SEMI-ANNUAL REPORT FOR USERS REGULATED BY THE ALUMINUM FORMING CATEGORY

Attn: Water Div/NPDES Pretreatment Use of this form is not an EPA/PC&E requirement. (1) IDENTIFYING INFORMATION A. LEGAL NAME & MAILING ADDRESS **B. FACILITY & LOCATION ADDRESS** Saint Jean Industries Inc. 424 Industrial Park Rd. Same as Legal Name & Mailing Address Heber Springs AR 72543 AFIN: 12-00058 Permit #: ARP001050 C. FACILITY CONTACT: Greg Cothren, EHS Coordinator TELEPHONE NUMBER: 501-362-9572 (2) REPORTING PERIOD--FISCAL YEAR May 2011 A. MONTHS WHICH REPORTS ARE DUE B. PERIOD COVERED BY THIS REPORT FROM: 11/1/2010 TO: 4/30/2011 May & November (3) DESCRIPTION OF OPERATION A. REGULATED PROCESSES per 40 CFR Part 467 Subpart D B. CHANGES: SUMMARIZE ANY CHANGES IN THE REGULATED PROCESSES SINCE THE LAST REPORT. ATTACH AN ADDITIONAL SHEET IF THE SPACE BELOW IS INADEQUATE. PROVIDE A NEW SCHEMATIC IF APPROPRIATE. Pretreatment standards for new sources **PROCESS** PRODUCTION--off/lbs PROD'N DAYS* §467.46 Core (MWS) N/A 6,842,675 §467.46 Sol Ht Trt §467.46 Clean/Etch Bath N/A §467.46 Clean/Etch Rinse N/A *Show dates and number of days between dates. [Reserved] C. Number of Regular Employees at this Facility 320

SEMI-ANNUAL REPORT CON'D FACILITY NAME: Saint Jean Industries-Heber Springs AR

(4)	FLC	W	MEAS	URE	MENT	(CON'D)

B. INDIVIDUAL PROCESS WASTESTREAMS DISCHARGED TO POTW

Operation	Ave Tot Flow ¹	Gals & Number ²	Type of Discharge	No. Disc Days
§467.46 Core-Misc. WS	NA			*****
§467.46 Sol Heat Trt.	568	*******	Continuous	181
§467.46 C/E Bath	N/A			
§467.46 C/E Rinse	N/A			
Total Regulated	568			181
§403.6(e) Unregulated ³	NA			
§403.6(e) Dilute	NA			
Non-Contact Cool. Water	1905	********	Continuous	181
Sanitary	7,000	********	Continuous	181
Total Flow to POTW	9,473	********	***********	******

The Ave Tot Flow is the "total gallons discharged divided by the number of discharge days" during the reporting period. Note that "Ave Tot Flow" times "No. Disc Days" must equal the actual total gallons discharged to the POTW for this six month period.

YPE OF TREATME	ENT SYSTEM			B COMMENT	S ON TREATMENT SY	ZSTEM		
ECK EACH APPLI				B. COMMENT	S ON TREATMENT S	I DI LIVI		
eutralization								
nemical Precipita	ation and Sedime	entation						
romium Reduct	ion							
anide Destruction	on							
ther								
one								
				=				
			CN-NA					
Conc. (Mg/l)	Cr	CN-NA		Zn	TTO-NA		O&G	
Conc. (Mg/l)	Cr SHT	CN-NA	SHT	Zn	TTO-NA	SHT	O&G Bath	Rinse
				Zn		SHT 162.6		Rinse
Max Allow. Conc.	SHT	SHT	SHT	Zn				Rinse
Max Allow. Conc. Ave Allow Conc.	SHT 6.07	3.27	SHT 16.6	Zn		162.6		Rinse
Max Allow. Conc. Ave Allow Conc. Max Measured Conc.	SHT 6.07 2.47	3.27 1.28	16.6 6.86	Zn		162.6 162.6		Rinse
Max Allow. Conc. Ave Allow Conc. Max Measured Conc.	SHT 6.07 2.47 <.007	3.27 1.28 < .01	SHT 16.6 6.86 .002	Zn		162.6 162.6 <5		Rinse
Max Allow. Conc. Ave Allow Conc. Max Measured Conc.	SHT 6.07 2.47 <.007	3.27 1.28 < .01	SHT 16.6 6.86 .002	Zn		162.6 162.6 <5		Rinse
Max Allow. Conc. Ave Allow Conc. Max Measured Conc. Ave Measured Conc.	SHT 6.07 2.47 <.007 <.007	3.27 1.28 < .01 < .01	SHT 16.6 6.86 .002 .002	Zn		162.6 162.6 <5		Rinse
Conc. (Mg/l) Max Allow. Conc. Ave Allow Conc. Max Measured Conc. Ave Measured Conc. 40CFR136 Prese	SHT 6.07 2.47 <.007 <.007	3.27 1.28 < .01	SHT 16.6 6.86 .002 .002	Zn		162.6 162.6 <5		Rinse

²List the total gallons in each batch and the number of times the batch was released to the POTW; e.g., 300 gal/batch & 4 times.

