

Elgas Kooragang LPG Facility Independent Audit 2025 – Operations

State Significant Development (SSD 8448)

27/05/2025

Independent Environmental Audit

Elgas Kooragang LPG Facility

27/05/2025

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Acronyms and Abbreviations

Acronym	Definition
AS/NZS	Australian/ New Zealand Standard
CoC	Conditions of consent
CR	Compliance Report
CRPAR	Compliance Reporting Post Approval Requirements (2018/ 2020)
DPHI	Department of Planning, Housing and Infrastructure
DPIE	Department of Planning, Industry and Environment
EMS	Environmental management system
EIS	Environment Impact Statement
EP&A Act	<i>Environmental Planning and Assessment Act 1979</i>
FERP	Flood Emergency Response Plan
IAPAR	Independent Audit Post Approval Requirements
LPG	Liquid petroleum gas
MMT	Mosquito Management Plan
OEMP	Operations Environmental Management Plan
PHA	Preliminary Hazard Analysis
QRA	Quantitative Risk Assessment
RtS	Response to Submissions
SSD	State significant development
TMP	Traffic Management Plan

Executive Summary

Approval for the development of a liquefied petroleum gas (LPG) storage and distribution facility at Kooragang was granted as development consent state significant development (SSD) 8448 to Sovechles Nominees by the Minister for Planning on 23 November 2018. The development comprises of construction and operation of a LPG facility for bulk and cylinder distribution, office building and associated car park.

Development consent for SSD 8448 (23/11/2018) requires that independent audits of the development be carried out in accordance with condition C18.

This independent audit report satisfies these conditions, and has been conducted in accordance with:

- *Independent Audit Post Approval Requirements (IAPAR)* (DPIE, May 2020)
- The processes and practice procedures identified in AS/NZS ISO 19011:2014 - *Guidelines for Auditing Management Systems*.

This audit report documents the findings and outcomes of the review of compliance conducted by Arcadis. The audit process comprised a detailed document review, opening and closing meetings, site visit (conducted on the 24 April 2025) and post-site audit document review and follow up.

Consultation with the Department of Planning, Housing and Infrastructure (DPHI) was conducted in order to develop the scope for the audit. Consultation identified a focus on:

- Compliance Reporting (C15 and C16) and Independent Audit (C18 and C19) requirements.

It was found that the site was generally compliant, and the project was generally being managed in accordance with the requirements of the SSD 8448 conditions of consent. Of the 98 conditions, the audit identified the following:

- 34 compliant
- 10 non-compliant (nine being unique non-compliances)
- 54 not triggered.

Non-compliances were identified in respect of the following conditions:

- **A2:** non-compliant as a result of the nine non-compliances presented below
- **A6:** exceedance of storage limit for LPG onsite
- **B8:** Hazard Audit report not submitted within the required timeframe
- **C1:** deficiencies in the preparation of operational environmental management plans (EMP)
- **C8:** failure to notify the DPHI that a review of EMPs was being conducted
- **C11:** failure to notify the Department of non-compliances detected during Elgas Internal Audit and Compliance Reporting processes
- **C15:** non-conformance with the Compliance Reporting Post Approval Requirements (CRPAR) in the preparation of Compliance Reports
- **C16:** failure to make the 2022 Compliance Report publicly available within the required timeframe
- **C19:** failure to notify the Department that the 2021 Independent Audit report had been published on the project website
- **C21:** Response to submissions (A2(c)) for the initial Environment Impact Statement (EIS) or Modifications have not been uploaded to the project website.

Other than the non-compliance against condition A6, all other non-compliances are considered administrative in nature and do not pose an environmental risk to the facility. Recommendations have been presented to address the non-compliances.

Of the five improvement opportunities presented, four relate to omissions in site operational environmental management plans (OEMP) to clarify how conditions of consent requirements are being met, site processes, , notification and review triggers, etc.

The audit identified an effective Environmental Management System (EMS), induction and training and monitoring and inspections. Of note is the increased ownership of the consent by Elgas management staff and improved processes in the past six months to promote improved compliance.

The audit concludes that the Elgas Kooragang LPG Facility project is generally being undertaken in compliance with the requirements of SSD 8448.

2 Introduction

2.1 Project Background

Arcadis Australia Pacific Pty Ltd (Arcadis) was engaged by Elgas Ltd (the client) to undertake an independent audit of the operation stage works for the Kooragang liquefied petroleum gas (LPG) storage and distribution facility.

Approval for construction and operation of the LPG storage and distribution facility in Kooragang was granted to Sovechles Nominees Pty Ltd under Section 4.38 of the *Environmental Planning and Assessment Act 1979* (EP&A Act) on 23 November 2019 by the NSW Minister for Planning. Conditions of consent are provided in SSD 8448, including the following two modifications to the initial consent.

- Modification 1: to delete conditions B26 and B27 relating to the preparation of a Water Management Plan. Approved on the 20 October 2020.
- Modification 2: to amend condition B38 to operate 24 hours 7 days a week. Approved on the 6 August 2021.

The consent conditions of SSD 8448, including Modification 1 and Modification 2, are presented in the Independent Audit Table (Appendix D).

The development comprises construction and operation of a LPG facility, including the following:

- Bulk storage vessel
- Cylinder storage area
- Overnight truck parking and loading area
- Cylinder filling dock
- Associated infrastructure
- Office building
- Car park.

The site layout is presented in Figure 1.

2.1.1 Project Location

The project site is defined as Lot 1 in DP 1195449, located at 130 Cormorant Road, Kooragang NSW.

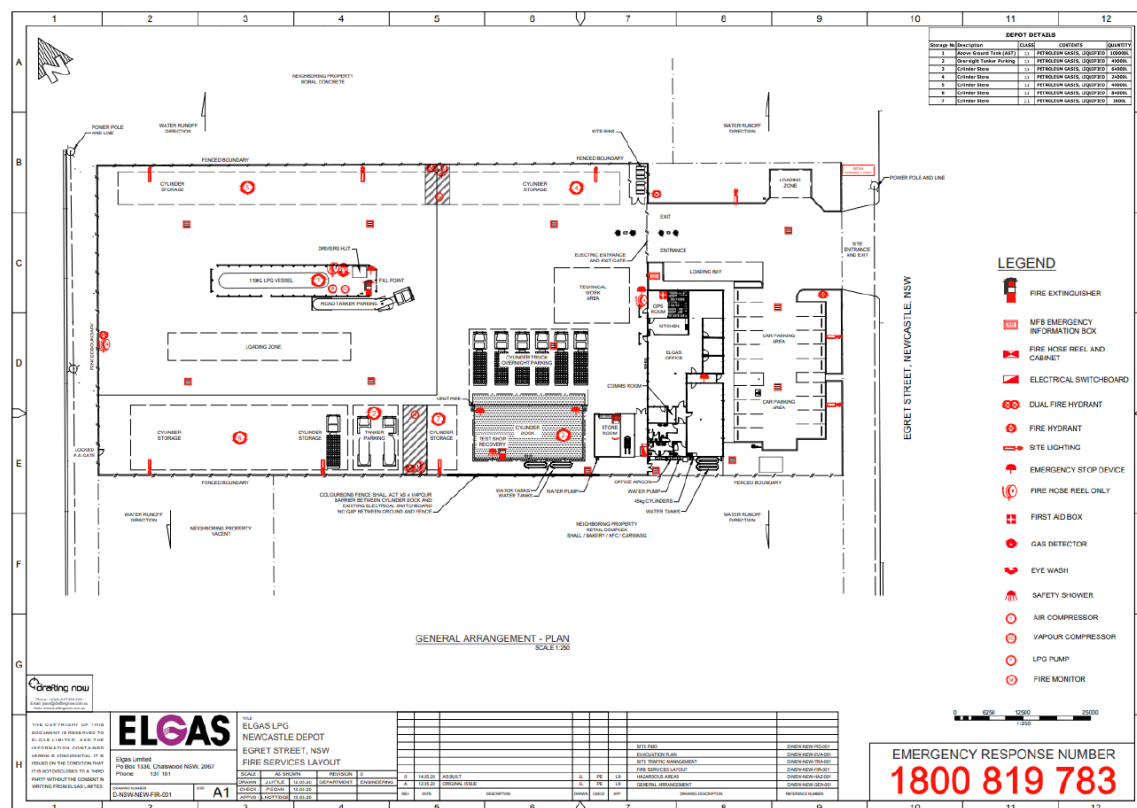


Figure 1: Elgas Kooragang site layout

2.1.2 Project Staging

Staging is not relevant to this project.

2.1.3 Independent Audit Requirements

This Independent Audit has been conducted to meet the requirements in conditions of consent (CoC) C17 – C19 of SSD 8448, as presented in Table 11.

Table 1: SSD 8448 conditions of consent relating to Independent Audits

Condition	Requirement
C17	No later than 4 weeks before the date notified for the commencement of operation, an Independent Audit Program prepared in accordance with the <i>Independent Audit Post Approval Requirements</i> (Department 2018) must be submitted to the Department.
C18	Independent Audits of the development must be carried out in accordance with: (a) the Independent Audit Program submitted to the Department under Condition C17 of this consent; and (b) the requirements for an Independent Audit Methodology and Independent Audit Report in the Independent Audit Post Approval Requirements (Department 2018).
C19	In accordance with the specific requirements in the Independent Audit Post Approval Requirements (Department 2018), the Applicant must:

Condition	Requirement
	(a) review and respond to each Independent Audit Report prepared under Condition C18 of this consent; (b) submit the response to the Department; and (c) make each Independent Audit Report and response to it publicly available no later than 60 days after submission to the Department and notify the Department in writing at least 7 days before this is done.

In accordance with *Independent Environmental Audit Program – SSD 8448 Elgas Kooragang, 130 Cormorant Road Kooragang NSW (Lot 1 DP 1195449) (27/07/2020)*, prepared to satisfy CoC C17, the Independent Audit Program for the facility is presented in Table 2. This is based on the commencement date for operation of the facility of 1 September 2020. This document has not been updated.

The actual approved commencement date for operation of the facility was the 20 October 2020, which is the date applied when assessing compliance for this audit.

Table 2: Independent Audit Program for SSD 8448

Audit	Requirement Frequency	Timeframe
Initial Independent Audit	Within 52 weeks of the notified commencement date of operation	30 August 2021
Independent Audits during operation phase of the development	At intervals no greater than three years	To be confirmed

2.2 Audit Team

Christine Louie – Lead Auditor, Reviewer

Qualifications

- Bachelor of Engineering (Chemical) (Hons), Master of Environmental Engineering Science
- Environmental Auditor (Exemplar Global Cert. No. 132320). Scopes:
 - Environmental Management Audit
 - ISO 14001:2015 Audit
 - Regulatory Compliance Audit.
 - Site Contamination Assessment

Denise Day – Support auditor, Audit report author

Qualifications

- Bachelor of Science (Honours), Post Graduate Diploma in Environmental Impact Assessment
- Master Environmental Auditor (Exemplar Global Certificate No: 14760). Scopes:
 - Environmental Management Audit

- ISO 14001:2015 Audit
- Regulatory Compliance Audit.

2.3 Audit Objectives

The objectives of this independent audit were to assess:

- Compliance with the SSD 8448 conditions of consent and to identify recommendations for each non-compliance raised
- Implementation of site Environmental Management Plan (EMP) and Sub Plans
- The environmental performance of the development
- The appropriateness and effectiveness of the project's environmental management systems (EMS)
- The adequacy of the EMP and Sub Plans and identify opportunities for improvement.

2.4 Audit Scope

This independent audit was undertaken in accordance with IAPAR (May 2020, as per DPHI direction) to assess the environmental compliance of the Kooragang LPG facility development during the operation phase with the conditions of Development Consent SSD 8448 under the EP&A Act.

The independent audit involved desktop review of available information relating to the development consent approval conditions including environmental management plans and monitoring records; site inspection; interviews with development personnel; and preparation of this independent audit report detailing the findings of the audit.

2.5 Audit Period

In accordance with SSD-8448-PA 48, this independent audit addresses development activities undertaken during the operation phase since the completion of the first operational independent audit on the 13 November 2021 and the date of the site inspection for this audit on the 24 April 2025.

3 Audit Methodology

This independent audit was conducted in accordance with the audit methodology and audit report requirements detailed in *Independent Audit Post Approval Requirements* (IAPAR) (May 2020). As relevant, the audit methodology will also meet the requirements of AS/NZS ISO 19011:2019 *Guidelines for auditing management systems*.

3.1 Selection and Endorsement of the Audit Team

Endorsement of the independent audit team was provided to the Approval holder from the Planning Secretary Department of Planning, Housing and Infrastructure (DPHI) on 25 March 2025 (SSD-8448-PA-48). The letter of approval is provided in Appendix A.

3.2 Independent Audit Scope Development

IAPAR (May 2020) sets out the minimum requirements to be met when undertaking independent audits include:

1. An assessment of compliance with:
 - a. Conditions of consent SSD 8448 applicable to the phase of the development that is being audited
 - b. All post approval documents prepared to satisfy the conditions of consent, including an assessment of the implementation of Environmental Management Plans and Sub-plans
 - c. All environmental licences and approvals applicable to the development excluding environmental protection licences issued under the *Protection of the Environment Operations Act 1997*.
2. An assessment of the environmental performance of the development, including but not necessarily limited to, an assessment of:
 - a. Actual impacts compared to predicted impacts documented in the environmental impact assessment;
 - b. The physical extent of the development in comparison with the approved boundary, and any potential off-site impacts
 - c. Incidents, non-compliances and complaints that occurred or were made during the audit period
 - d. The performance of the development having regard to agency policy and any particular environmental issues identified through consultation carried out when developing the scope of the audit
 - e. Feedback received from the Department, and other agencies and stakeholders, including the community or Community Consultative Committee, on the environmental performance of the project during the audit period.
3. The status of implementation of previous Independent Audit findings, recommendations and actions (if any)
4. A high-level review of the project's environmental management systems (if any), including assessment of any third party certification of them, the type, nature and scope of the systems having regard to the nature and scale of the development, and the implementation of the systems. It is not expected that an Independent Audit comprises a management system audit, however any key deficiencies identified in the system should be discussed
5. A high-level assessment of whether Environmental Management Plans and Sub-plans are adequate
6. Any other matters considered relevant by the auditor or the Department taking into account relevant regulatory requirements and legislation and knowledge of the development's past performance.

3.2.1 Consultation

Consultation was undertaken with DPHI to obtain input into the scope of the audit. Evidence of consultation is provided in Appendix B. A summary of consultation is presented in Table 3.

Table 3: Summary of consultation

Agency	Contact	Dates	Consultation Comments
DPHI	compliance@planning.nsw.gov.au Joel Fleming	Issued:25/03/2025 Response:27/03/2025	Since the initial IEA, the compliance reporting (Schedule 2, Condition C15) and independent audits (Schedule 2, Condition C18) have not been completed at the frequency detailed in the consent or Independent Audit Post Approval Requirements (2018). During the audit review compliance with the compliance reporting and independent auditing requirements. In accordance with Schedule 2, Condition A29 of the consent, NSW Planning provided direction for Elgas Ltd to refer to the 2020 version for all future IEAs (NSW Planning reference: SSD-8448-PA-41). Please note that this IEA should audit the period commencing from 13 November 2021 until no later than 30 April 2025 with the site inspection considered the last day of the audit period. Not required to consult with any other government agencies or stakeholders for the purposes of this IEA.

3.3 Audit Process

3.3.1 Opening Meeting

An opening meeting was conducted on the 24 April 2025 with the purpose of discussing:

- The audit purpose, objectives and scope
- The resources required
- Methodology to be applied in conducting the audit
- Overview of the project and current status of the works
- Site safety requirements, including induction and Personal Protective Equipment (PPE).

3.3.2 Site Interviews

Site personnel and their position title interviewed for this audit are provided in Table 4. Interviews were conducted during the site visit on the 24 April 2025.

Table 4: Interview personnel

Name	Position	Company
Patrick Egan	Regional Depot Operations Manager	Elgas
David Russell	Depot Manager	Elgas

The interviews covered the following information:

- The overarching EMS for the project, including the management of documentation such as the waste register, training and induction records, site inspections.
- The review of records (training, waste, inspections) in to ensure they met the requirements of the consent conditions and OEMP and Sub Plans
- Site traffic control, waste and chemical management, inspections and corrective actions
- The implementation and maintenance of management controls around the project site, including any changes.

3.3.3 Site Inspection

The site inspection was undertaken on the 24 April 2025 by Christine Louie (Lead Auditor) and Denise Day (Support Auditor).

All areas visited during the site inspection included:

- Bulk storage vessel
- Cylinder storage area
- Overnight truck parking and loading area
- Cylinder filling dock
- Associated infrastructure
- Office building
- Car park.

