

ADEQ

ARKANSAS
Department of Environmental Quality

Date: 1/12/07

Odell Haggans
Plant Superintendent
Airtherm
3333 N. Washington
Forrest City, Arkansas 72335

Re: ADEQ Pretreatment Compliance Assurance Visit (CAV) at Airtherm (ARP001019)

On 12/20/06 a CAV was conducted by ADEQ Pretreatment personnel to satisfy the requirements of our memorandum of agreement with EPA Region VI. This is intended to satisfy Pretreatment Program implementation procedures to: "randomly sample and analyze the effluent from [Airtherm] and to conduct surveillance activities in order to identify, independent of information supplied by [Airtherm] occasional and continuing noncompliance with pretreatment standards" [see 40 CFR 403.8(f)(2)(v)].

The site visit observations, sampling analysis and subsequent information gained indicated Airtherm is not compliant with the pretreatment standards under the National Pretreatment Standards in 40 CFR 403 for existing sources in 40 CFR 433 with **two (2) deficiencies noted:**

1) Under **40 CFR 403.12(g)(1)** [self monitoring reports] "Except in the case of Non-Significant Categorical Users, the reports required in paragraphs (b), (d), (e), and (h) of this section shall contain the results of sampling and analysis of the Discharge, including the **flow** and the nature and concentration...of pollutants contained therein which are limited by the applicable Pretreatment Standards..."

Sampling for compliance of the ancillary operation's [painting under 40 CFR 433.10(a)] wastewater is not being conducted and flows are not being separately reported. It has been agreed that the samples taken during this site visit (see comments below) will constitute part of Airtherm's next semi-annual report. Sampling of the powder coat paint booth troughs' wastewater must be conducted and submitted also. It is advised to analyze for all the toxic organics (except the pesticide fraction) from the table in 40 CFR 433.11(e) to verify your existing Toxic Organic Management Plan (TOMP) doesn't have to be modified.

This procedure (dual sampling) must be continued in the future. An alternative would be for Airtherm to plumb the powder paint curtains' wastewater to the outside trough, dump it on the same frequency as the "cleaning line" and sample the combination of both federally regulated streams as they're being discharged.

Flow data could not be produced during the site visit for either of the two separate regulated processes: the parts cleaning (phosphatizing) line nor the paint booth recycled water. Knowing

that both these operations' wastewater is batch discharged, reports should not only include the volume but the frequency (once/3 months? Once/6 weeks?) of discharge.

Recommendation: Without knowledge of the paints' constituents, it was advised the sludge from the troughs, be TCLP tested (see 40 CFR 261.24) to verify it does not exceed hazardous waste levels.

2) Under **403.12(b)(3)** "Description of operations. The User shall submit a brief description of the nature, average rate of production, and Standard Industrial Classification of the operation(s) carried out by such Industrial User. This description should include a schematic process diagram which indicates points of Discharge to the POTW from the regulated processes.

No schematic could be produced during the time of the inspection nor could one be located in this office's files. Attachment G is an overall rough drawing of your overall plant layout. While it is not current and did not include (this office took the liberty to "pencil in" discharge lines) the "points of discharge to the POTW (city) from the regulated processes, the submittal of a simplified diagram similar to this including the regulated wastewater lines and points of discharge will satisfy this deficiency.

Additional comments:

Attached to this report are the two (2) analytical results from ADEQ's lab as well as your contract lab's. The average of the two (parameter by parameter) will be acceptable for reporting for your next semi-annual report to Mr. Rufus Torrence. Hopefully, before that report time, sampling of your powder curtain troughs' wastewater can be obtained and included. And, an accurate measurement of flows (with discharge frequency) can be determined and submitted.

Also, please submit the MSDS for the new powder coat formulations currently being used.

Find attached various supporting documentation: the "Pretreatment Inspection Report"; ADEQ's and ESC's "Certificates of Analysis" with their Chains of Custody. The two analytical results (averaged) indicate your cleaning line (phosphatizing) is in compliance with the pretreatment standards in 40 CFR 433.

Please respond in writing within thirty (30) days of receipt of this report with corrective actions and any comments and/or inaccuracies contained within the attached inspection report.

This office wishes to extend its appreciation to you and your staff for the transparent exchange of information and dialogue during the visit. Your non-adversarial attitude, willingness to "open the books", sharing of process knowledge and cooperation compliments the true spirit of environmental partnerships.

ADEQ Pretreatment staff will continue the CAV procedure in the future at all federally/state regulated (categorical) facilities located in cities, such as Forrest City, without approved Pretreatment Programs.

If there are further questions or comments, please feel free to contact this office,

Sincerely,

A handwritten signature in cursive script that reads "Allen R. Gilliam".

Allen R. Gilliam

ADEQ State Pretreatment Coordinator
501.682.0625

cc: Dennis Benson, ADEQ NPDES Enforcement Branch Manager
David Scott, Mestek, Inc., 260 N. Elm Street, Westfield, MA 01085
Lee Bohme, EPA Region VI, 1445 Ross Ave, MC 6WQ-PP, Dallas, TX 75202-2733

