finance.	
19.1	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 Permits to store nuclear waste. Road Use Permits in relation to the Intractable Waste Disposal Facility, Mt Walton East.	Retain as State archives
21	MAINTENANCE	Refer also to General Retention and Disposal Authority for State Government Information	
21.1	Disposal Cell - Shafts and Trenches	Records relating to the maintenance of Disposal Cells at the Intractable Waste Disposal Facility, Mt Walton East.	Retain as State archives
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 - organisational 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.	Retain as State archives
27	REPORTING	Refer to General Retention and Disposal Authority for State Government Information	
27.1	Reports - Mount Walton East Intractable Waste Disposal Facility	Reports relating specifically to Intractable Waste Disposal Facility, Mt Walton East • Close-out reports contain details of each specific disposal operation • Performance and Compliance Reports • Technical Audit reports	Retain as State archives
29	OCCUPATIONAL HEALTH AND SAFETY	Also refer to General Retention and Disposal Authority for State Government Information	
29.1	Intractable Waste - OHS	Includes but is not limited to: Use, presence, neutralisation and removal, transport, safety precautions, chemical and radiological issues; and advice on health risks relating to Intractable Waste Disposal Facility, Mt Walton East.	Retain as State archives

APPENDIX K

ASNO ASO316 Report and IAEA Guidance on Access Submission Acknowledgement

John Shepherd

From: ASNO Nuclear <nuclear.asno@dfat.gov.au>
Sent: Wednesday, 4 March 2026 1:39 PM
To: Spencer, Michelle
Cc: Mark Shepherd; Clinch, Erin
Subject: RE: Permit Number PN207 - Submission of ASO316 form and IAEA access guidance - 2026 [SEC=OFFICIAL]

OFFICIAL

Hi Michelle,

Thank you for the submission of an ASO316 form and maps. We appreciate the confirmation that there has been no nuclear material disposed since 2008.

ASNO will reach out should we have any questions.

Kind regards,
Sophie.

Sophie Yang

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

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

From: Spencer, Michelle <Michelle.Spencer@dohw.wa.gov.au>
Sent: Wednesday, 4 March 2026 4:21 PM
To: ASNO Nuclear <nuclear.asno@dfat.gov.au>
Cc: Mark Shepherd <mark.shepherd@auroraenvironmental.com.au>; Clinch, Erin <Erin.Clinch@dohw.wa.gov.au>
Subject: Permit Number PN207 - Submission of ASO316 form and IAEA access guidance - 2026

OFFICIAL

Hi ASNO Team,

Please find attached the completed ASO316 form (including site maps) for permit PN207. The information included in the form has not changed since the 2025 submission.

There has been no disposal of nuclear material for this reporting period. Our last disposal containing nuclear material occurred in 2008.

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

Kind regards

Michelle Spencer

Contract Manager (IWDF) | Building and Contracts

Djookanup, 16 Parkland Rd, Osborne Park WA 6017
6551 1203 | WA.gov.au



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



The Department of Housing and Works 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.

Mon	Tue	Wed	Thu	Fri
Office	Office	WFH	Office	WFH

APPENDIX L

June 2026 ASNO Annual Inventory Submission Acknowledgement

John Shepherd

From: ASNO Nuclear <nuclear.asno@dfat.gov.au>
Sent: Wednesday, 17 June 2026 2:34 PM
To: Mark Shepherd; stuart.parr@ransconsultancy.com; eleanor.hopkins@dohw.wa.gov.au; ASNO Nuclear
Subject: Report on Physical Inventory Taking submitted on 17/06/2026 for Minister for Works c/- Department of Housing and Works (Western Australia) Michelle.Spencer@dohw.wa.gov.au [SEC=OFFICIAL:Sensitive]
Attachments: PIT_checklist.xlsx

OFFICIAL: Sensitive

This email acknowledges that a contact for your organisation has logged into the [NUMBAT database \(https://numbat.asno.gov.au\)](https://numbat.asno.gov.au) and clicked the "Complete Physical Inventory Taking" button, submitting the inventory list of nuclear material for your organisation as of 30/06/2026.

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.

Yours sincerely,

Australian Safeguards and Non-Proliferation Office

P +61 2 6261 1920
E nuclear.asno@dfat.gov.au



*We acknowledge the Traditional Custodians of Country throughout Australia, and their continuing connection to land, waters and community.
We pay our respects to all First Nations peoples, their cultures and to their Elders, past, present and emerging.*

OFFICIAL: Sensitive

APPENDIX M

2025 – 2026 IWDF Annual Community Meeting Agenda



Agenda		IWDF Annual Community Meeting (IACM)	
Time/ Day:		16 October 2025 at 6:00pm	
Venue:		Goldfields Arts Centre, 35 Cheetham Street, Kalgoorlie	
IWDF Team:	Name	Organisation	
	Dr Mark Shepherd	Director, Aurora Environmental	
	Ms Eleanor Hopkins	Director, Maintenance Frameworks Department of Housing and Works	
	Ms Erin Clinch	IWDF Project Director Department of Housing and Works	
	Ms Michelle Spencer	IWDF Contract Manager Department of Housing and Works	
Invitees:	Confirmed	Jan McLeod, Bruce Olsen, Tracey Rathbone, Kristy Van Kuyl, Paul Wilcox	
	Unconfirmed	David Williams, Malcolm Cullen, Rhonda Evans, Bryan Close, Gary Guerini, Kelly Watts, Abnesh Chetty, Paul Warner, Greg Dwyer, Aaron Cook.	
Item	Topic	Responsible	Time
	FIRST SECTION		30-minute allocation
1	Welcome to the inaugural IWDF Annual Community Meeting	DHW	6.00pm
2	Acknowledgement of Country	DHW	
3	Safety Notice and Housekeeping	DHW	
4	Purpose of the IWDF Annual Community Meeting	DHW	
5	Introduction	DHW	
6	Site Selection Criteria	Aurora	
7	Location of the IWDF	Aurora	
8	IWDF Governance Structure	DHW	
9	IWDF People	DHW	
10	IWDF Drone Footage	MS	
11	Questions (limited to 10 minutes)	DHW	6.30pm

OFFICIAL

	SECOND SECTION		35-minute allocation
1	Disposal Cell Diagram	Aurora	6.40pm
2	2024-25 PCR Report • Overview • Regulatory Compliance • Site Monitoring • Botanist Report	Aurora	
3	Overview of Waste Enquiries	Aurora	
4	Management System	Aurora	
5	IWDF Online Information • Website • Email	DHW	
6	Question time (limited to 10 minutes)	DHW	7.20pm
7	Meeting Close	DHW	7.30pm

APPENDIX N

October 2025 Rehabilitation Monitoring Records

OFFICIAL

INTRACTABLE WASTE DISPOSAL FACILITY

REHABILITATION MONITORING RECORD IWDF-FORM-38A

Page 1 of 1

Project No: DFI-PP03939 - 2025-26 IWDF Ongoing Management				Storage Location of Photos: Aurora Environmental					Monitored By: MJS			
Site: Intractable Waste Disposal Facility, Mt Walton East									Client: Department of Housing and Works			
Monitoring Location: IWDF Disposal Cells									Date: 14/10/2025			
Trench / Area	Location	Date	Time	Vegetation Density			Vegetation Variety		Description and Other Comments (e.g. soil status)			
	Loc. No			% Cover	Max height	Average height	Y/N	Number of plant types	Soil Status	Dead vegetation	Tyned?	Other Comments
2020NRT01	01	14/10/2025	1155	40	2	1	Y	11	Gravelly Sand	Y	Y	Growing well
	02	14/10/2025	1205	35	1.5	0.8	Y	14	Gravelly Sand	Y	Y	Growing well
	03	14/10/2025	1214	3	0.8	0.3	Y	5	Gravelly Sand	Y	Y	Growth still sparse due to clay, may need deeper tyning
2008RT01	01	14/10/2025	1125	75	5.0	1.7	Y	12	Gravelly Sand	Y	Y	
	02	14/10/2025	1133	60	2.0	1.2	Y	10	Gravelly Sand	Y	Y	
	03	14/10/2025	1144	75	3.5	1.5	Y	15	Gravelly Sand	Y	Y	

IWDF MT. WALTON EAST

**REHABILITATION
PHOTOS**

OCTOBER 2025



2020NRT01 - Loc.1



2020NRT01 - Loc.2



2020NRT01 - Loc.3



2008RT01 - Loc.1



2008RT01 - Loc.2



2008RT01 - Loc.3

APPENDIX O

October 2025 Capping Monitoring Records

INTRACTABLE WASTE DISPOSAL FACILITY

CAPPING MONITORING RECORD IWDF-FORM-38b

Page 1 of 1

Project No: DFI-PP03939 - 2025-26 IWDF Ongoing Management				Storage Location of Photos: Aurora Environmental						Monitored By: MJS	
Site: Intractable Waste Disposal Facility, Mt Walton East										Client: Department of Housing and Works	
Monitoring Location: IWDF Disposal Cells										Date: 14/10/2025	
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	14/10/2025	1344	Y	Numerous	2-10cm	N	-	-	Compound	Channels 1.5-2m apart down each side of dome
	Loc. 2	14/10/2025	1347	Y	2	1-5cm	N	-	-	Dome	One channel at each end of dome 1-5cm deep
2008RT01	Loc. 1	14/10/2025	1355	Y	A few	1-3cm	N	-	-	Compound	Not deep
	Loc. 2	14/10/2025	1351	Y	Several	1-2cm	N	-	-	Dome	Minor short channels
2002RT01	Loc. 1	14/10/2025	1335	N	-	-	N	-	-	Compound	
	Loc. 2	14/10/2025	1340	N	-	-	N	-	-	Dome	
2000RT01	Loc. 1	14/10/2025	1405	Y	A few	2-10cm	N	-	-	Compound	
	Loc. 2	14/10/2025	1401	Y	1	5-15cm	N	-	-	Dome	One main channel up to 15cm deep
98NRT02	Loc. 1	14/10/2025	1419	N	-	-	N	-	-	Compound	
	Loc. 2	14/10/2025	1415	N	-	-	N	-	-	Dome	
98NRT01	Loc. 1	14/10/2025	1428	Y	Numerous	1-10cm	N	-	-	Compound	One slightly deeper channel
	Loc. 2	14/10/2025	1424	Y	2	1-15cm	N	-	-	Dome	One channel up to 15cm deep
97NRT02	Loc. 1	14/10/2025	1439	Y	A few	1-5cm	N	-	-	Compound	
	Loc. 2	14/10/2025	1435	N	-	-	N	-	-	Dome	
97NRT01	Loc. 1	14/10/2025	1505	Y	A few	1-2cm	N	-	-	Compound	
	Loc. 2	14/10/2025	1501	Y	2	2cm	N	-	-	Dome	
96NRT01	Loc. 1	14/10/2025	1306	N	-	-	N	-	-	Compound	
	Loc. 2	14/10/2025	1301	N	-	-	N	-	-	Dome	
94NRT02	Loc. 1	14/10/2025	1254	N	-	-	N	-	-	Dome	
94NRT01	Loc. 1	14/10/2025	1250	N	-	-	N	-	-	Compound	
94RT01	Loc. 1	14/10/2025	1231	N	-	-	N	-	-	Compound	
92RS01+02	Loc. 1	14/10/2025	1227	N	-	-	N	-	-	Dome	Surface fines gone
	Loc. 2	14/10/2025	1225	N	-	-	N	-	-	Dome	Surface fines gone

**IWDF MT. WALTON EAST
TRENCH CAPPING PHOTOS
OCTOBER 2025**



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

2025 – 2026 Management System Manuals



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

**INTRACTABLE WASTE DISPOSAL FACILITY MT WALTON EAST
ENVIRONMENTAL, HEALTH & SAFETY AND QUALITY MANAGEMENT SYSTEM
(EHSQMS)**

**MANAGEMENT AND POLICY MANUAL
DEPARTMENT OF HOUSING AND WORKS**

This manual is the Environmental, Health and Safety and Quality Policy, organisational structure, and procedures as adopted by the Department of Housing and Works (DHW) 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
22	17/07/25	Update department from Finance to Housing and Works. Other minor updates.	JWS	MJS	MJS

MT – Management Team

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C	ASNO Permit PN207

Environmental, Health & Safety and Quality Policy



Government of Western Australia
Department of Housing and Works

ENVIRONMENTAL, HEALTH & SAFETY AND QUALITY POLICY INTRACTABLE WASTE DISPOSAL FACILITY

The Department of Housing and Works 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 Housing and Works 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: Erin Clinch

Date: 17 / 12 / 2025

DHW 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.

On 1 July 2025, the proponent for the IWDF became the Minister for Works care of the Department of Housing and Works (DHW).

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. The RC registration RS 13/2011 20590 for 8 February 2026 to 8 February 2029 names Mr Mark Bryden, General Manager Operations, Department of Housing and Works, 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 DHW 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 2029) 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-metre-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 occurred.

