

April 8, 2014

Ms. Kathryn Catlin, Wastewater Systems Manager City of Harrison Wastewater Treatment Facility P.O. Box 1715 Harrison, AR 72602

Re: Pretreatment Compliance Inspection (Boone Co)

AFIN: 05-00054 NPDES Permit No. AR0034321

Claridge Products (IU)
Claridge Extrusions (IU)
Pace Industries (IU)
Anchor Die Cast (IU)

Dear Ms. Catlin:

On January 29, 2014, I performed a Pretreatment Compliance Inspection (PCI) of the wastewater treatment facility in accordance with the provisions of the Federal Clean Water Act, the Arkansas Water and Air Pollution Control Act, and the regulations promulgated thereunder. This inspection did not reveal evidence of any violations.

If I can be of any assistance, please contact me at (870) 446-6170 or by e-mail at Kirkpatrick@adeq.state.ar.us.

Sincerely,

Ouce Repaired
Bruce Kirkpatrick

District 2 Field Inspector

Water Division

	ADEQ Water NPDES In	spec	tion AF	IN: <b>05-00054</b>		Pe	ermit #: AR0	0343	21
						•			<u> </u>
<b>\$</b>	EPA								Form Approved OMB No. 2040-0003
		UNIT	ED STATES ENVIRONMI		N AGENCY				
	NPDE	S C	Complianc	e Inspec	tion	Report			
				Section A: Nation					
	Transaction Code		NPDES			Yr/Mo/Day		Inch	ec. Type Inspector Fac. Type
1		0	0 3 4 3	<b>2 1</b> 11	12 1	4 0 1 2	<b>9</b> 17	18	P 19 S 20 1
	A F I N 0	5	- 0 0 0	5 4	Remarks				
	Inspection Work Days	I	Facility Evaluation R	ating	BI	QA		R	Reserved
	67 69		70 <b>N</b>	71	<b>N</b> 72		74 75		80
	Section B: Facility Data								
incl	ne and Location of Facility Inspected ade POTW name and NPDES permit	numl	per)	harging to POTV	V, also	Entry Time/Date 0940 / 2014-01-29			Permit Effective Date
City of Harrison Wastewater Treatment Plant 1508 Silver Valley Road							October 1, 2007		
Harrison, Arkansas Section 2, T18N, R20W in Boone County Exit Time/Date 1422 / 2014-01-29								Permit Expiration Date  September 30, 2012 (extended)	
	ne(s) of On-Site Representative(s)/Ti							Othe	er Facility Data
Mr	Mr. Tim Holt / Pretreatment Coordinator / Phone 870-741-4426								
Nar	ne, Address of Responsible Official/	Title/I	Phone and Fax Numb	er				PDS	S# 077138
Ms. Kathryn Catlin / Wastewater Systems Manager / Phone: 870-741-5527 City of Harrison  Contacted									
	. Box 1715					🗹	Yes No		
Hai	Harrison, AR 72602								
Section C: Areas Evaluated During Inspection (S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)									
S	Permit	N	Flow Measuremen	nt	N O	perations & Maintena	nce	N	Sampling
N	Records/Reports	N	Self-Monitoring P	rogram	N s	udge Handling/Dispos	sal	N	Pollution Prevention
N	Facility Site Review	N	Compliance Scheo	dules	SP	retreatment		N	Multimedia
N	Effluent/Receiving Waters	N	Laboratory		N s	orm Water		N	Other:
		Se	ction D: Summary o	of Findings/Com	ments (A	ttach additional sheet	s if necessary	7)	
$\mathbf{T}$	he facility was operatin	g th	e pretreatme	ent progran	n satis	factorily at the	time of	the	inspection. Facility
									ormed at the facilities of
th	e four Significant Indu	stri	al Users: Cla	ıridge Prod	lucts,	Claridge Extru	sions, Pa	ace l	Industries, and Anchor
D	ie Cast.								
Naı	ne(s) and Signature(s) of Inspector(s	) Bı	ruce Kirkpatrick	Agency/Office/					Date
a	a Repetent			_		ntal Quality-Jasper 0 /FAX# (870) 446-218	<b>31</b>		April 2, 2014
						·			
Sig	nature of Reviewer	_		Agency/Office/					Date
	リーニ・MをCJ	7		ADEQ / NLR /	201-097	VU44			April 7, 2014

