ADEQ

ARKANSAS
Department of Environmental Quality

NPDES PERMIT FILE
NPDES # ARP001058
AFIN # 52-00230
Permit PN
✓ Correspondence
Technical Backup
8/20/08 Date Scanned

August 19, 2008

Tracey Payne, General Mgr
B & M Painting
347 Van Buren
Camden, AR 71701

Attention: Denver Ezell, Chemical Mgr

Re: State Pretreatment Reporting Requirements
(Permit No. ARP001058 AFIN 52-00230)

Dear Mr. Ezell:

In reference to B&M Painting (BMP) Baseline Monitoring Report (BMR) dated July 9, 2008, BMP is not required at this time to have an ADEQ indirect discharge permit prior to commencing discharge to the City of Camden Publicly Owned Treatment Works [POTW--local municipal sewer system]; nonetheless, the City of Camden may require a local permit. However, BMP is required to demonstrate compliance with federal and state laws by submitting reports to ADEQ. I have reviewed the BMR and decided that it is acceptable.

Nonetheless, industrial users with processes regulated by categorical pretreatment standards [40CFR433, et al] whose discharge enters, can enter or will enter a POTW (local municipal sewer system) must continue to submit **40CFR403.12** reports to the Control Authority [ADEQ]. BMP next semi-annual report is due in December 2008 before 4:30 pm on December 31, 2008.

I performed my bi-annual inspection of BMP facility on August 13, 2008; a copy of my report is attached. BMP provides anodizing, chemical conversion/phosphate coating for machined parts used in the military and aerospace industry. All parts are made and machined elsewhere and delivered to BMP for coating and painting. During the inspection BMP inquired about a TOMP. In reference to my letter dated February 19, 2008 to Brian McCasland find:

> *BMP is required to submit semi-annual reports which are due in June and Decmeber of every year to demonstrate continued compliance with pretreatment standards per **§§ 433.12(a)** and **433.17.***
>
> 1. *BMP may submit a Toxic Organic Management Plan (TOMP) in lieu of testing for TTOs which are not reasonably expected to be present in the discharge. The TOMP has essentially two parts (SMP & Certification):*
>
>   a. *The Solvent Management Plan (SMP) describes how BMP will control TTOs and need be submitted only once and updated if necessary.*
>
>   b. *The Certification must be submitted with each semi-annual report.*

c. *Any TTO appearing on the analyses attached to the BMR or appearing on the MSDS must be tested for concentration in the discharge at least twice each year and the analyses must be submitted with each semi-annual report.*

BMP may submit a TOMP which certifies that these parameters can not enter the sewer; testing will not be required.

Appendices B (TTOs) & D (TOMP) in EPA Guidance Manual for Implementing Total Toxic Organics (TTO) Pretreatment Standards provide instructions for developing a TOMP. These appendices may be helpful if BMP elects to submit a TOMP. The entire manual may be viewed on the internet; the web site is

http://www.epa.gov/npdes/pubs/owm0021.pdf

Note that BMP must sample for Cyanide, Cadmium, Chromium, Copper, Lead, Nickel, Silver and Zinc for every semi-annual report submitted to ADEQ; please be sure methods are indicated on lab reports. If BMP samples for TTOs at the request of the City of Camden, then BMP must submit these results to ADEQ, too.

If BMP or an authorized representative has questions or needs more information, please contact ADEQ NPDES Pretreatment at 682-0626.

Sincerely,

Rufus J. Torrence, ADEQ NPDES Engineer

Encl: Pretreatment Industrial Facility Information

cc: Eric Flemings, ADEQ Inspection Mgr.

David Richardson, Asst Mgr (w/encl)
Camden Water Utilities
P O Drawer J
Camden, AR 71711

Pretreatment Industrial Inspection
Facility Information

Facility Name:	Site Address:
B&M Military & Aerospace Coating, Inc (aka B & M Painting)	**347 Van Buren Camden, AR 71701**
Signatory Authority (Name & Title): **Tracy Payne, General Manager**	
Phone: **(870) 836-3388**	Mailing Address (if different): **(Same)**
Fax:	
Address: **347 Van Buren**	Corporate Owner Name and address (if applicable):
Camden, AR 71701	**(Not Applicable)**
Phone: **(Same)**	
Fax:	Phone: **(Not Applicable)**
Contact Person (Name & Title):	Fax: **(Not Applicable)**
Derek McCasland	Corporate CEO: **(Not Applicable)**
e-mail: **derek_mccasland@hotmail.com**	e-mail: **(Not Applicable)**
Facility Permit # or **ARP001058**	Last Inspection Date: **(Not Applicable)**
POTW (City) IU discharges to: **Camden Water Utilities**	POTW's NPDES #**AR0022365**
Industrial Classification: ☒ Categorical **40 CFR 433**	☐ Significant
If Categorical, list which CFR #(s) the facility is subject to:	

