

Report Control Number:

# **ENVIRONMENTAL MANAGEMENT BUREAU REGION 8**



# SURVEY/INSPECTION FOR WATER QUALITY MANAGEMENT

ENVIRONMENTAL MONITORING AND ENFORCEMENT DIVISION-WATER AIR QUALITY MONITORING SECTION

| Date of Inspection:  | February 15, 2022                       |   |                         |  |  |  |
|--|---|---|-------------------------|--|--|--|
| Mission Order No.:   | EMBR8-2022-006109                       |   |                         |  |  |  |
|  |   |   |                         |  |  |  |
| 1. GENERAL INFORMATION   | ON                                      |   |                         |  |  |  |
| Name of Establishment: 5   | SUHI WATER SUPPLY (Mactan Rocks Inc     | dustries, Inc.)                               |                         |  |  |  |
| Address: BRGY. STO. NIN  | O, TACLOBAN CITY                        | Geo Coordinates:<br>11.321423 N, 124.952150 E |                         |  |  |  |
| Nature of Business: WAT  | ER SUPPLY PROJECT                       |   |                         |  |  |  |
| PSIC Code: 36000   | Code: 36000 Product: POTABLE WATER      |   | -                       |  |  |  |
| Operating hours/day: 24  | Operating days/week: 7                  | Operating days/y                              | rear:                   |  |  |  |
| Product Lines  | Production Rate as Declared             | Actual Pro                                    | duction Rate (unit/day) |  |  |  |
|  | in the ECC (unit/day)                   |   |                         |  |  |  |
| POTABLE WATER  | 1200 m3/day                             |   |                         |  |  |  |
|  |   |   |                         |  |  |  |
| Name of Managing Head  | : NELSON ACUIN                          |   |                         |  |  |  |
| Name of PCO:   | NONE                                    |   |                         |  |  |  |
| PCO Accreditation No.:   | -                                       | Date of Effectivity                           | y: -                    |  |  |  |
| Phone/Fax:   | 0998-841-1798                           | Email: -                                      |                         |  |  |  |
| 2. PURPOSE OF INSPECTI   | ON                                      | 1   |                         |  |  |  |
| ☐ Verify accuracy of inference renewals, or modified the control of the control | ormation submitted by the establishme   | ent pertaining to ne                          | w permit applications,  |  |  |  |
| New Renewal  |   | New   | Renewal                 |  |  |  |
| PMPIN Applicat   |   |   |                         |  |  |  |
|  | te ID Registration                      |   |                         |  |  |  |
|  | te Transporter Registration             |   |                         |  |  |  |
|  | te TSD Registration                     | - i   |                         |  |  |  |
|  | ate Air Pollution Control Installation  | H   |                         |  |  |  |
| Discharge Perm   |   |   |                         |  |  |  |
| Others   |   |   |                         |  |  |  |
|  |   |   |                         |  |  |  |
| ☐ Determine complian   | nce status with the environmental regul | ations, permit cond                           | ditions, and other      |  |  |  |
| requirements   |   |   |                         |  |  |  |
| ☐ Investigate commun   | nity complaints                         |   |                         |  |  |  |
| ☐ Check status of volu   |   |   |                         |  |  |  |
| Industrial Ecowa   |   |   |                         |  |  |  |
|  | onmental Partnership Program (PEPP)     |   |                         |  |  |  |
|  | ication Board (PAB)                     |   |                         |  |  |  |
| Others   |   |   |                         |  |  |  |
| ☐ Others WATER QU  |   |   |                         |  |  |  |
| Name of Contact Person:  | NELSON ACLUN                            | V   |                         |  |  |  |
| Position / Designation:  | MANAGING HEAD                           |   |                         |  |  |  |
|  |   |   |                         |  |  |  |