Photographs taken during the site inspections are presented in Appendix C.

3.3.4 Closing Meeting

The closing meeting was conducted on the 24 April 2025 with the purpose of:

- Presenting preliminary audit findings
- Discussing recommendations
- Confirming any post-audit actions, including requests for further documentation.

3.4 Compliance status descriptors

Evidence collated through documentation and during the site inspection and interviews was evaluated to assess compliance with the relevant conditions of consent. Any information gaps identified were addressed through requests for further data, or additional interviews.

The evidence used to verify the compliance status descriptor chosen with respect to each condition of consent is documented in the Audit Table (Appendix D). The environmental significance of non-compliance has also been assessed based on the potential risk.

The compliance status descriptors and definitions that have been applied to assess compliance requirements in the Audit Table are presented in Table 5.

Table 5: Compliance status descriptors

Status	Description
Compliant	The auditor has collected sufficient verifiable evidence to demonstrate that all elements of the requirement have been complied with within the scope of the audit.
Non-compliant	The auditor has determined that one or more specific elements of the conditions or requirements have not been complied with within the scope of the audit.
Not triggered	A requirement has an activation or timing trigger that has not been met during the temporal scope of the audit being undertaken (may be a retrospective or future requirement), therefore an assessment of compliance is not relevant.

When evaluating post-approval documents (such as the OEMP and Sub Plans), the following was assessed:

- Have they have been developed in accordance with the conditions of consent and approvals applicable to the development, and is the content is adequate
- Have they have been implemented in accordance with the conditions of consent for the development.

The adequacy of documents was determined on the basis of:

- Any non-compliances resulting from the implementation of the document
- Whether there are any opportunities for improvement.

4 Audit Findings

4.1 Approval and Document List

A Request for Information (RFI) Register was prepared based on a review of the SSD 8448 conditions of consent was issued to the Elgas on the 1 April 2025.

The key documents reviewed for the audit, and the relevant approval documents, are provided in Table 6.

Table 6: Relevant documents

Document name	Date
Environmental Management Plan Elgas Newcastle Rev 1.6 (OEMP)	19/12/2024
Depot Traffic Management Plan (SOP-300-008) Rev 1.3 (TMP)	02/11/2021
Newcastle (Kooragang) Emergency Plan Rev 1.6	05/11/2024
ELGAS Newcastle Flood Emergency Response Plan Rev 1.1	05/11/2020
Elgas Newcastle Depot Hazard Audit Report (The Linde Group)	19/10/2022
Mosquito Management Plan Elgas LPG Storage Facility 130 Cormorant Road Kooragang Rev 1.1	05/11/2024
Operational Compliance Report for the Period 21 October 2023 To 28 November 2024	28/11/2024
Operational Compliance Report for the Period 21 October 2022 to 20 October 2023	30/10/2023
Operational Compliance Report for the Period 13 November 2021 to 21 October 2022	21/10/2022
New LPG Storage Facility, 130 Cormorant Road, Kooragang (Part Lot 1, DP 1195449) Environmental Impact Statement	22/08/2017

4.1.1 Other Approvals

No other approvals were identified for the site.

4.2 Compliance Performance

Compliance performance as assessed against each of the conditions of consent of SSD 8448 is presented in detail in Appendix D. The evidence (documentation, interviews and site visit observations) assessed to determine compliance, along with a summary of the finding, is presented. Photographs taken during the site visit as evidence to support the findings are presented in Appendix C.

A summary of compliance findings against the CoC for SSD 8448 is presented in the table below.

Table 7: Compliance findings

Consent Schedule	Number of Conditions	Compliant	Non-compliant	Not triggered
Part A – Administrative Conditions	29	7	2	20
Part B – Specific Environmental Conditions	48	21	1	26
Part C - Environmental Management, Reporting and Auditing	21	6	7	8
Total	98	34	10	54

4.3 Summary of agency notices, orders, penalty notices or prosecutions

No agency notices, orders, penalty notices or prosecutions have been issued in relation to the development during the audit period.

4.4 Non-compliances

As presented in Table 8, of the 98 conditions of consent relevant to the current audit, a total of 10 non-compliances were identified. The non-compliance against condition A2 is a result of the other nine non-compliances, and as such was not allocated a unique identifier (shown as Operational Audit 2 Non-compliance OA2_NCX).

Of the nine unique non-compliances, one (OA2_NC1) relates to an exceedance of the LPD storage limit at the facility under condition A6, while the remaining non-compliances are generally administrative in nature.

Table 8: Details of non-compliances against SSD 8448

Identifier	CoC	Requirement	Audit Finding
-	A2	The development may only be carried out: a) in compliance with the conditions of this consent;	This audit identified non-compliances against the following conditions: A6, B8, C1, C8, C11, C15, C16, C19, C21
OA2_NC1	A6	The storage of LPG on-site at any given time must not exceed 178 tonnes.	The 2024 Internal Audit (18/03/24) identified that at the time of the Internal Depot Audit, Depot DG stocktake exceeded the limit (confirmed during the site visit that this referred to LPG). Local management recalculated the site DG and noted the site was at 3% above the SafeWork NSW Notification NDG200406. The site continues to monitor the DG levels monthly. This exceedance was also reported in the 2024 Compliance report. At the time of the Compliance Report the DG Calculator was sighted, and site was within limits.

Identifier	CoC	Requirement	Audit Finding
OA2_NC2	B8	Within one month of completing each audit carried out in accordance with Condition B7, the Applicant must submit a report to the satisfaction of the Planning Secretary for approval. The audit report must be accompanied by a program for the implementation of all recommendations made in the audit report. If the Applicant intends to defer the implementation of a recommendation, reasons must be documented.	The site audit was conducted on the 6-7 September 2022. The Hazard Audit Report was issued to Department on 19/11/2022, more than one month after the site audit. The report was approved by DPE on the 25/11/2022. The program for the implementation of the Report's recommendations is dated 08/02/2023. Delays with previous consent owner. Elgas are now managing the consent.
OA2_NC3	C1	Management plans required under this consent must be prepared in accordance with relevant guidelines, and include: a) details of: (i) any relevant limits or performance measures and criteria; and b) a description of the measures to be implemented to comply with the relevant statutory requirements, limits, or performance measures and criteria;	The OEMP does not mention the storage limit for LPG on-site at any given time of 178 tonnes, as specified under condition A6. A non-compliance is also identified under condition A6. The OEMP does not mention the measures to be implemented to ensure compliance with the storage limit for LPG on-site at any given time of 178 tonnes, as specified under condition A6.
OA2_NC4	C8	Within three months of: b) the submission of an Independent Audit under Condition C17; the strategies, plans and programs required under this consent must be reviewed, and the Department must be notified in writing that a review is being carried out.	No written notification to the Department that strategies, plans and programs were being reviewed following the 2021 IEA. No review or updates following the 2021 IEA are documented in the OEMP Revisions Table. Site interviews identified a review had not been conducted.
OA2_NC5	C11	The Department must be notified in writing to compliance@planning.nsw.gov.au within seven days after the Applicant becomes aware of any non-compliance.	This requirement for responding to non-compliances is not addressed in the OEMP. No non-compliance notifications have been issued during the audit period; however, non-compliances were identified in Compliance Reports (CR) that were not notified under this condition. 2023 CR: a non-compliance with condition C16 was identified. 2024 CR: exceedance of LPG limit identified (non-compliance with condition A6).
OA2_NC6	C15	Compliance Reports of the project must be carried out in accordance with the Compliance Reporting Post Approval Requirements (Department 2018).	Assessment for this audit is against CRPAR 2018. <u>2024 CR</u>: no non-compliances were identified, however, under condition B9 it states that the 2024 Internal Depot Audit identified an exceedance of DG stored at the site in relation to condition A6 (this was confirmed in the site interview). Under A6 compliance was only assessed according to the records on the day the Compliance Report site inspection was conducted. As a non-compliance during the reporting

Identifier	CoC	Requirement	Audit Finding
			period was identified, this should have been reported as a non-compliance. <u>2023 CR</u>: two non-compliances were identified, one of which (C19) appears to be a confusion with the condition, as C19 refers to responding to the Independent Audit report, rather than the Compliance Report. Neither of the non-compliances were notified under condition C11. Section 3.2.4 of CRPAR (2018) sets out the requirements for reporting of all non-compliances. The non-compliances identified in the 2023 CR were not reported in accordance with these requirements.
OA2_NC7	C16	The Applicant must make each Compliance Report publicly available no later than 60 days after submitting it to the Department and notify the Department in writing at least 7 days before this is done.	The 2023 CR identified that the 2022 CR was published approximately 90 days after submission to the Department. No evidence that a non-compliance notification was issued to the Department in accordance with condition C11 following the non-compliance being identified.
OA2_NC8	C19	In accordance with the specific requirements in the Independent Audit Post Approval Requirements (Department 2018), the Applicant must: c) make each Independent Audit Report and response to it publicly available no later than 60 days after submission to the Department and notify the Department in writing at least 7 days before this is done.	The independent audit report (23/11/2021) is provided on the project website. The Department was not notified.
OA2_NC9	C21	At least 48 hours before the commencement of construction until the completion of all works under this consent, the Applicant must: At least 48 hours before the commencement of construction until the completion of all works under this consent, the Applicant must: a) make the following information and documents (as they are obtained or approved) publicly available: (i) the documents referred to in Condition A2 of this consent and the final layout plans for the development;	Response to submissions (condition A2(c)) have not been uploaded for the initial EIS (noting that an RtS was not prepared for MOD 1 or 2)¹.

¹ The draft audit report stated that the RtS for the initial EIS and Modifications had not been uploaded to the Project website, however, review following discussions with Elgas it was identified that RtS had not been prepared for the Modifications, and the wording was updated in the final audit report..

4.5 Previous Audit Recommendations

Kooragang LPG Facility Independent Environmental Audit (JBS&G, 23/11/2021) identified the following audit recommendations. The status of implementation of each recommendation is also provided.

Table 9: Status of 2021 Independent Audit recommendations

Consent condition	Recommendation	Finding	Status
C8	Ensure that a review of strategies, plans and programs is undertaken for all future occurrences listed under items a) to d) and notified to the Department as required by condition C8.	Issues with communications between consent holder and Elgas. Access and management of the consent has now been taken over by Elgas. Repeat non-compliance identified in this audit.	Open
C16 C19 C21	Pre-start up and post-start up Compliance Reports and applicant response to the initial Independent Audit to be made available on the project website https://www.elgas.com.au/welcome-to-elgas/elgas-environmental-monitoring-data/newcastle-depot-kooragang-nsw/	Review of the website verified that these documents have been uploaded.	Closed

4.6 OEMP, Sub-plans and Compliance Documents

The environmental management plans reviewed for the audit included:

- Operational Environmental Management Plan (CEMP) (Conditions C5 and C6)
- Operational Traffic Management Plan (OTMP) (Condition B19)
- Flood Emergency Response Plan (FERP) (Condition C6(b)(ii))
- Mosquito Management Plan (MMP) (Condition B50).

In relation to compliance with the conditions of consent, a number of minor non-compliances, generally in relation to information omissions, as discussed in Section 4.4 were identified.

In addition to assessing the compliance of the plans with the relevant conditions of consent, the plan review included the identification of the following:

1. The mitigation actions to be implemented to manage project risks and impacts, including the applicant's Management and Mitigation Measures identified in Appendix 2 of SSD 8448.
2. Any must/ shall/ will statements, as these present statements of commitment for implementing a process or undertaking an activity
3. Statement of Commitments from the Response to Submissions.

Identified mitigation actions and statements of were verified during the site inspection, interviews and review of the document management system. A summary of the findings is presented in Table 10.

Table 10: Assessment of the implementation of management plan requirements

Plan	Audit Finding	Opportunity for improvement
OEMP	Implemented in accordance with stated requirements, including mitigation actions, induction, inspections and monitoring, reviews and record keeping. The following were identified during site inspection: - The chemical storage shed did not have bunding for the small quantities of non-DG chemicals being stored. - A risk assessment was not conducted for the introduction of nitrogen use and storage at the site. - The Emergency Response Plan had not been updated to include nitrogen. Non-compliances and improvement opportunities	OA2_IO1: Install a small bund in the storeroom for storage of liquid chemicals. OA2_IO2: Ensure the following is implemented at the site: - Regular reviews to ensure SDS are updated within the 5-year timeframe, as required under the Work Health and Safety Regulations - Conduct a risk assessment for all new DG introduced at the site, including the review of the adequacy and appropriateness of existing controls - Review and update the Emergency Response Plan to include compressed nitrogen and consider any emergency response requirements.
OTMP	Implemented in accordance with stated requirements, including mitigation actions. No traffic incidents or complaints recorded. TMP Section 10.4 refers to waste bin collection but does not state the permitted hours for waste collection under condition B43.	OA2_IO3: Include the requirements of condition B43 in the TMP.
FERP	Implemented in accordance with stated requirements, including mitigation actions. No flood events have impacted the site during the audit period. The revision history is different to the date stated on the front page.	OA2_IO5: Update the Revision History table in the FERP to include accurate details of the current revision.
MMP	Limited actions identified in the plan. No mosquito issues identified.	None

Overall, implementation of the site OEMP and Sub Plans has been in accordance with the requirements and has been effective on the basis of there being no incidents or complaints, and the findings of this audit.

4.7 Environmental Management System

In assessing the EMS for the Project, the audit considered the recommendations of the *Environmental Management Plan Guideline for Infrastructure Projects* (DPIE, April 2020), the key elements of which are identified in Table 11, along with the audit findings against each element.

Table 11: Review of the project EMS

EMS Element	Audit findings
Relationship to an existing environmental management system	The EMS is described in Section 5 of the OEMP. Elgas has an integrated Health, Safety and Environmental (HSE) Management System (ELGGEN-HSE-114) implemented onsite which comprises procedures, documents and forms. Element 12 of the HSE MS covers environmental management including risk assessment, waste management, National Pollution Inventory Reporting, consultation and information. The site OEMP and Sub Plans provide information on how workplace health, safety and environment is to be managed on the project.
Environmental management structure and responsibilities	Section 6 of the OEMP provides the roles and responsibilities of the Site Manager.
Legal and compliance requirements	Although SSD 848 is referenced limited information regarding the legal and compliance requirements for the site has been provided. QA2_IO4: Include additional detail in the OEMP regarding the legislative basis for the development, approval pathway and modifications to the consent. Consider cross-referencing requirements in the OEMP to the relevant consent condition/s, so that the legal foundation is transparent.
Training and awareness	Site personnel are inducted into the requirements of the OEMP, Sub Plans, site procedures and emergency response. Evidence of induction was reviewed. The Emergency Response Procedure identifies ongoing training drills which were delivered during the audit period.
Environmental risk assessment	Section 5 of the OEMP states that the Elgas Environmental Management System (ELGGEN-HSE-114) is based on environmental risk assessment (ELGGEN-HSE-102 Risk & Hazard Management), which is addressed through procedures, documents and forms. Risk management is also discussed in Section 3.1 of the OEMP Appendix B Safety Management System Element 12 – Environmental Management.
Environmental management measures	Management and mitigation measures on the site have generally been addressed through site procedures.
Environmental monitoring and review	Monitoring of objectives is through inspections, audit (internal and external), and reporting (incidents, corrective actions, etc). Internal Audits are discussed in Section 15 of the OEMP.
Environmental inspection, audit and corrective actions	Inspection includes regular daily visual inspections of work activities, and monthly site inspection reports. Annual internal audits are conducted at the depot.
Communications	Communications are addressed in Section 2, 6.1 and 6.2 of the OEMP. Site induction, onsite training, site notice boards and monthly safety meeting are the key forms of communication.

No recommendations or opportunities for improvement were identified in relation to the project EMS.

4.8 Environmental Performance

The environmental performance against environmental aspects relevant to the project, was assessed based on complaints, incidents, notifications and observations during the site visit on the 24 April 2025. The performance of the project against each aspect is presented in Table 12.

Table 12: Environmental performance

Environmental Aspect	Performance Finding
Noise	No noise complaints recorded. Appropriate maintenance of plant and equipment. No issues identified during the site inspection.
Air quality	No odour or air quality complaints recorded. Appropriate maintenance of plant and equipment. No issues identified during the site inspection.
Water	Site surface water is being managed in accordance with approved plans.
Land	Not applicable – the site is almost completely paved.
Land (contamination)	No spills or incidents recorded. No evidence of spills observed during the site inspection.
Waste	Waste is being managed appropriately onsite in terms of containment and sorting. No waste or litter was observed during the site visit.
Heritage	The plaque was sighted at the entrance to the office. No heritage issues identified.
Traffic	No traffic complaints recorded. Traffic access and flow adjacent to the project has been maintained. No traffic issues identified during the site inspection.

