

ADEQ

ARKANSAS
Department of Environmental Quality

November 14, 2011

Mark Niemeier
Human Resources Manager
L.A. Darling Company
P.O. Box 338
Corning, AR 72422

Re: L. A. Darling Pretreatment Compliance Assurance Visit (ARP000011); City of Corning
NPDES #AR0033979)

Dear Mr. Niemeier,

Under 40 CFR 403.8(f)(2)(v), “[ADEQ will] Randomly sample and analyze the effluent from Industrial Users and conduct surveillance activities in order to identify, independent of information supplied by Industrial Users, occasional and continuing noncompliance with Pretreatment Standards...”

On 10/19/11, a compliance assurance visit (CAV) was conducted by ADEQ Pretreatment personnel at your facility. Four (4) grab samples were taken at separate times from your two (2) phosphate rinse tanks during the CAV. These grab samples were deemed representative of wastewater discharged to the City’s sewage treatment system.

ADEQ’s laboratory analysis indicated your facility is in compliance with the Metal Finishing Standards in 40 CFR 433.17.

The compliance assurance visit indicated L. A. Darling is in compliance with the Federal Pretreatment Regulations in 40 CFR 403. No further action is deemed necessary at this time.

Please keep this and all Pretreatment correspondence on file for future reference.

If there are further questions or comments, please feel free to contact this office at (501) 682-0625 or electronically at gilliam@adeq.state.ar.us.

Sincerely,



Allen Gilliam
ADEQ State Pretreatment Coordinator

Attachments: “Pretreatment Industrial Inspection” (CAV) and ADEQ’s lab analysis for all 40 CFR 433 metals (A-1 through A-4)

**Pretreatment Industrial Inspection
Facility Information**

Facility Name / Address: L.A. Darling, Gondola Division / 302 Wooten Lane, Corning, AR 72422

Signatory Authority (Name / Title): Mark Niemeier / Human Resources Manager

Phone: 870.857.3546 x-2224

Mailing Address (if different):

P.O. Box 338, Corning, AR 72422

Fax: 870.857.3995

L.A. Darling

Address: same

Corporate Owner Name and address: ~~Corning~~ - 1401 Hwy. 49B North, Paragould, AR 72450

Contact Person (Name / Title): Mark Niemeier / Human Resources Manager

Phone: 870.239.9564

Phone: same

Fax:

Fax: same

Corporate President: Randy Guthrie

e-mail: mark.niemeier@ladarling.com

e-mail: randy.guthrie@ladarling.com

Facility Tracking #ARP000011 AFIN#1100046

Last Inspection Date: 11/19/09

POTW (City) IU discharges to: Corning (NPDES #AR0033979)

Industrial Classification: Categorical

Significant

If Categorical, list which CFR #(s) the facility is subject to: 40 CFR 433.17 (Metal Finishing Pretreatment Standards for New Sources)

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B. Inspection Analysis

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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 no Page 5 of 10

B. **Pollution Prevention Activities** yes no Page 6 of 10

C. **Pretreatment System** (not necessary) yes no Page 7 of 10

D. **Chemical Storage** yes no Page 8 of 10

E. **Spill/Slug Control Plan** yes no Page 9 of 10

F. **Self-Monitoring/TOMP** yes no Page 10 of 10

Comments :

Inspector's Name (Print): Allen Gilliam

Signature: *Allen Gilliam*

IU Rep's Name (Print):

MARK NIEMEIER

Signature: *Mark Niemeier*

Date and Time Inspection Ended: 10/19/11 @ 11:45 A.M.

I. Summary of Inspection

A. Inspection and Objective (Complete Before Inspection)

<input type="checkbox"/> Permit Renewal	<input checked="" type="checkbox"/> Bi-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): Compliance assurance with 40 CFRs 403 and 433 requirements via sampling and process walk-through.

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 checked="" type="checkbox"/> Flow/pH Meter(s)	<input type="checkbox"/> Calibration Records
<input type="checkbox"/> MSDS Inventory List	<input type="checkbox"/> New MSDS	<input type="checkbox"/>

Comments: See updated hand drawn schematic dated 2/1/10 (on file). It provides a much better overview of plant and process flow.

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: Adequate, no comment.

Process Area(s): Adequate, no comment.

Pretreatment System: Not necessary.

Self Monitoring Procedures: Adequate, no comment.

Diversion/Sewer Meters: N/A

Spill/Slug Control Plan: Slug discharge plan deemed not necessary.

Sampling Point: During this site visit, grab samples were taken from two (2) final rinse tanks in two (2) of their phosphatizing lines.

