

ENVIRONMENTAL MONITORING AND ENFORCEMENT DIVISION-WATER AIR QUALITY MONITORING SECTION

Report Control Number: _____
Date of Survey/Inspection: February 9, 2022
Mission Order No.: EMBR8-2022-005616

1. GENERAL INFORMATION		
Name of Establishment: MULTI-PURPOSE CIRCULAR ASTRODOME (CITY GOVERNMENT OF TACLOBAN)		
Address: Brgy. 61, Sagkahan, Tacloban City		Geo Coordinates: 11.222146 ⁰ N, 125.002436 ⁰ E
Nature of Business: Commercial/Multi-Purpose Building		
PSIC Code:	Product:	Year Established:
Operating hours/day: 15 hours	Operating days/week: 7 days	Operating days/year: 365 days
Product Lines	Production Rate as Declared in the ECC (unit/day)	Actual Production Rate (unit/day)
Name of Managing Head:	MS. CELICA QUEBIC	
Name of PCO:	MS. RUBY BALANTO	
PCO Accreditation No.:		Date of Effectivity:
Phone/Fax:	(0947) 562 1108	Email:
2. PURPOSE OF INSPECTION		
<input type="checkbox"/> Verify accuracy of information submitted by the establishment pertaining to new permit applications, renewals, or modification		
<input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> PMPIN Application <input type="checkbox"/> Hazardous Waste ID Registration <input type="checkbox"/> Hazardous Waste Transporter Registration <input type="checkbox"/> Hazardous waste TSD Registration <input type="checkbox"/> Permit to Operate Air Pollution Control Installation <input type="checkbox"/> Discharge Permit <input type="checkbox"/> Others _____	New <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Renewal <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input checked="" type="checkbox"/> Determine compliance status with the environmental regulations, permit conditions, and other requirements <input type="checkbox"/> Investigate community complaints <input type="checkbox"/> Check status of voluntary commitment <input type="checkbox"/> Industrial Ecowatch <input type="checkbox"/> Philippine Environmental Partnership Program (PEPP) <input type="checkbox"/> Pollution Adjudication Board (PAB) <input type="checkbox"/> Others _____ <input type="checkbox"/> Others _____		
Name of Contact Person	MS. CHRISTINE SEGURA	
Position / Designation	Administrative Aide	

3. COMPLIANCE STATUS

3.1 DENR Permits/Licenses/Clearance

Environmental Law	Permits		Date of Issue	Expiry Date
PD 1586	ECC1	ECC-08-040317-0042	03-17-2004	
	ECC2			
RA 6969	DENR Registry ID			
	PCL Compliance Certificate			
	CCO Registry			
	Permit to Transport			
RA 8749	POA No.			
RA 9003	ECC for Sanitary Landfill			
RA 9275	DP No.			

4. Water Supply and Wastewater Generation

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

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

5. Information on Wastewater Pollution

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
- Septic Tank		N/A	
		<input type="checkbox"/> V-weir	Other (specify)
6. Flow Metering Device Use		<input type="checkbox"/> Flow Meter	
7. Flow Rate		Influent	Effluent
			No Discharge
		Others (specify)	

A. Components of WWTP			
Primary	Biological	Chemical	Others
<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) _____	<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) _____	<input type="checkbox"/> pH Adjustment <input type="checkbox"/> Disinfection <input type="checkbox"/> Oxidation/Reduction <input type="checkbox"/> Flocculation/ Coagulation <input type="checkbox"/> Others (specify) _____	
B. Condition of the WWTP			
1. What is the general condition of the WWTP during sampling?		<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						
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?			✓	

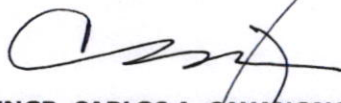
DAO 2005-10 Rule 14.6	5. Has the establishment submitted copy of the Environmental Compliance Certificate or Certificate of Non-Coverage?		√		
	6. Does the establishment have a DENR ID Number as hazardous waste generator, as applicable?		√		
	7. Has the establishment designated or appointed a PCO?	√			
	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.				

<p>Other Observations:</p> <ol style="list-style-type: none"> 1. Tacloban City Convention Center, also known as the City Astrodome or the Tacloban City Coliseum, is a frequent venue for seminars, conventions, concerts, graduation ceremonies, major sport events and many more, with a seating capacity of 4,500 individuals. 2. It was issued and Environmental Compliance Certificate No. 08-040317-0042 issued on March 17, 2004 by this Office. 3. Aside from the big arena, the place has also twenty (20) stalls/rooms presently occupied by tenants who are engaged in food services, such as bars, restaurants and snack centers. Each stall was provided with individual comfort room. 4. Comfort rooms, for male and female visitors, at the big arena, VIP rooms and at the ground floor and second floor of the building were also provided. 5. All wastewater generated from the comfort rooms go directly to septic tanks provided with no discharge observed during the monitoring. 5. The establishment is operating without valid Discharge Permit from this Office. 6. No Accredited Pollution Control Officer.
<p>Remarks and Recommendation:</p> <ol style="list-style-type: none"> 1. To apply for a Wastewater Discharge Permit. 2. Designated PCO to undergo training and apply for accreditation. 3. For issuance of Notice to Comply.
<p>List of Documents Reviewed:</p> <p>-</p>


Submitted by:


VILMA C. FABILLO
Senior EMS


Recommending Approval:

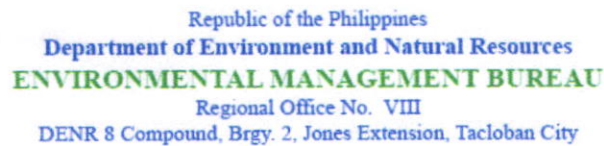

ENGR. CARLOS A. CAYANONG
Engineer IV/Chief, WAQMS

Approved by:


MANUEL J. SACEDA, JR.
OIC, Chief, EMED

Noted by:


ENGR. REYNALDO B. BARRA
OIC, Regional Director



Doc. Date : April 04, 2022
IIS No. : R8-2022-009925

Company Name : ENVIRONMENTAL MANAGEMENT BUREAU -
REGION VIII (EASTERN VISAYAS)



Subject / Title: MULTI-PURPOSE CIRCULAR ASTRODOME (CITY GOVERNMENT OF TACLOBAN), BRGY. 61, SAGKAHAN, TACLOBAN CITY

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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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