

## Henderson, Katie

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**From:** Gilliam, Allen  
**Sent:** Thursday, April 12, 2012 1:48 PM  
**To:** batesville eugene townsley; wwsuper@cityofbatesville.com  
**Cc:** Henderson, Katie  
**Subject:** AR0020702\_Bad Boy ARP001027 Baseline Monitoring Report overdue\_20120412 AFIN 3200530  
**Attachments:** BMR Metal Finishing Form 2012.doc; 433 semi annual report FORM 2011.doc

Eugene,

As per our previous phone conversations and at your request please find attached a standardized (metal finisher's) baseline monitoring report (BMR) for Bad Boy Mowers in Batesville. They have been correctly identified as a metal finisher under 40 CFR 433 according to your inspection description.

Also find attached an optional semi-annual pretreatment report they may use. It could still be better worded in my opinion. Call with any questions about it.

Since Batesville no longer has a delegated pretreatment program, ADEQ is now designated the "control authority" and your help in bringing Bad Boy back into compliance with the Federal Pretreatment Regulations is greatly appreciated. My notes show I had left a voice mail on 3/29 to Wes Hubbard (general manager?) @ 870.698.0090, but have not heard back from him since.

I'll begin correspondence with Bad Boy notifying them they must also send ADEQ any pretreatment related reports as well as to you. This office would appreciate any environmental contact name, phone # and e-mail info you can gather and send back to me. ARP001027 has been assigned as their pretreatment tracking number and should be referenced on all pretreatment related reports.

You may or may not want to tell them they are currently in significant non-compliance (SNC) since this BMR had to be submitted prior to discharge of any regulated w.w. to your sewage collection system.

Please call with any questions.

Allen Gilliam  
ADEQ State Pretreatment Coordinator  
501.682.0625

**ADEQ BASELINE MONITORING REPORT [BMR]**  
(for Metal Finishers under 40 CFR 433)

**Instructions:** In accordance with 40CFR403.12(b) Industrial Users subject to categorical Pretreatment Standards are required to submit to ADEQ a report which contains the information in paragraphs (b)(1)-(7). The User is responsible for submitting a complete and accurate report. The User must complete this form in as much detail as possible. Include additional information on attached sheets as necessary where space is limited.

(1) Facility Identifying Information [**§403.12(b)(1)**]:

A. Legal Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_ Zip: \_\_\_\_\_

B. Facility Name: \_\_\_\_\_  
Location: \_\_\_\_\_  
\_\_\_\_\_ Zip: \_\_\_\_\_

C. Name of Owners: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

D. Name of Pretreatment System Operators: \_\_\_\_\_ Class: \_\_\_\_\_  
\_\_\_\_\_ Class: \_\_\_\_\_  
\_\_\_\_\_ Class: \_\_\_\_\_

E. Facility Signatory Authority / Title: \_\_\_\_\_ / \_\_\_\_\_

F. Main wastewater compliance contact / Title: \_\_\_\_\_ / \_\_\_\_\_  
Phone number: \_\_\_\_\_ Cell #: \_\_\_\_\_  
e-mail address: \_\_\_\_\_

G. Number of Employees: \_\_\_\_\_ Number of Shifts: \_\_\_\_\_

H. Number of Months per Calendar Year which Plant normally operates: \_\_\_\_\_

I. Name of the City [Publicly Owned Treatment Works (POTW)] that receives the wastewater discharges from this facility. If this facility has other wastewater not connected to a sewerage system describe where that wastewater is discharged):

\_\_\_\_\_  
\_\_\_\_\_

J. Provide the date the facility began discharging regulated wastewater to the POTW: \_\_\_\_\_

Date facility installed/commenced construction of the Metal Finishing operation(s): \_\_\_\_\_

(2) User's Permits [**§403.12(b)(2)**]:

Describe all environmental control permits held by or for the facility:

Describe Title of the Permit	Permit No.	Issuing Office or Agency	Exp. Date

(3) Description of Operations [**§403.12(b)(3)**]:

A. List Basis Metals Used: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B. List Chemicals (attach first page of their MSDS if necessary [not trade names]) used in regulated process(es) (solvents, acids, caustics, aqueous cleaners, machining oils/lubricants/coolants, etc.) and their use/at what station:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

C. Provide a Comprehensive Narrative Description of the facility's wastewater activities/processes or other activities conducted and the Final Products (attach a separate sheet if necessary): \_\_\_\_\_  
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See Section E. below. A, B & C above can be submitted on separate sheets of paper. These do not have to be to-scale and can be hand drawn, preferably with a separate (numbered) legend for separate process/pretreatment tanks, etc. This numbered legend page can then describe what chemicals and process is being performed without further complicating the schematic.