Chemical Storage: Adequate, no comment.

II. Pre-Inspection Meeting

A. General Information

Date and Time Inspection Started: 10/19/11 @ 8:25 a.m.		SIC/NAICS code(s): 2542/337215	
IU Reps/Titles: Mark Niemeier / Human Resources Manager		ADEQ Rep/Titles: Allen Gilliam / State Pretreatment Coordinator	
End product(s): Metal shelving, upright fixtures & metal storage racks		Approx. # of units/lbs produced: 36 Mlbs/yr	
Days of Operation: Monday - Friday		Days of Production (if different): Same	
Hours of Operation: 16 per day		Hours of Production (if different): Same	
Shift 1, hrs: 6 a.m. to 2 p.m.	Shift 2, hrs: 2 p.m. to 10 p.m.	Shift 3, hrs.: N/A to	
# of Employees: 50	Peak Mos.: N/A	"Off" Mos.: N/A	
Are there any scheduled plant shutdowns? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> If yes, when? Holidays			
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 checked="" type="checkbox"/> No <input type="checkbox"/>			
If No, explain:			
Are there any Special Entry Procedures for the Discharge/Sample point locations? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
If Yes, explain: Safety glasses required.			
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: One has to be wary of forklift traffic and overhead conveyed workpieces.			
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"/>			
Processes? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, explain:			
Production Levels? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, explain: The fixture upright manufacturing line has been moved to another facility.			
Raw materials? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, explain:			
Flow rates? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, explain: Production has decreased dramatically since last site visit; therefore, flow.			
Are regulated and non-regulated wastestreams combined? yes <input type="checkbox"/> no <input checked="" type="checkbox"/>			
Prior to Pretreatment System? 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 type="checkbox"/> N/A <input checked="" type="checkbox"/>			
At connection to sanitary sewer? yes <input checked="" type="checkbox"/> no <input type="checkbox"/> N/A <input type="checkbox"/>			
What is the current avg. process flow? Last semi-annual report (7/26/11) indicated ~ 9,868 gpd			

B. Facility Permits

Permit / ID Type	Permit / ID No.	Expiration Date
Air	497-AR-4	7/14/92 issued w/no expiration date
RCRA	ARD990869802	SQCEG ("Active")
NPDES (stormwater)	ARR00A826	6/30/14
Other		

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. Fe phosphatizing	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	4. Tube mill (idled at this time, but w.w. hauled off-site)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
2. Rinses	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	5.	Yes <input type="checkbox"/> No <input type="checkbox"/>
3.	Yes <input type="checkbox"/> No <input type="checkbox"/>	6.	Yes <input type="checkbox"/> No <input type="checkbox"/>

Were processes visually inspected? Yes No N/A

Brief description of process(es): Facility manufactures gondolas and an assortment of other merchandise/commercial displays for retail stores. Raw material is either hot or cold rolled steel, steel sheeting, Fe phosphate and powder coat paint. Facility forms, presses, stamps, perforates, cuts, welds, ["rolls" (~ 9 tube mills or "stands") steel to form support legs ("uprights") – currently idled], machines and assembles various pieces to meet customer final products' specifications. Shelving units can be 16" to 20" in width and vary in length. What little fluids generated in this area are captured by "oil sorb" socks. The idled tube mill forms tubes from cold rolled steel and then travel through a trough of coolant/lubricant then into further "stands" (~7) to make rectangular final forms. This entire area is self-contained with a below grade trough where it is hauled off-site once spent. Forming of the shelves themselves is in a separate area.

Fe phosphatizing captures this facility under the metal finishing regs in CFR 433.17. They currently have two (2) almost identical phosphatizing lines (3rd one idled). They all have a first stage cleaner/Fe phosphatizing stage followed by milder Fe phosphatizing bath with a final fresh water rinse prior to entering a dry-off/curing oven, then to powder coating and back through the dry-off/curing oven. The phosphatizing rinses are the only source of regulated wastewater. All tanks in "Line 1" (see 2/1/10 schematic) are heated while only the first two tanks in "Line 2" are heated.

There are two separate powder coat paint lines with no w.w. generated.

General observations of facility's indoor housekeeping: Clean and orderly with no visible spills or leakage.

General observations of area outside facility's building: Uncluttered with no evidence of spills or unpermitted discharges.

Check all sources of wastewater being discharged into the City's collection system. Indicate avg. gal/day, measured estimated. If batch discharged, list frequency and volume (1000 gal/month, e.g.).

