

**ENVIRONMENTAL MANAGEMENT BUREAU REGION 8****SURVEY/INSPECTION FOR WATER QUALITY MANAGEMENT****ENVIRONMENTAL MONITORING AND ENFORCEMENT DIVISION-WATER AIR QUALITY MONITORING SECTION**

Report Control Number: _____

Date of Survey/Inspection: January 19, 2022Mission Order No.: EMBR8-2022-003836**1. GENERAL INFORMATION**Name of Establishment: **FOUR-STOREY COMMERCIAL BUILDING – CITI APPLIANCE MC CORP.**

Address: Brgy. Yakal, Catarman, Northern Samar

Geo Coordinates:

12.49765, 124.63937

Nature of Business: Non-Residential Building

PSIC Code: 41002

Product: N/A

Year Established: 2004

Operating hours/day: 8

Operating days/week: 7

Operating days/year: 365

Product Lines	Production Rate as Declared in the ECC (unit/day)	Actual Production Rate (unit/day)
N/A	N/A	N/A
Name of Managing Head:	CITI APPLIANCE MC CORP.	
Name of PCO:	N/A	
PCO Accreditation No.:	N/A	Date of Effectivity: N/A
Phone/Fax:	N/A	Email: N/A

2. PURPOSE OF INSPECTION

- ☐
- Verify accuracy of information submitted by the establishment pertaining to new permit applications, renewals, or modification

	New	Renewal
<input type="checkbox"/> New Renewal	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> PMPIN Application	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Hazardous Waste ID Registration	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Hazardous Waste Transporter Registration	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Hazardous waste TSD Registration	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Permit to Operate Air Pollution Control Installation	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Discharge Permit	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Others _____	<input type="checkbox"/>	<input type="checkbox"/>

- ☐
- Determine compliance status with the environmental regulations, permit conditions, and other requirements

- ☐
- Investigate community complaints

- ☐
- Check status of voluntary commitment

☐ Industrial Ecowatch☐ Philippine Environmental Partnership Program (PEPP)☐ Pollution Adjudication Board (PAB)☐ Others _____

- ☐
- Others
- WATER SURVEY

Name of Contact Person	NONE
Position / Designation	N/A

3. COMPLIANCE STATUS

3.1 DENR Permits/Licenses/Clearance

Environmental Law	Permits		Date of Issue	Expiry Date
PD 1586	ECC1	ECC-08-040809-0165	8/18/2004	N/A
	ECC2	N/A		
RA 6969	DENR Registry ID	N/A		
	PCL Compliance Certificate	N/A		
	CCO Registry	N/A		
	Permit to Transport	N/A		
RA 8749	POA No.	N/A		
RA 9003	ECC for Sanitary Landfill	N/A		
RA 9275	DP No.	N/A		

4. Water Supply and Wastewater Generation - N/A

A. Water Sources

Sources of Water Supply	Daily (m ³ /day)	Annual (m ³ /day)	Specify if Others
Surface water (river, lakes, etc.)			
Groundwater			
Water utilities			
Others (specify)			

B. Wastewater Sources

Water Use / Sources of Wastewater	Consumed (m ³ /day)	Generated (m ³ /day)	Specify if Others
Process Water			
Domestic Water			
Cooling Water			
Maintenance			
Storm drain			
Others (specify)			

C. Quality of Abstracted Water - no sampling done

Sources of Water Supply	BOD/ COD	TSS	AVFP	Heavy Metals	Specify if Others

5. Information on Wastewater Pollution N/A

A. Does the Establishment have a Wastewater Treatment Plant?	<input type="checkbox"/> Yes <input type="checkbox"/> No
B. What type of WWTP?	<input type="checkbox"/> Physical <input type="checkbox"/> Biological <input type="checkbox"/> Chemical <input type="checkbox"/> Others
C. WWTP Detail	
1. Date Installed	
2. Design Capacity	
3. Cost of WWTP	
4. Annual Maintenance Cost (Php/year)	
5. Location of Discharge Point(s)	Receiving Water Body Classification of Water Body
Within the facility	Septic Tank
	<input type="checkbox"/> V-weir Other (specify)
6. Flow Metering Device Use	<input type="checkbox"/> Flow Meter
7. Flow Rate	Influent Effluent Others (specify)