Attachments

Pretreatment Industrial Inspection

Facility Information

Facility Name: Airtherm/Div. of Mestek, Inc.		Site Address: 3333 N. Washington	
		Forrest City, AR 72335	
Signatory Authority (Name & Title): <i>Odell Haggans - Plant Mgr.</i>		Mailing Address (if different): Same	
Phone: 870.633.5660			
Fax: 870.0699			
Address: Same		Corporate Owner Name and address (if applicable):	
		<i>Mestek, 260 N Elm Street</i>	
Phone: Same		<i>Westfield, MA</i>	
Fax: Same		Phone: <i>(413) 564-5751</i>	
Contact Person (Name & Title): <i>Bright Jumper</i>		Fax: <i>(413) 568-2969</i>	
<i>Odell Haggans</i>		Corporate CEO: <i>John Reed</i>	
e-mail: <i>jkgore@mestek.com</i>		e-mail: <i>(EHS) dscott@mestek.com - Dave Scott</i>	
Facility Permit # or ID# <i>ARP001019</i>		Last Inspection Date: <i>9/21/05</i>	
POTW (City) IU discharges to: <i>Forrest City WWTP</i>		POTW's NPDES # <i>AR0020087</i>	
Industrial Classification: <input checked="" type="checkbox"/> <i>Categorical</i>		<input type="checkbox"/> <i>Significant</i>	
If Categorical, list which CFR #(s) the facility is subject to: <i>Metal Finishing under 40 CFR 433</i>			
Table of Contents			
I. Summary of Inspection		Page	of
A. Inspection Objectives			
B. Inspection Analysis			
II. Pre-Inspection Meeting		Page	of
A. General Information			
B. Facility Permits			
C. Additional Comments			
III. Attachments "Yes" indicates item exists at the facility and attachments will be included			
"No" indicates item does not exist at the facility and attachments aren't necessary			
A. Industrial Processes		yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Page of
B. Pollution Prevention Activities		yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Page of
C. Pretreatment System		yes <input type="checkbox"/> no <input type="checkbox"/>	Page of
D. Chemical Storage		yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Page of
E. Spill/Slug Control Plan		yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Page of
F. Self-Monitoring/TOMP		yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Page of
Comments : <i>AFIN # 6200032 Haz. Waste Generator # ARD006320683 (N - not a generator [verified])</i>			
Inspector's Name (Print): <i>Allen Gilliam</i>		Signature: <i>Allen Gilliam</i>	
IU Rep's Name (Print): <i>ODELL HAGGANS</i>		Signature: <i>Odell Haggans</i>	
Date and Time Inspection Ended: <i>12/20/06 @ 1:00 pm</i>			

Pretreatment Industrial Inspection

Facility Information

Facility Name: Airtherm/Div. of Mestek, Inc.		Site Address: 3333 N. Washington	
		Forrest City, AR 72335	
Signatory Authority (Name & Title): Odell Haggans – Plant Superintendent			
Phone: 870.633.5660		Mailing Address (if different): Same	
Fax: 870.0699			
Address: Same		Corporate Owner Name and address (if applicable):	
		Mestek, Inc.; 260 N. Elm Street	
Phone: Same		Westfield, MA 01085	
Fax: Same		Phone: 413.564.5751	
Contact Person (Name & Title):		Fax: 413.568.2969	
Odell Haggans or Dwight Jumper -- EHS Manager		Corporate CEO: John Reed	
		Corporate EHS Director: David Scott	
e-mail: ohaggans@mestek.aom		e-mail: dscott@mestek.com	
Facility Permit # or ID# ARP001019		Last Inspection Date: 9/21/05	
POTW (City) IU discharges to: Forrest City WWTP		POTW's NPDES #AR0020087	
Industrial Classification:	<input checked="" type="checkbox"/> Categorical	<input type="checkbox"/> Significant	
If Categorical, list which CFR #(s) the facility is subject to: Metal Finishing under 40 CFR 433			
Table of Contents			
I. Summary of Inspection			Page 2
A. Inspection Objectives			
B. Inspection Analysis			
II. Pre-Inspection Meeting			Page 3 to 4
A. General Information			
B. Facility Permits			
C. Additional Comments			
III. Attachments	"Yes" indicates item exists at the facility and attachments will be included		
	"No" indicates item does not exist at the facility and attachments aren't necessary		
A. Industrial Processes	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Page	5
B. Pollution Prevention Activities	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Page	6
C. Pretreatment System (not necessary) <i>More process Info</i>	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Page	7
D. Chemical Storage	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Page	8
E. Spill/Slug Control Plan	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Page	9
F. Self-Monitoring/TOMP	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Page	10
Comments : AFIN # 6200032 Haz. Waste Generator # ARD006320683 (N – not a generator [verified])			
Inspector's Name (Print): Allen Gilliam		Signature: original signed	
IU Rep's Name (Print): Odell Haggans		Signature: original signed	
Date and Time Inspection Ended: 12/20/06 @ 1:00 p.m.			

