



# Mining Dust Control Checklist

## Watering and Suppression Systems

Inspect and verify the functionality and effectiveness of water sprays, dust suppression systems, and wetting agents.

### Water Spray System Pressure (PSI)

### Water Tank Level (%)

### Nozzle Condition

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor

### Pump Operation

- ☐ Operating Normally
- ☐ Noisy
- ☐ Intermittent
- ☐ Not Operating

### Last Watering Date

Enter date...

### Watering Start Time

### Comments or Observations about System Performance

Write something...

## Ventilation System Performance

Assess airflow rates and effectiveness in removing airborne dust particles from work areas.

### Airflow Rate (m<sup>3</sup>/s)

Enter a number...

### Static Pressure (Pa)

Enter a number...

### Fan Operating Status

- ☐ Operating Normally
- ☐ Reduced Speed
- ☐ Malfunctioning
- ☐ Off

### Filter Condition

- ☐ New
- ☐ Good
- ☐ Fair
- ☐ Poor

### Last Filter Change Date

Enter date...

### Notes on Ventilation Performance

Write something...

### Temperature (Celsius)

Enter a number...

### Humidity (%)

Enter a number...

## Road and Area Management

Evaluate road watering schedules, surface stabilization methods, and general housekeeping practices to minimize dust generation.

### Road Watering Frequency (times/day)

Enter a number...

### Road Stabilisation Method

- ☐ Water Spray
- ☐ Chemical Binder
- ☐ Crushed Rock Application
- ☐ Other

### Description of Area Housekeeping Practices

Write something...

### Last Road Sweeping Date

Enter date...

### Areas requiring increased cleaning

- ☐ Loading Areas
- ☐ Haul Roads
- ☐ Storage Areas
- ☐ Underground Workings

### Volume of Water Used for Road Watering (litres)

Enter a number...

### Notes on Observed Dust Levels on Roads

Write something...

## Equipment Maintenance & Emissions

Check for proper maintenance of equipment to reduce dust emissions, including filters, seals, and exhaust systems.

### Filter Change Date

Enter a number...

### Filter Efficiency (%)

Enter a number...

### Last Exhaust System Inspection

Enter date...

### Inspection Notes (Exhaust System)

Write something...

**Exhaust System Condition**

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor

**Engine Hours (Since Last Maintenance)**

Enter a number...

**Upload Photos (Emissions/Maintenance)**

 Upload File

# Monitoring and Sampling

Review dust monitoring data and sampling results to identify areas needing improvement and verify compliance with regulations.

