

**APPENDIX C1      Data Sheet for TSP Monitoring**

Monitoring Location		
Details of Location		
Sampler Identification		
Date & Time of Sampling		
Elapsed-time	Start (min.)	
Meter Reading	Stop (min.)	
Total Sampling Time (min.)		
Weather Conditions		
Site Conditions		
Initial Flow Rate, Qsi	Pi (mmHg)	
	Ti (°C)	
	Hi (in.)	
	Qsi (Std. m <sup>3</sup> )	
Final Flow Rate, Qsf	Pf (mmHg)	
	Tf (°C)	
	Hf (in.)	
	Qsf (Std. m <sup>3</sup> )	
Average Flow Rate (Std. m <sup>3</sup> )		
Total Volume (Std. m <sup>3</sup> )		
Filter Identification No.		
Initial Wt. of Filter (g)		
Final Wt. of Filter (g)		
Measured TSP Level (µg/m <sup>3</sup> )		

Name & Designation

Signature

Date

Field Operator:

Laboratory Staff:

Checked by:

**APPENDIX C2 Noise Monitoring Field Record Sheet**

Equipment	Model	Equipment No.	Last Calibration/Due Date
Sound Level Meter			/
Sound Pressure Calibrator			/

Calibration before measurement (dB(A))	
Calibration after measurement (dB(A))	

Monitoring Location							
Description of Location							
Date of Monitoring							
Weather Condition		Sunny / Cloudy / Rainy					
Measurement Start Time (hh:mm)							
Measurement Time Length (min/hr)							
Measurement Results	L90 (dB(A))						
	L10 (dB(A))						
	Leq (dB(A))						
Major Construction Noise Source(s) During Measurement	Excavator / backhoe					Bulldozer	
	Dump truck / lorry					Jack Hammering	
	Others, pls specify						
Other Noise Source(s) During Measurement	Road traffic noise					Air traffic noise	
	Construction noise from other sites (e.g. piling) pls specify:						
	Village activities or animal noise (e.g. dog barking) pls specify:						
Remarks							

	Name	Signature	Date
Recorded By			
Checked By			

**APPENDIX C3      Water Quality Monitoring Data Record Sheet**

Location		Surface	Middle	Bottom
Monitoring Station				
Date				
Weather				
Sea Condition				
Tide Mode				
Start Time	(hh:mm)			
Water Depth	(m)			
pH				
Temperature	(°C)			
Salinity	(ppt)			
Turbidity	(NTU)			
Sample Identification				
SS	(mg/l)			
DO	(mg/l)			
DO Saturation	(%)			
BOD <sub>5</sub>	(mg/l)			
Ammonia-Nitrogen	(mg/l)			
Total inorganic Nitrogen	(mg/l)			
chlorophyll-a	(mg/l)			
<i>E. coli</i>	(CFU/100ml)			
Observed Construction Activities	<100m from location			
	>100m from location			
Other Observations				

**Name & Designation**

**Signature**

**Date**

**Recorded by:**

**Checked by:**

Note: The SS results are to be entered once they are available from the laboratory.

**APPENDIX C5**

**Air Quality (H<sub>2</sub>S) Monitoring Data Record Sheet**

<b>General Information</b>				
Monitoring Station				
Date				
Weather				
<b>Monitoring Results</b>				
<i>Sample No.</i>	<i>Time</i>	<i>Wind Speed</i>	<i>Wind Direction</i>	<i>Level (ppb)</i>
Sample 1	Start:			
	Stop:			
Sample 2	Start:			
	Stop:			
Sample 3	Start:			
	Stop:			
Sample 4	Start:			
	Stop:			
Sample 5	Start:			
	Stop:			
Sample 6	Start:			
	Stop:			
Sample 7	Start:			
	Stop:			
Sample 8	Start:			
	Stop:			
Other Observations				

**Name & Designation**

**Signature**

**Date**

**Recorded by:**

**Checked by:**



## APPENDIX C4

### Landfill Gas Monitoring - Field Measurement Recording Sheet

Name of site:

Date of measurement:

Sampling equipment used:	Dates calibrated

Sample location	Date of measurement	Sampling time	Perimeter on-site and/or off-site monitoring holes						Remark
			Weather condition	Balance gas (%)	Flammable gas (methane %)	Carbon dioxide (%)	Oxygen (%)	Temp (°C)	

Field Technician: \_\_\_\_\_

Checked by: \_\_\_\_\_

**Drainage Services Department  
Performance-related Complaint Register**

First date of receipt by the Department	Date of receipt by the Division	File Ref.	Format of complaint (Please tick)		Channel of complaint (see Note 1)	Brief account of the complaint	Details of actions taken			
			Verbal	Written			Complaints transferred to and on	Interim reply sent on (Note 2)	Full reply to complainant sent on	Follow-up action required (please specify)

**Note 1:**  
 CE - Chief Executive's Office  
 CS - Chief Secretary for Administration's Office  
 OB - The Ombudsman  
 IC - Legislative Council  
 A - Anonymous

PB - Policy Bureaux  
 DB - District Boards  
 ICAC - Independent Commission Against Corruption  
 M - Mass media  
 O - Other departments/organizations (please specify)

**Note 2:**  
 An interim reply should be sent to the complainant if a full reply cannot be made within 10 calendar days or before the specified deadline.  
 The interim reply should explain the reasons for the delay and give an indication of whom to contact if the complainant wishes to check progress.

**Drainage Services Department  
Return on Performance-related Complaints for the month of \_\_\_\_\_**

To: ADS/GA2 (Fax: 2827 8605)  
From: \_\_\_\_\_ (HQs/Branch/Division)

First date of receipt by the Department	Date of receipt by the Division	Format of complaint (Please tick)		Channel of complaint (see Note 1)	Brief account of the complaint	Details of actions taken			Status of follow-up action: C - completed I - in progress (Note 3)	
		Verbal	Written			Interim reply sent on (Note 2)	Full reply to complainant sent on	Follow-up action required (please specify)		

**Note 1:**

- CE - Chief Executive's Office
- CS - Chief Secretary for Administration's Office
- OB - The Ombudsman
- LC - Legislative Council
- A - Anonymous

**Note 2:**

- PB - Policy Bureaux
- DB - District Boards
- ICAC - Independent Commission Against Corruption
- M - Mass media
- O - Other departments/organizations (please specify)

**Note 3:**

An interim reply should be sent to the complainant if a full reply cannot be made within 10 calendar days or before the specified deadline. The interim reply should explain the reasons for the delay and give an indication of whom to contact if the complainant wishes to check progress.

All in progress complaints reported in the current period should be repeated in the following monthly returns until their follow-up actions are completed.

Signature: \_\_\_\_\_  
Name: \_\_\_\_\_

Post: \_\_\_\_\_  
Date: \_\_\_\_\_