I. Summary of Inspection			
A. Inspection and Objective (Complete Before Inspection)			
<input type="checkbox"/> Permit Renewal	<input checked="" type="checkbox"/> Annual	<input type="checkbox"/> Spill/Slug	<input type="checkbox"/> Unscheduled
<input type="checkbox"/> New Construction	<input type="checkbox"/> Noncompliance	<input type="checkbox"/> Follow-up	<input type="checkbox"/> Complaint
Inspection Objective(s) Annual Compliance Assurance Visit with sampling			
Checklist of items to be reviewed and/or visually inspected:			
<input checked="" type="checkbox"/> Pre-inspection Meeting	<input type="checkbox"/> Permit Conditions	<input type="checkbox"/> Safety Concerns	
<input checked="" type="checkbox"/> Process Inspection	<input type="checkbox"/> Pretreatment Process	<input checked="" type="checkbox"/> TOMP	
<input checked="" type="checkbox"/> Chemical Storage	<input checked="" type="checkbox"/> Discharge point(s)	<input checked="" type="checkbox"/> Spills/Slug Control Plan	
<input checked="" type="checkbox"/> Records Review	<input type="checkbox"/> RCRA information	<input checked="" type="checkbox"/> Process/Flow/Pretreatment Schematics	
<input checked="" type="checkbox"/> IU sampling procedures	<input type="checkbox"/> Flow/pH Meter(s)	<input type="checkbox"/> Calibration Records	
<input checked="" type="checkbox"/> MSDS Inventory List	<input checked="" type="checkbox"/> New MSDS (<i>need</i>)	<input type="checkbox"/>	
Comments:			
B. Inspection Analysis			
Were there any deficiencies/violations identified and noted during the inspection? <input checked="" type="checkbox"/> *Yes <input type="checkbox"/> No			
Provide a brief narrative of deficiencies/violations or other concerns in the following areas:			
Records Review: Could not locate MSDS on the various paints (6?) they are currently using and *flow estimates from their regulated processes could not be immediately produced.			
*Process Area(s): Sampling the discharge from the ancillary powder coat water curtain (recycled & then dumped ~every 3 months) will have to be addressed.			
Pretreatment System: N/A			
Self Monitoring Procedures: 3 (1- alkaline and 2 phosphatizing) of the 5 tanks in their parts cleaning line are batch discharged about every 6 weeks throughout the year with the 2 rinse tanks being discharged about once every 2 to 4 weeks. Facility reps indicated self-monitoring samples are taken when all 5 tanks are being dumped at the same time.			
*The powder coat paint booths' recycled "water curtain" sumps are dumped about every 3 months but is not being sampled as it is discharged to a separate drain into the city's sewer system.			
*A requirement will be made to sample this wastewater for compliance with 40 CFR 433 also twice/year.			
Diversion/Sewer Meters: N/A			
Spill/Slug Control Plan: Appears there is no potential for a slug discharge, therefore, no need for a plan. It appears there isn't a large enough quantity of toxic chemicals at the facility to pose any threat to the city's WW treatment plant if a slug was to be released. Process tanks are manually dumped periodically in a relatively small volume and their chemical storage areas seem to be adequately maintained with adequate containment & clean up procedures.			
Sampling Point: Adequate for the 5 stage phosphatizing line.			
*The facility will have to start sampling separately for the wastewater from the powder coating operations as it is being dumped.			
Chemical Storage: Drums are located on spill trays, paints are in powder form and stored next to powder coat operations and what little solvents they use for cleaning their spray guns, once spent, are stored in drums to ship off-site for proper recycle/disposal			

II. Pre-Inspection Meeting

A. General Information

Date and Time Inspection Started: 12/20/06 ~8:00 a.m.		SIC code(s): 3585 NAICS code: 333414	
IU Reps/Titles: Odell Haggans - Plant Superintendent; Dwight Jumper – EHS Manager		Control Authority Reps/Titles: Jim Beazley - Forrest City water & wastewater supt. invited but declined and was not present	
End product(s): Heating and A/C commercial units		Approx. # of units produced: ?	
Days of Operation: Monday thru Friday		Days of Production (if different):	
Hours of Operation: 7 a.m. to 3:30 p.m.		Hours of Production (if different):	
Shift 1, hrs.: 7 a.m. to 3:30 p.m.	Shift 2, hrs.: N/A to	Shift 3, hrs.: N/A to	
# of Employees: ~60	Peak Mos.: "continuous at this time"	"Off" Mos.: N/A	
Are there any scheduled plant shutdowns? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> If yes, when?			
Are there designated plant clean-up days? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> If yes, when?			
Is the facility currently in compliance with all pretreatment reporting requirements and limits? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
If No, explain: <i>As previously mentioned, the wastewater from an ancillary operation under CFR 433, the powder coat paint curtain wastewater had not been sampled for compliance with 40 CFR 433 limitations.</i>			
Are there any Special Entry Procedures for the Discharge/Sample point locations? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
If Yes, explain:			
Are there any Safety Concerns or Identified Hazards that the inspector should be aware of: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If Yes, explain: wear safety glasses			
Has there been any changes since the last inspection regarding the following items:			
Plant/flow/process layout? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, obtain copy of updated schematic for facility file. <i>Can't find one in file. Will have to request one per 40 CFR 403.12(b)</i>			
Processes? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, explain:			
Production Levels? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, explain:			
Raw materials? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, explain: <i>Facility reps indicated some paints have changed but no current MSDS could be produced.</i>			
Flow rates? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, explain			
Are regulated and non-regulated wastestreams combined? yes <input type="checkbox"/> no <input checked="" type="checkbox"/> <i>*(however, see comments regarding powder coat water curtain wastewater being periodically dumped directly to city's sewer system & not being sampled)</i>			
Prior to Pretreatment System? (<i>none required</i>)		yes <input type="checkbox"/>	no <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
If Yes, was the CWF used to calculate limits?		yes <input type="checkbox"/>	no <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
Prior to connection to the POTW sanitary sewer?		yes <input type="checkbox"/>	*no <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
At connection to sanitary sewer?		yes <input type="checkbox"/>	*no <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
Production and flows verified for Production-Based Standards?		yes <input type="checkbox"/>	no <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
What is the current avg. production rate and process flow? N/A			
Is the prod. rate or flow substantially different (+/- 20%) from those used in calculating limits? yes <input type="checkbox"/> no <input type="checkbox"/> N/A <input type="checkbox"/>			

Attachment A: Industrial Process(es)