D. Summarize each Point Source Category Core Process generating wastewater (Electroplating, Electroless Plating, Anodizing, Coating [chromating, phosphating, and coloring], Chemical Etching and Milling, and Printed Circuit Board Manufacture) See 40 CFR 433 @ [http://www.access.gpo.gov/nara/cfr/waisidx\\_05/40cfr433\\_05.html](http://www.access.gpo.gov/nara/cfr/waisidx_05/40cfr433_05.html) for applicability):

Core Operation(s)	Pretreatment Standard Category – 40 CFR 433.17	SIC Code(s)	NAICS Code(s)
List any of the forty (40) “ancillary” operations generating wastewater (see 40 CFR 433.10 @ <a href="http://www.access.gpo.gov/nara/cfr/waisidx_05/40cfr433_05.html">http://www.access.gpo.gov/nara/cfr/waisidx_05/40cfr433_05.html</a> for these which are also regulated under 40 CFR 433)			

E. Provide on separate sheets (if necessary):

- (i) A comprehensive schematic of manufactured parts flow through each regulated process that generates Federally regulated wastewater. These are preferably to be not-to-scale and on 8.5”X11” sheets of paper and can be hand drawn if CAD is not available.
- (ii) A comprehensive schematic drawing showing all wastewater directional flows (regulated and unregulated), location of pretreatment system, sampling locations and flows for each individual wastestream. Show points of discharge to the POTW from regulated processes and sampling point. These do not have to to-scale and can be hand drawn if CAD is not available. Several 8.5” X 11” sheets are preferable to one large facility layout.
- (iii) Denote any Pollution Prevention (P2) practices such as flowlines showing in-situ filtration, counter-current flows, air knives, wet scrubber return water to baths, acid/caustic baths regeneration, etc.
- (iv) Denote chemical storage areas (bulk storage, at work stations, outdoor, etc.)
- (v) Denote any floor drains and containment areas (curbs, secondary containment, below grade grated troughs pumped/gravity-flowed to pretreatment, etc).
- (vi) In lieu of Total Toxic Organic (TTO) monitoring, a Toxic Organic Management Plan (TOMP) may be submitted. Once approved by ADEQ, the following certification statement may be made: “Based on my inquiry of the person or persons directly responsible for managing compliance with the permit limitation for total toxic organics (TTO), I certify that, to the best of my knowledge and belief, no dumping of concentrated toxic organics into the wastewaters has occurred since filing of the last discharge monitoring report. I further certify that this facility is implementing the toxic organic management plan submitted to ADEQ.”

(4) Flow Measurement [§403.12(b)(4)]:

A. Total Plant Flow in Gallons per Day (gpd):

Average \_\_\_\_\_ Maximum \_\_\_\_\_

{denote all the flows below if measured [M] or estimated [E]}

B. Individual Flows in Gallons per Day <sup>1</sup> (gpd); <u>Dilute</u> wastestreams include non-contact cooling water, sanitary waste, boiler blowdown, etc.	Average Flow Rate <sup>2</sup> (gpd)	Max. Flow Rate (gpd)	Type Discharge <sup>2</sup> and at what frequency (describe)	Discharged to City, hauled off-site or recycled (describe)
Regulated Streams				
Unregulated Streams				
Dilute Streams <sup>3</sup>				
Non-Contact Cooling Water				
Boiler Blowdown				
Sanitary Wastewater				
De-I or R/O backwash				

<sup>1</sup>Referring to 40 CFR403.6(e)(1) average flows must be for a 30-day period unless batch discharges are less frequent than monthly.