A. Components of WWTP

Primary <input type="checkbox"/> Screening <input type="checkbox"/> Primary Treatment <input type="checkbox"/> Grit Removal <input type="checkbox"/> Oil/Water Separator <input type="checkbox"/> Equalization Tank <input type="checkbox"/> Others (specify) _____	Biological <input type="checkbox"/> Activated Sludge <input type="checkbox"/> Anaerobic Digestion <input type="checkbox"/> Tricking Filter <input type="checkbox"/> Oxidation/Stabilization Pond <input type="checkbox"/> Sequencing Batch Reactor <input type="checkbox"/> Others (specify) _____	Chemical <input type="checkbox"/> pH Adjustment <input type="checkbox"/> Disinfection <input type="checkbox"/> Oxidation/Reduction <input type="checkbox"/> Flocculation/ Coagulation <input type="checkbox"/> Others (specify) _____	Others
B. Condition of the WWTP N/A			
1. What is the general condition of the WWTP during sampling? No sampling done		<input type="checkbox"/> Properly maintained <input type="checkbox"/> Inadequately maintained <input type="checkbox"/> Poor maintenance <input type="checkbox"/> Others	
2. Is the WWTP under construction or undergoing rehabilitation?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
3. If the answer is No. 2 is YES, has this been reported to EMB/LLDA?			
4. Which System or units are under construction or being modified?			
5. Estimated date of completion			
6. Treatment units utilized to treat wastewater			

Water Quality Field Date N/A						
Sampling Point No. 1						
Sampling Station				Sampling Time:		
Type of Sample						
Result Analysis						
Parameter	Value	Unit	DENR Effluent Standards	Compliant		Remarks
				Yes	No	

III. SUMMARY OF FINDINGS					
Legal Reference	Compliance Requirements	Compliant			Remarks
		Y	N	N/A	
DAO 2005-10 Rule 14.1	1. Has the establishment submitted two notarized copies of accomplished application form?			/	
DAO 2005-10 Rule 14.2	2. Has the establishment submitted Sewer and Drainage Plan Drawing of appropriate scale in as standard size sheet and in accordance with good engineering practice?			/	
	3. Has the establishment submitted water quality analysis of abstracted water and the appropriate bills?			/	
	4. Has the establishment submitted Pollution Prevention/Environmental Management System Plan or Program?			/	
	5. Has the establishment submitted copy of the Environmental Compliance			/	

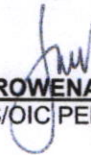
	Certificate or Certificate of Non-Coverage?				
	6. Does the establishment have a DENR ID Number as hazardous waste generator, as applicable?			/	
	7. Has the establishment designated or appointed a PCO?			/	
DAO 2005-10 Rule 14.6	8. Does the establishment use its effluent for Agricultural Purposes?			/	If yes, proceed to succeeding items
	a. Has the establishment submitted certified true copy of land ownership or notarized copy of agreement between the owner of the land where the effluent is to be applied and the discharger/permittee?			/	
	b. Has the establishment submitted proof that wastewater to be used for land application does not contain toxic or substances (as defined in RA 6969)?			/	
	c. Does the establishment's wastewater applied for agricultural purposes directly or indirectly seep or drain into groundwater or nearby surface waters which will affect the quality of such ground and/or surface water?			/	
	d. Has the establishment submitted a Certification from the Department of Agriculture (DA) stating that the quantity, quality and distribution methodology of application are suited for agricultural purposes?			/	
	e. Does the establishment use land application only during periods of low surface water flow to enhance loading limits compliance?			/	
	f. Has the establishment submitted baseline groundwater quality data and self-monitoring report within the discharge areas, and installed at least one groundwater monitoring well which shall be drilled in each dominant direction of groundwater movement?			/	
	g. Has the establishment submitted an emergency plan – which shall respond to emergencies that can prevent or minimize damage to equipment, land, groundwater, etc., and/or public health?			/	
	h. Does the plan highlight the design considerations, systems operation, treatment/monitoring of soil, crops, effluent and groundwater before/after irrigation? Such requirements shall be in addition to Section 14.2.			/	