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 pesticides 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

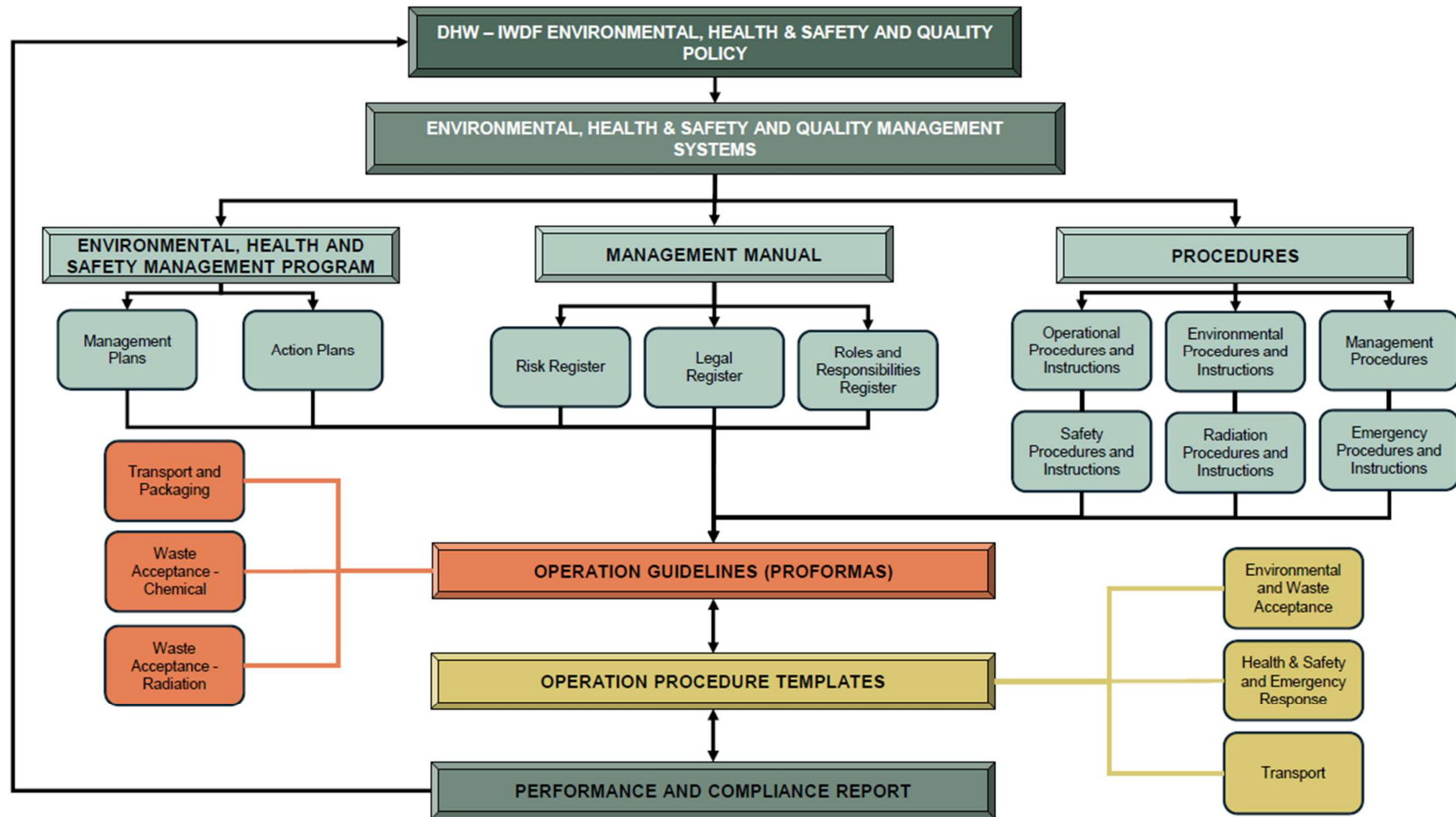
The IWDF Environmental, Health & Safety and Quality Management System (EHSQMS) is designed to identify areas of actual or potential environmental risk resulting from activities at the IWDF. The system then guides the formulation of procedures and objectives which minimise or eliminate these risks.

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 the DHW maintains a high level of performance.

The Facility Management Contractor (FMC), on behalf of DHW, 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 DHW management manual (this manual) provides details on the IWDF site and an overview of the management system, including how its components are interconnected.

The DHW 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 DHW 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 DHW'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.

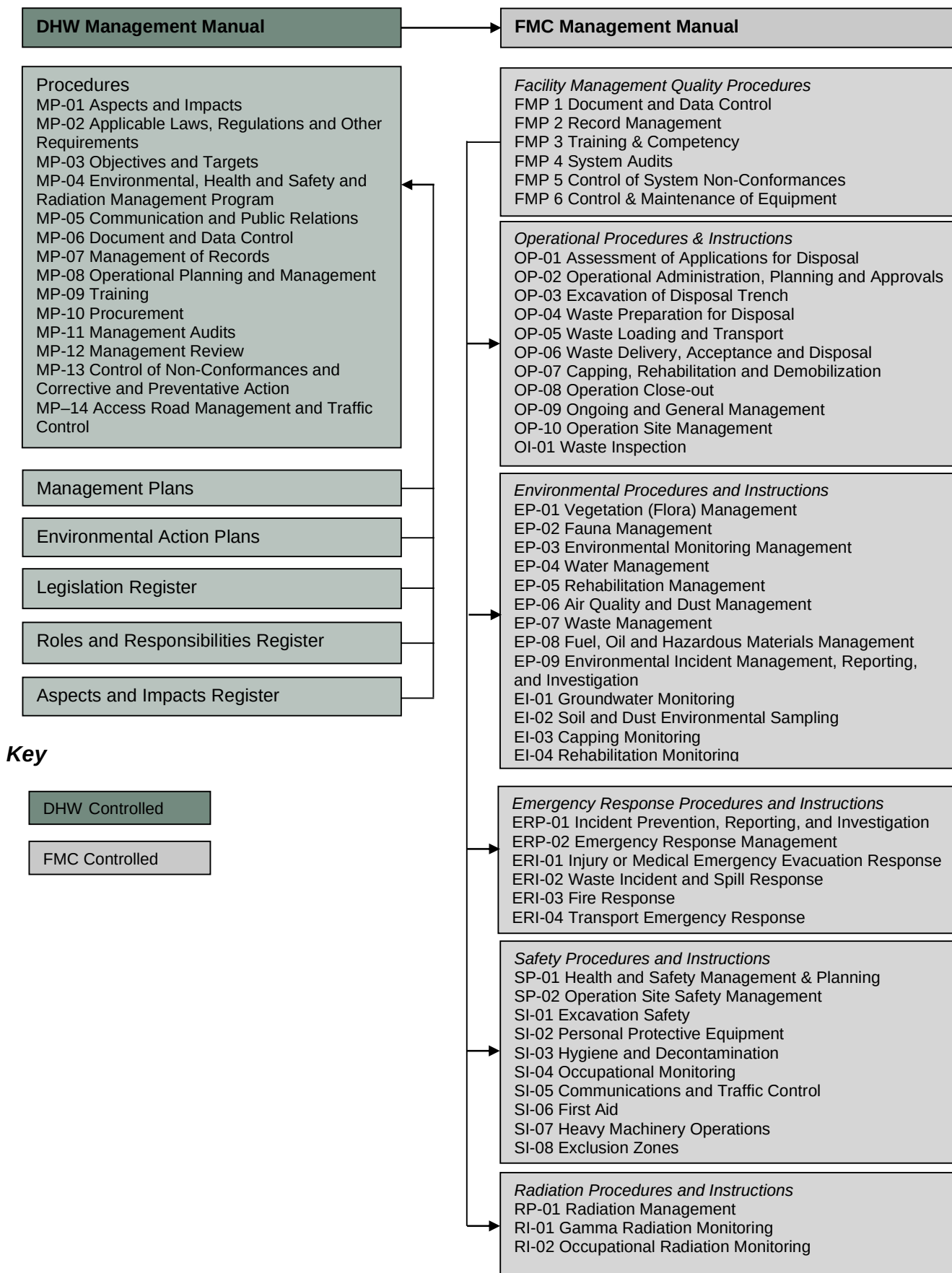
b) *Operation Procedure*: When a disposal operation is planned, the operation procedure templates are completed so that they address the waste types and operation. Once completed and approved, the procedure templates become the operation procedures associated with that disposal operation.

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 DHW 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 DHW. 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

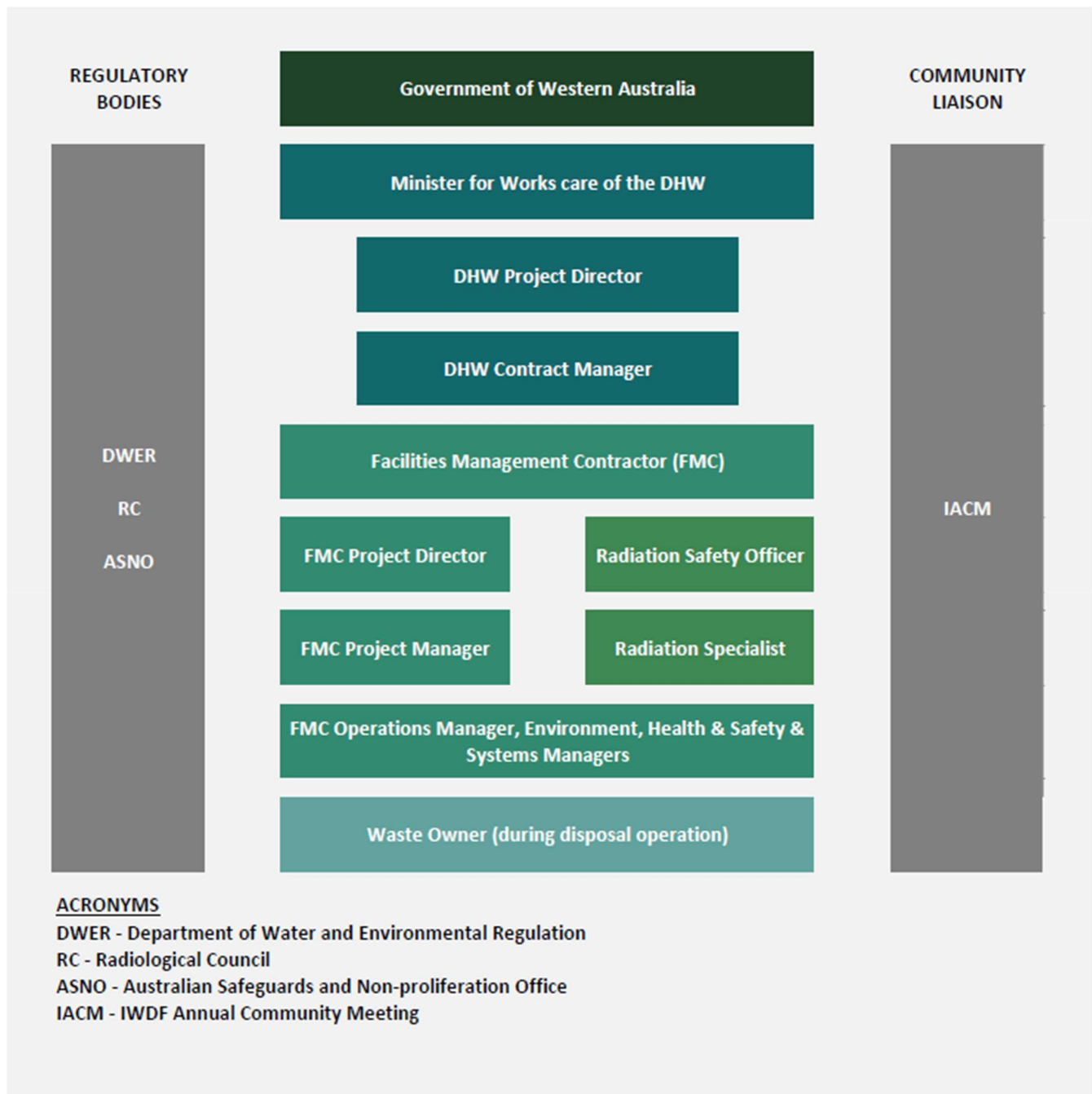
5.5 *Performance and Compliance Report*

This is an **annual** report prepared by DHW 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



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, <i>Environmental Protection Regulations 1987</i>)	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 prior¹ 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 <i>Environmental Protection Act 1986</i> Locked Bag 10 Joondalup DC WA 6919 or: info@dwer.wa.gov.au
Department	means the department established under section 35 of the <i>Public Sector Management Act 1994</i> (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	<i>Environmental Protection Act 1986</i> (WA)
EP Regulations	<i>Environmental Protection Regulations 1987</i> (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 <i>Radiation Safety Act 1975</i> 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

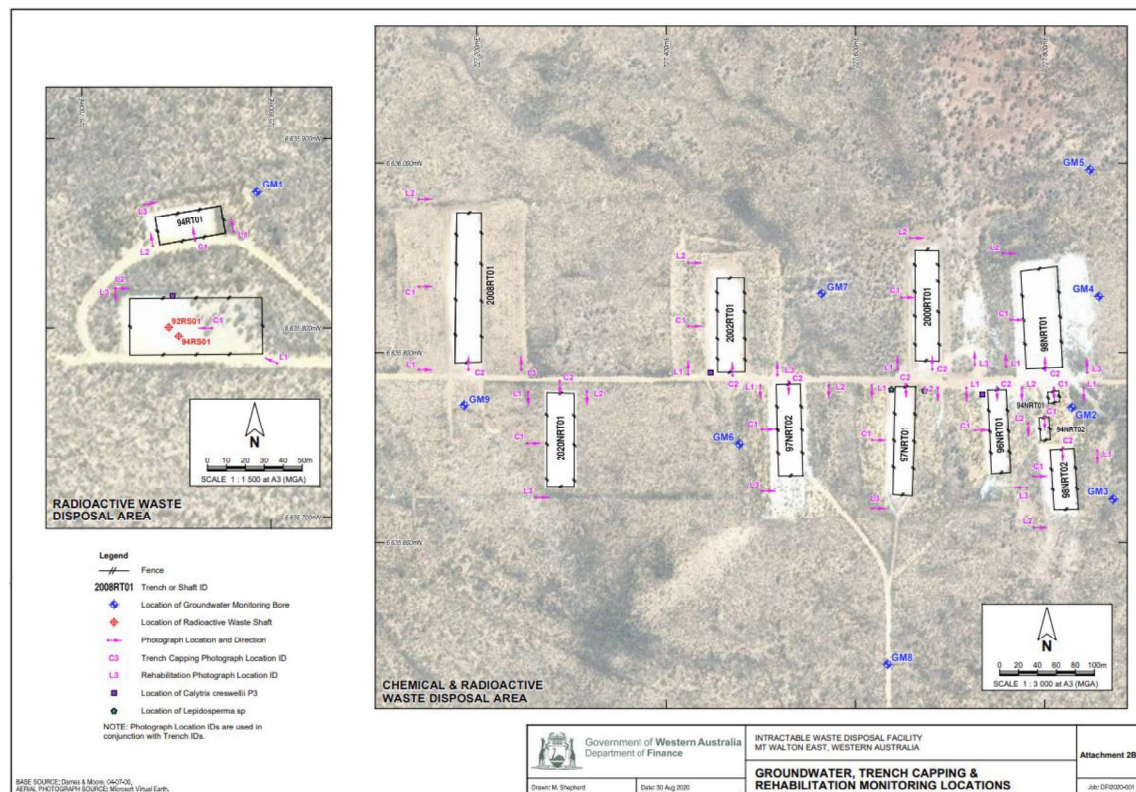


Figure 2: Groundwater monitoring location

Schedule 2: Premises boundary

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

Table 2: Premises boundary coordinates (GDA94)

Easting <i>Longitude (x)</i>	Northing <i>Latitude (y)</i>	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

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

MR MARK BRYDEN
GENERAL MANAGER OPERATIONS
DEPARTMENT OF HOUSING AND WORKS
ATTN: MS ERIN CLINCH, IWDF PROJECT DIRECTOR
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 LOW-LEVEL 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.

17 FEB 2026

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 2029

* 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 2029

RADIATION SAFETY ACT

CONDITIONS, RESTRICTIONS AND LIMITATIONS (SECTION 36)

SPECIAL CONDITIONS

- 1. 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.**
- 2. 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.**

CERTIFICATE NO: RS 13/2011 20590

EXPIRES ON: 08 February 2029



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.