List process(es) generating wastewater. Note if it's categorical (federally regulated w/pretreatment limits) or not			
1. 5 stage phosphatizing line	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	4. Sanitary	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
2. 2 powder coat water curtains	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	5.	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. 2 pressure test tanks	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	6.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Were processes visually inspected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>			
Brief description of process(es): 1. Typical 5 stage phosphatizing line – alkaline bath (heated)/city water rinse; heated phosphatizing (“paint lock”) bath/city water rinse (air agitated) followed by a final heated phosphatizing (sealant/rust inhibitor) bath. No countercurrent flows in use.			
2. Sheet metal HVAC metal “shells” are powder coated with overspray caught by a water curtain which is recycled and dumped about every 3 months. 6 different colors are used.			
3. Two small (less than 20 gallons?) trays are used for pressure testing heat exchangers and valves. They are rarely dumped and in this office’s opinion are insignificant regarding compliance sampling.			
Remaining operations are mainly stamping, “breaking” (mechanical folding) of sheet metal, machining and final assembly of HVAC system with no wastewater generated.			
General observations of facility’s indoor housekeeping: Clean and orderly			
General observations of area outside facility’s building: Very little debris nor storage of any material. There were some wooden pallets under cover and cardboard baled for recycle. Overall, clean surroundings with no evidence of unpermitted wastewater discharge.			
Check all sources of wastewater being discharged into the City’s collection system. Indicate avg. gal/day, measured (M) or estimated (E). If batch (B) discharged, list frequency and volume (1000 gal/month, e.g.). <i>Some days, there is no flow from any of the regulated processes.</i>			
<input checked="" type="checkbox"/> Process Rinse Overflows – continuous but, minimal when in use	<input type="checkbox"/> Equip. Cleanup	<input type="checkbox"/> Floor Cleanup Mainly done by regular dry floor sweeping	<input checked="" type="checkbox"/> Spent Bath Solutions B ~every 6 weeks No volume estimates could be given
<input type="checkbox"/> Product Cleaning	<input type="checkbox"/> Forklifts Maint./Wash	<input type="checkbox"/> Tank Dragout	<input type="checkbox"/> Air Pollution Devices
<input type="checkbox"/> Boiler Blowdown	<input checked="" type="checkbox"/> Spent Rinse Tanks: B ~every 6 weeks. No volume could be given.	<input type="checkbox"/> Equipment Coolants – sent off-site for disposal	<input type="checkbox"/> Non-Contact Cooling Water
<input type="checkbox"/> Stormwater	<input checked="" type="checkbox"/> Recycled powder coat paint booths’ troughs: B – no volume could be given	<input type="checkbox"/>	<input type="checkbox"/>
List Major Raw Materials and Chemicals used: Cold rolled sheet steel (20 to 14 gauge), 48” X 120”, ~40 to 50 % of it galvanized (not phosphatized nor painted), Fe phosphate, sodium hydroxide, outside manufactured copper tube, heat exchangers, powdered paint of 6 (?) varying colors, electric motors, wiring and other preassembled metal and plastic parts for completed HVAC units.			
Check Waste Stream Pollutants of Concern from Process(es)			
<input type="checkbox"/> BOD	<input type="checkbox"/> CN No CN used in process	<input checked="" type="checkbox"/> Metals (List): CFR 433 metals	<input checked="" type="checkbox"/> Solvents (List): Toxic Organics from CFR 433. IU has submitted a TOMP in lieu of testing. Visual observation during inspection indicated TTOs aren’t present in quantities of concern
<input type="checkbox"/> TSS	<input type="checkbox"/> Cl ₂	<input type="checkbox"/> pH	<input type="checkbox"/> O&G
Are there floor drains in the Process area? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes list number and the location of all floor drains:			
1 near phosphatizing line which if anything was flushed to it would be the same material as what the facility normally batch discharges. And, one where the powder coat spray paint booths water curtain’s wastewater is periodically discharged.			

Attachment B: Pollution Prevention (P2) / Recycling Activities

Does the facility have a written P2 Plan? Yes No

Does this facility practice P2? Yes No

Environmental Management System in place? Yes No

ISO Certified? Yes No

Written Standard Operating Procedures? Yes No

Explain: Operation of the phosphatizing line has written procedures for operator to determine when to add chemicals and dump baths & rinses

Preventative Maintenance Program Yes No (hydraulic systems, valves, pumps, etc)

Explain: Visual of valves and pipe fittings

Water Reuse: Yes No they "might look into it"

Explain: Discussions about counter current flow was mentioned as a way to save on water usage

Cost Accounting to Track Savings: Yes No

Explain:

Inventory Control / "Green Purchasing": Yes No (lean manufacturing/"env. friendly purchasing", etc)

Explain:

Employee Training: Yes No

Explain: IU has their chemical supplier train "operators" of the 5 stage phosphatizing operations – when to add chems. when to dump tanks, etc.

Spent Solvent Reclamation? Yes No

Explain:

Recycle Paper, Aluminum, Boxes, and Pallets? Yes No

Explain: They do recycle cardboard. Some of their wooden pallets are sent back to the suppliers.