<sup>2</sup>Do not normalize over a period of days if batch discharged; state measured amount per batch and at what frequency). Show type - Continuous, Batch (Monthly, Semi-annually, 1 per 3 months, 5 days/week, 25 days/30-day period, etc.)

<sup>3</sup> Denote whether any of these streams are combined to the regulated wastestream prior to pretreatment OR prior to the final sampling point. If any of these flows are combined with the regulated wastestream as alluded to above, the MAC and AAC values in Section (5)C. below will have to be calculated.

(5) Measurement of Pollutants in User's Discharge to POTW [§ 403.12(b)(5)]:

A. (i) Cite Evidence why the process wastewater is subject to 40 CFR 433:

Core Process: \_\_\_\_\_  
 Core Process: \_\_\_\_\_  
 Core Process: \_\_\_\_\_

(ii) Provide on a separate sheet a comprehensive schematic of all wastewater pretreatment equipment (holding tanks, mixing tanks, chemical injection points, clarifier, sludge holding tank, sludge press/supernatant, flow lines, etc) and wastewater flows direction. Show treatment system location in relation to process flows and sampling points on schematic drawing required in Section 3.E.(ii) above.

B. Analysis of Regulated Flows: The industrial user must perform sampling and analysis of the effluent from all regulated processes which discharge into the POTW (after pretreatment). Provide the analytical data for the regulated processes in the appropriate space below. If facility's Metal Finishing regulated flow is the only flow that is sampled, the below limits apply.

CONCENTRATION (mg/l)									
40 CFR 433.17 Limits	Pollutant								
	Cd	Cr	Cu	Pb	Ni	Ag	Zn	CN	TTO**
Maximum daily	0.11	2.77	3.38	0.69	3.98	0.43	2.61	1.20	2.13
Monthly Average* not to exceed	0.07	1.71	2.07	0.43	2.38	0.24	1.48	0.65	---

\* Regardless of samples taken/analyzed, these limits must be met at a minimum.

\*\* See [http://edocket.access.gpo.gov/cfr\\_2005/julqtr/pdf/40cfr433.11.pdf](http://edocket.access.gpo.gov/cfr_2005/julqtr/pdf/40cfr433.11.pdf) for list of Toxic Organics.

C. Analysis of Total Plant Flow (Mark each blank "N/A" if not appropriate/applicable)

In accordance with 40 CFR 403.6(e) an industrial user may sample and analyze the total plant flow and calculate an alternate concentration limit using the combined wastestream formula if regulated process flows are mixed with other flows prior to treatment and/or sampling. Record the analytical results for all regulated pollutants below. Record the calculated concentration limits as well as the actual measured concentrations.

CONCENTRATION (mg/l)									
	Pollutant								
	Cd	Cr	Cu	Pb	Ni	Ag	Zn	CN	TTO
MAC <sup>1</sup>	--	--	--	--	--	--	--	--	--
AAC <sup>2</sup>	--	--	--	--	--	--	--	--	--
AMMC <sup>3</sup>									
AMAC <sup>4</sup>									

- 1 MAC --- Maximum Alternate Concentration as determined by ADEQ. *[If facility's Metal Finishing sampled flow is diluted with sanitary wastewater,*
- 2 AAC --- Average Alternate Concentration as determined by ADEQ. *boiler blowdown or non-contact cooling water, these numbers will have to be calculated per the Combined Wastestream Formula (CWF) in 40 CFR 403.6]*
- 3 AMMC --- Actual Measured Maximum Concentration from Lab results. *[Facility's results must include the (ADEQ certified) lab's results & QA sheet*
- 4 AMAC --- Actual Measured Average Concentration from Lab results. *along with a complete chain of custody]*

D. User Sample Location\*: \_\_\_\_\_

\*This location should be identified on the wastewater flow schematic required in Section 3.E.(ii) above. }

Sample Type (Composite samples are required except where not feasible or where grab samples are specifically required)

Number of Samples Taken: \_\_\_\_\_ Frequency (Daily, Weekly, etc) \_\_\_\_\_

Analytical Methods Used (Must be in accordance with 40CFR136--for example: Meth. 200.7, 624, 625, etc.) \_\_\_\_\_

