

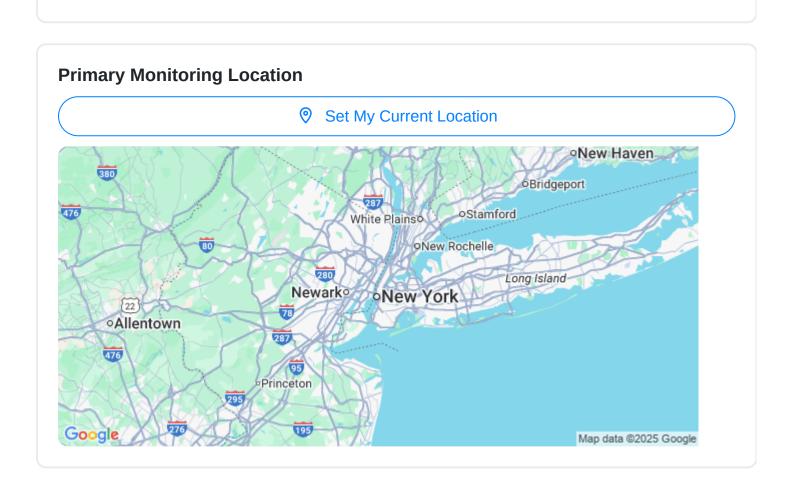
Mining Noise Monitoring Checklist

Pre-Monitoring Setup

Ensuring equipment and environment are prepared for accurate noise level assessment.



Start Time

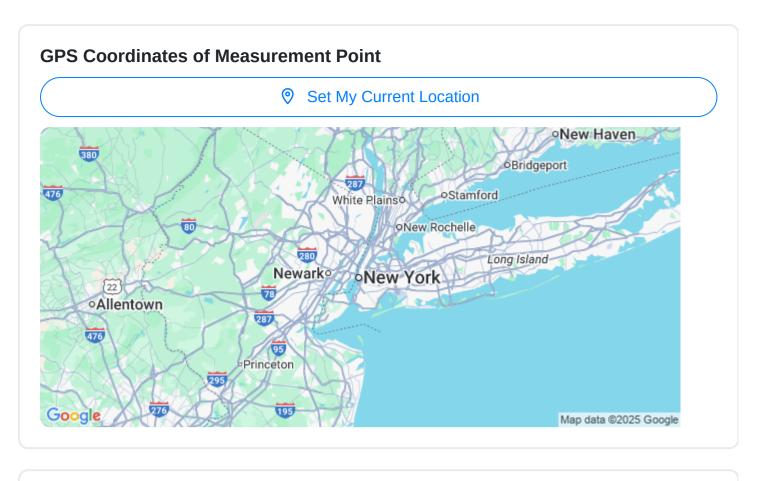


Weather Conditions	
Clear	
Cloudy	
Rain	
Windy	
Wind Speed (m/s)	
Enter a number	
Monitoring Plan Reference	
Write something	
Equipment Calibration & Functiona	litv
Verifying the sound level meter and associated equipment are f	_
Verifying the sound level meter and associated equipment are f	_
Verifying the sound level meter and associated equipment are fare within calibration dates.	_
Verifying the sound level meter and associated equipment are fare within calibration dates. Last Calibration Date	_
Verifying the sound level meter and associated equipment are fare within calibration dates. Last Calibration Date Enter date	_
Verifying the sound level meter and associated equipment are fare within calibration dates. Last Calibration Date Enter date Serial Number	_
Serial Number Enter a number	_

Calibration Standard Used ANSI ISO Other	
Frequency Response (Hz) Enter a number	
Sensitivity (dB/µPa) Enter a number	
Self-Test Pass/Fail Pass Fail	

Measurement Locations

Confirming the chosen locations align with the monitoring plan and represent relevant noise sources.



Distance from Noise Source (meters) Enter a number...

pe of Location (e.g., ne	ear drill rig, haul road, blasting area)
Near Drill Rig	
Haul Road	
Blasting Area	
Processing Plant	
Office/Administrative Area	
Other	

Description of Surrounding Environment (e.g., open pit, underground, residential area nearby)

Write something...