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

A handwritten signature in dark ink, appearing to read 'H. Upton', with a stylized flourish at the end.

Ms H Upton
Secretary, Radiological Council

Encl. Certificate of Registration

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.**

CERTIFICATE NO:

RS 13/2011 20590

EXPIRES ON:

08 February 2026

Appendix C ASNO Permit PN207



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 <i>nuclear material</i> 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 <i>Nuclear Non-Proliferation (Safeguards) Act 1987</i> .
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 <i>the Act</i> .
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 <i>Permit Holder's Representative</i> 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 <i>the Act</i> .
Inventory	The entire physical stock of <i>nuclear material</i> , 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 <i>nuclear material</i> 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 <i>nuclear material</i> , enrichment of <i>nuclear material</i> , 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	<i>Source and special fissionable material</i> the same as in <i>the Act</i> but for the purposes of this Permit excludes material that has been deemed by ASNO as practicably irrecoverable (Schedule 3, Article 11 of <i>the Act</i>) or material that is the subject of an exemption or termination declaration under section 11 of <i>the Act</i> .
Nuclear Security	The prevention of, detection of, and response to, criminal or intentional unauthorised acts involving or directed at <i>nuclear material</i> , nuclear facilities and associated items. NOTE: <i>The Act</i> refers to physical security, which in relation to the protection of <i>nuclear material</i> , 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 <i>the Act</i> .
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 Housing and Works.

Unless otherwise agreed, this Manual remains the property of the Department of Housing and Works.

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 Housing and Works 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
18	17/07/25	Update department from Finance to Housing and Works. Other minor updates.	JWS	MJS	MJS

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FACILITY MANAGEMENT CONTRACTOR IWDF PROCEDURES MANUAL

1. INTRODUCTION

1.1 BACKGROUND

The Department of Housing and Works (DHW) 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 DHW 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 DHW maintains a high level of environmental performance.

The structure of the EHSQMS is given in the *DHW 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 DHW. This Manual should be read in conjunction with the relevant FMC procedures and with the DHW 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		Admin & financial management, costing & reporting				
• Inspection/ waste quality review • Preparation • Packaging • Transport						
Disposal		Operational & system auditing				
		Waste inventory / database				

Figure 1b FMC Personnel Chart

FMC PERSONNEL CHART						
Project Director Mark Shepherd						
Project Manager John Shepherd						
Operations Manager	Engineering Manager	Administration, Systems & Reporting Manager	Technical Subcontractors	Health & Safety Manager	Environment Manager	Radiation Manager
Mark Shepherd	TBA	Mark Shepherd	Pinpoint Drafting Colin Reeves	TBA	John Shepherd	Stuart Parr
Alternative	Alternative	Alternative	McMullan Nolan Surveyors	Safety Officer/ Nurse	Alternative	Radiation Specialist
John Shepherd	TBA	Stephen Patmore	Analytical Reference Laboratories	TBA	Mark Shepherd	TBA
		Assistant TBA	PGV Environmental Paul van der Moezel			
			Support Staff Aurora Environmental			
			Technical Assistant Shayne Pittaway			

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.

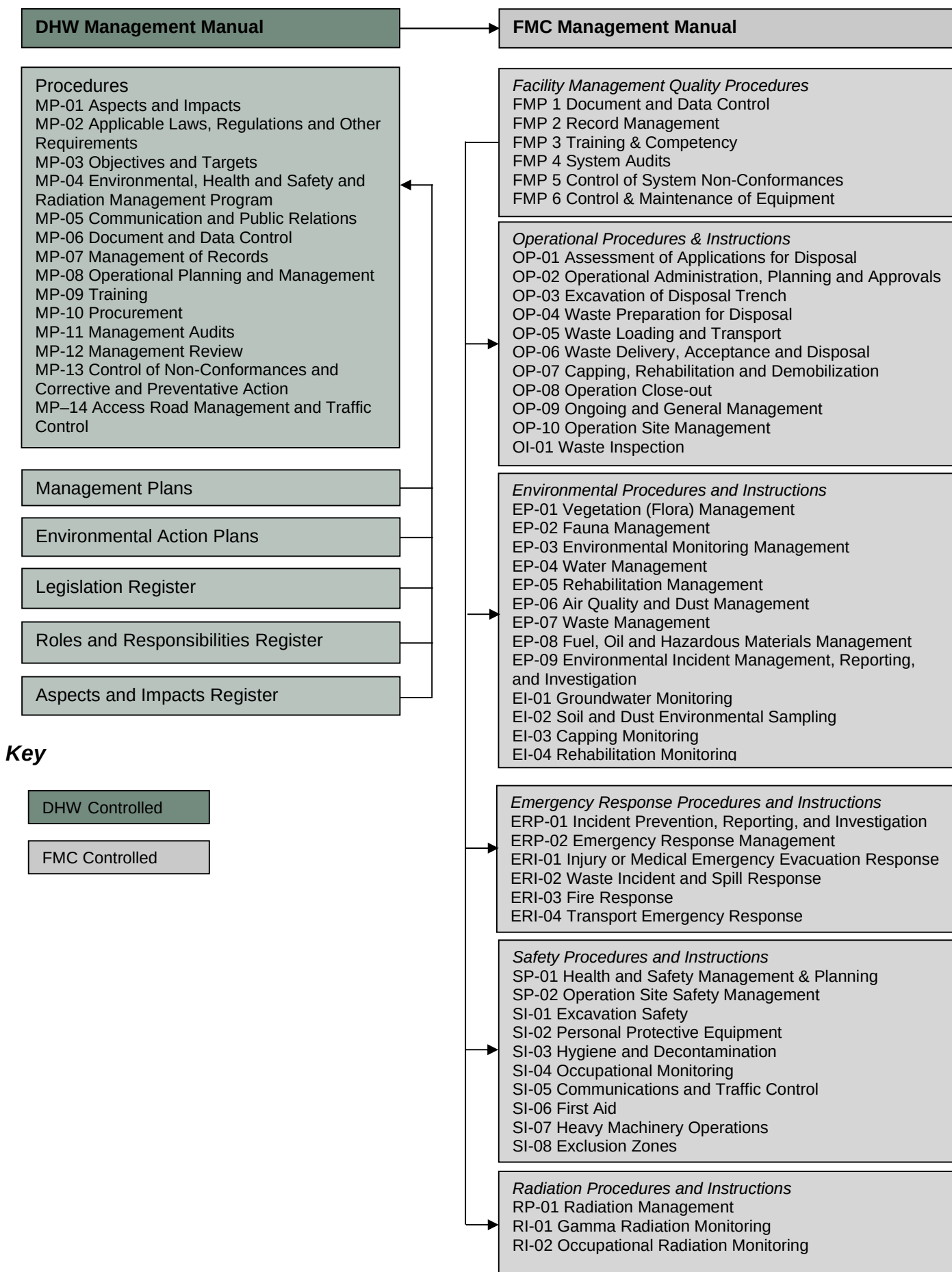
Each **Procedure** defines the who, what, where, when, how, and why of operational activities to allow them to be undertaken in a manner acceptable to DHW and in accordance with the IWDF policy statement.

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 DHW Management Procedures is provided in **Figure 2**.

The context of these procedures in relation to the DHW IWDF Management System is given in Figure 1 of the *DHW System Manual*.

FIGURE 2**IWDF SYSTEMS STRUCTURE**

3.2 DHW MANAGEMENT PROCEDURES

These procedures define the management of IWDF activities undertaken directly, or coordinated, by DHW, 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 DHW 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 DHW 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 DHW staff) and the additional physical locations in which FMC activities are carried out.

In cases where DHW procedures exist, but there is no specific FMC Management procedure, the involvement/responsibility of the FMC is either minimal or fully specified in the DHW 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 DHW 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 DHW 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 DHW 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.

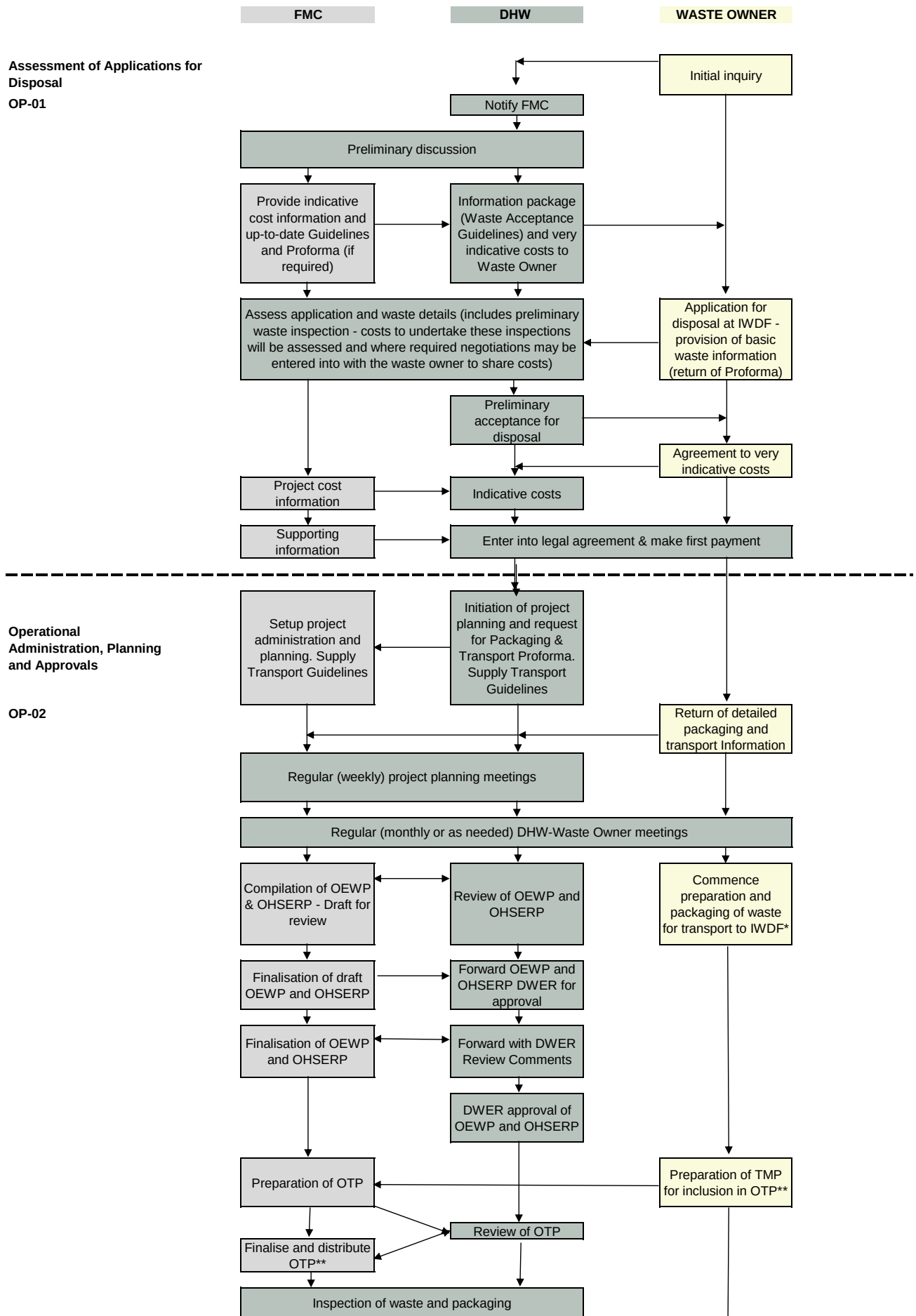
3.12 OPERATION PROCEDURES

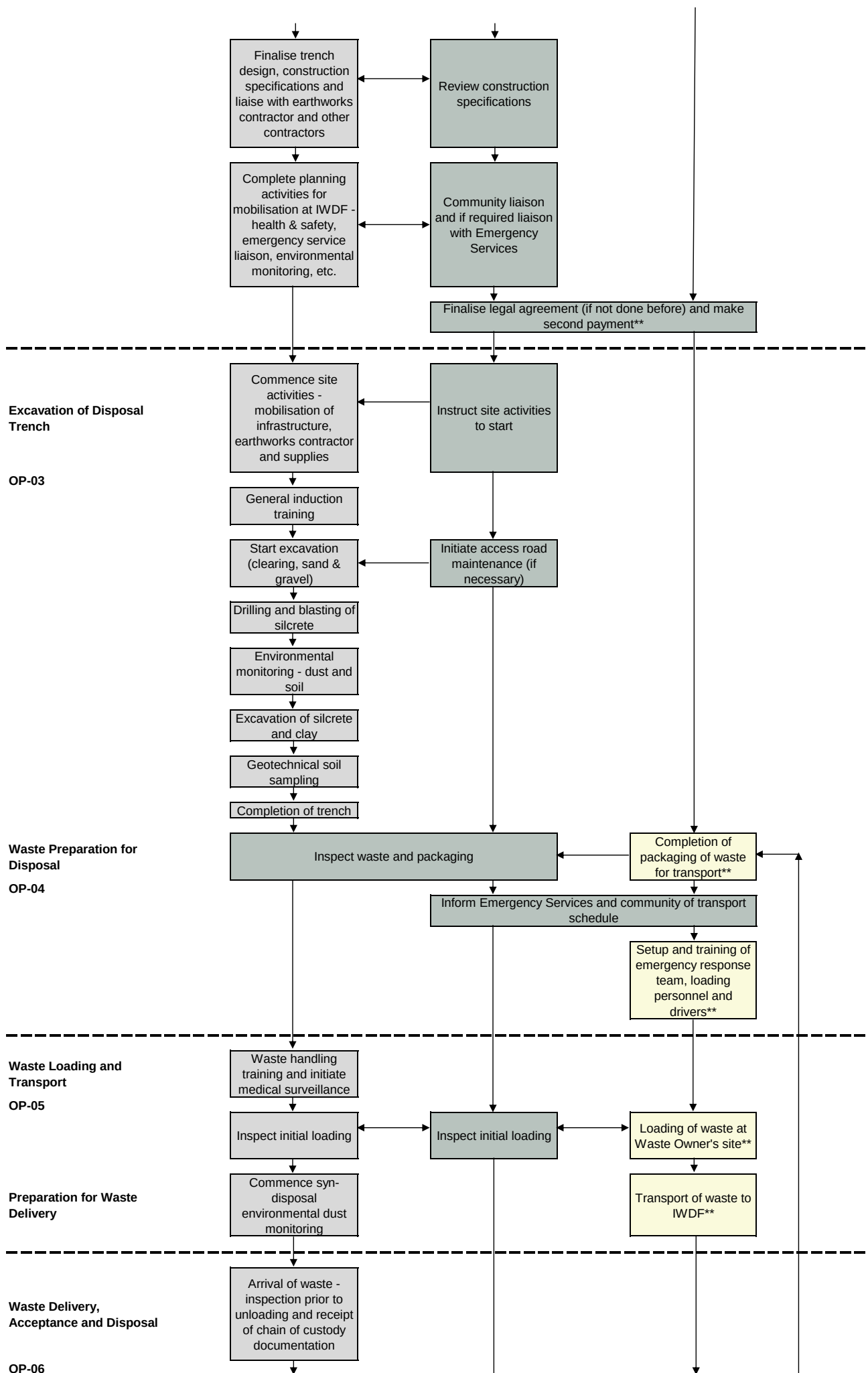
In addition to IWDF procedures, Operation Procedures must be referred to during disposal operations (e.g., Operation Environmental Procedures). These documents are generated on an operation-by-operation basis following applicable guidelines (see the DHW System Manual), and include reference to waste-specific quantities, hazards, and controls. These are referred to in many IWDF procedures and instructions.