Recycle Waste Oil, Solvents, and Lubricants? Yes No N/A

Explain: waste oil from air compressor and fork lifts and a small volume of solvent from paint gun cleaning buckets

Other Activities: N/A

P2 Equipment/Practices in use: *Very limited opportunities. The website "P2Rx" was given to facility reps for reference*

Overflow Alarms

Aqueous Cleaning Solutions

Fog Spray Rinsing

Countercurrent Rinsing

Dragout Collection Trays

Seal-Less Pumps

Air Jets to Blow Parts Dry

Secondary Containment of Process Solutions

Aqueous Paint Stripping Solutions

Bead Blasting to Remove Paint

Water Soluble Cutting Fluids

Recycle Overspray

In-Process Recycle (Ion Exchange, Reverse Osmosis)

Conductivity Meters

Dead Rinse Tanks

Bath / Rinse Filtration

Attachment C: Pretreatment System (pretreatment not necessary for this Fe Phosphatizer)

Are wastestreams segregated before pretreatment?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Are they pretreated prior to discharge to the sanitary sewer?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Was the pretreatment system visually inspected during this visit?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Check which of the following are utilized for pretreatment prior to discharge to sanitary sewer: N/A				
<input type="checkbox"/> Dissolved air floatation	<input type="checkbox"/> Membrane Tech.	<input type="checkbox"/> Ion Exchange	<input type="checkbox"/> Biological Treatment	
<input type="checkbox"/> Centrifugation	<input type="checkbox"/> Flow Equalization	<input type="checkbox"/> Ozonation	<input type="checkbox"/> Chlorinating	
<input type="checkbox"/> Chemical Precipitation	<input type="checkbox"/> Oil/Water Separation	<input type="checkbox"/> Reverse Osmosis	<input type="checkbox"/> Grit Removal	
<input type="checkbox"/> Sludge Filter Press	<input type="checkbox"/> Grease Trap	<input type="checkbox"/> Screen	<input type="checkbox"/> Solvent Separation	
<input type="checkbox"/> pH Adjustment	<input type="checkbox"/> Sand Trap	<input type="checkbox"/> Sedimentation	<input type="checkbox"/> Silver Recovery	
<input type="checkbox"/> Belt/Disk Oil Skimmer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Provide Brief Description of Pretreatment System (leaks, cleanliness, equipment not in working order): <i>none necessary</i>				
Does the description match the schematic currently on file?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
System Operator(s) Name: N/A				
Does discharge permit require licensed operator?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
Is the System Operator(s) licensed by the State of Arkansas (per Reg. # 3?)		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
List Name(s) and License classification of process "operator(s)": Terry Gardner; James Fingers and William McKissick				
Is the discharge from the Pretreatment Process System?		<input type="checkbox"/> Batch	<input type="checkbox"/> Continuous	<input checked="" type="checkbox"/> Combination (<i>mainly batch</i>)
If any discharges are batch type or combination, describe the following:				
1) Volume of each batch (phos): approximately 1000+ gallons (?) per ~ every 6 weeks				
2) Volume of each batch (water curtain): (no estimate could be given) gallons per ~ every 3 months				
Describe process from which batch originated (spent bath, e.g.): 1) 5 stage phosphatizing and 2) recycled water curtain wastewater from powder coat operations. The recycled trough wastewater is batch dumped ~every 3 months.				
Approximate duration of batch discharge: <i>approximately 45 minutes to drain all five tanks from 5 stage phosphatizing. No estimates given on time it takes to dump the water curtain troughs.</i>				
Meter Type	Calibration Procedure and Frequency	Comments (Totalizer Reading)		
N/A	Simple cubic feet measurements of tank volumes converted to gallons			

Attachment D: Chemical Storage Area(s)

Does the facility have a designated chemical storage area(s)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Was this area(s) visually inspected? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Describe Chemical Storage Area(s)	Are there floor drains in this area?	If yes, where does this drain lead to?
1. Drums located across aisle way from phosphatizing operation but, are resting on spill trays.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Pretreatment <input checked="" type="checkbox"/> Sanitary Sewer <input type="checkbox"/> Storm Sewer
2. Powdered paints are stored in room adjacent to the painting stations.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Pretreatment <input checked="" type="checkbox"/> Sanitary Sewer <input type="checkbox"/> Storm Sewer
3. Solvent (small volume) for paint guns are kept in a 5 gallon bucket near painting operations	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Pretreatment <input checked="" type="checkbox"/> Sanitary Sewer <input type="checkbox"/> Storm Sewer
4.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Pretreatment <input type="checkbox"/> Sanitary Sewer <input type="checkbox"/> Storm Sewer
Does the Chemical Storage Area(s) contain any of the following?		
<input type="checkbox"/> Dikes, Berms for Containment	<input type="checkbox"/> Plugs for Floor Drains	
<input type="checkbox"/> Secondary Tanks for Holding	<input type="checkbox"/> Premix (low) Concentrations	
<input type="checkbox"/> Alarms	<input type="checkbox"/> Chain restraints, limited access	
<input checked="" type="checkbox"/> Spills Control Kits for Cleanup ("floor dry")	<input type="checkbox"/> Notification Procedures	
<input type="checkbox"/> Chemical desegregation within Storage Area	<input checked="" type="checkbox"/> Other "spill trays" under drums	
Chemical Inventory List (MSDS) on file?		<input checked="" type="checkbox"/> Yes & <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Were any new MSDS reviewed during the Inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A		
If yes, list below: <i>Current powder coat paints MSDSs could not be located during site visit.</i>		
MSDS on chems used in the phosphatizing operation were provided and are attached.		
Chemical storage comments: Adequate, no comment		
Chemical handling procedures (totes, dolly, buckets, hardline, etc): chemicals are stored in close proximity to where they are actually going to be used. They're typically siphoned from a drum into a 5 gallon container for transfer to process tanks. The alkaline cleaning powder is simply scooped in pre-determined quantities from their box containers.		