The environmental controls implemented across the site were generally in accordance with the conditions of consent and the requirements of the OEMP and relevant Sub Plans and adequate in controlling environmental risks across the project site.

The lack of project incidents or complaints provides further evidence that environmental performance objectives are being met.

4.9 Consultation Outcomes

As requested by DPHI the scope of the independent audit included additional focus on assessing compliance with the aspects identified in Table 13. Evidence was primarily collated through the review of correspondence and interviews. The audit found that the project was non-compliance with conditions relating to Compliance Reporting and Independent Audits. Other consultation requests were compliant.

Table 13: Consultation request outcomes

Request	Audit Finding
Since the initial IEA, the compliance reporting (Schedule 2, Condition C15) and independent audits (Schedule 2, Condition C18) have not been completed at the frequency detailed in the consent or Independent Audit Post Approval Requirements (2018). During the audit review compliance with the compliance reporting and independent auditing requirements.	Non-compliant <u>Compliance Reports (C15)</u> <i>Frequency - Compliant</i> The schedule is defined in Compliance Monitoring and Reporting Program (03/08/2020), which was based on the proposed start date for operation of the 30/08/2020. Noting that the actual date of the start of operation was the 20/10/2020, the date for the first compliance report should have been October 2021, and annually thereafter. Compliance Reports generally cover the period from October to October and have been dated October (except for 2024 when a request for extension was approved). - Operational Compliance Report for the period 21 October 2023 to 28 November 2024 (28/11/2024). Elgas request for an extension on the 25/10/2024. Report submitted to DPHI on the 28/11/2024. SSD-8448-PA-40 retrospectively granted an extension of time for the CR until 29/11/2024. - Operational Compliance Report for the period 21 October 2022 to 20 October 2023 (30/10/2023) - Operational Compliance Report for the period 13 November 2021 to 21 October 2022 (21/10/2022). <i>Reporting requirements – Non-compliant</i> No non-compliances were identified in the 2024 Compliance Report, however, under condition B9 it stated that the 2024 Internal Depot Audit identified an exceedance of DG stored at the site in relation to condition A6 (this was also confirmed in the site interview). Under A6 compliance was only assessed according to the records on the day the site inspection for the Compliance Report was conducted. This should have been reported as a non-compliance. Two non-compliances were identified in the 2023 Compliance Report, one of which (C19a) is a confusion with the condition, as C19 refers to responding to the Independent Audit report, rather than the Compliance Report. As a consequence, the requirements of C19 are not addressed in the 2023 or 2024 Compliance Reports. Note: Condition C19a) was not found to be non-compliant in this audit. Neither of the non-compliance were notified under condition C11. Section 3.2.4 of CRPAR (2018) sets out the requirements for reporting of all non-compliances. The non-compliances identified in the 2023 Compliance Report were not reported in accordance with these requirements. <u>IEA C18</u> <i>Frequency - Compliant</i>

Request	Audit Finding
	Based on the proposed start date for operation of the 30/08/2020, the audit program for the project states the timing for the first independent audit as 30/08/2021 (one year after start of operations) and at intervals of no greater than 3 years following. This document has not been updated. Noting that the actual date of the start of operation was the 20/10/2020, the date for the first operations audit should have been October 2021, in accordance with IAPAR (2018). The date for the first audit was 12/11/2021 (delayed slightly, however out of scope for this audit), so the date for the second operational IEA should have been November 2024. SSD-8448-PA-41: Elgas request for extension of IEA 2024 to the 30/04/2025 lodged on the 19/11/2024 (within the three-year time period for the second audit) and was approved. This audit was conducted on the 24/03/2025. Interviews identified that delays in submitting documentation in a timely manner has resulted from Elgas not having access to the DPHI planning interface and poor communications with the consent holder. Elgas now have access which should provide greater clarity and more efficient document submission processes. Reporting requirements – Non-compliant A non-compliance is recorded against condition C19c) as the Department was not notified of publication of the 2021 Independent Audit on the project website.
In accordance with Schedule 2, Condition A29 of the consent, NSW Planning provided direction for Elgas Ltd to refer to the 2020 version for all future IEAs (NSW Planning reference: SSD-8448-PA-41).	Compliant This audit was conducted in accordance with the requirements of IAPAR (May 2020).
Please note that this IEA should audit the period commencing from 13 November 2021 until no later than 30 April 2025 with the site inspection considered the last day of the audit period.	Compliant The audit period for this audit was from 13 November 2021 until 24 April 2025.

4.10 Complaints

The management of enquiries and complaints in relation to the project are detailed in Section 12 of the OEMP. Elgas is responsible for managing complaints and maintaining the complaints register for the development.

No complaints have been recorded for the project during the audit period.

4.11 Incidents

No incidents were recorded for the project during the audit period.

4.12 Actual versus Predicted Environmental Impacts

The purpose of this section addresses the predicted impacts and suggested mitigation and management measures from the EIS versus actual impacts and mitigation measures implemented as part of the project delivery. Environmental impacts associated with various aspects of the development are summarised in Section 8 of the EIS (New LPG Storage Facility, 130 Cormorant Road, Kooragang (Part Lot 1 DP 1195449) Environmental Impact Statement (RPS, 22/08/2017)).

The impacts reviewed included those relevant to the operational stage of the development and are presented in Table 14, along with an assessment against the actual impacts of the project identified through the audit.

Table 14: Actual Verses Predicted Environmental Impacts

EIS – Impacts Identified	Assessment of actual impacts
Hazard and Risk – EIS Section 8.1 and Appendix 5 The Preliminary Hazard Analysis (PHA) and Quantitative Risk Assessment (QRA) identify the hazards associated with the proposed development and recommends a number of mitigation and management measures (many of which are presented in Appendix A of SSD 8448).	The site inspection confirmed that the mitigation measure (e.g. stacking of cylinder cages not to exceed 2m high for 8.5 and 15-18kg cylinders, annual pressure testing of hoses, hazard signage) were being implemented effectively. No incidents or complaints have been recorded for the site. Predicted ~ Actual Impacts
Traffic and Transport - EIS Section 8.3 and Appendix 15 The proposed development will have minimal impact on the surrounding road network. Parking for the proposed development exceeds Newcastle DCP requirements, and access and circulation for the site is appropriate for the development, providing for the swept paths of heavy vehicles including B-Doubles.	The site inspection identified that the traffic mitigation measures appear to be effective as there is clear access to the site with no queuing, and no traffic incidents or complaints have been recorded. Parking spaces have been maintained according to the consent. Predicted ~ Actual Impacts
Air Quality and Odour - EIS Section 8.4 and Appendix 20 The proposed ELGAS facility will have no detrimental effect on air quality or emissions as the nature of the operation will not generate any significant odour emissions.	Bulk LPG transfer/delivery and cylinder filling activities are the main potential sources of odour, which are managed through the implementation of site procedures based on the respective Standards (AS/NZSv60079.10.1:2009 Explosives Atmospheres and AS/NZS 1596:2014 The Storage and Handling of LPG Gas. Out of test cylinders were observed to have a hole punched in them and were placed in a separate dedicated area for disposal. No odour complaints have been recorded. Predicted ~ Actual Impacts

EIS – Impacts Identified	Assessment of actual impacts
Operational noise – EIS Section 8.5 and Appendix 21 The Operational Noise Impact Assessment concludes that the nominated noise criteria will be achieved at all surrounding premises and will comply with the INP at all noise-sensitive receiver locations. No noise mitigation measures are suggested.	The noise-generating activities assessed for the facility have remained consistent with those in the EIS. Operational hours were extended with Modification 2. No noise complaints recorded for the audit period. Predicted ~ Actual Impacts
Waste– Section 8.6 and Appendix 16 The EIS identified limited waste streams for operations and mitigation measures included separation for recycling, regular monitoring and limiting ordering to required amounts.	Operational waste streams are consistent with those identified in the EIS. Separation of waste materials were observed during the site inspection. No loose litter or waste was observed around the facility. Predicted ~ Actual Impacts

Overall, the actual impacts of the development at the time of the audit were equivalent to or less than the assessed or predicted impacts identified in the project EIS. Impacts have been mitigated through the implementation and maintenance of appropriate and effective management measures, and confirmation of effective implementation was confirmed through the audit.

4.12.1 Project Boundary

The site visit confirmed that the project boundary conforms with the approved boundary as shown in Appendix 1 of SSD 8448.

4.13 Site Inspection

A site inspection was conducted on the 24 April 2025 during which observations on the project's environmental performance were recorded and photographs taken (see Appendix C). Overall, environmental performance and housekeeping on the site was observed to be very good, with all areas being maintained in a tidy manner, no litter, the concrete was in good condition, drains clear and clean, and no evidence of spills.

During the walk over of the site issues relating to the following was raised and discussed with the auditees:

- Small volumes of liquid chemicals (not labelled as Hazardous or Dangerous Goods) were being stored in the storeroom without bunding. It was recommended that a small bund be purchased for these products and to separate them from the aerosol storage cabinet.

Project staff were very responsive to recommendations identified to rectify deficiencies.

4.14 Site Interviews

Site interviews were structured around the SSD 8448 conditions of consent and how the project demonstrates compliance with each condition and assessing understanding of environmental risk and performance management requirements on site.

Overall, the interviews demonstrated that the project personnel had a good understanding of environmental risks and controls associated with the project, and a clear understanding of the OEMS in place, the interface

between the Elgas EMS and site management plans, and the management of required documentation such as the waste register, training and induction records, site inspections.

Communication processes are facilitated through inductions and site noticeboards. Interviews also indicated a positive culture in terms of incident reporting (including near misses) and addressing corrective actions in a timely manner.

5 Recommendations

5.1 Previous Annual Review or Compliance Report Recommendations

For this audit the recommendations associated with the following Compliance Reports were reviewed:

- Operational Compliance Report for the period 21 October 2023 to 28 November 2024 (28/11/2024).
- Operational Compliance Report for the period 21 October 2022 to 20 October 2023 (30/10/2023)
- Operational Compliance Report for the period 13 November 2021 to 21 October 2022 (21/10/2022).

The non-compliance against C19(a) identified in the 2023 Compliance Report was found not to be a non-compliance in this audit, due to confusion between compliance reporting and independent audit requirements in SSD 8448. This error appears to be a result of the terminology used in the Compliance Report which interchanges compliance reporting with audit and independent audit.

An additional non-compliance that was identified in the 2024 Compliance Report yet was not reported. The recommendations for non-compliances against A6 (OA2_NC1), C1 (OA2_NC3), are C15 (OA2_NC6) should address this non-compliance.

Furthermore, non-compliances identified in the Compliance Reports were not notified to the Department in accordance with condition C11 (OA2_NC5).

This audit identified that actions and recommendations in the relevant Compliance Reports have been closed.

Report year	Non-compliances	Recommendation/s	Assessment	Status
2024	None	-	The 2024 Compliance Report identified a non-compliance against condition A6 during the reporting period, that was not included as a non-compliance in the report. Refer to OA2_NC1 and OA2_NC3 for recommendations to address the non-compliance.	Open
2023	1. Condition C16 requires the publication of the 2022 Operational Compliance Report (i.e., last year's edition of this report) no later than 60 days after submission of the Report to the Department. The actual	Publication of Operation 2022 Compliance Report no later than 60 days after submission of the report to the Department.	2023 Compliance Report published on ELGAS Website prior 20.12.24.	Closed

Report year	Non-compliances	Recommendation/s	Assessment	Status
	time taken was approximately 90 days.			
	2. Condition C19: C19(a) requires the Applicant to review and respond to the 2022 Report. A non-compliance is found on the basis that no response was made by anyone, as far as we can ascertain. C19(b) requires submission of the response to the Department but no response was made. C19(c) repeats the requirements of C16, with the addition of publication of the response.	Publication of the response to the findings is to be issued and provided to the Department.	This condition, which refers to the Independent Audit (IA), has been confused with Compliance Reporting. This audit did not find a non-compliance against 19C(a) (noting that there was non-compliance 19C(c) as the Department was not notified of the report being uploaded. Note: Non-compliances identified in the 2023 Operational Compliance Report were assessed by NSW Planning and the breaches were recorded with no further enforcement action proposed.	Closed
2022	None	1. The PHA recommends “1. Ensure that the nighttime surveillance patrol of the site includes the Bobtail area to detect possible presence of LP Gas (can be detected by odour). This activity is to be included in the procedures.	This activity was not feasible with the security patrols. Alternate monitoring includes video surveillance of the bobtail area, tanker drivers prep and post inspections, access to portable gas detectors and updating the Emergency Plan.	Closed
		2. Elgas takes responsibility for the content of the project website and upgrades the information by date order, by relevance and by clarification of the titles of the documents included, some of which are not correct.	Elgas has taken responsibility for managing the project website. The audit found the website had all relevant information (except the EIS Response to Submissions), document naming was clear and there were no duplications.	Closed
		3. Recommended that all communication be centralized with Elgas, who should ensure that other stakeholders are kept informed as required.	This recommendation has been recently resolved with Elgas gaining access to communications with DPHI.	Closed

5.2 Non-Compliance Recommendations

Recommendations to rectify non-compliances identified during this audit are presented in Table 15. Of the recommendations associated with the nine non-compliances identified in Section 4.4 none have been closed out.

Table 15: Non-compliance recommendations

NC Number	Condition	Recommendation	Status
OA2_NC1	A6	Ensure monthly monitoring of the of LPG storage onsite is implemented. Note that exceedances of 178 tonnes of LPG are required to be reported to the Department in accordance with condition C11. Consider reviewing storage procedures and/or increasing the frequency of monitoring should exceedances be identified.	Open
OA2_NC2	B8	Ensure that the Hazard Audit report is submitted to the Department within one month of completing the site inspection for each Hazard Audit.	Open
OA2_NC3	C1	Include reference to the LPG storage limit specified under condition C6 in the OEMP. Provide details of the procedure for monitoring and recording compliance with condition A6, including the process to be implemented should an exceedance be identified (including non-compliance notification).	Open
OA2_NC4	C8	Ensure that a review pf the strategies, plans and programs required under the consent are reviewed within 3 months of one of the triggers listed under condition C8. Ensure that the Department is notified that a review is being carried out. For transparency, consider including details of plan reviews in the relevant plan Revisions Table, along with the trigger for the review, even when no updates to the plans are made.	Open
OA2_NC5	C11	Ensure that the Department is notified in writing within 7 days of becoming aware of a non-compliance. Note that this includes any non-compliances identified through the preparation of a Compliance Report under condition C15.	Open
OA2_NC6	C15	Ensure annual Compliance Reports are prepared in accordance CRPAR (2020) going forward. All non-compliances identified are to be reported, even if the site is complaint in relation to the condition at the time of the site inspection for the Compliance Report. Address all non-compliances in accordance with Section 3.1.3 of CRPAR (2020) (recommend using a table format, as suggested in point 3 of SSD-8448-PA-38).	Open
OA2_NC7	C16	Ensure annual compliance reports are publicly available within 60 days of submission to the Department and notify the Department in writing at least 7 days before this is done.	Open
OA2_NC8	C19	Ensure the Department is notified at least 7 days prior to making an Independent Audit Report public.	Open
OA2_NC9:	C21	Ensure the Response to Submissions for the initial EIS and any modifications, as relevant, have been uploaded to the project website.	Open

5.3 Improvement Opportunities

Opportunities for improvement identified through the audit process are presented in Table 16. Consideration of the first two of these suggestions may better manage risks and enhance environmental performance of the project. The remaining three improvement opportunities relate to minor changes the site OEMP and Sub Plans and could generally be considered administrative.

Table 16: Opportunities for improvement

Number	Improvement Opportunity	Status
OA2_IO1	Install a small bund in the storeroom for storage of liquid chemicals.	Open
OA2_IO2	Ensure the following is implemented at the site: - Regular reviews to ensure SDS are updated within the 5-year timeframe, as required under the Work Health and Safety Regulations - Conduct a risk assessment for all new DG introduced at the site, including the review of the adequacy and appropriateness of existing controls - Review and update the Emergency Response Plan to include compressed nitrogen and consider any emergency response requirements.	Open
OA2_IO3	Include the requirements of condition B43 in the TMP.	Open
OA2_IO4	Include additional detail in the OEMP regarding the legislative basis for the development, approval pathway and modifications to the consent. Consider cross-referencing requirements in the OEMP to the relevant consent condition/s, so that the legal foundation is transparent.	Open
OA2_IO5	Update the Revision History table in the FERP to include accurate details of the current revision.	Open

5.4 Key Strengths

The key strengths identified in relation to the management of the project include: The key strengths identified in relation to the management of the project include:

- Monitoring of operational compliance through internal audit and the review of procedures and processes
- Improved ownership and management of the consent with Elgas taking over responsibility for the timing, reporting and submission of requirements associated with the consent.