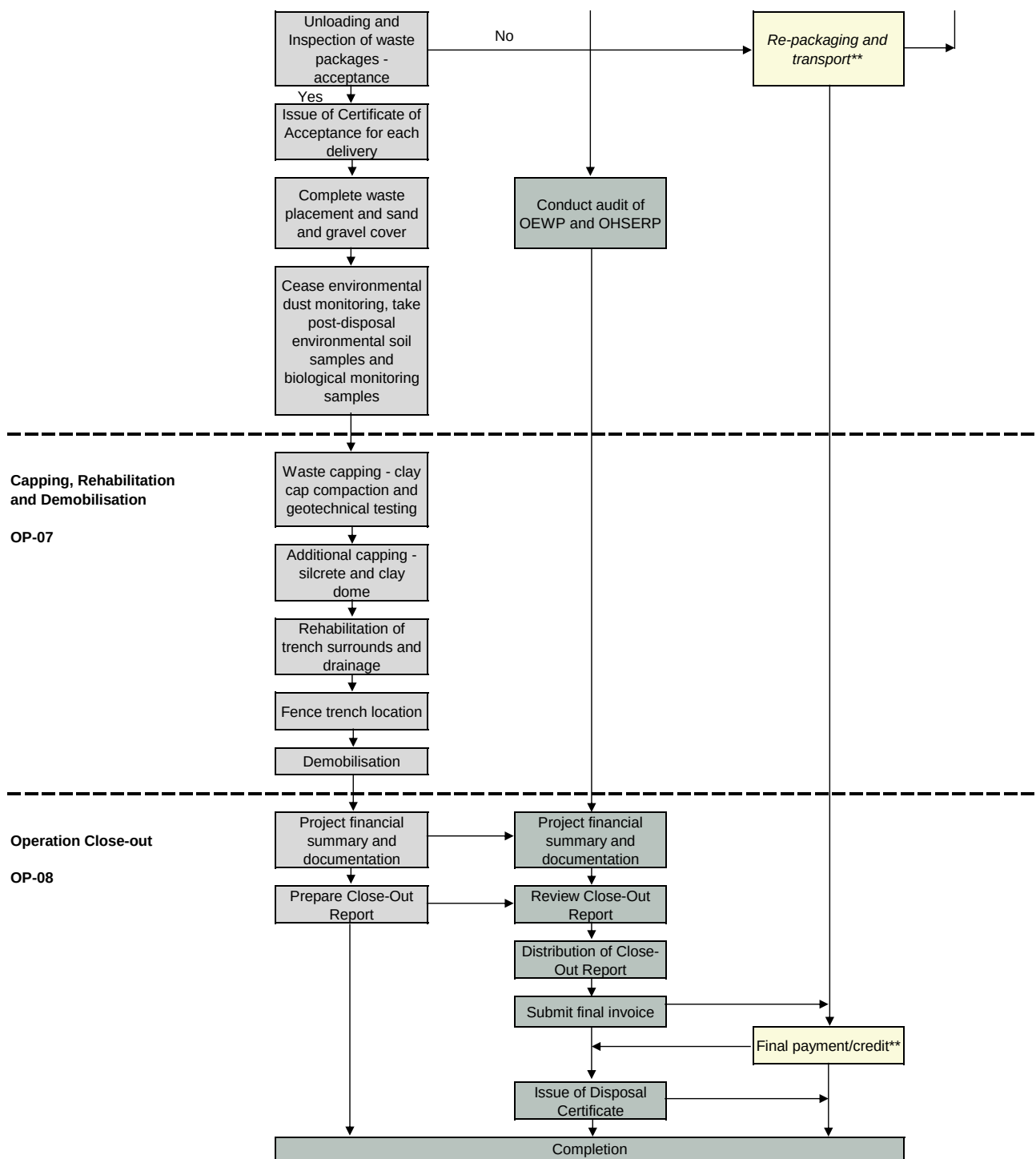
Intractable Waste Disposal Facility - Mt Walton East

Waste Disposal Operation

Typical Sequence of Activities







Notes:

- * Packaging can be undertaken by DHW for small consignments of radioactive wastes
- ** Transport of small consignments of chemical waste may be undertaken by DHW 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
- DHW Department of Housing and Works
- 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

2025 – 2026 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			
		Environmen tal	Socio- political	Legal	Health & Safety		Environm ental	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 each day, all personnel must blow 0.00 on the alcohol breathalyser to be authorised to commence work. Any persons on site suspected of consuming drugs will be confined to the camp area and removal from site will be arranged. Alcohol consumption is prohibited during active 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
All	Failing to update the community on IWDF activities	Low	Medium	Medium	Low	IWDF Annual Community Meetings (IACMs). 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 personnel 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 DHW 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 footwear 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			
		Environmen- tal	Socio-political	Legal	Health & Safety		Environmen- tal	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). 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.	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
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 notification and authorisation by IWDF Project Director. All vehicles equipped with bullbars.	Medium	Low	Low	Medium
Operational Planning	Disposal cell size incorrect	Low	Low	Medium	Low	Calculations checked on multiple occasions by two people. A 5% buffer is added to the cell dimensions to ensure all waste can be accommodated.	Low	Low	Low	Low
Operational Planning	Poor coordination with transport and cell completion	Low	Low	Medium	Low	Experience with previous excavations and the clay material being excavated allows accurate estimation of completion time and flexibility in the transport contract allows coordination with transport company. Updates are provided to ensure good coordination and a buffer of a few days is provided due to the required equipment changes post excavation.	Low	Low	Low	Low
Operational Planning	Not obtaining all of the required approvals for disposal	Low	Medium	High	Low	The approvals required for a disposal operation are well documented and understood by both the FMC and the DHW. As a result, the legal agreement between DHW and the waste owner cannot ratified until approvals are in place.	Low	Low	Low	Low
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

Aspects and Impacts (Risk) Register - IWDF Mt Walton East

Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
		Impact					Impact			
		Environmen- tal	Socio-political	Legal	Health & Safety		Environmen- tal	Socio-political	Legal	Health & Safety
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
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 disabled 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
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			
		Environmen- tal	Socio-political	Legal	Health & Safety		Environm- ental	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
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
Waste Acceptance and Inspection	Unloading leaking or contaminated waste containers	Medium	Low	Low	Medium	Waste is only accepted at the site after it has been inspected to ensure no containers have leaked during transport or that there is no contamination of the packaging, and the inspection form has been signed. Waste cannot be unloaded prior to a satisfactory inspection. Two people check the inspection has been satisfactorily conducted, prior to acceptance and unloading of the waste.	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			
		Impact					Impact			
		Environmen tal	Socio- political	Legal	Health & Safety		Environm ental	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 DHW IWDF Project Director or FMC Project Manager.	Low	Low	Low	Low
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.	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/egress point.	Low	Medium	Significant	Significant
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

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Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
		Impact					Impact			
		Environme ntal	Socio- political	Legal	Health & Safety		Environm ental	Socio- political	Legal	Health & Safety
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
Surface Water Management	Excavation becomes flooded	Low	Medium	Low	Low	Clay bunding is used to block the ramp to prevent runoff water entering the cell during operations when rainfall is forecast or observed to be imminent.	Low	Low	Low	Low
Surface Water Management	Water pools at the suface near the completed excavation	Medium	Medium	Low	Low	Pooling of water at the surface of the cell (which is undesirable as it could potentially leach into the cell) is prevented by the construction of a watershedding clay dome over the cell and associated V-drains each side of the dome that transfer the water downslope and away from the cell. Six monthly monitoring of the dome and V-drains ensures their continuing effectiveness.	Low	Low	Low	Low
Groundwater Management	A groundwater table develops which intersects the disposal cell	Medium	Medium	Low	Low	The site was chosen because it has no groundwater table, but drill data are used to ensure that all cells are a minimum of 5m above the clay/graintoid basement interface to ensure that even if a groundwater table develops it will not intersect the cell. Monitoring bores are checked six-monthly to confirm that a groundwater table has not developed.	Low	Low	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
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
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

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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 DHW IWDF Project Director or FMC Project Manager.	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
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 opposite side of the trench to the ramp so that there is another access point.	Low	Medium	Significant	Significant
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

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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 additional 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
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
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

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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
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 occurring.	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 DHW IWDF Project Director or FMC Project Manager.	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 toluene in waste).	Low	Low	Low	Low
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 opposite side of the trench to the ramp so that there is another access/egress 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

Aspects and Impacts (Risk) Register - IWDF Mt Walton East

Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
		Impact					Impact			
		Environmen- tal	Socio-political	Legal	Health & Safety		Environmen- tal	Socio-political	Legal	Health & Safety
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 additional 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
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 DHW and the FMC via email and phone. IWDF Annual Community Meetings (IACMs). System audits. Management Review Meetings (MRMs). Monthly Ongoing Environmental and Operational Management Meetings (OEOMs).	Low	Medium	Medium	Low
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 DHW. 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 DHW 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 DHW 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 DHW 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 duration of the disposal operation.	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			
		Environmen- tal	Socio-political	Legal	Health & Safety		Environmen- tal	Socio-political	Legal	Health & Safety
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
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 treatment	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
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

Aspects and Impacts (Risk) Register - IWDF Mt Walton East

Aspect	Hazard / Risk	PRIOR TO CONTROLS				Controls Implemented	AFTER CONTROLS			
		Impact					Impact			
		Environmen- tal	Socio-political	Legal	Health & Safety		Environmen- tal	Socio-political	Legal	Health & Safety
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
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 necessary (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). Liaison with relevant government bodies and independent authorities (Radiological Council, DWER etc). Management System backed up on both DHW and FMC file serves. Archiving and Retention and Disposal Schedules. Regular general contact between DHW and the FMC via email and phone. IWDF Annual Community Meetings (IACMs).	Low	Medium	Medium	Medium

APPENDIX R

2025 – 2026 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
Environmental Protection	Dangerous Goods Safety Act 2004
	Packaging and Transport Guidelines
	Biodiversity Conservation Act 2016
	EP-01 Vegetation (Flora) Management
	Bush Fires Act 1954
	EP-01 Vegetation (Flora) Management
	DWER 2021 Guidelines: Assessment and Management of Contaminated Sites
	EI-01 Groundwater Monitoring
	Environmental Protection (Clearing of Native Vegetation) Regulations 2004
	EP-01 Vegetation (Flora) 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 of Disposal Trench
	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	Work Health and Safety Commission, First aid in the workplace: Code of practice 2022 (DEMIRS)
	SI-06 First Aid
	Work Health and Safety Commission, 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 & 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 (Updated January 2015)
	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 (Updated October 2024)
	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

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 2210.1:2025 Safety, protective and occupational footwear - Guide to selection, care and use SI-02 Personal Protective Equipment
	AS/NZS 1801:2024 Occupational protective helmets SI-02 Personal Protective Equipment

APPENDIX S

2025 – 2026 Management Review Meetings Minutes



Agenda			IWDF MT WALTON EAST MANAGEMENT REVIEW MEETING – No. 23
Time/Day:	16 December 2025 at 9:30am		
Venue:	Aurora Office – Boardroom – Dilhorn House, 2 Bulwer St, Perth		
Invitees:	Name	Representing	
	Mark Shepherd (MS)	Aurora – Principal Environmental Scientist (Director)	
	John Shepherd (JS)	Aurora – Senior Environmental Scientist	
	Erin Clinch (EC)	Department of Housing and Works – Project Director	
	Michelle Spencer (MSp)	Department of Housing and Works – Contract Manager	

1. Open and Welcome

EC opened the 23rd IWDF Management Review Meeting (MRM) by welcoming all attendees.

On 9 December 2025, MSp emailed the draft agenda to participants, inviting feedback. The annotated agenda was subsequently shared with all attendees on 12 December 2025.

2. Minutes of the Previous Meeting

The draft minutes from the previous MRM, held on 12 June 2025, were emailed to attendees on 23 June 2025. The final version was distributed on 1 August 2025.

The minutes were endorsed and verified as accurate.

3. Business Arising from Previous Meeting

3.1 Management System review

Action from Previous Meeting:

EH was tasked with reviewing MP-04 to confirm whether the management system review period was captured. CG was to ensure that Management Plans and Action Plans included defined review periods.

Response:

MSp confirmed MP-04 requires Management Plans to be audited every six months, Action Plans during monthly OEOMs, and disposal-specific procedures at least once per disposal. The IWDF team verified that the Plans include review periods.

MS noted delays when accessing MANS2 documents via SharePoint.

The IWDF team agreed that the titles of the Waste Acceptance Guidelines should indicate that they include the Waste Acceptance Proformas within the document.

Actions Arising:

- MS to complete IWDF Form 50 to schedule reviews of specific Procedures and Plans during OEOMs. Once completed, MSp will incorporate these procedures into subsequent OEOM agendas.
- MSp to liaise with IT to investigate the slow download times for Teams Channel documents experienced by MS.
- JS to provide MSp with the updated Management Plans reflecting the revised Waste Acceptance Guideline titles. MSp to update the MANS2 spreadsheet accordingly and upload the revised document to MANS2.

3.2 MP-09 Public Access Procedure Guideline**Action from Previous Meeting:**

FMC is to implement the new guideline titled MP-09: IWDF Database Guideline into the Management System once finalised.

Response:

MSp has completed MP-09 and uploaded the document to MANS2 in preparation for submission to DWER for review.

3.3 Waste Acceptance Guidelines (Chemical & Radioactive)**Action from Previous Meeting:**

CG to provide the updated Guidelines

Response:

On 2 July 2025, CG emailed MSp to advise that the Waste Acceptance Guidelines had been updated and uploaded to the Teams Channel.