Kerri McCabe

#### ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY

#### PRETREATMENT COMPLIANCE INSPECTION (PCI) REPORT

Name of Municipality: Harrison AFIN Number: 05-00054 NPDES Permit Number(s): AR0034321 Program Tracked under NPDES Permit Number: AR0034321 Fact Sheet Preparation Date: August 15, 2005 Date of Last PCI/Audit: June 1, 2012 Date of Last Annual Report: January 4, 2014 Name of Inspector: Bruce Kirkpatrick Date PCI Performed: 1-29-2014 Name, Title, and Telephone Number of Facility Representative: Mr. Tim Holt, Pretreatment Coordinator, 870-741-4426 Name and Title of Other Participants: n/a Number of IUs Visited: 4 Name(s) of IUs Visited: Claridge Extrusions, Anchor Die Cast, Claridge Products, Pace Industries AN IU SITE VISIT FORM SHOULD BE COMPLETED FOR EACH IU VISITED

NOTE: ANY QUESTION PRINTED IN ALL CAPS AND BOLD PRINT INDICATED A REGULATORY REQUIREMENT AND MUST BE ANSWERED FOR THE PCI REPORT TO BE COMPLETE. A NO ANSWER TO ONE OF THESE QUESTIONS SHOULD RESULT IN AN UNSATISFACTORY RATING.

Form approved July 1989

#### A. INDUSTRIAL USER SURVEY

- 1. List any Significant Industrial Users (SIUs) which have been added or deleted from the program since the last audit or inspection. none
- 2. Has ADEQ or EPA been notified of these changes? n/a
- 3. HAS THE INDUSTRIAL USER SURVEY BEEN KEPT UPDATED? yes
- What procedures are being used to update the IU Survey? New industries would need to contact Harrison Public Works to obtain water service.
- Total number of Significant Industrial Users, according to the definition used by the POTW. (This number must be greater than or equal to the answer to question 6) 4
- 6. Number of Categorical Industrial Users: 4
- 7. How does the POTW determine the appropriate categorical standards to apply to an IU? Annual sampling by POTW along with once/month sampling by facility. Permits developed by NRS Consulting.
- 8. List all categorical IUs discharging under the approved (such Include the name of the IU, the regulatory category as Metal Finishing), and the regulated process (phosphating, zinc plating, etc.) Additional listings can be made in the comments section if necessary.

Name of IU: <b>Claridge Extrusions</b>	Category: <b>Aluminum Forming</b>	Regulated Process: Ext./anod./phosphate
Claridge Products	Porcelain enameling	Porcelain enameling
Anchor Die Cast	Aluminum die casting	Zinc plating
Pace Industries	Metal Finishing	Die casting

# B. LOCAL LIMITS

BY ADEQ	OR EPA? yes			I APPROVED
Describe	e any apparent served	problems with	the local lim	nits.
sludge p requirem	en are pollutar performed by the ments of the ap s sheet) and pa	ne POTW? Does pproved progra	this fulfill m (as describe	the ed in
		Require	ment in	
llutant:	Frequency:	Permit:		Comments
tals: nfluent: ffluent:	Annual Annual	same	same	
Sludge:	Annual	same	same	
ganics: nfluent:	Annual	same	same	
ffluent:	Annual	same	same	
Sludge:	Annual	same	same	
(since t caused b action t	ere been any in the last PCI of by industrial of taken by the Ci ar. Were these	Audit) which lischarges? I ty to ensure	were believed f so, describe that the incid	l to be e the
11/a				

#### C. INDUSTRIAL USER CONTROL MECHANISM

1.	Is the POT	W using the	type of cor	ntrol mech	anism (permit	,
	agreement,	etc.) requi	red by the	approved ;	program? <b>ye</b>	s

- 2. How many IU permits (or other control documents) have been issued? 4
- 3. DO ALL <u>SIGNIFICANT</u> <u>IUS</u> HAVE CURRENT (UNEXPIRED) CONTROL DOCUMENTS? IF NOT, LIST ALL UNPERMITTED SIUS, THE DATE OF EXPIRATION OF THEIR PREVIOUS PERMIT (IF APPLICABLE), AND THE REASON FOR DELAY IN ISSUING THE REQUIRED DOCUMENT. yes
- 4. Does the control document contain the following items?

