

Daily Boom Check Form

Date: <u>12-30-20</u>	Start Time: <u>8:10 am</u>	End Time: <u>8:59 am</u>
Supervisor: <u>Simon</u>		# Crew Members: <u>2</u>
BOOM AT 002, 004, 005		
Checked: <u>YES</u> / NO		
Pellets/Powder Present: YES / <u>NO</u>		
All Pellets/Powder Removed: YES / <u>NO</u> (if no explain)		
Weight/Volume of Plastics Removed*: <u>N/A</u>	No. of Bags Collected: <u>N/A</u>	
Condition of Boom: <u>Clear</u>		
Boom Repaired: YES / <u>NO</u> (explain)		
BOOM AT 003		
Checked: <u>YES</u> / NO		
Pellets/Powder Present: YES / <u>NO</u>		
All Pellets/Powder Removed: YES / <u>NO</u> (if no explain)		
Weight/Volume of Plastics Removed*: <u>N/A</u>	No. of Bags Collected: <u>N/A</u>	
Condition of Boom: <u>Clear</u>		
Boom Repaired: YES / <u>NO</u> (explain)		
BOOM AT 006		
Checked: <u>YES</u> / NO		
Pellets/Powder Present: YES / <u>NO</u>		
All Pellets/Powder Removed: YES / <u>NO</u> (if no explain)		
Weight/Volume of Plastics Removed*: <u>N/A</u>	No. of Bags Collected: <u>N/A</u>	
Condition of Boom: <u>Clear</u>		
Boom Repaired: YES / <u>NO</u> (explain)		
BOOM AT 007		
Checked: <u>YES</u> / NO		
Pellets/Powder Present: YES / <u>NO</u>		
All Pellets/Powder Removed: YES / <u>NO</u> (if no explain)		
Weight/Volume of Plastics Removed*: <u>N/A</u>	No. of Bags Collected: <u>N/A</u>	
Condition of Boom: <u>Clear</u>		
Boom Repaired: YES / <u>NO</u> (explain)		

* To be added once approved methodology in place

Daily Boom Check Form

BOOM AT 008

Checked: YES / NO

Pellets/Powder Present: YES / NO

All Pellets/Powder Removed: YES / NO (if no explain)

Weight/Volume
of Plastics Removed*: N/A

No. of Bags
Collected: N/A

Condition of Boom:

Clear

Boom Repaired: YES / NO (explain)

BOOM AT 009

Checked: YES / NO

Pellets/Powder Present: YES / NO

All Pellets/Powder Removed: YES / NO (if no explain)

Weight/Volume
of Plastics Removed*: N/A

No. of Bags
Collected: N/A

Condition of Boom:

Clear

Boom Repaired: YES / NO (explain)

BOOM AT 012

Checked: YES / NO

Pellets/Powder Present: YES / NO

All Pellets/Powder Removed: YES / NO (if no explain)

Weight/Volume
of Plastics Removed*: N/A

No. of Bags
Collected: N/A

Condition of Boom:

Good. Tree limbs cover

Boom Repaired: YES / NO (explain)

BOOM AT 014

Checked: YES / NO

Pellets/Powder Present: YES / NO

All Pellets/Powder Removed: YES / NO (if no explain)

Weight/Volume
of Plastics Removed*: N/A

No. of Bags
Collected: N/A

Condition of Boom:

Good. Tree limbs cover

Boom Repaired: YES / NO (explain)

* To be added once approved methodology in place