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Comments :

Inspector's Name (Print): **Rufus Torrence**	Signature:
IU Rep's Name (Print) **Derek McCasland**	Signature: **(Not Required)**
Date and Time Inspection Ended: **August 13, 2008 @ 12:55 pm**	

I. Summary of Inspection

A. Inspection and Objective (Complete Before Inspection)

☐ Permit Renewal	☒ Bi-Annual	☐ Spill/Slug	☐ Unscheduled
☐ New Construction	☐ Noncompliance	☐ Follow-up	☐ Complaint

Inspection Objective(s) **Compliance Assurance**

Checklist of items to be reviewed and/or visually inspected:

☒ Pre-inspection Meeting	☐ Permit Conditions	☐ Safety Concerns
☒ Process Inspection	☒ Petreatment Process	☒ TOMP ***(Guidance on Preparation)***
☒ Chemical Storage	☒ Discharge point(s)	☐ Spills/Slug Control Plan
☐ Records Review	☐ RCRA information	☐ Process/Flow/Pretreatment Schematics
☐ IU sampling procedures	☒ Flow/pH Meter(s)	☐ Calibration Records
☐ MSDS Inventory List	☐ New MSDS	☐

Comments:

B. Inspection Analysis

Were there any deficiencies/violations identified and noted during the inspection? ☐ Yes ☒ No

Provide a brief narrative of deficiencies/violations or other concerns in the following areas:

Records Review

Process Area(s)

Pretreatment System

Self Monitoring Procedures

Diversion/Sewer Meters

Spill/Slug Control Plan

Sampling Point

Chemical Storage

II. Pre-Inspection Meeting

A. General Information

Date and Time Inspection Started: **August 13, 2008 @ 9:45 am**	SIC code(s): **3471 & 3479**
IU Reps/Titles	Control Authority Reps/Titles
Derek McCasland, Lab Tech	**Rufus Torrence, Inspector/Engineer**
Tracy Payne, General Manager	
End product(s): **Painted Military/Aerospace Parts (Mfr Elsewhere)**	Approx. # of units produced: **(N/A)**
Days of Operation: **Monday thru Friday**	Days of Production (if different):
Hours of Operation: **7:30 am to 6:00 pm**	Hours of Production (if different):

Shift 1, hrs.: **7:30 am** to **6:00 pm**	Shift 2, hrs.: to	Shift 3, hrs.: to
# of Employees: **40**	Peak Mos.:	"Off" Mos.:

Are there any scheduled plant shutdowns? Yes ☐ No ☐ N/A ☒ If yes, when?

Are there designated plant clean-up days? Yes ☐ No ☐ N/A ☒ If yes, when?

Is the facility currently in compliance with all pretreatment reporting requirements and limits? Yes ☒ No ☐

If No, explain:

Are there any Special Entry Procedures for the Discharge/Sample point locations? Yes ☐ No ☒

If Yes, explain:

Are there any Safety Concerns or Identified Hazards that the inspector should be aware of: ☐ Yes. ☐ No

If Yes, explain:

Has there been any changes since the last inspection regarding the following items: **(Not Applicable)**

Plant/flow/process layout? Yes ☐ No ☐ If yes, obtain copy of updated schematic for facility file.

Processes? Yes ☐ No ☐ If yes, explain: **(Not Applicable)**

Production Levels? Yes ☐ No ☐ If yes, explain: **(Not Applicable)**

Raw materials? Yes ☐ No ☐ If yes, explain: **(Not Applicable)**

Flow rates? Yes ☐ No ☐ If yes, explain **(Not Applicable)**

Are regulated and non-regulated wastestreams combined?	yes ☐	no ☒	
Prior to Pretreatment System?	yes ☐	no ☒	N/A ☐
If Yes, was the CWF used to calculate limits?	yes ☐	no ☐	
Prior to connection to the POTW sanitary sewer?	yes ☐	no ☒	N/A ☐
At connection to sanitary sewer?	yes ☐	no ☒	N/A ☐
Production and flows verified for Production-Based Standards?	yes ☐	no ☐	N/A ☒

What is the current avg. production rate and process flow? **(Not Applicable)**

Is the prod. rate or flow substantially different (+/- 20%) from those used in calculating limits? yes ☐ no ☐

(Not Applicable)

B. Facility Permits		
Permit Type	Permit No.	Expiration Date
Air		
RCRA		
NPDES		
Other **City Permit**	**CWU-001-2000**	**August 2008**

C. Additional Comments
(Note which section or attachment comments are regarding)

Attachment A: Industrial Process(es)

List process(es) generating wastewater. Note if it's categorical (federally regulated w/pretreatment limits) or not

1. **Anodizing**	Yes ☒ No ☐	4.	Yes ☐ No ☐
2. **Chemical Conversion Coating**	Yes ☒ No ☐	5.	Yes ☐ No ☐
3. **Phosphating**	Yes ☒ No ☐	6.	Yes ☐ No ☐

Were processes visually inspected? Yes ☐ No ☐ N/A ☐

Brief description of process(es):

B&M provides anodizing, chemical conversion coatings, priming and topcoating for machined parts used in the military and aerospace industry. The parts are made and machined elsewhere and delivered to B&M for coating and painting.