Presence of Noise Barriers?	
Yes	
□ No	

Ambient Noise Readings

Recording baseline noise levels before machinery operation.

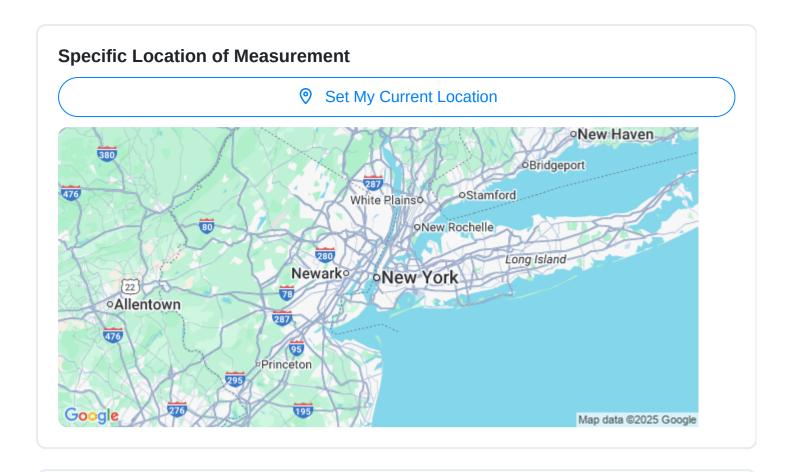
Start Time of Measurement

Sound Level (dBA)

Enter a number...

Measurement Location (GPS Coordinates) Set My Current Location New Haven OBridgeport 476 oStamford White Plainso oNew Rochelle Long Island Newark^o New York Allentown Princeton 195 Google Map data @2025 Google

Write something	
Write Something	
Temperature (°C)	
Enter a number	
perational Noise F	Readings
asuring noise levels during typic	cal mining operations (e.g., drilling, blasting, hauling).
Sound Level (dBA) - Drill	
Enter a number	
Sound Level (dBA) - Loader	
Enter a number	
Sound Level (dBA) - Haul Truc	ck
Enter a number	
Sound Level (dBA) - Crusher	
Enter a number	
Time of Reading	



Operator Name

Write something...

Notes/Observations (e.g., unusual noise, equipment issues)

Write something...

Near-Field/Worker Exposure Measurements

Assessing noise levels at worker locations and distances to determine potential exposure.

Worker Exposure Measurement Location Set My Current Location New Haven OBridgeport 476 oStamford White Plainso ONew Rochelle Long Island Newark^o New York Allentown 287 476 Princeton 195 Google Map data @2025 Google

Sound Level (dB(A)) - Leq

Enter a number...

Sound Level (dB(A)) - Peak

Enter a number...

Distance from Noise Source (meters)

Enter a number...

Task Performed During Measurement Drilling
Blasting
Hauling
Loading
Maintenance
Other
Worker Name/ID
Write something
Data Recording & Documentation roperly recording measurements, date/time, location, operator, and any relevant notes.
Date of Monitoring
Enter date
Start Time of Monitoring
Sound Level Meter Serial Number

Monitoring Team Members

Write something...

Weather Conditions

Write something...

Specific Measurement Locations

Set My Current Location



Notes/Observations

Write something...

Equipment Shutdown & Storage

Shutdown Date	
Enter date	
Shutdown Time	
Equipment Status Upon Shutdown	
Write something	
Notes on Shutdown Procedure (if applicable)	
Write something	
Storage Location	
Designated Equipment Storage	
On-Site Yard	
Off-Site Facility	
Storage Temperature (°C)	
Enter a number	
Signature of Person Completing Shutdown	

Review & Analysis

Initial review of data to ensure accuracy and consistency; flagging any issues.

Maximum Noise Level Recorded (dB) Enter a number	
Average Noise Level (dB)	
Enter a number	
Noise Level Exceeds Regulatory Limits?	
☐ Yes ☐ No	
Uncertain	
Detailed Observations and Notes	
Write something	
Date of Review	
Enter date	
Time of Review	
Time of Review	

Reviewer Signature	