# 3. COMPLIANCE STATUS

3.1 DENR Permits/Licenses/Clearance

| <b>Environmental Law</b> |                               | Permits              | Date of Issue | <b>Expiry Date</b> |  |
|--------------------------|-------------------------------|----------------------|---------------|--------------------|--|
|                          | ECC1                          | ECC-OL-R08-2016-0138 | 12/05/2016    |                    |  |
| PD 1586                  | ECC2                          |                      |               |                    |  |
|                          | ECC3                          |                      |               |                    |  |
|                          | DENR Registry ID              |                      |               |                    |  |
| DA 5050                  | PCL Compliance<br>Certificate |                      |               |                    |  |
| RA 6969                  | CCO Registry                  |                      |               |                    |  |
|                          | Permit to<br>Transport        |                      |               |                    |  |
| RA 8749                  | POA No.                       |                      |               |                    |  |
| RA 9003                  | ECC for Sanitary<br>Landfill  |                      |               |                    |  |
| RA 9275                  | DP No.                        |                      |               |                    |  |

| 4. Water Supply and Wastewater Gen      | eration     |                 |   |                    |                              |  |  |  |
|---|-------------|-----------------|---|--------------------|------------------------------|--|--|--|
| A. Water Sources                        |             |                 |   |                    |                              |  |  |  |
| Sources of Water Supply Dail            |             | ³/day)          |   | Annual (m³/day)    | Specify if Others            |  |  |  |
| Surface water (river, lakes, etc.) 1200 |             |                 |   |                    |                              |  |  |  |
| Groundwater                             |             |                 |   |                    |                              |  |  |  |
| Water utilities                         |             |                 |   |                    |                              |  |  |  |
| Others (specify)                        |             |                 |   |                    |                              |  |  |  |
| B. Wastewater Sources                   |             |                 |   |                    |                              |  |  |  |
| Water Use / Sources of Wastewater       | Consum      | <b>ed</b> (m³/d | lay)                                      | Generated (m³/day) | Specify if Others            |  |  |  |
| Process Water                           |             |                 |   |                    |                              |  |  |  |
| Domestic Water                          |             |                 |   |                    |                              |  |  |  |
| Cooling Water                           |             |                 |   |                    |                              |  |  |  |
| Maintenance                             |             |                 |   |                    |                              |  |  |  |
| Storm drain                             |             |                 |   |                    |                              |  |  |  |
| Others (specify)                        |             |                 |   |                    |                              |  |  |  |
| C. Quality of Abstracted Water          | er          |                 |   |                    |                              |  |  |  |
| Sources of Water Supply                 | BOD/<br>COD | TSS             | AVFP                                      | Heavy Metals       | Specify if Others            |  |  |  |
|   |             |                 |   |                    |                              |  |  |  |
|   |             |                 |   |                    |                              |  |  |  |
| 5. Information on Wastewater Pollution  |             |                 |   |                    |                              |  |  |  |
| A. Does the Establishment have a Wast   |             | ПҮе             | 26  |                    |                              |  |  |  |
| Treatment Plant?                        | ewater      |                 |   |                    |                              |  |  |  |
| B. What type of WWTP?                   |             | В               | hysical<br>iological<br>hemical<br>others |                    |                              |  |  |  |
| C. WWTP Detail                          |             |                 |   |                    |                              |  |  |  |
| 1. Date Installed                       |             | N/A             |   |                    |                              |  |  |  |
| 2. Design Capacity                      |             |                 |   |                    |                              |  |  |  |
| 3. Cost of WWTP                         |             |                 |   |                    |                              |  |  |  |
| 4. Annual Maintenance Cost (Php/year    | )           |                 |   |                    |                              |  |  |  |
| 5. Location of Discharge Point(s)       |             | Rece            | iving Wa                                  | iter Body          | Classification of Water Body |  |  |  |
| Left side of the Project                |             | Cree            | k   |                    | Not Classified               |  |  |  |