An expiration date: yes

Discharge limitations: yes

If the program requires self-monitoring by the IUs, do the Permits contain: yes

IU self-monitoring requirements: yes

IU reporting requirements: yes

5. Indicate which of the following recommended standard conditions are contained in the control documents:

Sample location: yes

Type of sample: yes

Monitoring frequency: yes

Bypass prohibition: no

Right of entry: yes

Nontransferability: yes

Revocation clause: no

Penalty Provisions: yes

Slug load notification: **yes** 

Notification of process change: yes

#### D. MONITORING OF IUS BY POTW

1.	Indicate current ins requirement below:	spection and sampling frequ	uency and program				
	Sampling:	Current frequency:	Program Requirement:				
	categorical IUs	quarterly	quarterly				
	other SIUs	n/a	n/a				
	Inspection: categorical IUs	quarterly	quarterly				
	other SIUs	n/a	n/a				
2.	HAS EACH SIU BEEN IN REQUIRED BY THE APPR	NSPECTED AND SAMPLED AT THE	E FREQUENCY				
3.	Are inspections anno	ounced or unannounced?	unannounced				
4.	Are records kept of each inspection? <b>yes</b>						
5.	Does the inspection report contain an adequate description of the following:						
	Date and time of ins	spection: yes					
	Officials present:	yes					
	Inspection of chemic	cal storage areas: <b>yes</b>					
	_	lated processes, categoricant these waste streams: years.	al waste streams, and es				
	Inspection of the pr	retreatment facilities: y	es				
	Review of self-monit	coring records: <b>yes</b>					
	Observation of IU se	elf-monitoring procedures:	yes				
	Verification that ap	pproved analytical techniqu	ues are used: <b>yes</b>				
	Verification of IU f	flow measurement (where red	quired): <u>n/a</u>				
6.	Overall adequacy of	inspection documentation:	satisfactory				

	yes
	Are analyses performed in accordance with EPA-approved methods (40 CFR 136)? <b>yes</b>
	Are sampling and flow monitoring equipment properly maintained? <b>yes</b>
	Is the POTW keeping proper field notes and chain of custo forms? <b>yes</b>
	Is the sampling location representative of the discharge the collection system? <b>yes</b>
	Are sampling locations identified in POTW records? yes
	Are sampling services available in an emergency? yes
	What are the POTW's procedures for tracking receipt and review of IU reports, such as BMR's, semi-annual reports, progress reports, bypass reports, and self-monitoring reports?
_	Tracking done on dry-erase board in Pretreatment
	Coordinator's office at the POTW along with computer tracking
	ARE SELF-MONITORING REPORTS REVIEWED TO VERIFY THAT ANALYSES WERE PERFORMED FOR ALL REGULATED PARAMETERS, AND TO EVALUATE COMPLIANCE WITH EFFLUENT LIMITS?
	yes

Revand in inspand Name Other Processing Meas Certification of the Certif	iew a Baseline Monitoring Report from the POTW's file, indicate which of the following items can be identified the BMR: BMR review not performed as part of this pection.  e and address: yes  er environmental permits held: yes  cription of operations: yes  cess flow diagrams: yes  w measurements: yes  surements of regulated pollutants: yes
and in inspand of the Desconding Flow Meas	indicate which of the following items can be identified the BMR: BMR review not performed as part of this pection.  e and address:yes  er environmental permits held:yes  cription of operations:yes  cess flow diagrams:yes  w measurements:yes  surements of regulated pollutants:yes
Prod Flow Mean	cription of operations: <a href="mailto:yes">yes</a> cess flow diagrams: <a href="mailto:yes">yes</a> w measurements: <a href="mailto:yes">yes</a> surements of regulated pollutants: <a href="mailto:yes">yes</a>
Prod Flow Mean	cription of operations: <a href="mailto:yes">yes</a> cess flow diagrams: <a href="mailto:yes">yes</a> w measurements: <a href="mailto:yes">yes</a> surements of regulated pollutants: <a href="mailto:yes">yes</a>
Prod Flow Meas Cer	cess flow diagrams: <a href="yes">yes</a> w measurements: <a href="yes">yes</a> surements of regulated pollutants: <a href="yes">yes</a>
Flow Meas Cer	w measurements: yes surements of regulated pollutants: yes
Mea: Cer	surements of regulated pollutants: <b>yes</b>
Cer	
Comj	tification of compliance by the IU: <b>yes</b>
	pliance schedule (if needed): <b>n/a</b>
	itional comments on the POTW's inspection and sampling cedures:
mb a	DOWN is nowforming a good job of sempling
	POTW is performing a good job of sampling inspecting.

# E. Enforcement

1.	ADEQUATELY 2	W IMPLEMENTED ENFO ADDRESS EVERY IU V ND REQUIREMENTS?	IOLATION OF PRETRI	
2.	How does the	e POTW respond to	the following vio	lations?
	Effluent lin	mitations: Phone of	call followed by a	letter.
	Late report:	S: Phone call fol	lowed by a letter.	
	Unpermitted	discharges: Phone	e call followed by	a letter.
	Slug loads	or spills: <b>Phone (</b>	call followed by a	letter.
3.	IS THE LIST DEVELOPED	tten enforcement r OF SIGNIFICANT VI IN ACCORDANCE WITH VIOLATING INDUSTR	OLATORS PUBLISHED EPA REGION VI CR	ITERIA FOR
	n/a			
4.	Violator with enforcement construction	Us which have met thin the last 12 m action which has n is required, ple aced on an enforce	onths, and descril been taken by the ase indicate whetl	pe the POTW. If ner the IU
	Name:	Type of Violation:	Enforcement Action:	Compliance Deadline:
non	ıe			
				;

AFIN: **05-00054** 

Permit #: AR0034321

ADEQ Water NPDES Inspection

ADEQ Water NPDES Inspection	AFIN: <b>05-00054</b>	Permit #: AR0034321

# H. EVALUATION AND COMMENTS

The	facility	is	operating	an	effective	pretreatment	program.