6 Conclusion

This Independent Audit Report satisfies the requirements of SSD 8448 condition of consent C18. The audit has been conducted in accordance with the *Independent Audit Post Approval Requirements* (DPIE, May 2020) and the AS/NZS ISO 19011:2014 – *Guidelines for Auditing Management Systems*. The audit report documents the outcomes of the review of compliance undertaken by Arcadis.

The audit process comprised of:

- The issue of the RFI Register and subsequent document review
- An opening and closing meeting and site visit conducted on the 24 April
- Post-site visit document review and follow up
- Issuing of draft audit report
- Post-draft audit report review and provision of additional documentation
- Issuing of Final Report (this report).

The audit identified that there were no incident or complaints during the audit period, the facility is generally compliant with the conditions of consent and operational activities are generally being managed in accordance with the requirements of SSD 8448. Nine unique non-compliances were identified, of which all but one were administrative in nature.

Of the five improvement opportunities presented, two of which are proposed to better manage risks and enhance environmental performance of the project, while the remaining three relate to minor changes the site OEMP and Sub Plans and could generally be considered administrative.

The audit identified an effective Environmental Management System (EMS), induction and training and monitoring and inspections. Of note is the increased ownership of the consent by Elgas management staff and improved processes in the past six months to promote improved compliance.

The audit concludes that the Elgas Kooragang LPG Facility project is generally being undertaken in compliance with the requirements of SSD 8448.

Appendix A. Auditor Approval

NSW Planning ref: SSD-8448-PA-48

Patrick Egan

Regional Depot Operations Manager – Northern New South Wales

Elgas Limited

Worimi Country

130 Cormorant Road

Kooragang, New South Wales 2304

25/03/2025

Sent via the Major Projects Portal only

Subject: Elgas Storage Facility Kooragang - Independent Audit - Auditor Proposal

Dear Mr Egan

I refer to your request for the Planning Secretary's approval of suitably qualified, experienced, and independent person/s to conduct an Independent Environmental Audit (IEA) of the Elgas Storage Facility Kooragang, submitted as required by Schedule 2, Condition C18 (b) of SSD-8448 as modified (the consent) to NSW Department of Planning, Housing and Infrastructure (NSW Planning) on 17 March 2025.

NSW Planning has reviewed the independent auditor nominations and based on the information you have provided is satisfied that the proposed person/s are suitably qualified, experienced, and independent.

In accordance with Schedule 2, Condition C18 (b) of the consent and the NSW Planning, *Independent Audit Post Approval Requirements* (2020), as nominee of the Planning Secretary, I endorse the following independent audit team:

- Christine Louie – Lead Auditor
- Denise Day – Assistant Auditor

Please ensure this correspondence is appended to the Independent Audit Report.

The Independent Audit must be prepared, undertaken, and finalised in accordance with the conditions of consent and the *Independent Audit Post Approval Requirements* (2020). Failure to meet these requirements will require revision and resubmission.

NSW Planning reserves the right to request an alternate auditor or audit team for future audits.

Please note, the Lead Auditor must attend the site inspection.

The IEA should audit the period commencing from 13 November 2021 until no later than 30 April 2025 with the site inspection considered the last day of the audit period. The IEA report and the Response to Audit Recommendations is required to be submitted to NSW Planning no later than 2 months from undertaking the IEA site inspection.

Should you wish to discuss the matter further, please contact Joel Fleming, (Senior Compliance Officer) on 02 6575 3416 or email compliance@planning.nsw.gov.au

Yours sincerely

A handwritten signature in blue ink, appearing to be "L. Gothard".

Laura Gothard
A/Team Leader
Compliance

As nominee of the Planning Secretary

Appendix B. Evidence of Consultation

Day, Denise

From: Joel Fleming <joel.fleming@planning.nsw.gov.au>
Sent: Thursday, 27 March 2025 10:40 AM
To: Day, Denise
Cc: Louie, Christine
Subject: Re: Independent Audit SSD 8448

You don't often get email from joel.fleming@planning.nsw.gov.au. [Learn why this is important](#)

Arcadis Warning: Exercise caution with email messages from external sources such as this message. Always verify the sender and avoid clicking on links or scanning QR codes unless certain of their authenticity.

Good morning Denise,

Thank you for contacting NSW Planning for consultation on the upcoming independent environmental audit (IEA) of the Kooragang LPG Storage Facility (SSD-8448) operated by Elgas Ltd. I appreciate your thorough approach to this process.

Since the initial IEA, the compliance reporting (Schedule 2, Condition C15) and independent audits (Schedule 2, Condition C18) have not been completed at the frequency detailed in the consent or *Independent Audit Post Approval Requirements* (2018). During the audit could you please review compliance with the compliance reporting and independent auditing requirements?

I do not require you to consult with any other government agencies or stakeholders for the purposes of this IEA.

Regarding your comment on which version of the *Independent Audit Post Approval Requirements* to use, you are correct, in accordance with Schedule 2, Condition A29 of the consent, NSW Planning provided direction for Elgas Ltd to refer to the 2020 version for all future IEAs (NSW Planning reference: SSD-8448-PA-41).

Please note that this IEA should audit the period commencing from 13 November 2021 until no later than 30 April 2025 with the site inspection considered the last day of the audit period.

If you have any questions, please feel free to contact me.

Thank you for your attention to these matters.

Joel Fleming
Senior Compliance Officer

Development Assessment and Sustainability | Department of Planning, Housing and Infrastructure
T 02 6575 3416 | **M** 0467 715 429 | **E** joel.fleming@planning.nsw.gov.au
The Store, 6 Stewart Avenue, Newcastle West NSW 2302
www.dphi.nsw.gov.au



The Department of Planning, Housing and Infrastructure acknowledges that it stands on Aboriginal land. We acknowledge the traditional custodians of the land and we show our respect for elders past, present and emerging through thoughtful and collaborative approaches to our work, seeking to demonstrate our ongoing commitment to providing places in which Aboriginal people are included socially, culturally and economically.

From: Day, Denise <Denise.Day@arcadis.com>
Sent: Tuesday, March 25, 2025 4:49 PM
To: DPE PSVC Compliance Mailbox <compliance@planning.nsw.gov.au>
Cc: Louie, Christine <christine.louie@arcadis.com>
Subject: Independent Audit SSD 8448

Good afternoon

Arcadis has been engaged by Elgas Ltd as the approved Independent Auditor on the Liquefied petroleum gas storage and distribution facility (SSD 8448) at 130 Cormorant Road, Kooragang. The operations audit will be delivered in mid-April 2025. In accordance with the Independent Audit Post Approval Requirements (IAPAR) I am required to consult with the Department regarding the scope for each audit, and to determine if there are other parties or agencies to be consulted.

Accordingly, can you please provide the following:

- Inputs on the audit scope, including issues or conditions of consent for focus (noting that any ongoing issues identified by the Department for Audit 1 will also be reviewed in Audit 2)
- Details of who is to be consulted as part of the audit process.

I would also like to confirm that, in accordance with the Independent Auditor approval from the Department (NSW Planning ref: SSD-8448-PA-48), the audit will be conducted in accordance with the *Independent Audit Post Approval Requirements* (2020), rather than the 2018 version referenced in condition C17, C18 and C19 of SSD 8448.

Please do not hesitate to call should you wish to discuss.

Kind regards

Denise Day (*she/her*) BSc (Hons) PgD (EIS)
Principal Environmental Consultant
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Please note: my work days are Monday, Tuesday and Thursday.

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Appendix C. Site Inspection Photographs

Site Photographs – 24 April 2025



Photo 1: Main site entrance gate



Photo 2: Main site entrance gate - signage



Photo 3: Main site entrance gate - signage



Photo 4: Spill kit located outside the site office, adjacent to the entry gate



Photo 5: Spill kit contents

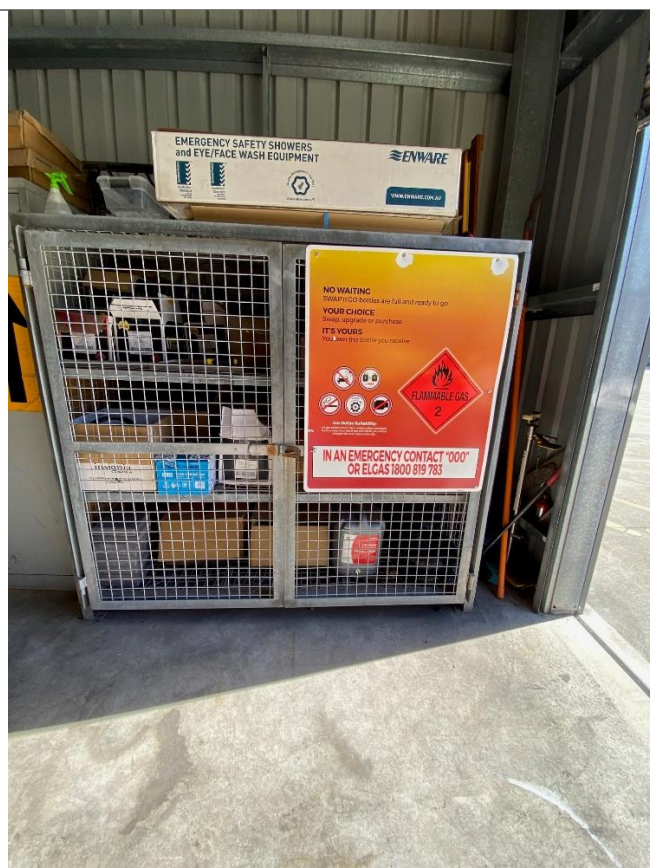


Photo 6: Flammable gas 2 storage cage in the storeroom



Photo 7: Content of the Flammable gas 2 storage cage in the storeroom (unbunded coolants)

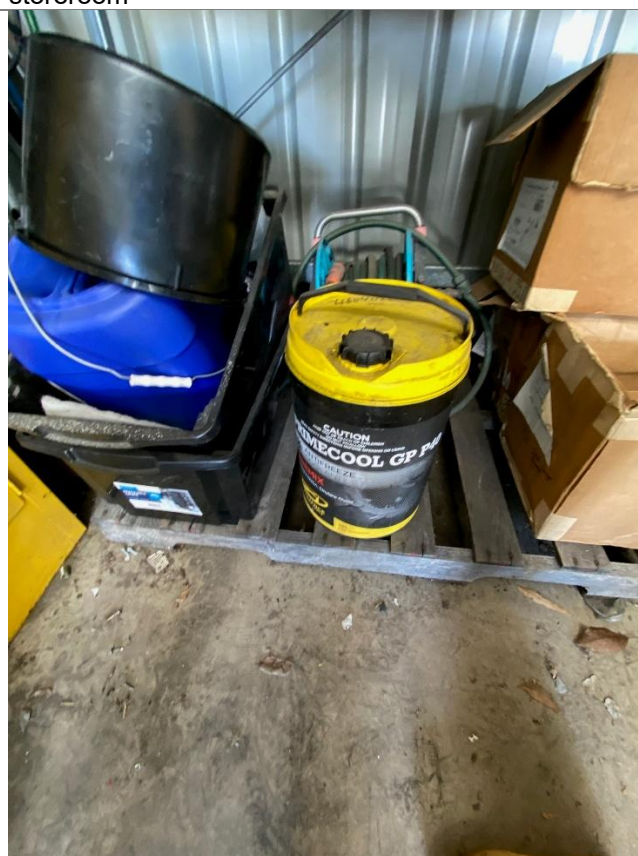


Photo 8: Unbunded coolant in the storeroom



Photo 8: Scale 1 in the cylinder filling area (testing and calibration in date)



Photo 8: Scale 2 in the cylinder filling area (testing and calibration in date)



Photo 9: Emergency shower and eyewash station in the cylinder filling area



Photo 10: Compressed nitrogen storage adjacent to the cylinder filling area



Photo 11: Small cylinder storage area

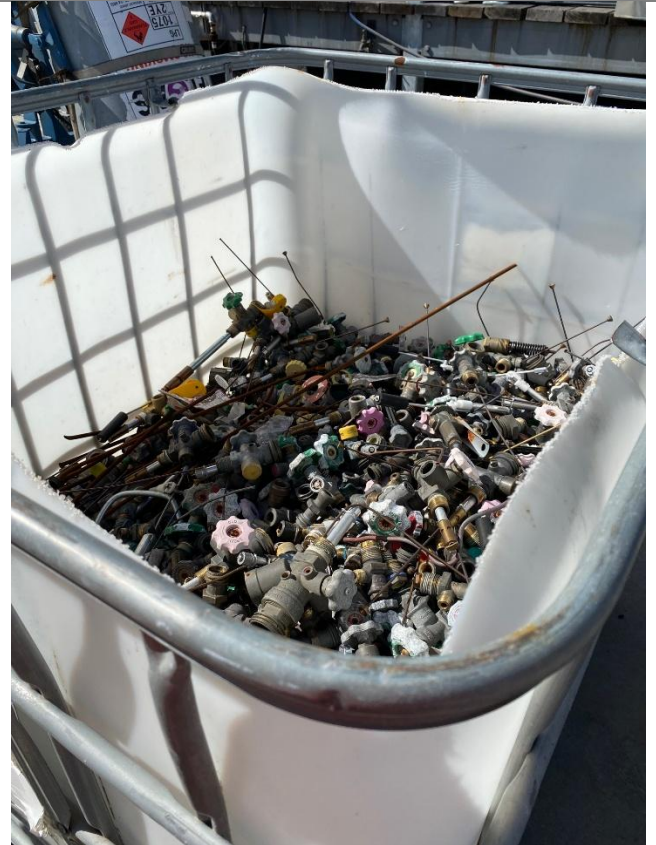


Photo 12: Valves removed from decommissioned cylinders



Photo 13: Decommissioned cylinders



Photo 14: Fire hose



Photo 15: Mixed recycling bin in the yard



Photo 16: General waste bin in the yard



Photo 17: Emergency stop and fire equipment near the bulk LPG tank

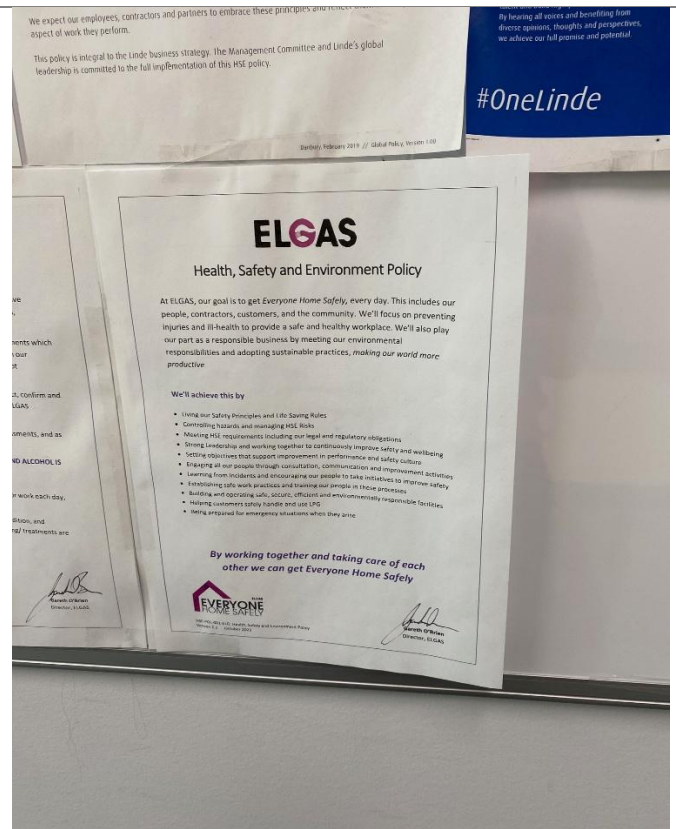


Photo 18: Elgas HSE policy on the staff noticeboard

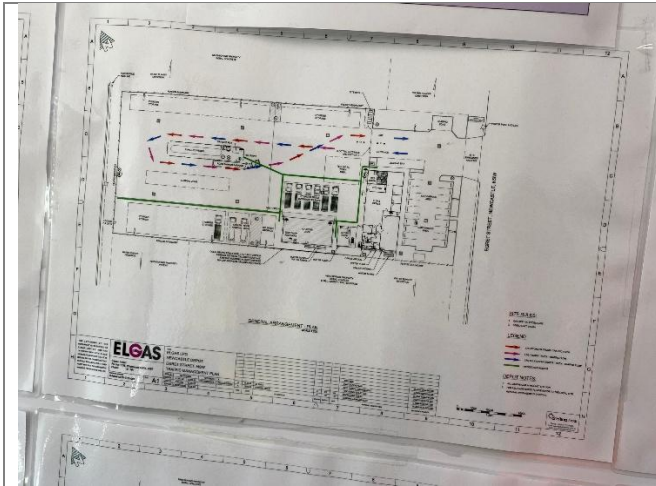


Photo 19: Site plan and vehicle movements – staff noticeboard

ELGAS
A Member of The Linde Group

Hazardous Storage

Bulk Storage

Tank ID Number	Product Name	Product Class	PG	UN No.	Type	Design Capacity	Typical Quantity
Storage 1	LP Gas	2.1	n/a	1075	n/g	100000 L	85000 L