|  |                            |  |                    |              | □ V-w    | eir            | _             |             | 0             | ther (speci | fy)           |
|--|----------------------------|--|--------------------|--------------|----------|----------------|---------------|-------------|---------------|-------------|---------------|
| 6. Flow Metering Device Use            |                            |  |                    | ☐ Flow Meter |          | r              |               |             | - Cine (spee) |             |               |
| 7. Flow Rate                           |                            |  |                    | Influen      |          | _              | uent          | C           | thers (spec   | cify)       |               |
| 7. Flow Nate                           |                            |  |                    |              |          |                |               |             |               |             |               |
| A. Con                                 | npone                      | nts of W                                 | WTP                |              |          |                |               |             |               |             |               |
| Primary                                |                            |  | Biological         |              |          |                | Che           | mical       |               |             | Others        |
| Screening                              |                            |  | ☐ Activated Sludge |              |          |                | pH Adjustment |             |               |             |               |
| Primary Trea                           |                            |  |                    | n            |          | ☐ Disinfection |               |             |               |             |               |
| ☐ Grit Remova                          | al Tricking Filter         |  |                    |              |          |                |               | Oxidation   | on/Reduct     | ion         |               |
| ☐ Oil/Water S                          | Separator                  |  |                    |              | ation Po | nd             |               | Floccula    | ation/ Coag   |             |               |
| ☐ Equalization Tank ☐ Sequencing Batch |                            |  | ing Batch          | Reactor      |          |                | Others        | (specify) _ |               |             |               |
| Others (spec                           | cify) _                    |  | Others (s          | pecify)      | -        |                |               |             |               |             |               |
| B. Con                                 | dition                     | of the W                                 | /\A/TD             |              |          |                | 4             |             |               |             |               |
| 1. What is the g                       |                            |  |                    | /TP          | □ Pro    | perly m        | nainta        | ined        |               |             |               |
| during sampling                        |                            |  |                    |              | _        |                |               | aintaine    | d             |             |               |
| adming sampling                        | B,.                        |  |                    |              |          | r main         | '             |             |               |             |               |
|  |                            |  |                    |              | Oth      |                |               | W. 505.     |               |             |               |
| 2. Is the WWTP                         | unde                       | r constru                                | ction or unde      | ergoing      | ☐ Yes    |                |               |             |               |             |               |
| rehabilitation?                        |                            |  |                    |              | □ No     |                |               |             |               |             |               |
| 3. If the answer                       | r is No                    | 2 is YES,                                | has this bee       | n            |          |                |               |             |               |             |               |
| reported to EM                         | IB/LLD                     | A?                                       |                    |              |          |                |               |             |               |             |               |
| 4. Which Syster                        | m or u                     | nits are u                               | ınder constru      | ıction       |          |                |               |             |               |             |               |
| or being modifi                        | ied?                       |  |                    |              |          |                |               |             |               |             | 4.000 180 4.4 |
| 5. Estimated da                        | ate of o                   | completio                                | on                 |              |          |                |               |             |               |             |               |
| 6. Treatment u                         | nits ut                    | ilized to t                              | reat wastew        | ater         |          |                |               |             |               |             |               |
| Water Quality Sampling Point           |                            |  | I/A                |              |          |                |               |             |               |             |               |
| Sampling Statio                        |                            |  |                    |              |          |                | Sam           | pling Ti    | me:           |             |               |
| Type of Sample                         |                            | _  |                    |              |          |                |               |             |               |             |               |
| Result Analysis                        |                            |  |                    |              |          |                |               |             |               |             |               |
|  |                            |  |                    | DENR         | Effluent | t              | Com           | pliant      |               |             |               |
| Parameter                              |                            | Value                                    | Unit               | Standa       | ards     |                | Yes           |             | No            | Rema        | arks          |
|  | _                          |  |                    |              |          |                |               |             |               |             |               |
|  | -                          |  |                    | -            |          |                |               |             |               |             |               |
|  | -                          |  |                    |              |          |                |               |             |               |             |               |
|  |                            |  |                    |              |          |                |               |             |               |             |               |
| III. SUMMARY                           | OF FIN                     | DINGS                                    |                    |              |          |                |               |             |               |             |               |
| Legal                                  | Com                        | pliance F                                | Requirement        | :s           |          | Com            | oliant        |             | Remarks       | S           |               |
| Reference                              |                            |  |                    |              |          | Y              |               | N/A         | 4             |             |               |
| DAO 2005-10                            | 1. H                       | as the establishment submitted           |                    |              | ed two   |                | /             |             |               |             |               |
| Rule 14.1                              | notarized copies of accomp |  |                    | olished      |          |                |               |             |               |             |               |
|  | appl                       | ication fo                               | orm?               |              |          |                |               |             |               |             |               |
| DAO 2005-10                            | 2.                         | Has the establishment submitted          |                    |              |          |                |               | 1           |               |             |               |
| Rule 14.2                              | Sew                        | er and                                   | Drainage Pl        | an Draw      | ing of   |                |               |             |               |             |               |
|  |                            |  | scale in as        |              | -        |                |               |             |               |             |               |
|  | 1                          |  | in accordan        |              |          |                |               | 1-3         |               |             |               |
|  |                            | neering p                                |                    |              |          |                |               |             | 1             |             |               |
|  | 3. Ha                      | as the est                               | ablishment s       | submitted    | water    |                |               | /           |               |             |               |
|  | qual                       | quality analysis of abstracted water and |                    |              |          |                |               |             |               |             |               |