General observations of facility's indoor housekeeping: **Excellent**

General observations of area outside facility's building: **Good**

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.).

☒ Process Rinse Overflows	☐ Equip. Cleanup	☐ Floor Cleanup	☐ Spent Bath Solutions
☐ Product Cleaning	☐ Forklifts Maint./Wash	☐ Tank Dragout	☐ Air Pollution Devices
☐ Boiler Blowdown	☐ Spent Rinse Tanks	☐ Equipment Coolants	☐ Non-Contact Cooling Water
☐ Stormwater	☐	☐	☐

List Major Raw Materials and Chemicals used:

Check Waste Stream Pollutants of Concern from Process(es)

☐ BOD	☒ CN^-	☒ Metals (List) **Cd, Cu, Cr, Pb, Ni, Ag & Zn**	☐ Solvents (List)
☐ TSS	☐ Cl_2		
☐ O&G	☐ S^-		
☐ pH	☐		

Are there floor drains in the Process area? ☐ Yes ☒ No If yes list number and the location of all floor drains:

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:		
Preventative Maintenance Program	Yes ☒	No ☐ (hydraulic systems, valves, pumps, etc)
Explain:		
Water Reuse:	Yes ☐	No ☒
Explain:		
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:		
Spent Solvent Reclamation?	Yes ☐	No ☒ **(Not Applicable)**
Explain:		
Recycle Paper, Aluminum, Boxes, and Pallets?	Yes ☐	No ☒
Explain:		
Recycle Waste Oil, Solvents, and Lubricants?	Yes ☐	No ☒
Explain:		
Other Activities		
P2 Equipment/Practices in use:		

☐ 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

Are wastestreams segregated before pretreatment?	☒ Yes	☐ No	☐ N/A
Are they pretreated prior to discharge to the sanitary sewer?	☐ Yes	☐ No	☐ N/A
Was the pretreatment system visually inspected during this visit?	☐ Yes	☐ No	☐ N/A

Check which of the following are utilized for pretreatment prior to discharge to sanitary sewer:

☐ Dissolved air floatation	☐ Membrane Tech.	☒ Ion Exchange	☐ Biological Treatment
☐ Centrifugation	☐ Flow Equalization	☐ Ozonation	☐ Chlorinating
☒ Chemical Precipitation	☐ Oil/Water Separation	☐ Reverse Osmosis	☐ Grit Removal
☒ Sludge Filter Press	☐ Grease Trap	☐ Screen	☐ Solvent Separation
☒ pH Adjustment	☐ Sand Trap	☐ Sedimentation	☐ Silver Recovery
☐ Belt/Disk Oil Skimmer	☐	☐	☐

Provide Brief Description of Pretreatment System (leaks, cleanliness, equipment not in working order):

Pretreatment system is a 1500 gallon collection/storage tank; wastewater is pumped from the collection/storage tank to a 4500 gallon batch tank where Cr is reduced and metals precipitated and settled. Treated wastewater is pumped to a third tank to hold before being released to the POTW. All three tanks are surrounded by a concete berm. Equipment appeared clean and in working order.

Does the description match the schematic currently on file? ☒ Yes ☐ No ☐ N/A

System Operator(s) Name: **Derek McCasland**

Does discharge permit require licensed operator?	☐ Yes	☐ No	☒ N/A
Is the System Operator(s) licensed by the State of Arkansas (per Reg. # 3?)	☐ Yes	☐ No	☒ N/A

List Name(s) and License classification:

(Not Applicable)

Is training provided to the Pretreatment System Operator(s)? ☐ Yes ☐ No ☒ N/A

If Yes, list type and frequency:

Is the discharge from the Pretreatment System? ☒ Batch ☐ Continuous ☐ Combination

If any discharges are batch type or combination, describe the following:

Volume of each batch: **4500** gallons per **Quarter**

Describe process from which batch originated (spent bath, e.g.):

Anodizing, Chemical Conversion & Phosphating

Approximate duration of batch discharge:

Meter Type	Calibration Procedure and Frequency	Comments (Totalizer Reading)
Totalizer		

Attachment D: Chemical Storage Area(s)

Does the facility have a designated chemical storage area(s)?	☒ Yes	☐ No
Was this area(s) visually inspected?	☒ Yes	☐ No ☐ N/A

Describe Chemical Storage Area(s)	Are there floor drains in this area?	If yes, where does this drain lead to?
1. **Barrels aligned along wall**	☐ Yes ☒ No	☐ Pretreatment ☐ Sanitary Sewer ☐ Storm Sewer
2.	☐ Yes ☐ No	☐ Pretreatment ☐ Sanitary Sewer ☐ Storm Sewer
3.	☐ Yes ☐ No	☐ Pretreatment ☐ Sanitary Sewer ☐ Storm Sewer
4.	☐ Yes ☐ No	☐ Pretreatment ☐ Sanitary Sewer ☐ Storm Sewer

Does the Chemical Storage Area(s) contain any of the following?