Transport Storage

Tank ID Number	Product Name	Product Class	PG	UN No.	Type	Design Capacity	Typical Quantity
Storage 2	LP Gas	2.1	n/a	1075	Road Tankers	40000 L	34000 L

Group 1 or Class 2.1 Package Storage

Storage Area ID	Dangerous Goods				Storage		Typical Quantity
	Name	Class	PG	UN No.	Storage Type	Max Capacity	
Storage 3	LP Gas	2.1	n/a	1075	Cylinder Store	64000 L	54400 L
Storage 4	LP Gas	2.1	n/a	1075	Cylinder Store	24000 L	20400 L
Storage 5	LP Gas	2.1	n/a	1075	Cylinder Store	40000 L	34000 L
Storage 6	LP Gas	2.1	n/a	1075	Cylinder Store	84000 L	71400 L
Storage 7	LP Gas	2.1	n/a	1075	Cylinder Store	1600 L	1360 L

40other Packaged Storage

Storage Area ID	Dangerous Goods				Storage		Typical Quantity
	Name	Class	PG	UN No.	Storage Type	Max Capacity	
Cylinder Dock	Paint Aerosol Can	2.1	n/a	1950	Flame Safe Cabinet	60 Units 21 Kg	20 Units 7 kg
Yard Storage Shed	Paint Aerosol Can	2.1	n/a	1950	Flame Safe Cabinet	120 Units 42 Kg	120 Units 42 kg

ELGAS-HSE-115-01 - Newcastle Depot Manifest
Uncontrolled if printed - check currency of version

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Photo 20: Copy of the DG manifest – staff noticeboard



Photo 21: Plaque acknowledging the traditional owners of the land

Appendix D. Audit Table

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
Administrative Conditions					
A1	In addition to meeting the specific performance measures and criteria in this consent, all reasonable and feasible measures must be implemented to prevent, and, if prevention is not reasonable and feasible, minimise any material harm to the environment that may result from the construction and operation of the development.	Audit findings	Non-compliances identified in this audit were generally administrative in nature and do not present material environmental risks. The site has been active in maintaining processes to manage risks, as evidenced by the lack of incidents and complaints in relation to the site during the audit period.	Compliant	
A2	The development may only be carried out:			Non-compliant	This non-compliance has not been given a unique identifier.
A2a	in compliance with the conditions of this consent;	SSD 8448	This audit identified non-compliances against the following conditions: A6, B8, C1, C8, C11, C15, C16, C19, C21	Non-compliant	
A2b	in accordance with all written directions of the Planning Secretary;	Refer to A3	Refer to condition A3.	Compliant	
A2c	in accordance with the EIS and Response to Submissions;	New LPG Storage Facility, 130 Cormorant Road, Kooragang (Part Lot 1, DP 1195449) Environmental Impact Statement		Compliant	
A2d	in accordance with Modification Assessments;	MOD 1 - Administrative amendments (03/08/2020) MOD 2 - Hours of work (27/05/2021)		Compliant	
A2e	in accordance with the Development Layout in Appendix 1; and	Site inspection	No changes to the layout.	Compliant	
A2f	in accordance with the management and mitigation measures in Appendix 2.	Evidence review Site inspection Audit Findings	Management measure are being implemented appropriately.	Compliant	
A3	Consistent with the requirements in this consent, the Planning Secretary may make written directions to the Applicant in relation to:			Compliant	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
A3a	the content of any strategy, study, system, plan, program, review, audit, notification, report or correspondence submitted under or otherwise made in relation to this consent, including those that are required to be, and have been, approved by the Planning Secretary; and	DPHI correspondence SSD-8448-PA-48: Independent Audit - Auditor Proposal (25/03/2025) DPHI correspondence SSD-8448-PA-47: Independent Audit 2025 - Auditor Proposal (14/02/2025) DPHI correspondence SSD-8448-PA-46: Post approval Document Received ((08/01/025) DPHI correspondence SSD-8448-PA-45: Post Approval Document Received (08/01/2025) DPHI correspondence SSD-8448-PA-44: Compliance Report 2024 (07/01/2025) DPHI correspondence SSD-8448-PA-43: Revised Operational Environmental Management Plan (OEMP) (08/01/2025) PA-41: IEA 2024 - Extension Request (07/01/2025) DPHI correspondence SSD-8448-PA-40: Compliance Report 2024 - Extension Request (07/01/2025) DPHI correspondence SSD-8448-PA-38: 2023 Operational Compliance Report (25/06/2024)	SSD-8448-PA-48: - Ensure this correspondence is appended to the Independent Audit Report: Compliant - The Independent Audit must be prepared, undertaken, and finalised in accordance with the conditions of consent and IAPAR (2020): Compliant - The Lead Auditor must attend the site inspection: Compliant SSD-8448-PA-47: - propose a new independent auditor: Compliant SSD-8448-PA-46: - publish the OEMP (V1.6) on the website between 16=17 January 2025 - Compliant SSD-8448-PA-45: - 2024 Compliance Report to be publicised approximately 16/01/2025. Sighted on the website: Compliant SSD-8448-PA-44: - make publicly available a copy of the Compliance Report on the company website: Compliant - include figures/maps of the facility showing the local and regional context (aspects relevant to the community such as residential areas or other key relevant land uses): Not triggered. To be reviewed in the next IEA. - refer to the CRPAR (May 2020) for all future Compliance Reports: Not triggered. To be reviewed in the next IEA. SSD-8448-PA-43: - Make the OEMP publicly available: Compliant SSD-8448-PA-41: - Extension of time until 30 April 2025: Compliant - Refer to IAPAR 2020 for future audits: Compliant SSD-8448-PA-40: - retrospectively grants an extension of time for the CR until 29/11/2024: Compliant SSD-8448-PA-38:	Compliant	
A3a	the implementation of any actions or measures contained in any such document referred to in Condition A3(a).	As above.	As above.	Compliant	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
A4	The conditions of this consent and directions of the Planning Secretary prevail to the extent of any inconsistency, ambiguity or conflict between them and a document listed in Condition A2(c). In the event of an inconsistency, ambiguity or conflict between any of the documents listed in Condition A2(c), the most recent document prevails to the extent of the inconsistency, ambiguity or conflict. <i>NOTE: For the purposes of this condition, there will be an inconsistency between documents if it is not possible to comply with both documents, or in the case of a condition of consent or direction of the Planning Secretary, and a document, if it is not possible to comply with both the condition or direction, and the document.</i>		No inconsistencies identified.	Not triggered	
A5	This consent lapses five years after the date from which it operates unless the development has physically commenced on the land to which the consent applies before that date.		Not applicable to current audit stage.	Not triggered	
A6	The storage of LPG on-site at any given time must not exceed 178 tonnes.	Newcastle DG Stocktake (Sept 2021-Sept 2023) Newcastle DG Stocktake (November 2023-April 2025) 2024 Compliance Report 2024 Internal Audit (18/03/24)	The 2024 Internal Audit (18/03/24) identified that at the time of the Internal Depot Audit, Depot DG stocktake exceeded the limit (confirmed during the site visit that tis referred to LPG). Local management recalculated of the site DG and noted the site was at 3% above the SafeWork NSW Notification NDG200406. The site continues to monitor the DG levels monthly. This exceedance was also reported in the 2024 Compliance report. At the time of the Compliance Report the DG Calculator was sighted, and site was within limits.	Non-compliant	OA2_NC1: Ensure monthly monitoring of the of LPG storage onsite is implemented. Note that exceedances of 178 tonnes of LPG are required to be reported to the Department in accordance with condition C11. Consider reviewing storage procedures and/or increasing the frequency of monitoring should exceedances be identified.
A7	The date of commencement of each of the following phases of the development must be notified to the Department in writing, at least one month before that date:		Not applicable to current audit stage.	Not triggered	
A7a	construction;		Not applicable to current audit stage.	Not triggered	
A7b	operation; and		Not applicable to current audit stage.	Not triggered	
A7c	cessation of operations.		Not applicable to current audit stage.	Not triggered	
A8	If the construction or operation of the development is to be staged, the Department must be notified in writing at least one month before the commencement of each stage, of the date of commencement and the development to be carried out in that stage		Not applicable to current audit stage.	Not triggered	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
A9	Where conditions of this consent require consultation with an identified party, the Applicant must:		Not applicable to current audit stage.	Not triggered	
A9a	consult with the relevant party prior to submitting the subject document to the Planning Secretary for approval; and		Not applicable to current audit stage.	Not triggered	
A9b	provide details of the consultation undertaken including:		Not applicable to current audit stage.	Not triggered	
A9b(i)	the outcome of that consultation, matters resolved and unresolved; and		Not applicable to current audit stage.	Not triggered	
A9b(ii)	details of any disagreement remaining between the party consulted and the Applicant and how the Applicant has addressed the matters not resolved.		Not applicable to current audit stage.	Not triggered	
A10	With the approval of the Planning Secretary, the Applicant may:		Not applicable to current audit stage.	Not triggered	
A10a	prepare and submit any strategy, plan or program required by this consent on a staged basis (if a clear description is provided as to the specific stage and scope of the development to which the strategy, plan or program applies, the relationship of the stage to any future stages and the trigger for updating the strategy, plan or program);		Not applicable to current audit stage.	Not triggered	
A10b	combine any strategy, plan or program required by this consent (if a clear relationship is demonstrated between the strategies, plans or programs that are proposed to be combined); and		Not applicable to current audit stage.	Not triggered	
A10c	Update any strategy, plan or program required by this consent (to ensure the strategies, plans and programs required under this consent are updated on a regular basis and incorporate additional measures or amendments to improve the environmental performance of the development).		Not applicable to current audit stage.	Not triggered	
A11	If the Planning Secretary agrees, a strategy, plan or program may be staged or updated without consultation being undertaken with all parties required to be consulted in the relevant condition in this consent.		Not applicable to current audit stage.	Not triggered	
A12	If approved by the Planning Secretary, updated strategies, plans or programs supersede the previous versions of them and must be implemented in accordance with the condition that requires the strategy, plan or program.	OEMP and sub-plans	The current OEMP and sub-plans are being implemented on site.	Compliant	
A13	Before the commencement of construction, the Applicant must consult with the relevant owner and provider of services that are likely to be affected by the development to make suitable arrangements for access to, diversion, protection and support of the affected infrastructure.		Not applicable to current audit stage.	Not triggered	
A14	Unless the Applicant and the applicable authority agree otherwise, the Applicant must: <i>Note: This condition does not apply to any damage to roads caused as a result of general road usage.</i>		Not applicable to current audit stage.	Not triggered	
A14a	repair, or pay the full costs associated with repairing, any public infrastructure that is damaged by carrying out the development; and		Not applicable to current audit stage.	Not triggered	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
A14b	relocate, or pay the full costs associated with relocating, any public infrastructure that needs to be relocated as a result of the development.		Not applicable to current audit stage.	Not triggered	
A15	All demolition must be carried out in accordance with Australian Standard AS 2601-2001 The Demolition of Structures (Standards Australia, 2001).		Not applicable to current audit stage.	Not triggered	
A16	All new buildings and structures, and any alterations or additions to existing buildings and structures, that are part of the development, must be constructed in accordance with the relevant requirements of the BCA. <i>Note:</i> - Under Part 6 of the EP&A Act, the Applicant is required to obtain construction and occupation certificates for the proposed building works. - Part 8 of the EP&A Regulation sets out the requirements for the certification of the development.		Not applicable to current audit stage.	Not triggered	
A17	The Applicant must ensure that all of its employees, contractors (and their sub-contractors) are made aware of, and are instructed to comply with, the conditions of this consent relevant to activities they carry out in respect of the development.	Site Induction Acknowledgment - Newcastle Depot (Feb 2025)	The form does not specifically address the CoC, however the OEMP is covered.	Compliant	
A18	Before the issue of a construction certificate for any part of the development, a payment of a levy of 1% of the proposed cost of carrying out the development must be paid to Council under section 7.12 of the EP&A Act.		Not applicable to current audit stage.	Not triggered	
A19	All plant and equipment used on site, or to monitor the performance of the development must be:	Noise/ odour/ air quality complaints ELGAS Operations and Safety Management System website ELGAS Maintenance Application Portal (EMAP) SMS Element 10 - Plant Maintenance V2.2 (September 2022)	See below.	Compliant	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
A19a	maintained in a proper and efficient condition; and	Maintenance records Site inspection	Ten assets shown for the Kooragang site with maintenance dates for each equipment item. Various maintenance status issues were viewed including calibration of scales, hose testing and conductivity testing. The Plant Maintenance plan - Elgas document that describes the requirements and responsibilities for managing the maintenance of plant and equipment at ELGAS Sites serviced by National Maintenance. Annual check by National Maintenance. Functional tests on vapour compressor and liquid trap. Test and tagging fire equipment done onsite- 6-monthly, current (March 2025), electrical annual.	Compliant	
A19b	operated in a proper and efficient manner.	Training records Training matrix Elevate (training system)	Training for the site is at 97%. Mostly online training. Tracked through monthly email alerts from Elgas Training Manager that training is due.	Compliant	
A20	The external walls of all buildings including additions to existing buildings must comply with the relevant requirements of the BCA.		Not applicable to current audit stage.	Not triggered	
A21	Before the issue of a Construction Certificate and an Occupation Certificate, the Applicant must provide the Certifying Authority with documented evidence that the products and systems proposed for use or used in the construction of external walls including finishes and claddings such as synthetic or aluminium composite panels comply with the requirements of the BCA.		Not applicable to current audit stage.	Not triggered	
A22	The Applicant must provide a copy of the documentation given to the Certifying Authority under Condition A21 to the Planning Secretary within seven days after the Certifying Authority accepts it.		Not applicable to current audit stage.	Not triggered	
A23	Before the construction of any utility works associated with the development, the Applicant must obtain relevant approvals from service providers.		Not applicable to current audit stage.	Not triggered	
A24	Before the commencement of operation of the development, the Applicant must obtain a Compliance Certificate for water and sewerage infrastructure servicing of the site under section 50 of the Hunter Water Act 1991.		Not applicable to current audit stage.	Not triggered	
A25	Before the issue of a Subdivision or Construction Certificate for any stage of the development, the Applicant (whether or not a constitutional corporation) is to provide evidence, satisfactory to the Certifying Authority, that arrangements have been made for:		Not applicable to current audit stage.	Not triggered	
A25a	the installation of fibre-ready facilities to all individual lots and/or premises in a real estate development project to enable fibre to be readily connected to any premises that is being or may be constructed on those lots; and		Not applicable to current audit stage.	Not triggered	
A25b	the provision of fixed-line telecommunications infrastructure in the fibre-ready facilities to all individual lots and/or premises in a real estate development project demonstrated through an agreement with a carrier.		Not applicable to current audit stage.	Not triggered	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
A26	The Applicant must demonstrate that the carrier has confirmed in writing they are satisfied that the fibre ready facilities are fit for purpose.		Not applicable to current audit stage.	Not triggered	
A27	Before the issue of the final Occupation Certificate, works-as-executed drawings signed by a registered surveyor demonstrating that the stormwater drainage and finished ground levels have been constructed as approved, must be submitted to the PCA		Not applicable to current audit stage.	Not triggered	
A28	References in the conditions of this consent to any guideline, protocol, Australian Standard or policy are to such guidelines, protocols, Standards or policies in the form they are in as at the date of this consent.		Noted. Current Standards apply to the site.	Compliant	
A29	However, consistent with the conditions of this consent and without altering any limits or criteria in this consent, the Planning Secretary may, when issuing directions under this consent in respect of ongoing monitoring and management obligations, require compliance with an updated or revised version of such a guideline, protocol, Standard or policy, or a replacement of them.		Noted. IAPAR 2020 is being referenced for this audit.	Compliant	
AN1	All licences, permits, approvals and consents as required by law must be obtained and maintained as required for the development. No condition of this consent removes any obligation to obtain, renew or comply with such licences, permits, approvals and consents.		DG manifest only.	Compliant	
B1	The Applicant must implement all recommendations listed in the PHA.	2022 Compliance Report 2022 Internal Audit	The PHA made ten recommendations. 2022 CR - All recommendations, except one, were confirmed by observation or documentation during the course of the 2022 Internal Audit, the exception being the recommendation for night patrol personnel to detect presence of gas by smell (Recommendation 1 of the PHA). An alternate process to achieve the outcome has been implemented. This was further scrutinised as part of the Hazard Analysis.	Compliant	
B2	No commercial development on Lot 1 DP 1195449 shall be located within the 5 per million per year individual fatality risk contour shown in Figure 5 of the PHA.		No development on Lot 1 DP 1195449 has occurred.	Not triggered	
B3(i)	At least one month prior to the commencement of construction of the development (except for construction of those preliminary works that are outside the scope of the hazard studies), or within such further period as the Planning Secretary may agree, the Applicant must prepare and submit for the approval of the Planning Secretary the studies set out under subsections (a) to (d) below (the pre-construction studies)		Not applicable to current audit stage.	Not triggered	
B3(ii)	Construction, other than of preliminary works, must not commence until approval has been given by the Planning Secretary and, with respect to the Fire Safety Study, approval has also been given by Fire and Rescue NSW.		Not applicable to current audit stage.	Not triggered	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
B3a	A Fire Safety Study for the development. This study must cover the relevant aspects of the Department's Hazardous Industry Planning Advisory Paper No. 2, 'Fire Safety Study Guidelines' and the New South Wales Government's Best Practice Guidelines for Contaminated Water Retention and Treatment Systems (NSW HMPCC, 1994). The study must also be submitted to Fire and Rescue NSW for approval.		Not applicable to current audit stage.	Not triggered	
B3b	A Hazard and Operability Study for the development, chaired by a qualified person, independent of the development, approved by the Planning Secretary prior to the commencement of the study. The study must be carried out in accordance with the Department's Hazardous Industry Planning Advisory Paper No. 8, 'HAZOP Guidelines'. The study report must be accompanied by a program for the implementation of all recommendations made in the report. If the Applicant intends to defer the implementation of a recommendation, reasons must be documented.		Not applicable to current audit stage.	Not triggered	
B3c	A Final Hazard Analysis of the development, prepared in accordance with the Department's Hazardous Industry Planning Advisory Paper No. 6, 'Hazard Analysis'. The Final Hazard Analysis must:		Not applicable to current audit stage.	Not triggered	
B3c(i)	report on the implementation of the recommendations under Condition B1; and		Not applicable to current audit stage.	Not triggered	
B3c(ii)	develop a Risk Reduction Program to minimise the risk to the adjoining land.		Not applicable to current audit stage.	Not triggered	
B3d	A Construction Safety Study , prepared in accordance with the Department's Hazardous Industry Planning Advisory Paper No. 7 'Construction Safety'. For developments in which the construction period exceeds six months, the commissioning portion of the Construction Safety Study may be submitted two months prior to commencement of commissioning.		Not applicable to current audit stage.	Not triggered	
B4	The Applicant must develop and implement the plans and systems set out under subsections (a) to (b) below. No later than two months prior to the commencement of commissioning of the development, or within such further period as the Planning Secretary may agree, the Applicant must submit for the approval of the Planning Secretary documentation describing those plans and systems. Commissioning must not commence until approval has been given by the Planning Secretary.		Not applicable to current audit stage.	Not triggered	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
B4a	a consolidated comprehensive Emergency Plan and detailed emergency procedures for all developments within Lot 1 DP 1195449. The Emergency Plan must include consideration of the safety of all people outside of the development who may be at risk from the development. The plan must address evacuation procedures for the neighbouring facilities occupying Lot 1 DP 1195449. The plan must be prepared in accordance with the Department's Hazardous Industry Planning Advisory Paper No. 1, 'Emergency Planning' and in consultation with the neighbouring facilities occupying Lot 1 DP 1195449.		Not applicable to current audit stage.	Not triggered	
B4b	a document setting out a comprehensive Safety Management System, covering all on-site operations and associated transport activities involving hazardous materials. The document must clearly specify all safety related procedures, responsibilities and policies, along with details of mechanisms for ensuring adherence to the procedures. Records must be kept on-site and must be available for inspection by Planning Secretary upon request. The Safety Management System must be developed in accordance with the Department's Hazardous Industry Planning Advisory Paper No. 9, 'Safety Management'.		Not applicable to current audit stage.	Not triggered	
B5	One month prior to the commencement of operation of the development, the Applicant must submit to the Planning Secretary, a Pre-Startup Compliance Report detailing compliance with conditions B3 and B4 on this consent, including:		Not applicable to current audit stage.	Not triggered	
B5a	dates of study/plan/system submission, approval, commencement of construction and commissioning;		Not applicable to current audit stage.	Not triggered	
B5b	actions taken or proposed, to implement recommendations made in the studies/plans/systems; and		Not applicable to current audit stage.	Not triggered	
B5c	responses to any requirement imposed by the Planning Secretary under Condition A2(b).		Not applicable to current audit stage.	Not triggered	
B6	Three months after the commencement of operation of the development, the Applicant must submit to the Planning Secretary, a Post-Startup Compliance Report verifying that:		Not applicable to current audit stage.	Not triggered	
B6a	the Emergency Plan required under Condition B4(a) is effectively in place and that at least one emergency exercise has been conducted; and		Not applicable to current audit stage.	Not triggered	
B6b	the Safety Management System required under Condition B4(b) has been fully implemented and that records required by the system are being kept.		Not applicable to current audit stage.	Not triggered	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/ Improvement Opportunity
B7	Within twelve months after the commencement of operation and every three years thereafter, or at such intervals as the Planning Secretary may agree, the Applicant must carry out a comprehensive Hazard Audit of the development. The audits must:	Elgas email: SSD 8448 – 130 Cormorant Road Kooragang – Liquefied Petroleum Gas Storage and Distribution Facility – Condition B7 Hazard Audit (6/10/2021) Email DPIE: confirmation of extension of Hazard Audit by 12 months (02/11/2021) Elgas Newcastle Depot Hazard Audit Report (The Linde Group, 19/10/2022) DPE correspondence: 2022	Due date for Hazard Audit was extended to the end of October 2022. Date of site audit 6-7 September 2022.(Compliant based on date of site audit).	Compliant	
B7a	be carried out at the Applicant's expense by a qualified person or team, who have been approved by the Planning Secretary and are independent of the development;	Email DPIE: Approval of 2021 Hazard Auditor – Elgas Kooragang Island (SSD 8448) (22/09/2021)	Approval of Hazard Auditor Mr. Chris King of BOC limited -	Compliant	
B7b	be carried out in accordance with the Department's Hazardous Industry Planning Advisory Paper No. 5, 'Hazard Audit Guidelines';	Elgas Newcastle Depot Hazard audit report (The Linde Group, 19/10/2022)	The Report cites HIPAP5 as a reference	Compliant	
B7c	include a review of the site Safety Management System and a review of all entries made in the incident register since the previous audit; and	Elgas Newcastle Depot Hazard audit report (The Linde Group, 19/10/2022)	Section 2.2 Scope includes the Safety Management System.	Compliant	
B7d	report on the implementation of the Risk Reduction Program required under Condition B3.	Elgas Newcastle Depot Hazard audit report (The Linde Group, 19/10/2022)	The Risk Reduction Programs embedded in the Safety Management System. The review of the SMS is in Section 5.	Compliant	
B8	Within one month of completing each audit carried out in accordance with Condition B7, the Applicant must submit a report to the satisfaction of the Planning Secretary for approval. The audit report must be accompanied by a program for the implementation of all recommendations made in the audit report. If the Applicant intends to defer the implementation of a recommendation, reasons must be documented.	Elgas correspondence: ELGAS Implementation Program – Hazard Audit October 2022 (08/02/2023) DPIE correspondence: Elgas Kooragang LPG Facility (SSD 8448) 2022 Hazard Audit (25/11/2022)	The site audit was conducted on the 6-7 September 2022. The Hazard Audit Report was issued to Department on 19/11/2022, more than one month after the site audit. The report was approved by DPE on the 25/11/2022. The program for the implementation of the Report's recommendations is dated 08/02/2023. Delay with previous consent owner. Elgas now managing the consent.	Non-compliant	OA2_NC2: Ensure that the Hazard Audit report is submitted to the Department within one month of completing the site inspection for each Hazard Audit.

