

Government of Western Australia Department of Water and Environmental Regulation

Annual Audit Compliance Report Form

Environmental Protection Act 1986, Part V

| Section A – Licence Details | | | | |
|-----------------------------|---|----------------------|----------------|--|
| Licence number: | L6537/1994/13 | Licence file number: | DER2011/010845 | |
| Licence holder: | SUEZ Medical Solutions Pty Ltd | | | |
| Trading as: | SUEZ Medical Solutions | | | |
| ACN: | 119 885 700 | | | |
| Registered address: | Level 3, 3 Rider Boulevard Rhodes NSW 2138 | | | |
| Reporting period: | 01 / 07 / 2019 to 30 / 06 / 2020 | | | |

Section B – Statement of Compliance with Licence Conditions

Did you comply with all of your licence conditions during the reporting period? (please tick the appropriate box)

☐Yes – please complete:

- section C;
- section D if required; and
- sign the declaration in Section F.

⊠No – please complete:

- section C;
- section D if required;
- section E; and
- sign the declaration at Section F.

Section C - Statement of Actual Production

Provide the actual production quantity for this reporting period. Supporting documentation is to be attached.

| Prescribed Premises Category | Actual Production Quantity |
|------------------------------|----------------------------|
| 59, 60 and 61a | 1,884.284 tonnes |

Section D - Statement of Actual Part 2 Waste Discharge Quantity

Provide the actual Part 2 waste discharge quantity for this reporting period. Supporting documentation is to be attached.

| Prescribed Premises Category | Actual Part 2 Waste Discharge Quantity | | | |
|------------------------------|--|--|--|--|
| N/A | N/A | | | |

| Section E – Details of Non-Compliance with Licence Condition | | | | | | | |
|--|---|---------------------------|--------------|-----------------------|--|--|--|
| Please use a separate page for each condition with which the licence holder was non-compliant at a time during the reporting period. | | | | | | | |
| Condition no: | 1.2.3 | Date(s) of no compliance: | | 19/05/2020 | | | |
| Details of non-comp | Details of non-compliance: | | | | | | |
| Triple bagged medic | cal waste has been stored ou | t of the bund | led area. | | | | |
| | il (or suspected) environment n maps or diagrams to provide in | IISII IIDA 60 | | | | | |
| Nil | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Cause (or suspecte | d cause) of non-compliance: | | | | | | |
| | vas temporarily stored in bundue to excess volume gener | | | o load interstate | | | |
| Action taken to mitig | gate any adverse effects of n | on-compliand | ce and preve | ent recurrence of the | | | |
| Additional containers and personnel were utilized to reduce the volume of waste stored on site to rectify that situation | | | | | | | |
| | | | | | | | |
| Was this non-compliance previously reported to DWER? | | | | | | | |
| ☐ Yes, and | | | | | | | |
| Reported to I | OWER verbally | Date: / | 1 | | | | |
| ☐ Reported to [| OWER in writing | Date: / | 1 | | | | |

| Section E – Details of Non-Compliance with Licence Condition | | | | |
|--|-----------------------------|--------------------------------|-----------------------|--|
| Please use a separate page for each condition with which the licence holder was non-compliant at a time during the reporting period. | | | | |
| Condition no: | 5.3.1 | Date(s) of non- compliance: | Nov 2019 and Jan 2020 | |
| Details of non-comp | oliance: | | | |
| Late reporting of 2 instances of detection recorded on matrix swabs in November 2019 and January 2020. | | | | |
| What was the actual (or suspected) environmental impact of the non-compliance? NOTE – please attach maps or diagrams to provide insight into the precise location of where the non-compliance took place. | | | | |
| Cause (or suspecte | d cause) of non-compliance: | | | |
| Cause (or suspecte | a dauge, or non-compliance. | | | |
| These swabs that were showing a positive result were not communicated due to an oversight with process. | | | | |
| Action taken to mitigate any adverse effects of non-compliance and prevent recurrence of the non-compliance: | | | | |
| Process updated to ensure all test results are communicated to more than one person. Procedure updated with swab testing now undertaken at the start of each month to ensure sufficient time to report. | | | | |
| Was this non-compliance previously reported to DWER? | | | | |
| ⊠ Yes, and | | | | |
| ☐ Reported to D | WER verbally | Date: / / | | |
| □ Reported to D | WER in writing | Date: 05/ 05 / 2020 | | |

5. Section F - Declaration

I/We declare that the information in this Annual Audit Compliance Report is true and correct and is not false or misleading in a material particular¹. I/We consent to the Annual Audit Compliance Report being published on the Department of Water and Environmental Regulation's (DWER) website. Signature²: Signature: Name: (printed) Name: (printed) Position: Position: CFO Date: Date: 2017/2020 Seal (if signing under seal):

¹ It is an offence under section 112 of the *Environmental Protection Act 1986* for a person to give information on this form that to their knowledge is false or misleading in a material particular.

² AACRs can only be signed by the licence holder or an authorised person with the legal authority to sign on behalf of the licence holder.