MS reported that the Waste Acceptance Guidelines have been updated to reflect staff changes. The Radiation Waste Acceptance Guidelines previously listed Ping Liu as a contact.

Actions Arising:

- JS to provide MSp with the updated changes made in the MRM to the Waste Acceptance Guidelines. MSp will incorporate these updates into MANS2.

3.4 Training**Action from Previous Meeting:**

MS to provide the updated training register.

Response:

MS provided the updated training register to MSp on 1 July 2025 and again on 11 December 2025 with the necessary updates for the site visit. Since then, JS has completed additional training.

Actions Arising:

- MS to provide an updated training schedule reflecting the recent training completed with JS.

3.5 Radiological Council registration renewal due 8 February 2026

MSP received the renewal form from the Radiological Council on 16 December for Registration RS 13/2011 20590. It was noted by the IWDF team that the renewal didn't include the amendments from the Safety Case as approval notification is outstanding.

Actions Arising:

- MSP to follow up on the Safety Case approval letter and arrange for the registration renewal form to be completed and signed.

4. IWDF Management Systems

4.1 Management & Policy Manual - 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.

MS reported that the Management Manual has been consolidated, combining FMC and DHW into a single document. MS reviewed the updated Manual and implemented minor changes.

The material changes are captured in the table below:

Procedure	Section	Suggested Change
Operation Guidelines	2.4 Page 8	Updating the naming of the Waste Acceptance Guidelines to incorporate Proforma
Management Procedures	Figure 2 Page 10	Add MP-09 Public Access Procedure
Management Procedures	2.6.1 Page 11	Add MP-09 Public Access Procedure

Actions Arising:

- JS to confirm that the version stored in MANS2 matches the document signed by EC during the last MRM. MSP to update the correct version in the MANS2 spreadsheet.
- JS to implement the changes listed in the table above.

4.2 Management Plans – updates

MS reported that a review of the Management Plans was completed in December 2025 (Revision 34). Minor formatting adjustments were applied to the document, and a summary of the technical changes to the plans is provided in the table below.

Management Plan	Version	Review Date	Change
Health and Safety	34	16/12/25	Add Incident Prevention, Reporting and Investigation to ERP-01
Radiation	34	9/12/25	Forms changed from PRM to IWDF forms.

Management Plan	Version	Review Date	Change
Radiation	34	16/12/25	<i>Replace</i> Provide community members with a copy of each radiation monitoring report <i>with</i> Provide community members with information on each radiation monitoring report
Transport	34	16/12/25	Name change due to reform changes – DEMIRS to DMPE & LGIRS
Waste Acceptance	34	16/12/25	Amend the names for the Waste Acceptance Guidelines and reflect that the Waste Acceptance Proforma is located in the guidelines.
Community Liaison	34	8/12/25	Removed reference to community representatives as there is no CLC.

4.3 Registers –updates Legal & Other Requirements and Aspects and Impacts registers

4.3.1 Legislative and Other Requirements Register

MS reported the register had been reviewed and remains current.

4.3.2 Aspects and Impacts Register

MS reported the register had been reviewed and changes made as detailed below.

Aspects and Impacts Register	Version	Review Date	Change
Line 7 – testing and tagging	5	16/12/25	Slight wording changed.
Line 8 – drug and alcohol	5	16/12/25	Slight wording changed.
Line 18 – smoking	5	16/12/25	Slight wording changed.
Line 21 – vehicle collision	5	16/12/25	Discussed changing the wording and it was amended slightly to notify the IWDF Project Director.
Line 85 – trench backfilling and capping	5	16/12/25	Removed arsenic and replaced with toluene

MS and JS explained to EC and MSp how ‘*After Controls*’ are calculated in the Risk Register. They walked through the risk matrix and emphasised that, even after implementing controls, the residual risk can remain ‘High’ (shown in red).

The IWDF Team reviewed potential approaches for future Tagging and Testing requirements:

- **Option A:** Engage a specialist to perform on-site testing.
- **Option B:** Apply for a WorkSafe exemption to reduce the required testing frequency.
- **Option C:** Train FMC staff to become competent in conducting the tests and purchase a PAT machine for this purpose.

MS expressed interest in pursuing **Option C**.

Actions Arising:

- EC to recommend Option C to DHW Management to obtain acceptance of the proposal or preferred alternative.
- MSp to procure a defibrillator to be available on-site prior to the next scheduled visit in April 2026.
- MS to check the contents and expiry dates of the first-aid kits on-site during the April site visit.

4.4 EHSQMS Procedures

MS reported that all Management Procedures (except MP-09) as well as document control matrices and registers were reviewed and updated in December 2025.

The material changes are captured in the table below.

Procedure	Suggested Change
MP-01 Document and Data Control	Minor spelling and grammar adjusted
MP-02 Record Management	Minor spelling and grammar adjusted
MP-03 Training and Competency	Minor spelling and grammar adjusted
MP-04 Management System Review & Auditing	Minor spelling and grammar adjusted
MP-05 Control of Non-Conformances	Minor spelling and grammar adjusted
MP-06 Communication and Public Relations	Minor spelling and grammar adjusted
MP-07 Procurement	Minor spelling and grammar adjusted
MP-08 Ongoing Site Management	Minor spelling and grammar adjusted
MP-09 Public Access Procedure Guidelines	New document and recently approved. No need for revision.
IWDF Document Control Matrix	No change
IWDF Risk Register	Discussed above
IWDF Complaints register	No complaints recorded since November 2024.
IWDF Legal Register	Discussed above
Roles & Responsibilities	No change

The team discussed the need to review SI-05 Communications and Traffic Control to determine whether it should mandate carrying a Starlink device and a personal locator beacon when attending site. Given the site's remote location, further investigation is required.

Actions Arising:

- EC and MSp to review SI-05 Communications and Traffic Control as this is part of the documents sent with the Mt Walton Road Permits. This needs to be added in the discussion at the January OEOM.
- MSp to send emergency contact list to MS.

4.5 Performance and Compliance Reporting

MS reported that he has commenced auditing for the next PCR.

The draft 2024-25 PCR was uploaded to the Teams share drive on 5 August 2025. The finalised 2024-25 PCR was submitted to DWER on 25 September 2025.

4.6 Annual Review of Finance R&D Schedule

A review of the IWDF Retention and Disposal Schedule was completed. The only update since the last MRM is the renaming of DEMIRS, which is now referred to as the Department of Mines, Petroleum and Exploration (DMPE). This file will be submitted to Records when the Records Team requests the latest IWDF Retention and Disposal Schedule.



Extract from
Department of Hous

4.7 Management System Upgrade

The Management System has not yet been submitted to DWER as some forms referenced in the Management Plan were missing from MANS2. FMC and DHW are currently reconciling these documents. DHW intends to submit MANS2 to DWER by the end of 2025.

5. Action Plans

5.1 Performance against 2025 – 2026 Action Plan

MS reported that all actions in the 2025–2026 Action Plans have been completed to date. The details of these actions are provided in the table below:

Action Plan	Improvement Target	Action	Responsibility	Required Completion Date	Status
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.	DHW IWDF Project Director, FMC Systems Manager, Management Team	Prior to October Site Monitoring visit.	An Asset Register was created, and the FMC used it onsite to verify asset details. This register will be reviewed during each site visit.
6 - RADIATION	Completed procedure for providing public access.	Complete and implement a detailed procedure for allowing public access to the waste registers	DHW Contract Manager	3 months after database completed (6 th of May 2025)	Completed and will be submitted to DWER with the MANS2. This document is known as MP-09

		(chemical & radioactive).			Public Access Procedure Guideline.
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	1 August 2025	Completed

The team discussed the potential implementation of a Fauna Survey and adding it to the Action Plan. The last Fauna Survey, conducted around 2010, was a desktop review. Before including this as an action item, the team needs to assess the cost versus benefit of undertaking the survey.

EC recommended reviewing Action Plans at each OEOM to identify any actions requiring updates. At the next OEOM, the team will consider additional items to include in the plan.

Actions Arising:

- MSp to include a discussion on Action Plans in each OEOM.

6. Compliance Audits

6.1 Ministerial Statement

A six-monthly compliance audit against Ministerial Statement 562 was completed.

6.2 License, Permit and Registration

No non-compliances have been recorded to date.

6.3 Management System

No non-compliances have been recorded to date.

6.4 Management Plans

No non-compliances have been recorded to date.

6.5 Ongoing Suitability of Management Plans

The update has been completed and is considered satisfactory.

6.6 Liaison with National and International Intractable Waste Management Facilities

MS & JS reviewed overseas facilities and created a PowerPoint presentation. The technology improvements observed were primarily related to tectonic risk.

In summary, no new technologies have emerged that would require changes to the current approach at the IWDF. EC noted that it would be useful to identify which facilities are government run versus privately operated when making future comparisons.

Please refer to the **Global Low Level Radioactive Waste Disposal Facilities** presentation for further detail.

7. Nonconformance and Corrective and Preventative Actions

No new CARs have been received to date, and the IWDF currently has no open CARs.

8. Electronic Document Library

8.1 Recent updates and changes

MS shared the Document Library with MSp on 7 October 2025. The 2025-26 Document Library will be provided at the next MRM scheduled for June 2026.

MSp confirmed that the 2024–25 Document Library has been saved in the U: drive and in TRIM to ensure compliance with record-keeping requirements.

9. Guideline Review and Changes

The following guidelines were reviewed and updated in December 2025 with a copy provided to MSp on 9 December 2025:

- Environmental and Waste Acceptance Guidelines

10. Monitoring

10.1 Groundwater

Groundwater monitoring was undertaken in October 2025, and no groundwater has been detected in any of the monitoring bores. Next groundwater monitoring is scheduled for April 2026.

10.2 Capping

Capping monitoring was last completed in October 2025 with no capping issues reported. Next capping monitoring is scheduled for April 2026.

10.3 Rehabilitation

Rehabilitation monitoring was last completed in October 2025. Next rehabilitation monitoring is scheduled for April 2026.

Only two trenches now require monitoring, as all others have been rehabilitated. MS intends to update the site plan to reflect this status, which will be completed before the next PCR.

Actions Arising:

- MS to update the site plan before the next PCR.

10.4 Dose constraint monitoring – report on monitoring results to date

Thermo-Luminescent Dosimeter (TLD) badges have been issued to MS with one control placed at the site office and are worn by MS (or substitute) to monitor whole body dose exposures during site monitoring activities. Dose exposure data are available for the April 2021 to April 2025 period.

Results returned a dose exposure below the Minimum Detection Level (MDL) of 0.01 mSv for each quarter. The total accumulated dose to date is 0.02 mSv. 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.

The October site visit data will be included under the October–December period. This information will be available in January 2026 and therefore reflected in the June 2026 MRM minutes.

Actions Arising:

- MS to provide MSp with the dose exposure data once it has been received.

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
October site visit	TBC

*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 in October 2025, was in excellent condition. The second half of road had minor sand blowout.

11.2 Firebreaks

Inspection of the firebreak during the October 2025 monitoring visit concluded that there was minor growth only in drains. Spraying was conducted. Next spraying to be conducted during the April site visit.

11.3 Site Infrastructure maintenance

During the October 2025 site visit, minor works and activities were completed, including:

- Repairing two doors.
- Reviewed the road signs requested by MSp and provided recommendations and feedback.
- Validating the Asset Register.
- Inspecting the onsite defibrillator and recommending its replacement.

Actions Arising:

- MSp to arrange replacement of the onsite defibrillator for the April site visit.
- As noted in section 4.3, a review will be undertaken on methods for future testing and tagging of equipment.

12 Staff Training Needs

12.1 Training requirements

The following staff training has occurred since June 2025:

- JS has completed the IWDF systems training.

MS provided MSp the updated staff training schedule on 11 December 2025. This update mentioned the site visit in October for Mark Shepherd and Shayne Pittaway.

Actions Arising:

- JS to provide MSp with the updated staff training schedule, including details of his training.

13 Radioactive Issues

13.1 IWDF Safety Assessments and Safety Case

MSp advised that Duncan Surin provided interim confirmation that the IWDF Safety Case was approved, and the Reform Changes have been amended on 4 November 2025.

Actions Arising:

- MSp to follow up Duncan for the formal notification from the Radiological Council of acceptance of the Safety Case.

14 Communications

14.1 Annual Community Meeting

The inaugural Annual Community Meeting was held on 16 October 2025 at the Goldfields Arts Centre. 4 people attended in person and 1 attended online. Future meetings will be 'in-person' meetings only.

Feedback was gathered and majority advised that future meetings should be alternated between Kalgoorlie and Coolgardie. Afternoon sessions were the most popular choice among attendees.

Majority of respondents were satisfied with the structure, the presenters and the overall presentation. One respondent, while satisfied with the FMC's knowledge and replies to questions, was dissatisfied with the way attendees' questions were handled, the topic relevance, and overall content.

14.2 Complaints

No complaints received.

14.3 Finance IWDF website content - status update

MSp advised that she made minor updates to the IWDF website with the Communications Team. The Industry Liaison email contact was removed as a contact and all communication changed to the IWDF-MountWalton@dohw.wa.gov.au email address. Reform changes were also updated. The IWDF Handbook and Brochure had been published on wa.gov.au on 9 July 2025 and the updates were as follows:

The IWDF Handbook changes are mentioned in the table below. Only reform changes were made to the IWDF Brochure.

Page	Change made
Throughout	Reflected the reform changes from Department of Finance to Department of Housing and Works.
4	Replaced off site with off-site.
5	Replaced preexisting with pre-existing.
9	Add: 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) up until June 30, 2025. The Department of Finance became the Department of Housing and Works (DHW) on the 1 st of July 2025, with the responsibility for the management and operation of the IWDF transferred accordingly.
10	Removed Project/ from the flow chart.
46	Change definition. DHW - The Department of Housing and Works. The Department is the current Government agency responsible for assisting the Minister for Works in the administration of the Public Works Act 1902 (WA). 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. To: DHW - The Department of Housing and Works is the current Government agency responsible for assisting the Minister for Works in the administration of the Public Works Act 1902 (WA). 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.
47	Change definition: Finance - The Department of Finance was the previous Government agency responsible for assisting the Minister for Works in the administration of the Public Works Act 1902 (WA).

Actions Arising:

- MS to amend the guide for visiting site.
- The weed management plan and fauna survey is approximately 15 years old. EC & MSp to discuss and review.
- Page 22 replace figure 4 with updated schematic shaft design.
- Page 29 includes the 2025 photo of point location 3.
- Page 44 Figure 9 IWDF Procedure Structure needs to have MP-09 added to the Management Procedures.