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/ Improvement Opportunity
B9	The Applicant must store all chemicals, fuels and oils used on-site in accordance with:	Hazardous Chemicals Register ChemAlert (print date 31/03/2025) ELG008-HSE-115-01-Newcastle Depot Manifest (V1.1 - 02.11.21) SafeWork correspondence: Notification of Hazardous Chemicals on Premises (16/01/2022) Site inspection	The following chemicals are stored onsite. <u>LPG</u> : Bulk storage 100,000L Cylinder storage 213,600L Tanker parking 40,000L <u>Aerosol paints</u> : Flammable storage 20.8 Kg <u>Nitrogen (compressed)</u> : Nitrogen storage 113,100L Small quantities of coolants and insecticides in the store room.	Compliant	
B9a	the requirements of all relevant Australian Standards; and	AS/NZS 1596:2008 The storage and handling of LP Gas 2023 Compliance Report 2023 Internal Audit (08/02/2023)	Limited liquid chemicals stored onsite. The site inspection identified non-DG liquids chemicals (coolants and insecticides) (approximately 5 containers, small volumes) in the store room that were being stored without bunding.	Compliant	OA2_IO1: Install a small bund in the storeroom for storage of liquid chemicals.
B9b	the NSW EPA's 'Storing and Handling of Liquids: Environmental Protection – Participants Manual' if the chemicals are liquids.	Storing and Handling of Liquids: Environmental Protection – Participants Manual (DECC, May 2007)	As above.	Compliant	
B10	In the event of an inconsistency between the requirements of conditions B9(a) and B9(b), the most stringent requirement must prevail to the extent of the inconsistency.			Not triggered	
B11	Dangerous goods, as defined by the Australian Dangerous Goods Code, must be stored and handled strictly in accordance with:	Hazardous Chemicals Register ChemAlert (print date 31/03/2025) ELG008-HSE-115-01-Newcastle Depot Manifest (V1.1 - 02.11.21) SafeWork correspondence: Notification of Hazardous Chemicals on Premises (16/01/2022)	The following DG are stored onsite. <u>LPG</u> : Bulk storage 100,000L Cylinder storage 213,600L Tanker parking 40,000L <u>Aerosol paints</u> : Flammable storage 20.8 Kg <u>Nitrogen (compressed)</u> : Nitrogen storage 113,100L (volume of gas)	Compliant	OA2_IO2: Ensure the following is implemented at the site: - regular reviews to ensure SDS are updated within the 5 year timeframe under the Work Health and Safety Regulations - conduct a risk assessment for all new DG introduced at the site, including the review of the adequacy and appropriateness of existing controls - review and update the Emergency Response Plan to include compressed nitrogen and consider any emergency response requirements. .

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/ Improvement Opportunity
B11a	all relevant Australian Standards;	AS/NZS 1596:2014 The storage and handling of LP Gas AS4332	The 2023 Internal Audit identified the introduction to site of compressed nitrogen for purging valves. The 2023 Compliance Report stated that compressed cylinder are covered by AS4332, but the requirements of the Standard far exceeded by site facilities, and no was action required. The Hazardous Chemicals Register identifies that a risk assessment was not available for this chemical. Compressed nitrogen was not included in Section 2.5 List of Dangerous Goods Handled Onsite of the Emergency Plan. SDS: BALCHAN SILVER 400GM (22/03/2020) and WD-40 (19 /09/2019), Not updated within the 5 years required under the WHS Regs. Based on the review of procedures and the site inspection LPG is being stored and handled appropriately.	Compliant	
B11b	for liquids, a minimum bund volume requirement of 110% of the volume of the largest single stored volume within the bund; and		There are no DG liquids stored on site.	Not triggered	
B11c	the Environment Protection Manual for Authorised Officers: Bunding and Spill Management – technical bulletin (EPA, 1997).		This document is no longer available. There are no liquids stored on site	Not triggered	
B12	In the event of an inconsistency between the requirements of conditions B11(a) to B11(c), the most stringent requirement must prevail to the extent of the inconsistency.		No inconsistencies identified.	Not triggered	
B13	The Applicant must prepare a Construction Traffic Management Plan for the development which details road safety and network efficiency measures and heavy vehicle routes, access and parking arrangements. Details must be included in the application for a Construction Certificate.		Not applicable to current audit stage.	Not triggered	
B14	The Applicant must ensure internal roads, driveways and parking (including grades, turn paths, sight distance requirements, aisle widths, aisle lengths and parking bay dimensions) associated with the development are constructed and maintained in accordance with the latest version of AS 2890.1:2004 Parking facilities Off-street car parking (Standards Australia, 2004) and AS 2890.2:2002 Parking facilities Off-street commercial vehicle facilities (Standards Australia, 2002).	Maintenance		Compliant	
B15	All road works associated with the development must be undertaken at full cost to the Applicant.		Not applicable to current audit stage.	Not triggered	
B16	The Applicant must ensure the swept path of the longest vehicle entering and exiting the site, as well as manoeuvrability through the site, is in accordance with the relevant AUSTROADS guidelines.		Not applicable to current audit stage.	Not triggered	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
B17	The Applicant must submit design plans to the satisfaction of the relevant roads authority which demonstrate that the proposed accesses to the development are designed to accommodate the turning path of a B-Double tanker.		Not applicable to current audit stage.	Not triggered	
B18	The Applicant must provide sufficient parking facilities on-site, including for heavy vehicles and for site personnel, to ensure that traffic associated with the development does not utilise public and residential streets or public parking facilities		Parking details provided on site plan include parking for site personnel in front of office building and for trucks in front of cylinder filling dock. Cormorant Road was observed to be free of parked cars and trucks during the site inspection.	Compliant	
B19	Prior to the commencement of operation, the Applicant must prepare an Operational Traffic Management Plan for the development to the satisfaction of the Planning Secretary. The plan must form part of the OEMP required by Condition C5 and must:	Depot Traffic Management Plan (SOP-300-008) Rev 1.3 (02/11/2021) (TMP)		Compliant	
B19a	be prepared by a suitably qualified and experienced person(s);	TMP	First version.	Compliant	
B19b	be prepared in consultation with Port of Newcastle;	TMP	Previous approved version included consultation with PoN and RMS.	Compliant	
B19c	describe how the requirements of Condition B21 will be met;	TMP	TMP Sections 10 and 12.	Compliant	
B19d	detail the on-site traffic control measures to prevent vehicular collision and control the manoeuvring of vehicles in designated areas;	TMP	TMP Sections 10 and 12.	Compliant	
B19e	detail the measures that are to be implemented to ensure road safety and network efficiency during operation;	TMP	TMP Sections 10 and 12.	Compliant	
B19f	detail heavy vehicle routes, access, parking arrangements and pedestrian management;	TMP	TMP Section 8 and pg 13.	Compliant	
B19g	include a Driver Code of Conduct to:	TMP	TMP Sections 8, 9 and 10.	Compliant	
B19g(i)	minimise the impacts on the local and regional road network;	TMP	TMP Sections 8.4 and 9.2.	Compliant	
B19g(ii)	minimise conflicts with other road users;	TMP	TMP Section 9.2.	Compliant	
B19g(iii)	minimise road traffic noise; and	TMP	Traffic noise is not addressed in the TMP. Low risk	Compliant	
B19g(iv)	ensure truck drivers use specified routes;	TMP	TMP Section 8 and pg 13.	Compliant	
B19h	include a program to monitor the effectiveness of these measures.	TMP	TMP Section 14.4 - quarterly Elgas Contractor Safety and Compliance Reviews with transport contractors	Compliant	
B20	The Applicant must:			Compliant	
B20a	not commence operation until the Operational Traffic Management Plan required by Condition B19 is approved by the Planning Secretary; and		Not applicable to current audit stage.	Not triggered	
B20b	Implement the most recent version of the Operational Traffic Management Plan approved by the Planning Secretary for the duration of operation	Depot Traffic Management Plan (SOP-300-008) Rev 1.3 (02/11/2021) (TMP)	Current approved TMP is being implemented.	Compliant	
B21	The Applicant must ensure:			Compliant	
B21a	The development does not result in any vehicles queuing on the public road network;	TMP Site inspection Complaints Register Incident Register	TMP Sections 10 and 12.	Compliant	
B21b	all vehicles enter and exit the site in a forward direction;	TMP Site inspection	TMP Section 12.	Compliant	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
B21c	heavy vehicles and bins associated with the development are not parked on local roads or footpaths in the vicinity of the site;	TMP Site inspection	TMP Section 10.1.	Compliant	
B21d	all vehicles are wholly contained on site before being required to stop;	TMP Site inspection	TMP Section 10.1.	Compliant	
B21e	all loading and unloading of materials is carried out on-site;	TMP Site inspection	TMP Section 10.5.	Compliant	
B21f	all trucks entering or leaving the site with loads have their loads covered and do not track dirt onto the public road network; and	TMP Site inspection Complaints Register Incident Register	TMP Section 10.8.	Compliant	
B21g	the proposed turning areas in the car park are kept clear of any obstacles, including parked cars, at all times.	TMP Site inspection	TMP Section 10.9 and 12.	Compliant	
B22	The Applicant must:		Not applicable to current audit stage.	Not triggered	
B22a	ensure that only VENM or ENM is brought onto the site;		Not applicable to current audit stage.	Not triggered	
B22b	keep accurate records of the volume and type of fill to be used; and		Not applicable to current audit stage.	Not triggered	
B22c	make these records available to the Department upon request		Not applicable to current audit stage.	Not triggered	
B23	Prior to the commencement of any construction or other surface disturbance the Applicant must install and maintain suitable erosion and sediment control measures on-site, in accordance with the relevant requirements of the Managing Urban Stormwater: Soils and Construction - Volume 1: Blue Book (Landcom, 2004) guideline and the Erosion and Sediment Control Plan included in the CEMP required by Condition C2.		Not applicable to current audit stage.	Not triggered	
B24	Prior to the commencement of operation, the Applicant must design, install and operate a stormwater management system for the development. The system must:		Not applicable to current audit stage.	Not triggered	
B24a	be designed by a suitably qualified and experienced person(s);		Not applicable to current audit stage.	Not triggered	
B24b	be generally in accordance with the conceptual design in the EIS;		Not applicable to current audit stage.	Not triggered	
B24c	be designed to meet the stormwater quantity and water quality criteria within the Newcastle Development Control Plan 2012;		Not applicable to current audit stage.	Not triggered	
B24d	be in accordance with applicable Australian Standards; and		Not applicable to current audit stage.	Not triggered	
B24e	(Engineers Australia, 2016) and Managing Urban Stormwater: Council Handbook (EPA, 1997) guidelines.		Not applicable to current audit stage.	Not triggered	
B25	The Applicant must ensure the stormwater management system is identified and sign-posted in accordance with Council's Stormwater and Water Efficiency for Development Technical Manual. Details must be included in the application for a Construction Certificate.		Not applicable to current audit stage.	Not triggered	
B26	Prior to the commencement of operation, the Applicant must prepare a Water Management Plan to the satisfaction of the Planning Secretary. The Water Management Plan must form part of the OEMP required by Condition C5. The Water Management Plan must:				
B26a	be prepared by a suitably qualified and experienced person(s) whose appointment has been endorsed by the Planning Secretary;				