Other Observations:
<div>1. As per inspection, the 4-Storey Building issued with ECC-08-040809-0165 issued on August 18, 2004 to CITI Appliance is presently the Jhon-Jhon Enterprises owned by a Taiwanese, thus, the proponent CITI Appliance was no longer existed. It was confirmed by the building official of the Municipality of Catarman that the said building was already sold to the present owner;</div> <div>2. The total gross area of the 4-Storey building is approximately 600 square meters only, hence, as per project threshold under buildings with less than one (1) hectare gross floor area (MC 2014-005), the type of project is not required for an ECC. Additionally, said building store has minimal wastewater generation (1 comfort room only).</div>
Remarks and Recommendation:
<div>1. Based on the above-cited information, removal of the project from the list of establishments for water monitoring /survey is recommended;</div> <div>2. Further, cancellation of the ECC is recommended as well as dropping said project from the universe list.</div>
List of Documents Reviewed:
ECC

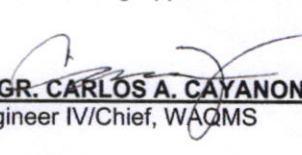
GEOTAGGED PHOTOS OF THE BUILDING




Prepared by:


FOR. ROWENA B. PABIA
SEMS/OIC/PEMO

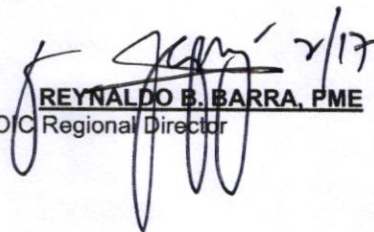
Recommending Approval:

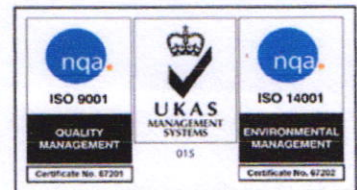

ENGR. CARLOS A. CAYANONG
Engineer IV/Chief, WAQMS

Approval:


FOR. MANUEL J. SACEDA
OIC Chief, EMED

Noted:


REYNALDO B. BARRA, PME
OIC Regional Director



DISPOSITION FORM

Doc. Date : February 13, 2022

IIS No. : R8-2022-006210

Company Name : CITI APPLIANCE MC CORP.

Subject / Title : WATER SURVEY - FOUR-STOREY BUILDING - CITI APPLIANCE MC CORP.

TO: All Officials/Personnel Concerned:

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Ladylle B. Oledan	02/14/2022	Niña L. Dela Cruz	08:47 AM	For initial/signature.
Niña L. Dela Cruz	02/14/2022	Ledane Joy Y. Laurente	05:30 PM	Pls. study / evaluate. Soft copy for your review please. I can print the report once approved
Ledane Joy Y. Laurente	02/15/2022	Carlos A. Cayanong	09:55 AM	For initial/signature.
Carlos A. Cayanong	02/17/2022	Niña L. Dela Cruz	08:49 AM	For approval.
Niña L. Dela Cruz	02/17/2022	Manuel J. Saceda Jr.	10:51 AM	For initial/signature.
C-EMED	02/17/22	ORD		1
RD	FEB 17 2022	EMED/ Niña	2:12 pm	Noted/Signed

Use code for comment/instruction and desired action:

A - For information / guidance / reference	B - For comments / recommendations	C - Pls. take up with me	D - Pls. draft answer memo
E - Pls. appropriate action	F - Pls. immediate investigation	G - Pls. Attach supporting papers	H - Pls. for approval
I - For initial/signature	J - For study/evaluation	K - Pls. release/file	L - Update stat of case

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