15 FMC Performance

15.1 Performance against FMC 2025 – 2026 estimated costs

MS reported that the budget is tracking well. December and January have been lighter periods, with March and April expected to be busier. The budget was reviewed.

EC queried the next steps following formal approval of the Safety Case. MS advised that post-closure activities may be required, including addressing the uncovered domes that

have remained for 20 years. According to the 2023 document, prior to site closure and transition to care and maintenance, sand will need to be placed and stabilised with vegetation as part of rehabilitation efforts. A trial run of this method will be conducted during the next disposal to test its effectiveness.

15.2 FMC performance against DHW contract management plan

Aurora demonstrated strong performance in delivering on the Contract Management Plan.

Key achievements included:

- Implementing additional updates and amendments to the Management System, particularly within the Management Plans and associated forms.
- Providing support and confirmation during the sign review process.
- Verifying and updating the Asset Register.
- Contributing positively to the IWDF Annual Community Meeting.
- Finalising and submitting the Safety Case.

16 Other Business

16.1 Disposal applications – new and updates to existing applications

MS noted that although two enquiries have been received since the last MRM, no new applications for waste disposal have been submitted.

16.2 IWDF File Notification Areas

EC advised that one File Notification Area (FNA) request had been received concerning Reserve 42001, the location of the IWDF facility. The FMC was consulted regarding this matter.

17 Meeting Concluded

1:40pm

18 Next Meeting

To be scheduled for 16 June 2026



Agenda			IWDF MT WALTON EAST MANAGEMENT REVIEW MEETING – No. 24
Time/Day:	19 June 2026 at 9:30am		
Venue:	Aurora Office – Boardroom – Dilhorn House, 2 Bulwer St, Perth		
Invitees:	Name	Representing	
	Mark Shepherd (MS)	Aurora – Principal Environmental Scientist (Director)	
	Erin Clinch (EC)	Department of Housing and Works – Project Director	
	Seema Bux (SB)	Department of Housing and Works – A/Contract Manager	
Apologies:	John Shepherd (JS)	Aurora – Senior Environmental Scientist	

1. Open and Welcome

EC opened the 24th IWDF Management Review Meeting (MRM) by welcoming all attendees.

On 17 June 2026, EC emailed the draft agenda to participants, inviting feedback. The annotated agenda was subsequently shared with all attendees on the same day.

2. Minutes of the Previous Meeting

The draft minutes from the previous MRM, held on 16 December 2025, were emailed to attendees on 13 January 2026. The final version was distributed on the same day.

The minutes were endorsed and verified as accurate.

3. Business Arising from Previous Meeting

3.1 Update IWDF Form 50 to include scheduled reviews of specific Procedures and Plans during OEOMs (MS). Incorporate into OEOM agendas (Msp).

Action from Previous Meeting:

MS to complete IWDF Form 50 to schedule reviews of specific Procedures and Plans during OEOMs. Once completed, MSp will incorporate these procedures into subsequent OEOM agendas.

Response:

EC advised the schedule was developed and updated for the 25/26 period. This item is closed out.

Actions Arising:

- MS to update the dates in the schedule to reflect the 2026/27 financial year.

3.2 Address MANS2 Aurora Access Issues (Slow Downloads) (Msp).

Action from Previous Meeting:

MSp to liaise with IT to investigate the slow download times for the Teams Channel documents experienced by MS.

Response:

EC advised MSp followed up with IT. MS confirmed issue has been resolved and is working okay.

3.3 Incorporate Waste Acceptance Guideline title updates into MANS2 and MANS2 Spreadsheet. (JS/Msp)

Action from Previous Meeting:

Waste Acceptance Guideline titles to be updated into MANS2 and MANS2 spreadsheet. JS to provide MSp with the updated changes made in the MRM to the Waste Acceptance Guidelines. MSp will incorporate these updates into MANS2.

Response:

EC checked MANS2 and advised this has been modified by JS on 16 December 2025. MS confirmed this has been reviewed and is completed. This item is closed out.

3.4 Updated training schedule reflecting the recent IWDF training completed by Aurora Staff (MS)

Action from Previous Meeting:

MS to provide an updated training schedule reflecting the recent training completed with JS.

Response:

MS confirmed training has been completed. This item is closed out.

3.5 Radiological Council registration renewal to be signed and completed (MS)

Action from Previous Meeting:

MSp to arrange for the registration renewal form to be completed and signed.

Response:

MS confirmed this has been signed and completed. This item is closed out.

3.6 Obtain Radiological Council Safety Case Approval (MSp)

Action from Previous Meeting:

MSp to follow up on the Safety Case approval letter.

Response:

EC confirmed this item is closed out. MS advised that the Waste Acceptance Criteria will require review by a RSO before submission to the Radiological Council. It was noted that the review is to be submitted to DHW by July 2027 to allow submission to the Radiological Council before December 2027.

Actions Arising:

- DHW to engage RSO to review waste acceptance criteria mid-2027.
- MS to submit waste acceptance criteria to DHW by July 2027.
- DHW to submit to Radiological Council by December 2027.

3.7 Update Environmental, Health & Safety and Quality Policy signed on 11 December to in MANS2 and MANS2 Spreadsheet (JS/Msp).**Action from Previous Meeting:**

JS to confirm that the version stored in MANS2 matches the document signed by EC during the last MRM. MSp to update the correct version in the MANS2 spreadsheet. JS to implement the changes listed in the table.

Response: EC confirmed this has been completed. This item is closed out.

3.8 Testing and Tagging methodology proposal review (EC)**Action from Previous Meeting:**

EC to recommend Option C to DHW Management. Either obtain acceptance of the proposal or preferred alternative. A review will be undertaken on methods for future testing and tagging of equipment.

Response: EC confirmed this item is closed out. Testing and tagging have since been completed by an external contractor. The methodology will be reviewed during the next financial year prior to the next site visit.

Actions Arising:

- EC to review testing and tagging in the next financial year.

3.9 Procure defibrillator and deploy to site at next scheduled visit (MSp)**Action from Previous Meeting:**

MSp to procure a defibrillator to be available on-site prior to the next scheduled visit in April 2026.

Response: MS confirmed this was installed at the site in May 2026. This item is closed out.

3.10 Inspect first-aid kits at next scheduled site visit (MS)

Action from Previous Meeting: MS to check the contents and expiry dates of the first-aid kits on-site during the April site visit.

Response:

MS confirmed this action has been completed. MS suggested including the first aid kit inspection within Form 52 Site Visit Checklist.

Actions Arising:

- MS to update form 52 adding in Fire Extinguishers as one of the items for checking.

3.11 Review and Update SI-05 Communications and Traffic Control documents (EC)

Action from Previous Meeting:

EC and MSp to review SI-05 Communications and Traffic Control as part of the documents sent with the Mt Walton Road Permits.

Response:

EC advised the documents have been updated but not yet been released. It was noted that the documents sit outside the IWDF Management System. This item is closed out.

3.12 Issue updated Mt Walton Road Emergency Contact List to Aurora (Msp)

Action from Previous Meeting:

MSp to send emergency contact list to MS.

Response: MS confirmed this is completed. MS noted he updates each time they go to site. This item is closed out.

3.13 Update the Rehabilitation Site plan prior to the 25/26FY PCR (MS)

Action from Previous Meeting:

MS to update the site plan before the next PCR.

Response: MS confirmed this has been completed and map updated. This item is closed out.

3.14 Submit October 2025 Dose Constraint Monitoring Report to DHW (MS)

Action from Previous Meeting:

MS to provide MSp with the dose exposure data once it has been received.

Response: MS confirmed this is completed. This item is closed out.

3.15 Update IWDF guide for visiting site (Induction document) (MS)

Action from Previous Meeting:

MS to amend the guide for visiting site.

Response:

MS confirmed this has been completed. This item is closed out.

3.16 Update IWDF Handbook pages 22, 29 and 44 (MS)

Action from Previous Meeting:

MS to amend the guide with the following changes - Page 22 replace figure 4 with updated schematic shaft design, Page 29 includes the 2025 photo of point location 3 and Page 44

Figure 9 IWDF Procedure Structure needs to have MP-09 added to the Management Procedures.

Response:

EC confirmed the required amendments had been completed. It was noted that the rehabilitation photographs remain suitable and do not require annual updates unless the associated figures are amended. This item is closed out.

3.17 Consider an updated fauna survey in 26/27FY budget (EC).

Action from Previous Meeting:

MSp to include a discussion on Action Plans in each OEOM. The fauna survey will be considered as part of future Action Plan discussions and budget planning, as required.

Response: This item is completed and closed out.

4. IWDF Management Systems

4.1 Environmental, Health & Safety and Quality Policy (MA)

The Environmental, Health & Safety and Quality Policy is reviewed annually for ongoing suitability by the Management Team. The policy was last reviewed on 17 December 2025.

Actions Arising:

- Management Team to review policy and sign off at next MRM meeting in December 2026.

4.2 Management Plans - updates (MS)

MS reported that a review of the Management Plans (version 34) was completed in December 2025. The Management Team reviewed the management plans and implemented the following changes.

The material changes are captured in the table below:

Management Plan	Suggested Change
Radiation	Improvement Program (page 15): <i>Remove</i> • Trial the procedure to be followed for providing public access to the waste database. • Approval of the IWDF Facility Safety Case (FSC), Operations Safety Assessment (OSA), and Post-Closure Safety Assessment (PCSA) from the Radiological Council (completed). Relevant Documents and Procedures (page 15) <i>Update the following documents to version 8 (approved 24 December 2025)</i> • Operations Safety Assessment V7 May 2024 • Post-Closure Safety Assessment V7 May 2024 and; • Facility Safety Case V7, June 2024
Waste Acceptance	Management Target (page 20): • Waste that are in the following categories are no accepted, without prior conditioning, at the IWDF – this item was queried and requires further discussion.
Community Liaison	Improvement Program (page 22): <i>Remove</i> • Complete the publicly available waste disposal spreadsheet on the Government web page for the IWDF. <i>Add</i> • A link on the website to request available waste disposal information from the database.

Actions Arising:

- MS to implement the changes listed in the table above and update to revision 35 dated 19 June 2026.

4.3 Management Manuals – updates (MS)

The Management Team reviewed the manual and discussed the following changes to be implemented.

Management and Policy Manual	Suggested Change
1.1 Environmental License (page 2)	To be updated.
1.3 Radiological Council Registration (page 2)	To be updated to Mark Bryden.
Figure 5 FMC Personnel Chart (page 23)	<i>Remove</i> • Ping Liu and Cameron Garside

Actions Arising:

- MS to confirm if Revision 5 exists and if the above changes have already been implemented. If agreed changes haven't been made, MS to implement.
- JS to upload Revision 5 to MANS2 once completed and checked.

4.4 Registers – updates Legal & Other Requirements and Aspects and Impacts registers (MS)**4.4.1 Legislative and Other Requirements Register**

MS reported the register had been reviewed and remains current.

4.4.2 Aspects and Impacts Register

MS reported the register had been updated and cross referenced with MS562.

New aspects have been added under the following categories Operation Planning, Surface Water Management and Ground Water Management, which were reviewed in the meeting by the management team.

Actions Arising:

- MS to upload Legal register revision 5 and Aspects and Impacts register revision 6.

4.5 EHSQMS Procedures (MS)

MS reported new procedures were completed in December 2025. Next review to be undertaken prior to December MRM Meeting.

4.6 Performance and Compliance Reporting (MS)

MS reported that auditing for the next PCR has commenced.

4.7 Management System Upgrade (EC)

DHW received approval from DWER for APP0033443 on 8 June 2026.

5. Action Plans**5.1 Performance against 2025 – 2026 Action Plan (MS)**

MS reported Action Plans are reviewed at each OEOM.

The following actions were discussed and status updated:

Action Plan	Improvement Target	Action	Responsibility	Required Completion Date	Status
5 - HEALTH	Formulate a procedure for systematically c	Review Physical Assets register and Strategic Asset	DHW IW DF Project Director,	Prior to October Site	MS stated assets are reported, covered and

AND SAFETY	checking the safety and operability of all IWDF site assets.	Plan. Develop a list of site assets that need to be checked during each site visit to confirm that they remain functional.	FMC Systems Manager, Management Team	Monitoring visit.	checked on Form 52. EC stated this needs to be formalised. MS to include asset list to be established for 6 monthly check in draft Action Plan for 26/27.
6 - RADIATION	Completed procedure for providing public access.	Complete and implement a detailed procedure for allowing public access to the waste registers (chemical & radioactive).	DHW Contract Manager	3 months after database completed (6 th of May 2025)	Completed.
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	1 August 2025	Closed out.

Actions Arising:

- MS to include an asset list for six-monthly inspections in the draft 2026–2027 Action Plan.
- MS to coordinate the Management Team's review of the audit tables for the new Management System by December 2026.

5.2 Draft 2026 – 2027 Action Plan (MS)

The Management Team discussed the development of the 2026–2027 Action Plan. It was agreed that a draft would be prepared for review at the July OEOM.

Actions Arising:

- MS to prepare a draft 2026–2027 Action Plan for review and endorsement at the July OEOM.

6. Compliance Audits

6.1 Ministerial Statement (MS)

MS reported review has been completed and confirmed there were no non-compliance.

6.2 Licence, Permit and Registration

No non-compliances have been recorded to date.

6.3 DHW Management System (MS)

No non-compliances have been recorded to date.

6.4 FMC Management System (MS)

No non-compliances have been recorded to date.

6.5 Management Plans (MS)

MS advised the Management Plans are currently under review and confirmed there are no non-compliances.

6.6 Ongoing Suitability of Management Plans (MS)

MS noted that several updates to the Management Plans had been identified during the meeting.

6.7 Liaison with National and International Intractable Waste Management Facilities (MS)

MS reported that liaison is ongoing. A review will be undertaken prior to IACM meeting.

7. Nonconformance and Corrective and Preventative Actions (MS)

No new CARs have been received to date, and the IWDF currently has no open CARs.

8. Electronic Document Library

8.1 Recent updates and changes (MS)

MS reported that the Aspects and Impacts Register and the Legal Register have been updated. He also advised that no complaints have been received during the reporting period, the latest technology review has been completed, and an updated Waste Enquiries Register will be provided to DHW.

9. Guideline Review and Changes

The following guidelines were reviewed and require changes:

- Operation Environmental and Waste Acceptance Procedure (Revision 11) still contains references to the Department of Finance. MS to finalise and update the procedure.
- Packaging and Transport Guidelines (Revision 12) require updating.

Actions Arising:

MS to review, update and issue revised versions of the above guidelines.

10. Monitoring

MS reported form sent to DHW every 6 months.