SEMI-ANNUAL REPORT CON'D **FACILITY NAME: Saint Jean Industries-Heber Springs AR** (6) CERTIFICATION A. CHECK ONE: CYANIDE ANALYSIS ATTACHED X CYANIDE CERTIFICATION PROVIDED BELOW (September SAR Only) In accordance with §467.03(a), based on my inquiry of the person or persons directly responsible for managing compliance with pretreatment standards, I certify that to the best of my knowledge, cyanide has not been used or generated and will not be used or generated in our processes which are regulated by the Aluminum Forming (40 CFR 467.46) categorical pretreatment standards since analyzing the first wastewater sample in January, February, March, April or May of this calendar year; and that the results of the first analysis contained less than 0.07 mg/l cyanide. Steve RyAn - Plant Mark Lee -Plant Manager rate Officer or authorized representative) Date of Signature B. CHECK ONE: □ REQUIRED TOXIC ORGANIC ANAL ATT'D 🔻 O & G ANAL ATTACHED In accordance with §467.03(b), as an alternative monitoring procedure for pretreatment, the POTW user may measure and limit oil and grease to the levels shown in Section 5.C in lieu of measuring and regulating total toxic organics (TTO). CORPORATE ACKNOWLEDGEMENT (Optional) STATE OF ARKANSAS COUNTY OF ____ Before me, the undersigned authority, on this day personally appeared _____ a corporation, known to me to be the person whose name is subscribed to the foregoing instrument(s), and acknowledged to me that he executed the same for purposes and considerations therein expressed, in the capacity therein stated and as the act and deed of said corporation. Given under my hand and seal of office on this ______ day of _____, 20__. Notary Public in and for ___ County, Arkansas My commission expires _____

SEMI-ANNUAL REPORT CON'D **FACILITY NAME: Saint Jean Industries-Heber Springs AR** (7) POLLUTION PREVENTION ACT OF 1990 [42 U.S.C. 13101 et seq.] §6602 [42 U.S.C. 13101] Findings and Policy para (b) Policy,--The Congress hereby declares it to be the national policy of the United States that pollution should be prevented or reduced at the source whenever feasible; pollution that cannot be prevented should be recycled in an environmentally safe manner whenever feasible; and disposal or other release into the environment should be employed only as a last resort and should be conducted in an environmentally safe manner. The User may list any new or ongoing Pollution Prevention practices: (8) GENERAL COMMENTS (9) SIGNATORY REQUIREMENTS [40CFR403.12(1)] I certify under penalty of law that I have personally examined and am familiar with the information in this semi-annual compliance report and all attachments, and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the report, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. Steve Ryan - Plant Controller Mark Lee NAME OF CORPORATE OFFICER OR AUTHORIZED REPRESENTATIVE Plant Manager

OFFICIAL TITLE

DATE SIGNED

Monthly Chemical Allowances Calculations

	Maximum for any 1 day	Maximum for Monthly Average	Daily	Monthly Avg	Conversion Factor (8.34) to Conversion Factor (8.34) to mg/l Maximum Daily Max Monthly Avg	Conversion Factor (8.34) to mg/l Max Monthly Avg	
Chromium	0.76	0.31	0.029	0.01172	6.07	2.474	
Cvanide	0.41	0.16	0.015	0.00605	3.27	1.277	Must be added on the May Report
Zinc	2.08	0.86	0.079	0.03251	16.60	98.9	
Oil & Grease	20.37	20.37	0.770	0.77008	162.56	162.56	
			millions mil-lbs/day				■
Production lbs	6,842,675 off/lbs	off/lbs	6.842675 0.0378				
חשמו וושמו Water Discharge	568	568 Avg.gal per day	0.000568				

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Days in Period



PRELIMINARY REPORT

June 15, 2011 Control No. 148487 Page 3 of 4

Saint Jean Industries Cast/Forged Products 424 Industrial Park Road Heber Springs, AR 72543

ANALYTICAL RESULTS

AIC No. 148487-1

-- Heat Treat Water 6/13/11 8:50am

Sample Identification: Heat	Treat vvaler of 15/11 0.50		DI.	Units	Qualifier
Analyte		Result < 0.01	RL 0.01	mg/l	OR CHANGE
Total Cyanide SM4500-CN C,E	Prep: 14-Jun-2011 1358 by 29		Jun-2011 1650 by 290		