(6) Certifications [§403.12(b)(5)(viii) & 403.12(b)(6)]:

**40 CFR 403.12(b)(6) Compliance Certification**

A. Are applicable categorical pretreatment standards being met on a consistent basis? YES \_\_\_ NO \_\_\_

B. If no, do you require:

(i) Additional operation and maintenance (O&M) to achieve compliance? YES \_\_\_ NO \_\_\_

(ii) New or additional pretreatment facilities to achieve compliance? YES \_\_\_ NO \_\_\_

**40 CFR 403.12(b)(5)(viii) Representative Certification**

I certify, to the best of my knowledge, that the sampling and analysis as shown in Section 5 above is representative of the User's normal work cycles and the expected Discharges to the POTW.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

In accordance with 40CFR403.12(b)(5)(viii) & (6) a qualified professional must complete and sign these certifications in the space below.

Name & Title \_\_\_\_\_  
Qualified Professional (Please Type or Print)

Signature \_\_\_\_\_

Date \_\_\_\_\_

(7) A. If additional O&M or new or additional pretreatment will be required to meet categorical pretreatment standards on a consistent basis, provide an explanation in an attachment. New sources must not commence discharge until compliance is possible.

B. Signatory Requirement [40 CFR 403.12(I)]

**40 CFR 403.12(I)(3) Authorization to Sign Environmental Reports**

I hereby authorize persons filling the position title of \_\_\_\_\_,  
responsible for the overall operation of the \_\_\_\_\_, Arkansas, to sign all regular  
reports required by National Pretreatment Standards--pursuant to ADEQ rules and/or Clean Water Act (CWA) regulations.  
This written authorization is provided in accordance with 40 CFR 403.12(I) and comparable state regulations.

\_\_\_\_\_  
*Corporate official name & title here*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*



**40 CFR 403.6(a)(2)(ii) Certification**

I certify under penalty of law that I have personally examined and am familiar with the information in this Baseline Monitoring 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.

\_\_\_\_\_  
*Name of Authorized Representative (Please Type or Print)*

\_\_\_\_\_  
*Official Title (Please Type or Print)*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

**TTO Certification Statement**

*(As mentioned in Section 3.E.(vi) above, the facility may submit a Toxic Organic Management Plan (TOMP) to ADEQ and receive TOMP approval before the waiver of TTO monitoring can be granted and the below certification statement can be made. EPA Guidance material can be found at <http://www.epa.gov/npdes/pubs/owm0021.pdf> for an acceptable TOMP)*

``Based on my inquiry of the person or persons directly responsible for managing compliance with the permit limitation for total toxic organics (TTO), I certify that, to the best of my knowledge and belief, no dumping of concentrated toxic organics into the wastewaters has occurred since filing of the last discharge monitoring report. I further certify that this facility is implementing the toxic organic management plan submitted to ADEQ."

\_\_\_\_\_  
*Name of Authorized Representative (Please Type or Print)*

\_\_\_\_\_  
*Official Title (Please Type or Print)*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

# SEMI-ANNUAL REPORT FOR INDUSTRIAL USERS REGULATED BY 40CFR433

Use of this form is not an EPA/ADEQ requirement.

Attn: Water Div/NPDES Pretreatment

## (1) IDENTIFYING INFORMATION

A. LEGAL NAME & MAILING ADDRESS

B. FACILITY & LOCATION ADDRESS

C. FACILITY CONTACT:

TELEPHONE NUMBER:

e-mail:

## (2) REPORTING PERIOD--FISCAL YEAR From ??? to ??? (Both Semi-Annual Reports must cover Fiscal Year)

A. MONTHS WHICH REPORTS ARE DUE

B. PERIOD COVERED BY THIS REPORT

\_\_\_\_\_ & \_\_\_\_\_

FROM: TO:

## (3) DESCRIPTION OF OPERATION

A. REGULATED PROCESSES

### CORE PROCESS(ES)

CHECK EACH APPLICABLE BLOCK

- Electroplating
- Electroless Plating
- Anodizing
- Coating
- Chemical Etching and Milling
- Printed Circuit Board Manufacture

### ANCILLARY PROCESS(ES)\*

LIST BELOW EACH PROCESS USED IN THE FACILITY

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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.