10.1 Groundwater (MS)

Groundwater monitoring was undertaken in May 2026, and no groundwater has been detected in any of the monitoring bores.

10.2 Capping (annual) (MS)

Capping monitoring was last completed in May 2026 with no capping issues, cracks or substances reported.

10.3 Rehabilitation (annual) (MS)

Rehabilitation monitoring is due to occur at October 2026 site visit.

10.4 Dose constraint monitoring – report on monitoring results to date (MS)

Dose constraint monitoring devices from May 2026 site visit cannot be submitted until after June 30. Consequently, results are pending.

11. IWDF Infrastructure

11.1 Access Road current condition report (MS)

MS reported that the Access Road, as assessed in May 2026, was in excellent condition.

11.2 Firebreaks (MS)

Inspection of the firebreak to be consider for October 2026 site visit.

11.3 Site Infrastructure maintenance (MS)

During the May 2025 site visit, the following minor works were completed:

- Kitchen fan repaired

12 Staff Training Needs

12.1 Training requirements (MS)

The following staff training has occurred since December 2025:

- Scott Duffy completed on-site training.
- David Forrest, an electrical contractor, completed a site induction.

13 Radioactive Issues

13.1 ARPANSA Consultation National Waste Handling and Packaging Code (MS)

MS reported that the initial stakeholder consultation had been completed. Awaiting the first draft to provide comment.

14 Communications

14.1 Annual Community Meeting (EC)

The inaugural Annual Community Meeting was held on 16 October 2025. The next meeting is scheduled for October 2026.

14.2 Complaints (EC)

No complaints received.

14.3 DHW IWDF website content - status update (EC)

IWDF handbook to be updated and uploaded to the website from 1st July 2026.

14.4 Ministerial Statement 0562 Review (EC)

Review has been completed and there was no need for recommended changes.

15 FMC Performance

15.1 Performance against FMC 2025 – 2026 estimated costs (MS)

MS reported that the budget remains on track.

Actions Arising:

- MS to submit the June invoice to facilitate processing before the end of the financial year.

15.2 FMC performance against DHW contract management plan – update (EC)

Aurora demonstrated strong performance in delivering on the Contract Management Plan. Key achievements included:

- Supported DWER Site Audit compliance against Ministerial statement.
- Provided on behalf of DHW to ARPANSA regarding Radioactive waste national packaging and handling code.
- Supported implementing continued updates and amendments to the Management System, particularly within the Management Plans and associated forms.
- Supported the submission for approval of the radiological council's approval of the safety case.

16 Other Business

16.1 Disposal applications – new and updates to existing applications (EC)

EC advised that no disposal applications have been received since the previous MRM.

16.2 IWDF File Notification Areas (EC)

EC advised that a new File Notification Area assessment has been received and is currently under consideration by DHW. A response to DMPE is pending.

17 Meeting Concluded

2:08pm.

18 Next Meeting

To be scheduled for 15 December 2026.

APPENDIX T

2025 – 2026 Action Plans



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

2025 – 2026 ACTION PLANS

IWDF 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.

ENVIRONMENTAL ACTION PLAN 1 - AIR QUALITY					
<i>Environmental, Health and Safety, and Quality Policy Statement:</i> 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.					
<i>Improvement Target</i>	<i>Action</i>	<i>Responsibility</i>	<i>Required Completion Date</i>	<i>Actual Completion Date</i>	<i>Records / status update</i>
<i>Improvement Objective:</i>					

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.					
Improve accessibility of instructions on emergency response procedures.	Develop information sheets and provide on-site.	FMC Project Manager	-	06/26	June 2026: Developed Information for Site Personnel – available on site in the Break Room. Shared as part of site induction.

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.					

Improve accessibility of instructions on environmental monitoring activities.	Develop information sheets and provide on-site.	FMC Project Manager	-	06/26	June 2026: Developed Information for Site Personnel – available on site in the Break Room. Shared as part of site induction.
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.	DHW IWDF Project Director, FMC Systems Manager, Management Team	Prior to October Site Monitoring visit.	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.

					As the number of site assets is constantly changing, this improvement target has been carried over into the 2026-2027 Action Plans. Currently under review by DHW IWDF Contracts Manager and FMC Project Manager.
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.	Complete and implement a detailed procedure for allowing public access to the waste registers (chemical & radioactive).	DHW IWDF Project Director	3 months after database completed (6 th of May 2025)	Drafted and circulated on 17 April 2025. Public access procedure approved 3 June 2025. Complete procedure published on MANS on the 30th of July 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. Finalised procedure incorporated into Management Procedure <i>MP-04 Management System Review and Auditing</i> on 30 July 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.					
<i>Improvement Target</i>	<i>Action</i>	<i>Responsibility</i>	<i>Required Completion Date</i>	<i>Actual Completion Date</i>	<i>Records/Status update</i>
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.					
<i>Improvement Target</i>	<i>Action</i>	<i>Responsibility</i>	<i>Required Completion Date</i>	<i>Actual Completion Date</i>	<i>Records/Status update</i>
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.					
<i>Improvement Target</i>	<i>Action</i>	<i>Responsibility</i>	<i>Required Completion Date</i>	<i>Actual Completion Date</i>	<i>Records/Status update</i>
Improvement Objective: To ensure that there are no inadvertent barriers to appropriate waste being disposed at the IWDF.					
Annual review of all proposed waste disposal at IWDF.	Complete annual review of all proposed waste disposal enquiries at the IWDF to ensure no inadvertent barriers.	FMC Project Manager	06/26	06/26	June 2026. Reviewed every instance of proposed waste disposal 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					
Improve community understanding of IWDF operations.	Hold Annual Meeting and publish PCR on IWDF website.	Management Team	12/25	09/25	Held Annual Meeting October 2025. Published the PCR on the IWDF Website September 2025.

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	1 August 2025	1 August 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. Branding changed from Finance to DHW across July 2025. New MANS uploaded to joint IWDF Teams Server on the 1st of August 2025. June 2026: Closed out
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Revision	Date	Description	Prepared by:	Checked by:	Approved by:
0.1	29/07/25	Draft 2025-2026 Action Plans prepared and agreed upon at July OEOM	MJS	MT	MT
0.2	30/06/2026	2025-2026 Action Plans – Updated with completion dates	JWS	MT	MT

APPENDIX U

2025 – 2026 Document Control Matrix

INTRACTABLE WASTE DISPOSAL FACILITY

IWDF DOCUMENT CONTROL MATRIX

* IWDF Management team consists of DHW IWDF Project Director and the FMC Project Manager

DOCUMENT TYPE	DOCUMENT EXAMPLE	DOCUMENT PREPARER	DOCUMENT REVIEWER	DOCUMENT APPROVER	DOCUMENT CONTROLLER	DOCUMENT DISTRIBUTION	DOCUMENT LOCATION
Environmental Management System Procedures	Management Manual, 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	DHW, 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	DHW, FMC, RSO, Earthworks Contractor	Management System
	Operational Procedures (& instructions)	Operations Manager, Systems Manager	FMC Project Manager	DWER, IWDF Management Team	FMC Systems Manager	DHW, FMC, RSO, Earthworks Contractor	Management System
	Environmental Procedures (& instructions)	Environmental Manager, Systems Manager	FMC Project Manager	DWER, IWDF Management Team	FMC Systems Manager	DHW, 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	DHW, FMC, RSO, Earthworks Contractor	Management System
	Safety Procedures (& instructions)	Safety Manager, Systems Manager	FMC Project Manager	DWER, IWDF Management Team	FMC Systems Manager	DHW, FMC, RSO, Earthworks Contractor	Management System
	Management Procedures	Systems Manager	FMC Project Manager	DWER, IWDF Management Team	FMC Systems Manager	DHW, FMC, RSO, Earthworks Contractor	Management System
Safety Assessments	Operations Safety Assessment	RSO, Radiation Specialist	DHW, FMC	Radiological Council	FMC Systems Manager	DHW, FMC, RSO, Radiological Council	Management System
	Post Closure Safety Assessment	RSO, Radiation Specialist	DHW, FMC	Radiological Council	FMC Systems Manager	DHW, FMC, RSO, Radiological Council	Management System
Safety Case	Facility Safety Case	RSO, Radiation Specialist	DHW, FMC	Radiological Council	FMC Systems Manager	DHW, 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	DHW & FMC Systems Managers	DHW, 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	DHW & FMC Systems Managers	DHW, FMC	Management System
	Packaging and Transport Guidelines	Systems Manager, Transport Coordinator, Operations Manager	FMC Project Manager	FMC IWDF Project Director	DHW & FMC Systems Managers	DHW, FMC	Management System
	Operation Packaging and Transport (Reporting) Guidelines	Systems Manager, Transport Coordinator, Operations Manager	FMC Project Manager	FMC IWDF Project Director	DHW & FMC Systems Managers	DHW, FMC	Management System
	Operation Health and Safety and Emergency Response (Reporting) Guidelines	Systems Manager, Health & Safety Manager	FMC Project Manager	DHW IWDF Project Manager	DHW & FMC Systems Managers	DHW, FMC	Management System
Disposal Operation Procedures	Operation Environmental and Waste Acceptance Procedures (OEWP)	Systems Manager, Environmental Manager, Operations Manager	FMC Project Manager	DHW IWDF Project Manager	DHW & FMC Systems Managers	DHW, FMC, DWER, Radiological Council (if radioactive waste), LGIRS	Management System
Disposal Operation Procedures	Operation Transport Procedures (OTP)	Systems Manager, Transport Coordinator, Operations Manager	FMC Project Manager	DHW IWDF Project Manager	DHW & FMC Systems Managers	DHW, FMC, Radiological Council (if radioactive waste), LGIRS	Management System

INTRACTABLE WASTE DISPOSAL FACILITY

DOCUMENT TYPE	DOCUMENT EXAMPLE	DOCUMENT PREPARER	DOCUMENT REVIEWER	DOCUMENT APPROVER	DOCUMENT CONTROLLER	DOCUMENT DISTRIBUTION	DOCUMENT LOCATION
	Operation Health & Safety and Emergency Response Procedures (OHSERP)	Systems Manager, Health & Safety Manager	FMC Project Manager	DHW IWDF Project Manager and DWER	FMC Systems Manager	DHW, FMC, DWER, Radiological Council (if radioactive waste)	Management System
	Construction Specifications	Systems Manager, Engineering Manager	FMC Project Manager	DHW IWDF Project Manager and DWER	FMC Systems Manager	DHW, 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	DHW, 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	DHW, 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	DHW IWDF Project Manager	DHW IWDF Project Director	DHW IWDF Project Director	DHW IWDF Project Manager	DHW, FMC and Relevant Contractors	DHW Records, Management System
Project Correspondence	Letters, Emails	DHW IWDF Project Manager	DHW IWDF Project Director	DHW IWDF Project Manager or Director	DHW IWDF Project Manager	DHW, FMC, Community and Relevant Contractors	DHW Records, Management System
Other Quality Critical Correspondence	Non-project letters, Emails	DHW IWDF Project Manager	DHW IWDF Project Director	DHW IWDF Project Manager or Director	DHW IWDF Project Manager	DHW, FMC, Community and Relevant Contractors	DHW Records, Management System
Quotes and Requests for Tender	IWDF Site Management	DHW IWDF Project Manager, FMC	DHW IWDF Project Manager	DHW IWDF Project Manager or Director	DHW IWDF Project Manager	DHW, FMC and Relevant Contractors	DHW Records, Management System

INTRACTABLE WASTE DISPOSAL FACILITY

DOCUMENT TYPE	DOCUMENT EXAMPLE	DOCUMENT PREPARER	DOCUMENT REVIEWER	DOCUMENT APPROVER	DOCUMENT CONTROLLER	DOCUMENT DISTRIBUTION	DOCUMENT LOCATION
Ministerial Documents	Ministerial Briefings	DHW IWDF Project Manager, FMC Project Manager	DHW IWDF Project Manager or Director	DHW IWDF Project Manager or Director	DHW IWDF Project Manager	DHW, FMC	DHW 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	DHW, 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	DHW, 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	DHW, 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	DHW IWDF Project Manager	DHW IWDF Project Manager	DHW IWDF Project Manager	DHW, FMC, DWER or Radiological Council (if necessary)	Management System
Legislative Documents (as specified in the Legal Register)	<i>Environmental Protection Act 1986</i>	N/A	N/A	N/A	FMC Project Manager	DHW, FMC	Management System

APPENDIX V

2025 – 2026 Access Road Condition Reports

IWDF MT WALTON EAST ACCESS ROAD
CONDITION REPORT

IWDF-FORM-44

ODOMETER START 61232
ODOMETER FINISH 61330

DATE 13/10/2025
DRIVER MJS

KEY:		T Trafficable		S Soft - Light Vehicles Only		U Un-trafficable		* Water depth, blockage of drains, etc		** s + gr - sand and gravel	
Road Observations	km	km	Road Surface	Circle One	NOTES*						
Great Eastern Highway											
	0	100	sand	☒ S U	ROAD IN EXCELLENT CONDITION						
	1	99	sand	☒ S U							
	2	98	sand	☒ S U							
	3	97	sand	☒ S U							
	4	96	sand	☒ S U							
powerline	5	95	sand	☒ S U							
	6	94	sand	☒ S U							
	7	93	sand	☒ S U							
	8	92	clay	☒ S U							
	9	91	s + gr**	☒ S U							
	10	90	s + gr	☒ S U							
x-road	11	89	sand	☒ S U							
	12	88	sand	☒ S U							
wash	13	87	gravel	☒ S U							
wash	14	86	sand	☒ S U							
	15	85	sand	☒ S U							
	16	84	sand	☒ S U							
	17	83	sand	☒ S U							
wash (2)	18	82	sand	☒ S U							
	19	81	sand	☒ S U							
	20	80	sand	☒ S U							
	21	79	sand	☒ S U							
floodway	22	78	sand	☒ S U							
	23	77	sand	☒ S U							
	24	76	sand	☒ S U							
	25	75	sand	☒ S U							
wash	26	74	s + gr	☒ S U							
	27	73	sand	☒ S U							
	28	72	sand	☒ S U							
	29	71	sand	☒ S U							
	30	70	sand	☒ S U							
	31	69	sand	☒ S U							
wash	32	68	sand	☒ S U							
	33	67	sand	☒ S U							
	34	66	sand	☒ S U							
	35	65	sand	☒ S U							
	36	64	clay	☒ S U							
wash	37	63	sand	☒ S U							
	38	62	sand	☒ S U							
	39	61	sand	☒ S U							
	40	60	sand	☒ S U							
	41	59	sand	☒ S U							
	42	58	sand	☒ S U							
wash	43	57	clay	☒ S U							
	44	56	clay	☒ S U							
wash	45	55	clay	☒ S U							
railway	46	54	clay	☒ S U							
	47	53	sand	☒ S U							
	48	52	sand	☒ S U							
wash	49	51	gravel	☒ S U							
	50	50	sand	☒ S U							