Attachment E: Spill/Slug Control Plan ("visual" during site visit determined "plan" not necessary)

Does the facility have a Spill/Slug control plan?	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
If yes are the following: 403.8(f)(2)(v)(A-D) requirements in place?	
Is the spill/slug control plan <2 years old?	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> N/A
(A) Describes discharge practices including non routine batch (slug) discharges	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> N/A
(B) Describes storage and handling of chemicals	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> N/A
(C) Procedures for immediate notification to POTW of slug discharges	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> N/A
(D) 1. Describes measures for controlling toxic/hazardous pollutants	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> N/A
2. Describes procedures and equipment for emergency response	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> N/A
3. Describes follow-up to limit damage suffered by POTW or environment	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> N/A
4. Does the facility have Spill/Slug Notification Procedures posted?	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> N/A
5. Are worker personnel provided training in the event of a spill or slug discharge?	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> N/A
If no:	
Does the facility have Spill/Slug Notification Procedures posted?	<input type="checkbox"/> yes <input type="checkbox"/> no ?
Is it posted in areas where chemicals are used and stored?	<input type="checkbox"/> yes <input type="checkbox"/> no ?
If Yes how many?	
Are appropriate personnel provided training in the event of a spill or slug discharge?	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no
Have there been any non-routine, episodic discharges or chemical spills in the past year?	<input type="checkbox"/> yes <input checked="" type="checkbox"/> *no
(Briefly Describe, Include Dates): *Periodic batch discharging is facility's normal discharge procedures and there have been no reports from city regarding adverse effects at their POTW.	
Was the City notified of these occurrences? <input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> N/A	

Visual Inspection of Discharge Lines/Points

Provide description of manhole condition and flow channel of the following where applicable:

See Attachment G for rough example floor layout:

Sampling / Monitoring Point: Centrally located ~2" drain hole in center of clean stainless steel trough on the outside wall of the 5 stage phosphatizing line. Trough is covered when there is no sampling taking place. All 5 tanks are plumbed into this one trough via 2" pipes. There didn't appear to be any significant solids build-up.

Monitoring for the recycled water curtain (behind the powder coat operations) wastewater will have to be at its 2" drain line prior to discharge into drain grate in floor. This will have to be conducted during its periodic dump when determined it's "spent"

Total Process Flow Monitoring Points: All 5 tanks in phosphatizing line are dumped at the same time during sampling and volumes are calculated using simple conversion of cubic feet to gallons per dump.

Similar calculations will have to be conducted for the troughs containing the recycled water curtains' volume.

Upstream Manhole: N/A

Point of Connection: N/A

Attachment F: Self-Monitoring & if CFR 433, TTO/TOMP Requirements

Have Operator (or person collecting the sample) to describe how composite and grab samples are collected and preserved. Record descriptions. Include name of individual and title.

Contract lab person manually grabs a series of samples during the ~45 minute "dump" of the 5 stage phosphatizing operation. He/she then composites the grabs for one composite sample.

During this site visit, all 5 tanks were opened to fill outside trough, and 1 grab and 1 duplicate was taken along with a grab sample for their contract lab – ESC. This was not a true split but samples were taken less than 2 minutes apart. Trough was thoroughly mixed and this inspector felt the grabs were homogeneous and representative.

It was discovered only after sampling and further walk-through of the plant that the powder coat water curtain also has a discharge point into a floor drain which is connected to the city's collection system.

Where is the sample point located?

<input checked="" type="checkbox"/> End of Process	<input type="checkbox"/> Pretreatment Effluent	<input type="checkbox"/> Total Flow
<input type="checkbox"/> Combined Flow	<input type="checkbox"/> Metered Flow	<input type="checkbox"/> Flow Actuator
<input type="checkbox"/> Private Manhole	<input type="checkbox"/> Utility Manhole	<input type="checkbox"/> Advance Notice Required
<input type="checkbox"/> Safety Hazards Identified	<input type="checkbox"/>	<input type="checkbox"/>

Is the Sample Collection Site Adequate? Yes No N/A

Does the facility rep. request a split sample on this sampling/inspection?
(this visit's sampling was not a true split as three [3] separate containers were used to collect grab samples less than 2 minutes apart.) Yes No

Does the facility perform self-monitoring tests in-house? Yes No N/A

If no, record the name and address of Contract Lab: Environmental Services Company, Inc. / 13715 West Markham / Little Rock, Arkansas 72211 (Debra Woosley - contact)

Automatic Sampler or Manual

IU Self-Monitoring Results reviewed: Yes No N/A

Is the Contract Lab certified by ADEQ for test parameters? Yes No N/A

Dates and Times of Sample Analysis Recorded? Yes No N/A

Correct Methods Used for Test Analysis (Refer To 40CFR Part 136) Yes No N/A

EPA recommended holding times being met (Refer to 40CFR Part 136) Yes No N/A

Chain of Custody Records for Self-Monitoring Samples Reviewed Yes No N/A

Were correct Sample Types Collected Yes No N/A

Dates and times of Sample Collection Recorded? Yes No N/A

Were Samples preserved correctly (refer to 40CFR Part 136) Yes No N/A

Were Self Monitoring records on file for past 3 years? Yes No N/A

List the parameters the facility monitors and the frequency:

<input checked="" type="checkbox"/> Cd(t)	<input checked="" type="checkbox"/> Cu(t)	<input checked="" type="checkbox"/> Cr(t)	<input checked="" type="checkbox"/> Ni(t)	<input checked="" type="checkbox"/> Pb(t)
<input checked="" type="checkbox"/> Ag(t)	<input checked="" type="checkbox"/> Zn(t)	<input type="checkbox"/> pH	<input type="checkbox"/> CN ^(t) (not on site, nor tested for this visit)	<input type="checkbox"/> CN ^(a-c) (not on site, nor tested)
<input type="checkbox"/> TTO-Vol (TOMP submitted)	<input type="checkbox"/> TTO-B/N (TOMP)	<input type="checkbox"/> TTO-A.E. (TOMP)	<input type="checkbox"/> TTO-Pest (TOMP)	<input type="checkbox"/> Cr(hex)