|                          | the appropriate bills?  |          |          |                                     |
|--------------------------|---|----------|----------|-------------------------------------|
|                          | 4. Has the establishment submitted Pollution Prevention/Environmental Management System Plan or Program?  |          | 1        |                                     |
|                          | 5. Has the establishment submitted copy of the Environmental Compliance Certificate or Certificate of Non-Coverage?   |          | <b>√</b> |                                     |
|                          | 6. Does the establishment have a DENR ID Number as hazardous waste generator, as applicable?  |          | <b>√</b> |                                     |
|                          | 7. Has the establishment designated or appointed a PCO?   |          | <b>√</b> |                                     |
| DAO 2005-10<br>Rule 14.6 | 8. Does the establishment use its effluent for Agricultural Purposes?   | <b>✓</b> |          | 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>✓</b> |                                     |
|                          | b. Has the establishment submitted proof<br>that wastewater to be used for land<br>application does not contain toxic or<br>substances (as defined in RA 6969)?   |          | 1        |                                     |
|                          | 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?   |          | 1        |                                     |
|                          | 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?  |          | <b>✓</b> |                                     |

| 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:

- This Office has issued Environmental Compliance Certificate (ECC) with reference number: OL-R08-2016-0138 was issued on December 5, 2016 with a production capacity of 1,200 cubic meters per day to Tacloban City.
- Project operates production capacity of 300 cubic meters to be supplied to GMA Kapuso Foundation Habitat.
- The main water source from "Suhi River" undergoes treatment through Flocculation, clarifier system, filtration, and chlorination.
- · Wastewater discharge is generated only during backwashing.

#### Remarks and Recommendation:

- Provide wastewater treatment facility for generated wastewater. Secure Discharge Permit through online system.
- ✓ Submit Compliance Monitoring Report (CMR) semi-annually through online system.

List of Documents Reviewed:

Prepared by:

Engr. CARLOS A. CAYANONG Chief, WAQMS

Approved by:

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

Noted by:

OIC-Regional Director



# Republic of the Philippines Department of Environment and Natural Resources ENVIRONMENTAL MANAGEMENT BUREAU

Regional Office No. VIII

DENR 8 Compound, Brgy. 2, Jones Extension, Tacloban City



# DISPOSITION FORM

Doc. Date: February 21, 2022

IIS No. : R8-2022-006765 Company Name: MACTAN ROCK INDUSTRIES, INC.

Subject / Title: SUHI WATER SUPPLY (MACTAN ROCKS INDUSTRIES, INC.) WATER QUALITY SURVEY

#### TO: All Officials/Personnel Concerned:

Please accomplish and route this properly with the corresponding attached communication/documents. The Official or employee in-charge to whom this document is routed shall act promptly and expeditiously without discrimination as prescribed in the SECSIME or within fifteen (15) working days from receipt thereof, failure to do is punishable by LAW under RA 6713 and negligence to Memorandum Circular No. 44 issued by the Office of the President of the Philippines "Directing all Government Agencies and Instrumentalities, including government-owned or controlled corporations to respond to all public requests and concerns within 15 days (15 from the receipt thereof)

For strict compliance.

| ROUTED                                   |                    |  |                 |                           |  |  |  |  |  |
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| Jerome C. Salvador                       | 02/21/2022         | Carlos A. Cayanong                         | 03:29 PM        | For initial/signature.    |  |  |  |  |  |
| CEMED                                    | 02(22)22           | 040  |                 | <u> </u>                  |  |  |  |  |  |
| RD                                       | FEB 2 2 25         | 022 EMED/<br>Ni=                           | 3:211-          | Noted Signed              |  |  |  |  |  |
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|  |                    |  |                 |                           |  |  |  |  |  |
|  |                    |  |                 |                           |  |  |  |  |  |

### 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. appropriatte 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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