IWDF MT WALTON EAST ACCESS ROAD
CONDITION REPORT

ODOMETER START 61232
ODOMETER FINISH 61330

DATE 13/10/2025
DRIVER MJS

IWDF-FORM-44

KEY:		T Trafficable		S Soft - Light Vehicles Only		U Un-trafficable		* Water depth, blockage of drains, etc		** s + gr - sand and gravel	
Road Observations	km	km	Road Surface	Circle One	NOTES*						
	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							
	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	MINOR SAND BLOWOUT OTHERWISE IN EXCELLENT CONDITION						
	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		T S U							
	100	0	IWDF Camp	T S U							

Mt Walton East

IWDF MT WALTON EAST ACCESS ROAD
CONDITION REPORT

ODOMETER START 33504
ODOMETER FINISH 33602

DATE 4/5/2026
DRIVER MJS

IWDF-FORM-44

KEY:		T Trafficable		S Soft - Light Vehicles Only		U Un-trafficable		*		Water depth, blockage of drains, etc		**		s + gr - sand and gravel	
Road Observations	km	km	Road Surface	Circle One	NOTES*										
Great Eastern 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											
	10	90	s + gr	T S U	ROAD IN EXCELLENT CONDITION										
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											
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											

IWDF MT WALTON EAST ACCESS ROAD
CONDITION REPORT

ODOMETER START... 33504
ODOMETER FINISH... 33602

DATE... 4/5/2026
DRIVER... MJS

IWDF-FORM-44

KEY:		T Trafficable		S Soft - Light Vehicles Only		U Un-trafficable		* Water depth, blockage of drains, etc		** s + gr - sand and gravel	
Road Observations	km	km	Road Surface	Circle One	NOTES*						
	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							
	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							
wash	69	31	sand	T S U							
	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	MINOR SAND BLOWOUTS BETWEEN 80-85 km MARKERS						
	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 Camp	T S U							
	100	0		T S U							

Mt Walton East

APPENDIX W

2025 – 2026 Internal Audit Schedule

INTRACTABLE WASTE DISPOSAL FACILITY

INTERNAL MANAGEMENT AUDIT SCHEDULE IWDF-FORM-50

X = Audit of procedure scheduled (if audit required)

X = Audit of procedure completed

PROCEDURE TO BE AUDITED	FINANCIAL YEAR: 2025 - 26											
	Jul 25	Aug 25	Sep 25	Oct 25	Nov 25	Dec 25	Jan 26	Feb 26	Mar 26	Apr 26	May 26	Jun 26
Ministerial Statement 562						X						X
MANAGEMENT PROCEDURES												
MP-01 Document and Data Control				X								
MP-02 Record Management				X								
MP-03 Training and Competency				X								
MP-04 Management System Review and Auditing					X							
MP-05 Control of Non-Conformances					X							
MP-06 Communication and Public Relations					X							
MP-07 Procurement						X						
MP-08 Ongoing Site Management						X						
MP-09 Public Access Procedure						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

INTRACTABLE WASTE DISPOSAL FACILITY

PROCEDURE TO BE AUDITED	FINANCIAL YEAR: 2025 - 26											
	Jul 25	Aug 25	Sep 25	Oct 25	Nov 25	Dec 25	Jan 26	Feb 26	Mar 26	Apr 26	May 26	Jun 26
8. Water						X						X
9. Waste Acceptance						X						X
10. Community Liaison						X						X
11. Management Review						X						X
OPERATIONAL PROCEDURES & INSTRUCTIONS												
OP-01 Assessment of Applications for Disposal	X					X						
OP-02 Operational Administration, Planning and Approvals	X											
OP-03 Excavation of Disposal Trench	X											
OP-04 Waste Preparation for Disposal	X											
OP-05 Waste Loading and Transport	X											
OP-06 Waste Delivery, Acceptance and Disposal	X											
OP-07 Capping, Rehabilitation and Demobilisation	X											
OP-08 Operation Close-out	X											
OP-09 Operation Site Management	X											
OI-01 Waste Inspection	X					X						
ENVIRONMENTAL PROCEDURES & INSTRUCTIONS												
EP-01 Vegetation (Flora) Management	X											
EP-02 Fauna Management	X											
EP-03 Environmental Monitoring Management	X											
EP-04 Water Management	X											

INTRACTABLE WASTE DISPOSAL FACILITY

PROCEDURE TO BE AUDITED	FINANCIAL YEAR: 2025 - 26											
	Jul 25	Aug 25	Sep 25	Oct 25	Nov 25	Dec 25	Jan 26	Feb 26	Mar 26	Apr 26	May 26	Jun 26
EP-05 Rehabilitation Management	X											
EP-06 Air Quality and Dust Management	X											
EP-07 Waste Management	X											
EP-08 Fuel, Oil and Hazardous Materials Management	X											
EP-09 Environmental Incident Management, Reporting, and Investigation	X											
EI-01 Physical Environment Monitoring	X											
RADIATION MANAGEMENT PROCEDURES & INSTRUCTIONS												
RP-01 Radiation Management	X											
RI-01 Gamma Radiation Monitoring	X											
RI-02 Occupational Radiation Monitoring	X					X						
SAFETY MANAGEMENT PROCEDURES & INSTRUCTIONS												
SP-01 Health and Safety Management & Planning	X											
SP-02 Operation Site Safety Management	X											
SI-01 Excavation Safety	X											
SI-02 Personal Protective Equipment	X											
SI-03 Hygiene and Decontamination	X											
SI-04 Occupational Monitoring	X											
SI-05 Communications and Traffic Control	X											
SI-06 First Aid	X											

INTRACTABLE WASTE DISPOSAL FACILITY

PROCEDURE TO BE AUDITED	FINANCIAL YEAR: 2025 - 26											
	Jul 25	Aug 25	Sep 25	Oct 25	Nov 25	Dec 25	Jan 26	Feb 26	Mar 26	Apr 26	May 26	Jun 26
SI-07 Heavy Machinery Operations	X											
SI-08 Exclusion Zones	X											
EMERGENCY RESPONSE PROCEDURES & INSTRUCTIONS												
ERP-01 Incident Prevention, Reporting, and Investigation	X											
ERP-02 Emergency Response Management	X											
ERI-01 Medical, Waste, and Fire Emergency Response	X											
ERI-02 Transport Emergency Response	X											

AUDIT SCHEDULE APPROVED BY: MJS

DATE: June 2026

REVISION: 9

APPENDIX X

2025 – 2026 Management Review Meetings Agendas



Agenda	IWDF MT WALTON EAST MANAGEMENT REVIEW MEETING
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Time/Day:	16 December 2025	
Venue:	Aurora Office – Boardroom – Dilhorn House, 2 Bulwer St, Perth	
Invitees:	Name	Representing
	Mark Shepherd	Aurora – Principal Environmental Scientist (Director)
	John Shepherd	Aurora – Senior Environmental Scientist
	Erin Clinch	Department of Housing and Works – Project Director
	Michelle Spencer	Department of Housing and Works – Contract Manager

1. Open and Welcome

1.1 Agenda Outline (EC)

2. Minutes of the Previous Meeting

3. Business Arising from Previous Meeting

- 3.1 Management System review (MSp) – EH was to review MP-04 to determine capture of management system review period timeframe. CG to ensure Management Plans and Action Plans contain review period.
- 3.2 MP-09 Public Access Procedure Guideline (MSp).
- 3.3 Waste Acceptance Guidelines (Chemical & Radioactive) – CG to provide the updated Guidelines – Completed.
- 3.4 Training – MS to send through the updated training register – Completed.
- 3.5 Radiological Council registration renewal due – 8 February 2026. Renewal application forms to be sent to DHW two months prior to expiry (MSp).

4. IWDF Management Systems

- 4.1 Environmental, Health & Safety and Quality Policy (EC)
- 4.2 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 EHSQMS Procedures (EC/MS)
- 4.6 Performance and Compliance Reporting (MS)
- 4.7 Annual Review of Finance R&D Schedule – Schedule to be updated to include IWDF Database and changes to Department names.
- 4.8 Management System Upgrade (MSp)

5. Action Plans

- 5.1 Performance against 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 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 (MS)

12 Staff Training Needs

- 12.1 Training requirements (MS)

13 Radioactive Issues

- 13.1 IWDF Safety Assessments and Safety Case (MS)

14 Communications

- 14.1 Annual Community Meeting (EC)
- 14.2 Complaints (EC)
- 14.3 Finance IWDF website content - status update (EC)
- 14.4 Ministerial Statement 0562 Review (EC)

15 FMC Performance

- 15.1 Performance against FMC 2025 – 2026 estimated costs (MS)
- 15.2 FMC performance against Finance contract management plan – update (MSp)

16 Other Business

- 16.1 Disposal applications – new and updates to existing applications (MS)
- 16.2 IWDF File Notification Areas (EC)

17 Next Meeting

To be scheduled for June 2026



Agenda	IWDF MT WALTON EAST MANAGEMENT REVIEW MEETING
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Time/Day:	19 June 2026	
Venue:	Aurora Office – Boardroom – Dilhorn House, 2 Bulwer St, Perth	
Invitees:	Name	Representing
	Mark Shepherd	Aurora – Principal Environmental Scientist (Director)
	John Shepherd	Aurora – Senior Environmental Scientist
	Erin Clinch	Department of Housing and Works – Project Director
	Seema Bux	Department of Housing and Works – A/Contract Manager

1. Open and Welcome

1.1 Agenda Outline (EC)

2. Minutes of the Previous Meeting

3. Business Arising from Previous Meeting

- 3.1 Update IWDF Form 50 to include scheduled reviews of specific Procedures and Plans during OEOMs (MS). Incorporate into OEOM agendas (Msp).
- 3.2 Address MANS2 Aurora Access Issues (Slow Downloads) (Msp).
- 3.3 Incorporate Waste Acceptance Guideline title updates into MANS2 and MANS2 Spreadsheet. (JS/Msp)
- 3.4 Updated training schedule reflecting the recent IWDF training completed by Aurora Staff (MS).
- 3.5 Radiological Council registration renewal to be signed and completed (MS)
- 3.6 Obtain Radiological Council Safety Case Approval (MSp)
- 3.7 Update Environmental, Health & Safety and Quality Policy signed on 11 December to in MANS2 and MANS2 Spreadsheet (JS/Msp).
- 3.8 Testing and Tagging methodology proposal review (EC)
- 3.9 Procure defibrillator and deploy to site at next scheduled visit (Msp)
- 3.10 Inspect first-aid kits at next scheduled site visit (MS)
- 3.11 Review and Update SI-05 Communications and Traffic Control documents (EC)
- 3.12 Issue updated Mt Walton Road Emergency Contact List to Aurora (Msp)
- 3.13 Update the Rehabilitation Site plan prior to the 25/26FY PCR (MS)
- 3.14 Submit October 2025 Dose Constraint Monitoring Report to DHW (MS)
- 3.15 Update IWDF guide for visiting site (Induction document) (MS)
- 3.16 Update IWDF Handbook pages 22, 29 and 44 (MS)
- 3.17 Consider an updated fauna survey in 26/27FY budget (EC).

4. IWDF Management Systems

- 4.1 Environmental, Health & Safety and Quality Policy (MA)
- 4.2 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 EHSQMS Procedures (MS)
- 4.6 Performance and Compliance Reporting (MS)
- 4.7 Management System Upgrade (EC)

5. Action Plans

- 5.1 Performance against 2025 – 2026 Action Plan (MS)
- 5.2 Draft 2026 – 2027 Action Plan (MS)

6. Compliance Audits

- 6.1 Ministerial Statement (MS)
- 6.2 License, Permit and Registration (MS)
- 6.3 DHW 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 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 (MS)

12 Staff Training Needs

- 12.1 Training requirements (MS)

13 Radioactive Issues

- 13.1 ARPANSA Consultation National Waste Handling and Packaging Code (MS)

14 Communications

- 14.1 Annual Community Meeting (EC)
- 14.2 Complaints (EC)
- 14.3 DHW IWDF website content - status update (EC)
- 14.4 Ministerial Statement 0562 Review (EC)

15 FMC Performance

15.1 Performance against FMC 2025 – 2026 estimated costs (MS)

15.2 FMC performance against DHW contract management plan – update (EC)

16 Other Business

16.1 Disposal applications – new and updates to existing applications (EC)

16.2 IWDF File Notification Areas (EC)

17 Next Meeting

To be scheduled for December 2026

APPENDIX Y

2025 – 2026 Dangerous Goods Storage Inventory Records

OFFICIAL
INTRACTABLE WASTE DISPOSAL FACILITY
 MT WALTON EAST, WESTERN AUSTRALIA

DANGEROUS GOODS STORAGE RECORD IWDF-FORM-51

Page 1 of 2

Date: <u>16/10/2025</u>	Completed by: <u>MJS</u>
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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 SBST	225L	DTB AREA	45		
DIESEL FUEL	-	3	(C1)	0.2	1	GENERATOR	80L	DTB AREA	16		
			Total volume manufactured products =			Total volume flammable (II) =			Total SF = 61	Total volume C1 & C2 = 305L	
Sea-container											
N/A											
			Total volume manufactured products =			Total volume flammable (II) =			Total SF =	Total volume C1 & C2 =	

OFFICIAL
INTRACTABLE WASTE DISPOSAL FACILITY
MT WALTON EAST, WESTERN AUSTRALIA

SUMMARY – Compliance with Requirements of the 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:

N/A

Page 2 of 2

OFFICIAL
INTRACTABLE WASTE DISPOSAL FACILITY
 MT WALTON EAST, WESTERN AUSTRALIA

DANGEROUS GOODS STORAGE RECORD IWDF-FORM-51

Page 1 of 2

Date: <u>6/5/2026</u>	Completed by: <u>MJS</u>
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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 SBST	210L	DTB AREA	42		
DIESEL FUEL	—	3	(C1)	0.2	1	GENERATOR	80L	DTB AREA	16		
			Total volume manufactured products =			Total volume flammable (II) =			Total SF = 58	Total volume C1 & C2 = 290L	
Sea-container											
N/A											
			Total volume manufactured products =			Total volume flammable (II) =			Total SF =	Total volume C1 & C2 =	

OFFICIAL
INTRACTABLE WASTE DISPOSAL FACILITY
MT WALTON EAST, WESTERN AUSTRALIA

SUMMARY – Compliance with Requirements of the 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: N/A

Page __2__ of __2__