\*SEE 40CFR433.10(a) FOR 40 DIFFERENT OPERATIONS

C. Number of Regular Employees at this Facility

\_\_\_\_\_

D. [Reserved]

**(4) FLOW MEASUREMENT**

**INDIVIDUAL & TOTAL PROCESS FLOWS DISCHARGED TO POTW IN GALLONS PER DAY**

Process	Average	Maximum	Type of Discharge
Regulated (Core &			
Regulated (Cyanide)			
§403.6(e) Unregulated*			
§403.6(e) Dilute			
Cooling Water			
Sanitary			
<b>Total Flow to POTW</b>			*****

\*"Unregulated" has a precise legal meaning; see 40CFR403.6(e).

**(5) MEASUREMENT OF POLLUTANTS**

**A. TYPE OF TREATMENT SYSTEM**

CHECK EACH APPLICABLE BLOCK

- Neutralization
- Chemical Precipitation and Sedimentation
- Chromium Reduction
- Cyanide Destruction
- Other \_\_\_\_\_
- None

**B. COMMENTS ON TREATMENT SYSTEM**

**C. THE INDUSTRIAL USER MUST PERFORM SAMPLING AND ANALYSIS OF THE EFFLUENT FROM ALL REGULATED PROCESSES-- CORE & ANCILLARY--(AFTER TREATMENT, IF APPLICABLE). ATTACH THE LAB ANALYSIS WHICH SHOWS A MAXIMUM; TABULATE ALL THE ANALYTICAL DATA COLLECTED DURING THE REPORT PERIOD IN THE SPACE PROVIDED BELOW. ZERO CONCENTRATIONS ARE NOT ACCEPTABLE; LIST THE DETECTION LIMIT IF CONCENTRATION WAS BELOW DETECTION LIMIT.**

Pollutant(mg/l)	Cd	Cr	Cu	Pb	Ni	Ag	Zn	CN	TTO*
Max for 1 day	0.11	2.77	3.38	0.69	3.98	0.43	2.61	1.20	2.13
Monthly Ave	0.07	1.71	2.07	0.43	2.38	0.24	1.48	0.65	--
Max Measured									
Ave Measured									

Sample Location \_\_\_\_\_

Sample Type (Grab or Composite) \_\_\_\_\_

Number of Samples and Frequency Collected \_\_\_\_\_

40CFR136 Preservation and Analytical Methods Use:  Yes  No

**(6) CERTIFICATION**

A. [Reserved]

[Reserved]

B. CHECK ONE:  §433.11(e) TOXIC ORGANIC ANALYSIS ATTACHED  §433.12(a) TTO CERTIFICATION

Based on my inquiry of the person or persons directly responsible for managing compliance with the pretreatment standard for total toxic organics (TTO), I certify that, to the best of my knowledge and belief, no dumping of concentrated toxic organics into the wastewaters has occurred since filing of the last semi-annual compliance report. I further certify that this facility is implementing the toxic organic management plan submitted to Arkansas Department of Environmental Quality.

\_\_\_\_\_  
(Typed Name)

\_\_\_\_\_  
(Corporate Officer or authorized representative)

Date of Signature \_\_\_\_\_

**CORPORATE ACKNOWLEDGEMENT (Optional)**

STATE OF ARKANSAS            )  
COUNTY OF \_\_\_\_\_)

Before me, the undersigned authority, on this day personally appeared \_\_\_\_\_ of \_\_\_\_\_, 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 \_\_\_\_\_, 200\_\_.

\_\_\_\_\_  
Notary Public in and for \_\_\_\_\_  
County, Arkansas

My commission expires \_\_\_\_\_.

**(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; pollution that cannot be prevented or recycled should be treated 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(I)]**

**I certify under penalty of law that I have personally examined and am familiar with the information in this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.**

\_\_\_\_\_  
NAME OF CORPORATE OFFICER OR AUTHORIZED REPRESENTATIVE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
OFFICIAL TITLE

\_\_\_\_\_  
DATE SIGNED