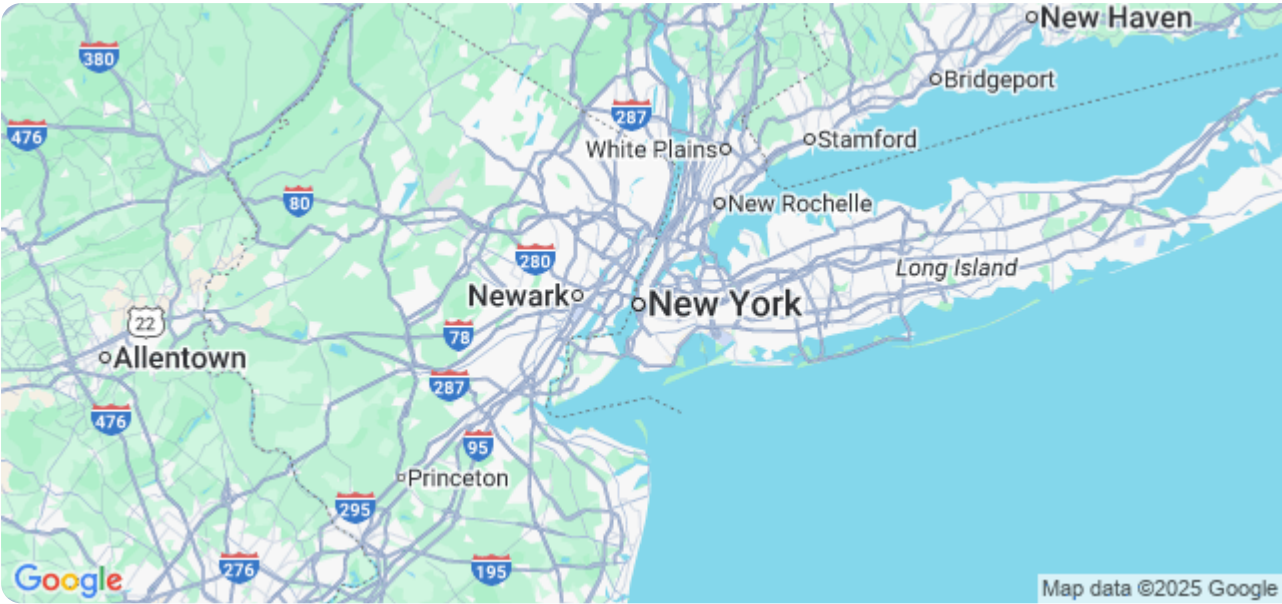
**Monitoring Date**

Enter date...

**Sampling Time**

Sampling Location (GPS Coordinates)

 Set My Current Location



Total Suspended Particulate (TSP) Concentration (mg/m³)

Enter a number...

Respirable Dust Concentration (mg/m³)

Enter a number...

Moisture Content (%)

Enter a number...

Sampling Method

- ☐ NIOSH Method 5
- ☐ Modified NIOSH Method
- ☐ Other (Specify)

### Notes/Observations (e.g., weather conditions, unusual dust activity)

Write something...

### Photos/Video of Sampling Area (Optional)

 Upload File

## Personal Protective Equipment (PPE)

Ensure workers are using appropriate respiratory protection and other PPE when dust exposure is likely.

### Respirator Type Used

- ☐ N95
- ☐ P100
- ☐ Powered Air-Purifying Respirator (PAPR)
- ☐ Other (Specify)

### Specify Respirator Type (if 'Other')

Write something...

### Fit Testing Conducted?

- ☐ Yes
- ☐ No
- ☐ N/A



### Last Fit Test Date

Enter date...

### NIOSH Approval Number (for Cartridges/Filters)

Enter a number...

### PPE Items Inspected (Check all that apply)

- ☐ Respirator
- ☐ Safety Glasses
- ☐ Hard Hat
- ☐ Hearing Protection
- ☐ Dust Mask
- ☐ Other

### Details of other PPE Items used

Write something...

## Training & Awareness

Verify that employees are properly trained on dust control procedures and aware of the health risks associated with dust exposure.

### Training Topics Covered

- ☐ Dust Hazards & Health Effects
- ☐ Engineering Controls (e.g., Ventilation)
- ☐ Administrative Controls (e.g., Work Practices)
- ☐ Respiratory Protection Program
- ☐ Monitoring and Reporting Procedures
- ☐ Emergency Procedures

### Number of Employees Trained

Enter a number...

### Date of Last Training Session

Enter date...

### Training Delivery Method

- ☐ Classroom
- ☐ Online
- ☐ On-the-Job

### Summary of Training Content

Write something...

### Trainer Qualifications

- ☐ Certified Safety Professional
- ☐ Experienced Mine Supervisor
- ☐ External Consultant

## Record Keeping

Confirm accurate record keeping of dust control activities, monitoring data, and corrective actions taken.

### Date of Record Keeping Entry

Enter date...

### Time of Record Keeping Entry

### Dust Monitoring Results (mg/m<sup>3</sup>)

Enter a number...

### Description of Dust Control Actions Taken

Write something...

**Effectiveness of Actions**

- ☐ Very Effective
- ☐ Effective
- ☐ Somewhat Effective
- ☐ Not Effective

**Supporting Documentation (e.g., photos, reports)**

 Upload File

**Signature of Person Completing Record**