Toxic Organic Management Plan (TOMP) for Metal Finishers under CFR 433

How does the IU report TTO? Analysis Certification Statement

Does the facility have a Toxic Organic Management Plan? Yes No N/A

If yes. Does the plan show how toxic organics are used, stored, and disposed? Yes No N/A

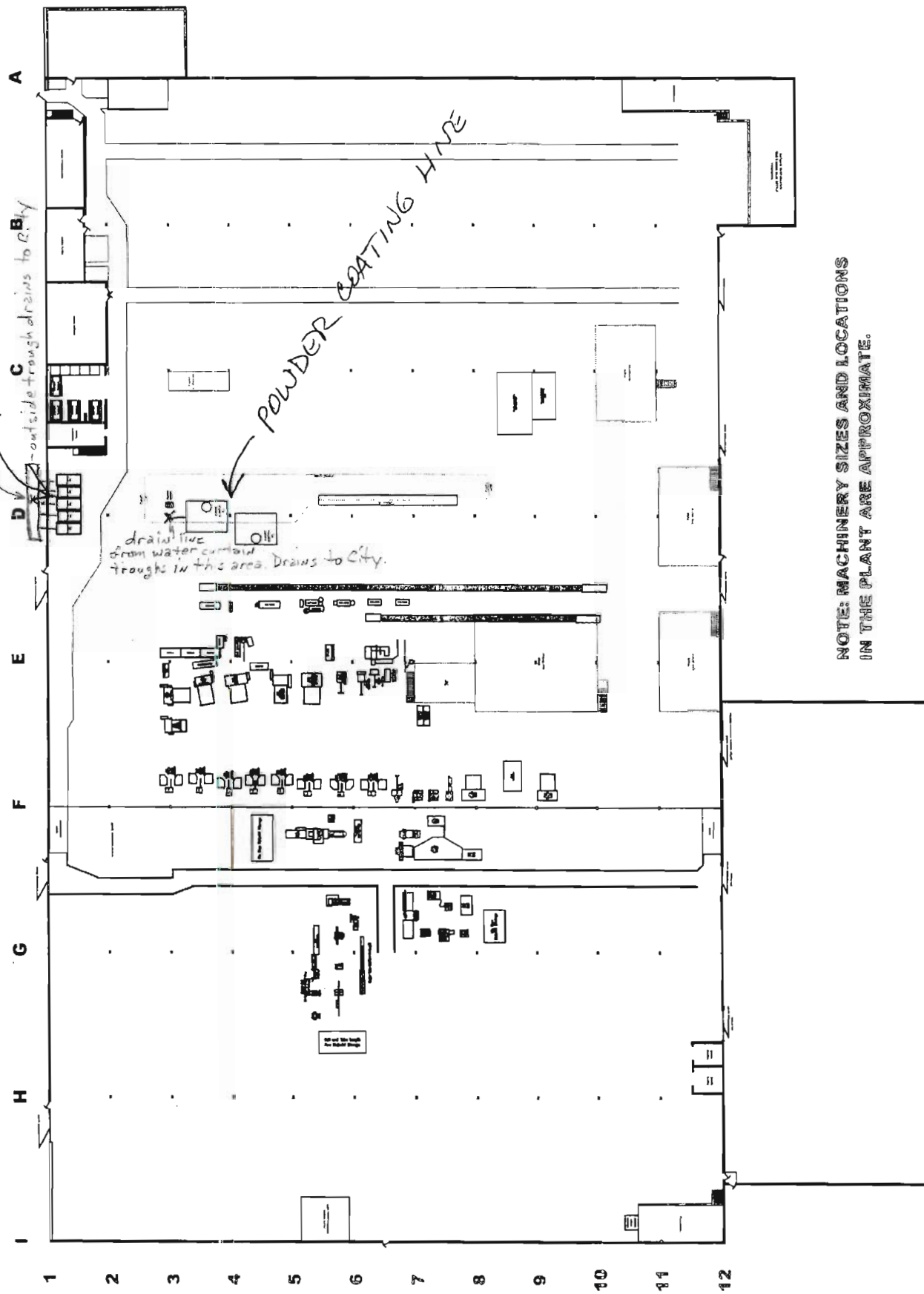
List the date of the last revision to the TOMP: 3/29/06

Is the TOMP being followed as written? Yes No N/A (If no, provide explanation in comments.) TOMP does state every 5 years, another TTO scan will be performed.

Attachment G

AIRTHERM LLC PLANT FORREST CITY, AR

PARTS CLEANING SYSTEM



NOTE: MACHINERY SIZES AND LOCATIONS IN THE PLANT ARE APPROXIMATE.

Environmental Services Company, Inc.