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/ Improvement Opportunity
B26b	be prepared in consultation with DoI;				
B26c	detail water use, metering, disposal and management on-site;				
B26d	detail the management of wastewater streams on-site; and				
B26e	contain a Groundwater Monitoring Plan which includes:				
B26e(i)	baseline data on groundwater levels and quality; and				
B26e(ii)	a program to monitor groundwater levels and quality.				
B27	The Applicant must:				
B27a	not commence operation until the Water Management Plan required by Condition B26 is approved by the Planning Secretary; and				
B27b	implement the most recent version of the Water Management Plan approved by the Planning Secretary for the duration of the development.				
B28	If groundwater is encountered during construction, the Applicant must obtain all necessary licences or, if required, approval from DoI.		Not applicable to current audit stage.	Not triggered	
B29	Prior to the commencement of construction, the Applicant must prepare a Groundwater Contingency Plan to the satisfaction of the Planning Secretary. The Groundwater Contingency Plan must form part of the CEMP required by Condition C2. The Groundwater Contingency Plan must:		Not applicable to current audit stage.	Not triggered	
B29a	define the triggers that activate the Groundwater Contingency Plan;		Not applicable to current audit stage.	Not triggered	
B29b	identify the protocols that will be implemented should the Groundwater Contingency Plan be triggered, including the preparation of a Groundwater Management Plan;		Not applicable to current audit stage.	Not triggered	
B29c	identify all potential groundwater licences or approvals that may be required should the Groundwater Contingency Plan be triggered;		Not applicable to current audit stage.	Not triggered	
B29d	define the timeframes for:		Not applicable to current audit stage.	Not triggered	
B29d(i)	notifying DoI if the Groundwater Contingency Plan is triggered;		Not applicable to current audit stage.	Not triggered	
B29d(ii)	implementing the protocols under paragraph (b) above; and		Not applicable to current audit stage.	Not triggered	
B29d(iii)	submitting the Groundwater Management Plan to DoI.		Not applicable to current audit stage.	Not triggered	
B30	The Applicant must:		Not applicable to current audit stage.	Not triggered	
B30a	not commence construction until the Groundwater Contingency Plan required by Condition B29 is approved by the Planning Secretary; and		Not applicable to current audit stage.	Not triggered	
B30b	implement the most recent version of the Groundwater Contingency Plan approved by the Planning Secretary for the duration of the development.		Not applicable to current audit stage.	Not triggered	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
B31	The Applicant must ensure all staff are aware of their statutory obligations for heritage under the National Parks and Wildlife Act 1974 and the Heritage Act 1977.	Site Induction Acknowledgment - Newcastle Depot (Feb 2025) 2023 Compliance Report	2023 Compliance Report suggested that the acknowledgement of Aboriginal Heritage be removed from the induction checklist and be replaced by a form of words (similar to that on the Elgas website) which should be prominently displayed at the top of the induction form, immediately under the Elgas logo. The current induction acknowledges the local traditional people.	Compliant	
B32	Prior to the commencement of operation, the Applicant must install a plaque which acknowledges the past occupation of the area by Awabakal and Worimi peoples.	Site inspection	Maintained, still in place.	Compliant	
B33	If any item or object of Aboriginal heritage significance is identified on site:		Not applicable to current audit stage.	Not triggered	
B33a	all work in the immediate vicinity of the suspected Aboriginal item or object must cease immediately;		Not applicable to current audit stage.	Not triggered	
B33b	a 10 m wide buffer area around the suspected item or object must be cordoned off; and		Not applicable to current audit stage.	Not triggered	
B33c	the OEH must be contacted immediately.		Not applicable to current audit stage.	Not triggered	
B34	Work in the immediate vicinity of the Aboriginal item or object may only recommence in accordance with the provisions of Part 6 of the National Parks and Wildlife Act 1974.		Not applicable to current audit stage.	Not triggered	
B35	The Applicant must take all reasonable steps to minimise dust generated during all works authorised by this consent.		Not applicable to current audit stage.	Not triggered	
B36	During construction, the Applicant must ensure that:		Not applicable to current audit stage.	Not triggered	
B36a	exposed surfaces and stockpiles are suppressed by regular watering;		Not applicable to current audit stage.	Not triggered	
B36b	all trucks entering or leaving the site with loads have their loads covered;		Not applicable to current audit stage.	Not triggered	
B36c	trucks associated with the development do not track dirt onto the public road network;		Not applicable to current audit stage.	Not triggered	
B36d	public roads used by these trucks are kept clean; and		Not applicable to current audit stage.	Not triggered	
B36e	land stabilisation works are carried out progressively on site to minimise exposed surfaces.		Not applicable to current audit stage.	Not triggered	
B37	The Applicant must ensure the development does not cause or permit the emission of any offensive odour (as defined in the POEO Act)	Complaints register Incident register Site inspection	No complaints or incidences recorded for the site. No odours detected during the site inspection.	Compliant	
B38	The Applicant must comply with the hours detailed in Table 1. Earthworks & Construction: Monday to Friday - 7am to 9pm Earthworks & Construction: Saturday - 8am to 1pm Operation: Monday to Sunday - 24hours	OEMP	24 hour operation, 7 days.	Compliant	
B39	Works outside of the hours identified in Condition B38 may be undertaken in the following circumstances:		Obsolete with MOD2	Not triggered	
B39a	Works outside of the hours identified in Condition B38 may be undertaken in the following circumstances:		Obsolete with MOD2	Not triggered	
B39b	where it is required in an emergency to avoid the loss of lives, property or to prevent environmental harm.		Obsolete with MOD2	Not triggered	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
B40	All waste materials removed from the site must only be directed to a waste management facility or premises lawfully permitted to accept the materials.	OEMP Elgas Monthly Waste Summary 2022-2023 2023 (Nov) -2025 Waste Report Waste records/ dockets	Stated in OEMP Appendix B Section 3.2. Elgas reports that all wastes are taken off-site to licensed waste management facilities. Waste streams are separated into: •General waste •Secure waste •Recycling (cardboard, brass and steel)	Compliant	
B41	The Applicant must assess and classify all liquid and non-liquid wastes to be taken off site in accordance with the latest version of EPA's Waste Classification Guidelines Part 1: Classifying Waste (EPA, 2014) and dispose of all wastes to a facility that may lawfully accept the waste.	Elgas Monthly Waste Summary 2022-2023 2023 (Nov) -2025 Waste Report	No waste requiring classification has been disposed of off site. Waste reports generated by Waste Flex identify that only General Waste is removed from the site.	Compliant	
B42	Waste generated outside the site must not be received at the site for storage, treatment, processing, reprocessing, or disposal.	Waste records/ dockets Site inspection	No waste is received at the site.	Compliant	
B43	The collection of waste generated during operation of the development must be undertaken between 7 am to 10 pm Monday to Friday	TMP Records	Not mentioned in the OEMP. TMP Section 10.4 refers to waste bin collection, but does not state the permitted hours for waste collection. Dockets within the times.	Compliant	OA2 IO3: Include the requirements of condition B43 in the TMP.
B44	Prior to the commencement of earthworks, the Applicant must prepare an unexpected contamination procedure to ensure that potentially contaminated material is appropriately managed. The procedure must form part of the of the CEMP in accordance with Condition C2 and must ensure any material identified as contaminated must be disposed off-site, with the disposal location and results of testing submitted to the Planning Secretary, prior to its removal from the site.		Not applicable to current audit stage.	Not triggered	
B45	The Applicant must ensure landscaping works are completed in accordance with the plans identified in Table 2. Drawing No.: Revision: Name of Plan: Author		Not applicable to current audit stage.	Not triggered	
B45a	L-01: DA2: Landscape Site Plan: RJ Sinclair Pty Ltd		Not applicable to current audit stage.	Not triggered	
B45b	L-02: DA2: Landscape Bedding Plans: RJ Sinclair Pty Ltd		Not applicable to current audit stage.	Not triggered	
B46	The Applicant must ensure the lighting associated with the development:		Not applicable to current audit stage.	Not triggered	
B46a	complies with the latest version of AS 4282-1997 - Control of the obtrusive effects of outdoor lighting (Standards Australia, 1997); and		Not applicable to current audit stage.	Not triggered	
B46b	Is mounted, screened and directed in such a manner that it does not create a nuisance to surrounding properties or the public road network.		Not applicable to current audit stage.	Not triggered	
B47	The Applicant must ensure adequate lighting is provided for after-hours access by tanker drivers	Site inspection	Hazardous-zone compliant lighting observed to be in place at tanker loading area.	Compliant	
B48	All signage and fencing must be erected in accordance with the development plans included in the EIS. <i>Note: This condition does not apply to temporary construction and safety related signage and fencing.</i>	EIS Site inspection		Compliant	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
B49	The Applicant must install a masonry or metal clad fence with a minimum height of 2.1 m around the perimeter of all open storage and work areas.	Site Inspection		Compliant	
B50	The Applicant must implement the Mosquito Management Plan – Proposed Elgas Facility, prepared for Sovechles Nominees Pty Ltd, for the duration of the construction and operation of the development to minimise breeding sites for nuisance biting and disease transmitting mosquitos.	Mosquito Management Plan Elgas LPG Storage Facility 130 Cormorant Road Kooragang Rev 1.1 (05/11/2024)	Due to the low risk at the site the requirements of the plan are limited to staff awareness and managing breeding points (stormwater detention and drains, and rainwater tanks). No mosquito manifestations were reported during the audit period.	Compliant	
C1	Management plans required under this consent must be prepared in accordance with relevant guidelines, and include: <i>Note: The Planning Secretary may waive some of these requirements if they are unnecessary or unwarranted for particular management plans.</i>	Environmental Management Plan Guideline for Infrastructure Projects (DPIE, April 2020)	Non-compliant with C1(a)(ii) and C1(b).	Non-compliant	
C1a	details of:		Non-compliant with C1(a)(ii)	Non-compliant	
C1a(i)	the relevant statutory requirements (including any relevant approval, licence or lease conditions);	Environmental Management Plan Elgas Newcastle Rev 1.6 (19/12/2024) (OEMP)	SSD 8448 is referenced, however, there is not an overview of the legislative basis for the approval, approval pathway or modifications to the consent. There is limited cross-referencing of conditions throughout the OEMP.	Compliant	QA2 IO4: Include additional detail in the OEMP regarding the legislative basis for the development, approval pathway and modifications to the consent. Consider cross-referencing requirements in the OEMP to the relevant consent condition/s, so that the legal foundation is transparent.
C1a(ii)	any relevant limits or performance measures and criteria; and	OEMP	The OEMP does not mention the storage limit for LPG on-site at any given time of 178 tonnes, as specified under condition A6. A non-compliance is also identified under condition A6.	Non-compliant	OA2_NC3: Include reference to the LPG storage limit specified under condition C6 in the OEMP. Provide details of the procedure for monitoring and recording compliance with condition C6, including the process to be implemented should an exceedance be identified (including non-compliance notification).