Name of Industry: Claridge Extrusions
POTW Name: City of Harrison
Industry Contacts: Harry Wagoner, Joe Clouse
Date and Time of Visit: 1/29/2014 at 1243 hrs
Description of Manufacturing Process: Extruding/finishing aluminum products
Sources of Process Wastewater: Aluminum extrusion, anodizing and phosphating
Categorical Industry? <b>yes</b>
Basis for Limits: Harrison Sewer Ordinance
Point of Application: Outfall 001
Description of Pretreatment Equipment and Procedures: pH adjustment / settling / filter press
Spill Prevention and Solvent Management Procedures: Solvent waste goes RineCo in Benton, Arkansas.
Solvent waste is stored in paint house which has no floor drains
with secondary containment.
Sampling Location and Equipment: Outfall 001 located in manhole on north side of building.
Grab samples are obtained.

Name of Industry: Anchor Die Casting
POTW Name: Harrison
Industry Contacts: Cathy Slay
Date and Time of Visit: 1/29/2014 at 1304 hrs
Description of Manufacturing Process:  Manufactures chain link fence parts
Sources of Process Wastewater: Metal finishing and metal molding
Categorical Industry? <b>yes</b>
Basis for Limits: Sewer ordinance
Point of Application: Outfall 001
Description of Pretreatment Equipment and Procedures:
pH adjustment, polymer addition, skimming/clarification, filter press
Spill Prevention and Solvent Management Procedures:
Facility has no floor drains; secondary containment provided.
Sampling Location and Equipment: Outfall 001 - A grab sample is obtained from the v-notch weir located on the west-side of the pretreatment building.
1000000 On the west side of the pretreatment surruing.

Name of Industry: Pace Industries					
POTW Name: Harrison					
Industry Contacts: Mark Maddox					
Date and Time of Visit: 1/29/2014 at 1114 hrs					
Description of Manufacturing Process:  Custom aluminum die casting					
Sources of Process Wastewater: Die washing and cooling; parts vibrators					
Categorical Industry? <b>yes</b>					
Basis for Limits: Sewer ordinance					
Point of Application: Outfall 001					
Description of Pretreatment Equipment and Procedures:					
pH adjustment, polymer addition, filter press					
Spill Prevention and Solvent Management Procedures:					
Facility has a SPCC Plan and trains staff in its implementation.					
All floor drains go to pretreatment facility. Spill clean-up					
kits located throughout plant.					
Sampling Location and Equipment: Outfall 001 - A grab sample is obtained from the discharge from					
the pretreatment plant					

Name of Industry: Claridge Products				
POTW Name: Harrison				
Industry Contacts: Harry Wagoner, Darren Tuck				
Date and Time of Visit: 1/29/2014 at 1337 hrs				
Description of Manufacturing Process: Liquid enameling of steel sheets				
Sources of Process Wastewater: Porcelain enameling process				
Categorical Industry? <b>yes</b>				
Basis for Limits: Sewer ordinance				
Point of Application: Outfall 001				
Description of Pretreatment Equipment and Procedures:				
pH adjustment, polymer addition, filtration				
Spill Prevention and Solvent Management Procedures:				
Facility has an SPCC plan and trains staff in implementation.				
All paint and solvent storage has secondary containment.				
Sampling Location and Equipment: Outfall 001 - A grab sample is obtained from the manhole just				
north of the porcelain area.				

## PPETS CODE SHEET

#### PRETREATMENT COMPLIANCE INSPECTION (PCI)

			CODE	
INSPECTOR'S NAME:	Bruce	Kirkpatrick		
NAME OF FACILITY:	City of Harrison			
PERMIT NUMBER USED TO TRACK PROGRAM:	AR0034321			
DATE OF PCI:	1/29/2014		DTIA	
PPETS WENDB DATA ELEMENTS				
NUMBER OF SIGNIFICA	NT IUS (SIUS):	4	SIUS	
NUMBER OF CATEGORICAL IUS:		4	CIUS	
SIUS NOT SAMPLED OR POTW:	INSPECTED BY	0	NOIN	
SIUS WITHOUT CONTRO	L MECHANISM:	0	NOCM	
SIUS IN SIGNIFICANT NONCOMPLIANCE WITH STANDARDS OR REPORTING:  0			PSNC	
SIUS IN SIGNIFICANT WITH SELF-MONITORIN		0	MSNC	
SIUS IN SIGNIFICANT WITH SELF-MONITORING INSPECTED OR SAMPLE	G AND NOT	0	SNIN	