

Quarry Closure Self-Assessment

This quarry closure form is for **final rehabilitation** and must be completed for any site that will no longer be used or held under a permit/lease by the company. A copy of a Quarry Closure Self-Assessment must be provided **30 days** before removing any equipment from the site. Information provided in this report must be accurate; all information will be reviewed and verified by a Quarry Materials Compliance Officer.

Part 1: Background Information	
Permit Holder / Lease Holder Name:	
File Number: 711 :	Area of Site (hectares):
Expiry Date of Permit/Lease:	Location:
What types of materials were excavated from the site? (Check all that apply) <ul style="list-style-type: none"> <input type="checkbox"/> Rock <input type="checkbox"/> Sand <input type="checkbox"/> Gravel <input type="checkbox"/> Borrow Material <input type="checkbox"/> Stockpiled Material <input type="checkbox"/> Armour Stone <input type="checkbox"/> Other: 	What operations were used to extract material from site? (Check all that apply) <ul style="list-style-type: none"> <input type="checkbox"/> Drilling & Blasting <input type="checkbox"/> Screening <input type="checkbox"/> Crushing <input type="checkbox"/> Pit run removal <input type="checkbox"/> Ripping <input type="checkbox"/> Asphalt batch plant <input type="checkbox"/> Other:
Name of company representative completing this report:	
Title/Position:	Date of inspection:

Part 2: Goal of Quarry Closure and Rehabilitation Work
Please select which option most closely aligns the goals and objectives of this quarry close-out and rehabilitation work: <ul style="list-style-type: none"> <input type="checkbox"/> To restore the quarry area to a physically and chemically stable and safe condition in order to protect public health and safety. <input type="checkbox"/> To decommission and rehabilitate the project site to a land use similar to its original use or an acceptable alternative. <input type="checkbox"/> To return the property to the Crown/municipality for long term care or use after monitoring demonstrates that closure objectives have been met; <input type="checkbox"/> Other:

PART 3: OBSERVATIONS

Please answer the following questions to identify the items that have been completed to date. Additional information (e.g., longer descriptions, maps, photos) may be attached with this report.

1. Orderly Conditions	Complete?		
	Yes	No	n/a
Has all scrap material (e.g., scrap lumber, scrap metal or other garbage) been removed from the site? Please provide waybills, receipts, etc. as proof of proper disposal.			
Has all imported material (e.g., concrete, asphalt, etc.) been removed from the site?			
Has all equipment (e.g., loaders, screeners, crusher, etc.) and supplies (e.g., culverts) been removed from the site?			
What work has been done to ensure the site is free of any scrap material, imported material, equipment or supplies? If waste asphalt or concrete has been removed from the site, please specify the current location of this material.			
Describe what additional work will be completed to remove these items from the site. A timeline for when this work will be completed must be provided.			

2. Entrance(s) and Exits	Complete?		
	Yes	No	n/a
Has the access to the site been decommissioned?			
What work has been done to remove access to this site?			
Describe what additional work, if any, is required to remove access to the site. A timeline for when this work will be completed must also be provided.			
If the access to the site is to remain in place, please provide rationale.			

3. Excavation Faces & Excavated Materials	Complete?		
	Yes	No	n/a
NOTE: If the site is not being sloped as required or stockpiled material is to remain on site, a request must be submitted for review and authorization by IET staff prior to final closure and surrender of the site.			
Have all excavation faces been sloped to a safe angle?			
Have all rock faces been sloped to a 2:1 gradient?			
Have all sand/gravel excavation faces been sloped to a 3:1 gradient?			

3. Excavation Faces & Excavated Materials <i>Continued</i>	Complete?		
	Yes	No	n/a
Has all stockpiled material on site been removed from the site and/or used to conduct required sloping?			
Has any imported material (e.g., topsoil/overburden from other sites, waste concrete, etc.) been used as fill to obtain final slopes?			
Please describe which areas of the quarry have been sloped to date. All sloped areas must be identified with their approximate gradient on a map (e.g., Google Earth Map) which must be attached to this report.			
What material (e.g., waste rock, overburden, crushed rock, imported material, etc.) was used to conduct the sloping in each area with reference to the map/aerial image?			
Describe any additional backfilling and sloping work to be conducted at the site to achieve the required slopes (i.e., 2:1 in rock; 3:1 in sand/gravel). A timeline for when this work will be completed must be provided.			

4. Regeneration / Revegetation of the site	Complete?		
	Yes	No	n/a
Has topsoil and/or organic material been re-spread over the entire site?			
Is seeding (e.g., hydroseeding) or planting (e.g., alders) required at this site?			
Please outline the planned method to rehabilitate the site (e.g., natural revegetation, hydroseeding, planting trees, other?)			
Please describe the work that has been completed to allow for the site to regenerate/revegetate. Please include details on the areas where topsoil and organic material has been spread, the approximate thickness of the material and the location and type of any seeding or planting that has been conducted.			
If there is insufficient topsoil or organic material to cover the entire site, please outline the seeding or planting that will be conducted (if required by the terms and conditions) to encourage revegetation.			
Describe what additional work must be done and provide a timeline when work will be completed.			

5. Equipment and Buildings	Complete?		
	Yes	No	n/a
Has all equipment, including weigh scales been removed from the site?			
Have all buildings or structures (e.g., sea cans, trailers, etc.) been removed from the site?			
Describe the work that has been completed at this site to date:			
Describe work that must be done and provide a timeline when work will be completed:			

6. Surface Water & Drainage	Complete?		
	Yes	No	n/a
Has surface water accumulation been addressed on site?			
Have drainage measures been implemented?			
Are there any sedimentation control devices (silt screens, hay bales, etc.) on site?			
Describe what type of water control measures have been required to control water accumulation at the site over the duration of the life of the permit.			
Describe any additional work required to control water at the site and provide a timeline when work will be completed.			
Describe any long term water control measures (e.g., drainage ditches, check dams, etc.) that will remain in place after the site is surrendered.			

7. Additional Comments
Describe any additional work that must be completed at this site to meet compliance and provide a timeline for this work.

PART 4: Requirements Checklist

Please review and confirm the following:

This form must be completed in its entirety with required documents attached. Complete and accurate information is required to ensure site conditions are compliant with the Quarry Materials Act, the Regulations and relevant terms and conditions.

- I understand that any item identified in Part 2 as “Not Complete” will be required to be completed prior to allowing the tenure on the site (e.g., permit/lease) to lapse.
- I have included all required additional information such as maps, digital shape files, additional text, photos, etc.
- I hereby certify that I have reviewed the completed Quarry Closure Self-Assessment form and the information contained within is true and accurate to the best of my information, knowledge and belief.

I hereby certify that all information provided in this form is truthful to the best of my knowledge. I understand that the submission of this form does not relieve the permit holder of any additional rehabilitation work.

Name: _____

Title/Position: _____

Signature: _____

Date: _____

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