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
C1a(iii)	the specific performance indicators that are proposed to be used to judge the performance of, or guide the implementation of, the development or any management measures;	OEMP	Section 9 Aspects and Impacts & Performance Targets and Objectives lists the environmental performance indicators.	Compliant	
C1b	a description of the measures to be implemented to comply with the relevant statutory requirements, limits, or performance measures and criteria;	OEMP	The OEMP does not mention the measures to be implemented to ensure compliance with the storage limit for LPG on-site at any given time of 178 tonnes, as specified under condition C6. See also C1(a)(i) above.	Non-compliant	Refer to: OA2_NC3 and QA2_IO4
C1c	a program to monitor and report on the:	OEMP	Section 9 Aspects and Impacts & Performance Targets and Objectives lists the key environmental performance indicators to be reviewed in the 3-yearly audit. Section 15: Internal Audits.	Compliant	
C1c(i)	impacts and environmental performance of the development;	OEMP		Compliant	
C1c(ii)	effectiveness of the management measures set out pursuant to paragraph (b) above;	OEMP		Compliant	
C1d	a contingency plan to manage any unpredicted impacts and their consequences and to ensure that ongoing impacts reduce to levels below relevant impact assessment criteria as quickly as possible;	Emergency Response Plan	The majority of risks that may impact the development are managed through the Emergency Response Plan.	Compliant	
C1e	a program to investigate and implement ways to improve the environmental performance of the development over time;			Compliant	
C1f	a protocol for managing and reporting any:			Compliant	
C1f(i)	incident and any non-compliance (specifically including any exceedance of the impact assessment criteria and performance criteria);	Environmental Management Plan Elgas Newcastle Rev 1.6	OEMP Section 6.1 Incidents OEMP Section 10 - non-compliances.	Compliant	
C1f(ii)	complaint;	OEMP	OEMP Section 12.	Compliant	
C1f(iii)	failure to comply with statutory requirements; and	OEMP	OEMP Section 10.	Compliant	
C1g	a protocol for periodic review of the plan.	OEMP and sub-plans	Variable review timeframes stated within the plans (e.g. OEMP every 3 years, TMP every 5 years, FERP not mentioned). None of the subplans refer to the triggers stated under condition .	Compliant	
C2	The Applicant must prepare a Construction Environmental Management Plan (CEMP) in accordance with the requirements of Condition C1 and to the satisfaction of the Planning Secretary.		Not applicable to current audit stage.	Not triggered	
C3	As part of the CEMP required under Condition C2 of this consent, the Applicant must include the following:		Not applicable to current audit stage.	Not triggered	
C3a	Construction Traffic Management Plan (see Condition B13);		Not applicable to current audit stage.	Not triggered	
C3b	Erosion and Sediment Control (see Condition B23);		Not applicable to current audit stage.	Not triggered	
C3c	Mosquito Management Plan (see Condition B50); and		Not applicable to current audit stage.	Not triggered	
C3d	Groundwater Contingency Plan (see Condition B29).		Not applicable to current audit stage.	Not triggered	
C4	The Applicant must:		Not applicable to current audit stage.	Not triggered	
C4a	not commence construction of the development until the CEMP is approved by the Planning Secretary; and		Not applicable to current audit stage.	Not triggered	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
C4b	carry out the construction of the development in accordance with the CEMP approved by the Planning Secretary and as revised and approved by the Planning Secretary from time to time.		Not applicable to current audit stage.	Not triggered	
C5	The Applicant must prepare an Operational Environmental Management Plan (OEMP) in accordance with the requirements of Condition C1 and to the satisfaction of the Planning Secretary.	Environmental Management Plan Elgas Newcastle Rev 1.6 (19/12/2024)(OEMP) DPHI correspondence SSD-8448-PA-43: Kooragang LPG Storage Facility – Revised Operational Environmental	OEMP Rev 1.6 submitted 26/11/2024 and approved 08/01/2025.	Compliant	
C6	As part of the OEMP required under Condition C5 of this consent, the Applicant must include the following:	OEMP		Compliant	
C6a	describe the role, responsibility, authority and accountability of all key personnel involved in the environmental management of the development;	OEMP	OEMP Section 6.	Compliant	
C6b	describe the procedures that would be implemented to:	OEMP		Compliant	
C6b(i)	keep the local community and relevant agencies informed about the operation and environmental performance of the development;	OEMP	OEMP Section 6.3.	Compliant	
C6b(ii)	receive, handle, respond to, and record complaints;	OEMP Complaints register Complaints records	OEMP Section 12.	Compliant	
C6b(iii)	resolve any disputes that may arise;	OEMP	OEMP Section 12.	Compliant	
C6b(iv)	respond to any non-compliance;	OEMP	OEMP Section 10 and Appendix D Emergency Plan.	Compliant	
C6b(v)	respond to emergencies; and	OEMP	OEMP Section 14 and Appendix	Compliant	
C6c	include the following environmental management plans:	OEMP		Compliant	
C6c(i)	Operational Traffic Management Plan (see Condition B19);	Environmental Management Plan Elgas Newcastle - Appendix	Plan included. Approved with OEMP Rev 1.6.	Compliant	
C6c(ii)	Flood Emergency Response;	Environmental Management Plan Elgas Newcastle - Appendix F Rev 1.1 (05/11/2020)	FERP included. Approved with OEMP Rev 1.6. Revision history different front page that states Dec 2024.	Compliant	OA2_IO5: Update the Revision History table in the FERP to include accurate details of the current revision.
C6c(iii)	Water Management Plan (see Condition B26); and				
C6c(iii)	Mosquito Management Plan (see Condition B50).	Environmental Management Plan Elgas Newcastle - Appendix	Plan included. Approved with OEMP Rev 1.6.	Compliant	
C7	The Applicant must:	Environmental Management Plan Elgas Newcastle Rev 1.6 -		Compliant	
C7a	not commence operation until the OEMP is approved by the Planning Secretary; and		Not applicable to current audit stage.	Not triggered	
C7b	operate the development in accordance with the OEMP approved by the Planning Secretary (and as revised and approved by the Planning Secretary from time to time).	Site inspection Audit findings OEMP	The site inspection identified that the development is generally being operated in accordance with the OEMP.	Compliant	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/ Improvement Opportunity
C8	Within three months of: the strategies, plans and programs required under this consent must be reviewed, and the Department must be notified in writing that a review is being carried out.		Non-compliant with C8(b). No evidence was identified of notification to the Department that a review was being conducted.	Non-compliant	OA2_NC4: Ensure that a review of the strategies, plans and programs required under the consent are reviewed within 3 months of one of the triggers listed under condition C8. Ensure that the Department is notified that a review is being carried out. For transparency, consider including details of plan reviews in the relevant plan Revisions Table, along with the trigger for the review, even when no updates to the plans are made.
C8a	the submission of an incident report under Condition C10;	Incident log Incident notifications	No incidents recorded.	Not triggered	
C8b	the submission of an Independent Audit under Condition C17;	Kooragang LPG Facility SSD 8448 Independent Environmental Audit (JBS&G, 23/11/2021)	No written notification to the Department that strategies, plans and programs were being reviewed following the 2021 IEA. No review or updates following the 2021 IEA are documented in the OEMP Revisions Table. Site interviews identified a review had not been conducted.	Non-compliant	
C8c	the approval of any modification of the conditions of this consent; or		No modifications during the audit period.	Not triggered	
C8d	the issue of a direction of the Planning Secretary under Condition A2(b) which requires a review,		No relevant directions issued.	Not triggered	
C9	If necessary to either improve the environmental performance of the development, cater for a modification or comply with a direction, the strategies, plans and programs required under this consent must be revised, to the satisfaction of the Planning Secretary. Where revisions are required, the revised document must be submitted to the Planning Secretary for approval within six weeks of the review. <i>Note: This is to ensure strategies, plans and programs are updated on a regular basis and to incorporate any recommended measures to improve the environmental performance of the development.</i>	Environmental Management Plan Elgas Newcastle Rev 1.6 (19/12/2024)(OEMP) DPHI correspondence SSD-8448-PA-43: Kooragang LPG Storage Facility – Revised Operational Environmental Management Plan (OEMP) (08/01/2025)	OEMP Rev 1.6 submitted 26/11/2024 and approved 08/01/2025.	Compliant	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
C10	The Department must be notified in writing to compliance@planning.nsw.gov.au immediately after the Applicant becomes aware of an incident. The notification must identify the development (including the development application number and the name of the development if it has one), and set out the location and nature of the incident. Subsequent notification requirements must be given and reports submitted in accordance with the requirements set out in Appendix 3.	OEMP Incident log and reports Complaints register	Requirement included in OEMP Section 10. No incidents recorded during the audit period.	Not triggered	
C11	The Department must be notified in writing to compliance@planning.nsw.gov.au within seven days after the Applicant becomes aware of any non-compliance.	OEMP Compliance reports (2022, 2023, 2024)	This requirement for responding to non-compliances is not addressed in the OEMP. No non-compliance notifications have been issued during the audit period, however, non-compliances were identified in Compliance Reports (CR) that were not notified under this condition. 2023 CR: a non-compliance with condition C16 was identified. 2024 CR: exceedance of LPG limit identified (non-compliance with condition A6).	Non-compliant	OA2_NC5: Ensure that the Department is notified in writing within 7 days of becoming aware of a non-compliance. Note that this includes any non-compliances identified through the preparation of a Compliance Report under condition C15.
C12	A non-compliance notification must identify the development and the application number for it, set out the condition of consent that the development is non-compliant with, the way in which it does not comply and the reasons for the non-compliance (if known) and what actions have been, or will be, undertaken to address the non-compliance.	OEMP Compliance reports (2022, 2023, 2024)	Refer to non-compliance above.	Not triggered	
C13	A non-compliance which has been notified as an incident does not need to also be notified as a non-compliance.		Noted.	Not triggered	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
C15	Compliance Reports of the project must be carried out in accordance with the Compliance Reporting Post Approval Requirements (Department 2018).	DPHI correspondence SSD-8448-PA-44: Compliance Report 2024 (07/01/2025) DPHI correspondence SSD-8448-PA-40: Compliance Report 2024 - Extension Request (07/01/2025) OPERATIONAL COMPLIANCE REPORT FOR THE PERIOD 21 OCTOBER 2023 to 28 November 2024 (28/11/2024) OPERATIONAL COMPLIANCE REPORT FOR THE PERIOD 21 OCTOBER 2022 to 20 October 2023 (30/10/2023) DPHI correspondence SSD-8448-PA-38: 2023 Operational Compliance Report (25/06/2024) OPERATIONAL COMPLIANCE REPORT FOR THE PERIOD 13 NOVEMBER 2021 to 21 OCTOBER 2022 (21/10/2022) CONDITION C15 – OPERATIONAL COMPLIANCE REPORT 1 (V2) (08/11/2021)	SSD-8448-PA-44 requires that future compliance reports be in accordance with CRPAR (2020). Assessment for this audit is against CRPAR 2018. <u>2024 CR</u> : Elgas request for an extension on the 25/10/2024. CR submitted to DPHI on the 28/11/2024. SSD-8448-PA-40 retrospectively grants an extension of time for the CR until 29/11/2024. No non-compliances were identified, however, under condition B9 it states that the 2024 Internal Depot Audit identified an exceedance of DG stored at the site in relation to condition A6 (this was confirmed in interviews). Under A6 compliance was only assessed according to the records on the day the Compliance report site inspection was conducted. This should have been reported as a non compliance. <u>2023 CR</u> : SSD-8448-PA-38 states the CR was submitted 07/11/2024 and included further information requirements for the 2024 CR. Two non-compliances were identified, one of which (C19) appears to be a confusion with the condition, as C19b) refers to responding to the Independent Audit report, rather than the CR. As a consequence the requirements of C19 are not addressed in the 2023 or 2024 Compliance Reports. C19b was not found to be non-compliant in this audit. Neither of the non-compliances were notified under condition C11. Section 3.2.4 of CRPAR (2018) sets out the requirements for reporting of all non-compliances. The non-compliances identified in the 2023 CR were not reported in accordance with these requirements.	Non-compliant	OA2_NC6: Ensure annual Compliance Reports are prepared in accordance CRPAR (2020 going forward). All non-compliances identified are to be reported, even if the site is complaint in relation to the condition at the time of the site inspection for the CR. Adress all non-compliances in accordance with Section 3.1.3 of CRPAR 2020 (recommend using a table format, as suggested in point 3 of SSD-8448-PA-38).
C16	The Applicant must make each Compliance Report publicly available no later than 60 days after submitting it to the Department and notify the Department in writing at least 7 days before this is done.	2023 Compliance Report	The 2023 CR identified that the 2022 CR was published approximately 90 days after submission to the Department. No evidence that a non-compliance notification was issued to the Department in accordance with condition C11 following the non-compliance being identified.	Non-compliant	OA2_NC7: Ensure annual compliance reports are publicly available within 60 days of submission to the Department and notify the Department in writing at least 7 days before this is done.

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
C17	No later than 4 weeks before the date notified for the commencement of operation, an Independent Audit Program prepared in accordance with the Independent Audit Post Approval Requirements (Department 2018) must be submitted to the Department.		Not applicable to current audit stage.	Not triggered	
C18	Independent Audits of the development must be carried out in accordance with			Compliant	
C18a	the Independent Audit Program submitted to the Department under Condition C17 of this consent; and	Independent Environmental Audit Program – SSD 8448 Elgas Kooragang, 130 Cormorant Road Kooragang NSW (Lot 1 DP 1195449) (Consentium, 27/07/2020) SSD-8448-PA-41	The audit program states the timing for the first independent audit as 30/08/2021 and at intervals of no greater than 3 years following. Noting that the actual date of the start of operation was the 20/10/2020. The date for the first audit was 13/11/2021, while the date for this audit was the 24/03/2025. SSD-8448-PA-41: Elgas request for extension of IEA 2024 to the 30/04/2025 lodged on the 19/11/2024 was approved.	Compliant	
C18b	the requirements for an Independent Audit Methodology and Independent Audit Report in the Independent Audit Post Approval Requirements (Department 2018).	IAPAR (2020) SSD-8448-PA-48	In accordance with SSD-8448-PA-48, this report complies with the audit methodology and report requirements stated in IAPAR 2020.	Compliant	
C19	In accordance with the specific requirements in the Independent Audit Post Approval Requirements (Department 2018), the Applicant must:		Non-compliant with C19(c).	Non-compliant	
C19a	review and respond to each Independent Audit Report prepared under Condition C18 of this consent;	Sovecles Nominees correspondence: LPG Facility 130 Cormorant Road, Kooragang NSW (SSD 8448): Independent Environmental Audit Report (26/11/2021)	The response to the audit report was provided to DPIE on the 26/11/2021 as attachment A.	Compliant	
C19b	submit the response to the Department; and	Sovecles Nominees correspondence: LPG Facility 130 Cormorant Road, Kooragang NSW (SSD 8448) Independent Environmental Audit Report (26/11/2021)	The response to the audit report was provided to DPIE on the 26/11/2021 as attachment A.	Compliant	
C19c	make each Independent Audit Report and response to it publicly available no later than 60 days after submission to the Department and notify the Department in writing at least 7 days before this is done.	https://www.elgas.com.au/elgas-knowledge-hub/elgas-updates/elgas-new-castle-site-data/ (accessed 31/03/2025)	The independent audit report (23/11/2021) is provided on the project website. The Department was not notified of publication.	Non-compliant	OA2_NC8: Ensure the Department is notified at least 7 days prior to making an Independent Audit Report public.

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
C20	Any condition of this consent that requires the carrying out of monitoring or an environmental audit, whether directly or by way of a plan, strategy or program, is taken to be a condition requiring monitoring or an environmental audit under Division 9.4 of Part 9 of the EP&A Act. This includes conditions in respect of incident notification, reporting and response, non-compliance notification and independent environmental auditing. <i>Note: For the purposes of this condition, as set out in the EP&A Act, "monitoring" is monitoring of the development to provide data on compliance with the consent or on the environmental impact of the development, and an "environmental audit" is a periodic or particular documented evaluation of the development to provide information on compliance with the consent or the environmental management or impact of the development</i>			Compliant	
C21	At least 48 hours before the commencement of construction until the completion of all works under this consent, the Applicant must:		Assess for Operations only.	Non-compliant	
C21a	make the following information and documents (as they are obtained or approved) publicly available:			Non-compliant	
C21a(i)	the documents referred to in Condition A2 of this consent and the final layout plans for the development;	https://www.elgas.com.au/elgas-knowledge-hub/elgas-updates/elgas-new-castle-site-data/ (accessed 31/03/2025)	EIS, architectural plans, modification applications uploaded. Response to submissions (A2(c)) have not been uploaded for the initial EIS.	Non-compliant	OA2_NC9: Ensure the Response to Submissions for the initial EIS and any modifications, as relevant, have been uploaded to the project website.
C21a(ii)	all current statutory approvals for the development;	https://www.elgas.com.au	Current consolidated consent and modification approvals.	Compliant	
C21a(iii)	all approved strategies, plans and programs required under the conditions of this consent;	https://www.elgas.com.au/elgas-knowledge-hub/elgas-updates/elgas-new-castle-site-data/ (accessed 31/03/2025) DPHI correspondence (Major	OEMP Rev 1.6 and subplans. Uploaded prior to 25/01/2025.	Compliant	
C21a(iv)	contact details to enquire about the development or to make a complaint;	https://www.elgas.com.au/elgas-knowledge-hub/elgas-updates/elgas-new-castle-site-data/ (accessed 31/03/2025)	Contact details provided.	Compliant	
C21av	the Compliance Reporting of the development;	https://www.elgas.com.au	All Compliance Reports are available.	Compliant	
C21a(vi)	audit reports prepared as part of any independent audit of the development and the Applicant's response to the recommendations in any audit report;	https://www.elgas.com.au	All Audit Reports are available.	Compliant	
C21a(vii)	any other matter required by the Planning Secretary; and			Not triggered	

CoC Number (ID)	Requirements	Evidence	Independent Audit Finding	Compliance Status	Non-compliance ID and Recommendation/Improvement Opportunity
C21b	keep such information up to date, to the satisfaction of the Planning Secretary.			Compliant	

Appendix E. Auditor Declaration

Independent Audit Declaration Form

Project Name: Elgas Kooragang LPG Facility

Consent Number: SSD 8448

Proponent: Elgas PTY LTD

Title of Audit: Independent Audit – Operations 2

Date: 12/05/2025

I declare that I have undertaken the Independent Audit and prepared the contents of the attached Independent Audit Report and to the best of my knowledge:

- i. the audit has been undertaken in accordance with relevant condition(s) of consent and the Independent Audit Compliance Requirements (Department 2019);
- ii. the findings of the audit are reported truthfully, accurately and completely;
- iii. I have exercised due diligence and professional judgement in conducting the audit;
- iv. I have acted professionally, objectively and in an unbiased manner;
- v. I am not related to any proponent, owner or operator of the project neither as an employer, business partner, employee, or by sharing a common employer, having a contractual arrangement outside the audit, or by relationship as spouse, partner, sibling, parent, or child;
- vi. I do not have any pecuniary interest in the audited project, including where there is a reasonable likelihood or expectation of financial gain or loss to me or spouse, partner, sibling, parent, or child;
- vii. neither I nor my employer have provided consultancy services for the audited project that were subject to this audit except as otherwise declared to the Department prior to the audit; and
- viii. I have not accepted, nor intend to accept any inducement, commission, gift or any other benefit (apart from payment for auditing services) from any proponent, owner or operator of the project, their employees or any interested party. I have not knowingly allowed, nor intend to allow my colleagues to do so.

Notes:

- a) Under section 10.6 of the *Environmental Planning and Assessment Act 1979* a person must not include false or misleading information (or provide information for inclusion in) in a report of monitoring data or an audit report produced to the Minister in connection with an audit if the person knows that the information is false or misleading in a material respect. The proponent of an approved project must not fail to include information in (or provide information for inclusion in) a report of monitoring data or an audit report produced to the Minister in connection with an audit if the person knows that the information is materially relevant to the monitoring or audit. The maximum penalty is, in the case of a corporation, \$1 million and for an individual, \$250,000; and
- b) *The Crimes Act 1900* contains other offences relating to false and misleading information: section 307B (giving false or misleading information – maximum penalty 2 years imprisonment or 200 penalty units, or both)

Name of Auditor: Chritine Louie, Lead Auditor - Arcadis



Signature:



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