☐ Dikes, Berms for Containment	☐ Plugs for Floor Drains
☐ Secondary Tanks for Holding	☐ Premix (low) Concentrations
☐ Alarms	☐ Chain restraints, limited access
☐ Spills Control Kits for Cleanup	☐ Notification Procedures
☐ Chemical desegregation within Storage Area	☐ Other

Chemical Inventory List (MSDS) on file?	☒ Yes	☐ No	☐ N/A
Were any new MSDS reviewed during the Inspection?	☐ Yes	☒ No	☐ N/A

If yes, list below:

Chemical storage comments: **B&M should store barrels on individual spill containment platforms.**

Chemical handling procedures (totes, dolly, buckets, hardline, etc):

Buckets

Attachment E: Spill/Slug Control Plan	
Does the facility have a Spill/Slug control plan?	☐ yes ☒ 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?	☐ yes ☐ no ☐ N/A
(A) Describes discharge practices including non routine batch (slug) discharges	☐ yes ☐ no ☐ N/A
(B) Describes storage and handling of chemicals	☐ yes ☐ no ☐ N/A
(C) Procedures for immediate notification to POTW of slug discharges	☐ yes ☐ no ☐ N/A
(D) 1. Describes measures for controlling toxic/hazardous pollutants	☐ yes ☐ no ☐ N/A
2. Describes procedures and equipment for emergency response	☐ yes ☐ no ☐ N/A
3. Describes follow-up to limit damage suffered by POTW or environment	☐ yes ☐ no ☐ N/A
4. Does the facility have Spill/Slug Notification Procedures posted?	☐ yes ☐ no ☐ N/A
5. Are worker personnel provided training in the event of a spill or slug discharge?	☐ yes ☐ no ☐ N/A
If no:	
Does the facility have Spill/Slug Notification Procedures posted?	☐ yes ☐ no
Is it posted in areas where chemicals are used and stored?	☐ yes ☐ no
If Yes how many?	
Are appropriate personnel provided training in the event of a spill or slug discharge?	☐ yes ☐ no
Have there been any non-routine, episodic discharges or chemical spills in the past year?	☐ yes ☐ no
(Briefly Describe, Include Dates)	
Was the City notified of these occurrences? ☐ yes ☐ no ☐ N/A	
Visual Inspection of Discharge Lines/Points	
Provide description of manhole condition and flow channel of the following where applicable:	
Sampling / Monitoring Point	
Total Flow Monitoring Point	
Upstream Manhole	
Point of Connection:	

***B&M does not have any open drains and a spill/slug plan is not applicable**

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.

Guidance on proper sampling technique was discussed with B&M to insure consistency from CIU to CIU across the state.

Where is the sample point located?

☒ End of Process	☒ Pretreatment Effluent	☐ Total Flow
☐ Combined Flow	☐ Metered Flow	☐ Flow Actuator
☐ Private Manhole	☐ Utility Manhole	☐ Advance Notice Required
☐ Safety Hazards Identified	☐	☐

Is the Sample Collection Site Adequate?	☒ Yes ☐ No ☐ N/A
Does the facility rep. request a split sample on this sampling/inspection?	☐ 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: **American Interplex**

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:

☐ Cd(t) **2/yr**	☐ Cu(t) **2/yr**	☐ Cr(t) **2/yr**	☐ Ni(t) **2/yr**	☐ Pb(t) **2/yr**
☐ Ag(t) **2/yr**	☐ Zn(t) **2/yr**	☐ pH	☐ CN^-(t) **2/yr**	☐ CN^-(a-c)
☐ TTO-Vol	☐ TTO-B/N	☐ TTO-A.E.	☐ TTO-Pest	☐ 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:

Is the TOMP being followed as written? ☐ Yes ☐ No ☐ N/A (If no, provide explanation in comments.)

If no, is there evidence that a TOMP is needed? ☐ Yes ☐ No ☐ N/A (If yes, provide description of evidence in comments.)

Comments: **B & M plans to develop and submit a TOMP; however, the City of Camden requires once/yr monitoring for TTOs. B&M must submit all 40CFR 136 analyses on regulated parameters to ADEQ.**