Corporate Office
 13715 West Markham
 Little Rock, AR 72211
 Tel. (501)221-2565 Fax (501)221-1341

Northwest Arkansas Branch
 1107 Century Avenue
 Springdale, AR 72762
 Tel. (501)750-1170 Fax (501)750-1172

Control Number: 0612010411
 Customer Name : AIRTHERM PRODUCTS, INC. (SPECIAL)
 Customer Number : 2091
 Report Date : 01/05/07

Sample Date : 12/20/06
 Sample Time : 1106
 Sample Type : GRAB PROCESS WATER
 Sample From : OUTSIDE TROUGH

Collected By: ALLEN GILLIAM
 Delivery By : JOYCE BROWN
 Work Order :
 Purchase Order :

Laboratory Analysis

Analysis		Laboratory Analysis		Quality Assurance				
Date	Time By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Accuracy % Recovery
01/02	1128 BGW	Chromium	0.08000 mg/L			EPA 200.7	0.00	101.5 *
01/02	1128 BGW	Nickel	0.1570 mg/L			EPA 200.7	1.01	99.2 *
01/02	1128 BGW	Copper	0.8560 mg/L			EPA 200.7	1.77	104.9 *
01/02	1128 BGW	Zinc	0.9990 mg/L			EPA 200.7	2.93	83.6 *
01/03	1128 BGW	Silver	0.0010 mg/L			EPA 200.7	1.82	109.9 *
01/02	1128 BGW	Cadmium	0.0040 mg/L			EPA 200.7	0.21	96.6 *
01/02	1128 BGW	Lead	< 0.0100 mg/L			EPA 200.7	0.97	103.5 *

* QA data shown is from a different sample or standard on the same date.

All equipment used is checked and/or calibrated daily. All testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

Signature Neil P. Ryan
 Environmental Services Co., Inc.



Environmental Services Company, Inc.
 Corporate Office
 13715 West Markham P.O. Box 55146
 Little Rock, AR 72211 Little Rock, AR 72215
 website: www.eslabs.com

Environmental Services Company, Inc.
 Northwest Branch
 1107 Century
 Springdale, AR 72764

CHAIN OF CUSTODY

Phone 479-750-1170 Fax: 479-750-1172

Client Information				Project Information				Requested Parameters					
Company Name: <u>Air thorn</u>		Permit/Project #: <u>AD552 N/A</u>		Purchase Order #:		Work Order #		Sampler Name(s): <u>Allen Gilliam</u>		and Signature(s): <u>Allen Gilliam</u>		Requested Parameters	
Address: <u>3333 N. Washington Forrest City, AR</u>		Telephone: <u>870.633.5660</u>		FAX:		Contact: <u>Odell Haggans</u>		ESC Client Number: <u>2091</u>					
Sample Identification		Sample Collection		Sample Containers		Custody Seals:		Intact?		Special		Units	
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative #	Used?	Intact?	Regular	Special	Units
<u>IL's waste water from outside trough cells "process" tanks discharging into it.)</u>	<u>0612010411</u>	<u>12/20/06</u>	<u>11:06 AM</u>	<u>Corzob</u>	<u>Water (process w.w.)</u>	<u>plastic</u>	<u>1 liter</u>	<u>Nitric</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Relinquished By: (Signature and Printed Name) <u>Allen Gilliam</u>	Received By: (Signature and Printed Name) <u>Jayla Brown</u>	Date <u>12/21/06</u>	Time <u>9:04 AM</u>	Date <u>12/21/06</u>	Time <u>9:04</u>	Date <u>12/21/06</u>		Time <u>13:00</u>	Date <u>12-21-06</u>		Time <u>13:00</u>		Analyst <u>Allen Gilliam</u>
Relinquished By: (Signature and Printed Name) <u>Allen Gilliam</u>	Received By: (Signature and Printed Name) <u>Jayla Brown</u>	Date <u>12/21/06</u>	Time <u>13:00</u>	Date <u>12/21/06</u>	Time <u>13:00</u>	Date <u>12-21-06</u>		Time <u>13:00</u>	Date <u>12-21-06</u>		Time <u>13:00</u>		Analyst <u>Allen Gilliam</u>
Comments: <u>Email results to Allen Gilliam as soon as they are finished gilliam@adeq.state.ar.us</u>													
Cool all samples to 4 degrees C with ice.													
pH: _____													
Temp.: _____ °C _____ °F													
DO: _____													
Debris: _____													
Chlorinated? Y N													
Fecal Start: _____													
This Document is Page ___ of ___													

Company Name

Company Address
Phone: Fax:

- CERTIFICATE OF ANALYSIS -

Attn:

Phone:
FAX:

Ext:

Our Lab#: 2006-3318

Your Sample ID: Airtherm Inc Wastewater

Sample Type:

Report Date: 04-Jan-07

ICP/MS-T

Aluminum	<	2000	µg/L	1/2/2007
Antimony	<	1000	µg/L	1/2/2007
Arsenic	<	250	µg/L	1/2/2007
Barium	<	1000	µg/L	1/2/2007
Beryllium	<	50.0	µg/L	1/2/2007
Boron	<	2500	µg/L	1/2/2007
Cadmium	<	100	µg/L	1/2/2007
Calcium		42.0	mg/L	1/2/2007
Chromium	<	100	µg/L	1/2/2007
Cobalt	<	250	µg/L	1/2/2007
Copper		917	µg/L	1/2/2007
Iron	<	10000	µg/L	1/2/2007
Lead	<	100	µg/L	1/2/2007
Magnesium		24.4	mg/L	1/2/2007
Manganese		184	µg/L	1/2/2007
Nickel	<	250	µg/L	1/2/2007
Potassium		5.72	mg/L	1/2/2007
Selenium	<	500	µg/L	1/2/2007
Silicon Dioxide		321	mg/L	1/2/2007
Silver	<	500	µg/L	1/2/2007
Sodium		4490	mg/L	1/2/2007
Thallium	<	250	µg/L	1/2/2007
Vanadium	<	250	µg/L	1/2/2007
Zinc		1470	µg/L	1/2/2007