<input checked="" type="checkbox"/> Process Rinse Overflows ~9,800 gpd (from last 7/26/11 semi-annual report.	<input type="checkbox"/> Equip. Cleanup	<input type="checkbox"/> Floor Cleanup	<input checked="" type="checkbox"/> Spent Bath Solutions hauled off-site ~ 2/year
<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 type="checkbox"/> Spent Rinse Tanks	<input type="checkbox"/> Equipment Coolants	<input type="checkbox"/> Non-Contact Cooling Water
<input type="checkbox"/> Stormwater	<input type="checkbox"/> Rinse overflows	<input type="checkbox"/>	<input type="checkbox"/>

List Major Raw Materials and Chemicals used:

Cold and hot rolled steel, sheet steel, Fe phosphate, cutting oils, acetylene, O₂, LP gas and coolants.

Check Waste Stream Pollutants of Concern from Process(es):

<input type="checkbox"/> BOD	<input checked="" type="checkbox"/> CN ⁻	<input checked="" type="checkbox"/> Metals (List): All Metal Finishing metals reg'd under 40 CFR 433.17	<input type="checkbox"/> Solvents (List): Facility has submitted (1/18/06) a Toxic Organic Management Plan (TOMP) in lieu of sampling/analyzing for toxic organics.
<input type="checkbox"/> TSS	<input type="checkbox"/> Cl ₂	<input checked="" type="checkbox"/> pH	
<input type="checkbox"/> O&G	<input type="checkbox"/> S ⁻		

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: Facility rep indicated they keep a book on most every standard operating procedure and a log book for a history.

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

Explain: Individual operators check their machines "once per week"

Water Reuse: Yes No

Explain: Facility has counter-current flows in their phosphatizing processes.

Cost Accounting to Track Savings: Yes No

Explain: Facility rep indicated they a "Rapid Continuous Improvement" (RCI) program in place.

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

Explain: Facility practices lean manufacturing.

Employee Training: Yes No

Explain: All workers are OSHA and some, wastewater trained.

Spent Solvent Reclamation? Yes No

Explain: Maintenance and tool room contain some solvents that are recycled through Safety Kleen.

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

Explain: Paper, wooden pallets, cardboard and scrap steel are recycled.

Recycle Waste Oil, Solvents, and Lubricants? Yes No

Explain: Waste oil is sent off for proper disposal/re-use.

Other Activities

P2 Equipment/Practices in use:

<input type="checkbox"/> Overflow Alarms	<input type="checkbox"/> Aqueous Cleaning Solutions
<input type="checkbox"/> Fog Spray Rinsing	<input checked="" type="checkbox"/> Countercurrent Rinsing
<input checked="" type="checkbox"/> Dragout Collection Trays	<input type="checkbox"/> Seal-Less Pumps
<input checked="" type="checkbox"/> Air Jets to Blow Parts Dry	<input type="checkbox"/> Secondary Containment of Process Solutions
<input type="checkbox"/> Aqueous Paint Stripping Solutions	<input type="checkbox"/> Bead Blasting to Remove Paint
<input checked="" type="checkbox"/> Water Soluble Cutting Fluids	<input type="checkbox"/> Recycle Overspray
<input type="checkbox"/> In-Process Recycle (Ion Exchange, Reverse Osmosis)	<input type="checkbox"/> Conductivity Meters
<input type="checkbox"/> Dead Rinse Tanks	<input type="checkbox"/> Bath / Rinse Filtration

Attachment C: Pretreatment System N/A (Pretreatment not necessary to meet categorical limits)

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:

<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): N/A

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

System Operator(s) Name:

Is the System Operator(s) licensed by the State of Arkansas? Yes No N/A

List Name(s) and License classification:

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

If Yes, list type and frequency:

Is the discharge from the Process? Batch Continuous Combination

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

Volume of ~~each batch~~ discharged: Process Rinse Overflows ~9,800 gpd (from last 7/26/11 semi-annual report).

Describe process from which wastewater originated (spent bath, e.g.): Wastewater is from phosphate rinses with occasional batch discharges from the spent phosphatizing tanks.

Approximate duration of batch discharge: continuous during production hours.

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

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. Numerous work stations have a drum or small quantities of necessary chemicals (coolants/lubricants) for use at that station.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Pretreatment <input type="checkbox"/> Sanitary Sewer <input type="checkbox"/> Storm Sewer
2.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Pretreatment <input type="checkbox"/> Sanitary Sewer <input type="checkbox"/> Storm Sewer
3.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Pretreatment <input 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 checked="" 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 type="checkbox"/> Spills Control Kits for Cleanup	<input type="checkbox"/> Notification Procedures
<input type="checkbox"/> Chemical desegregation within Storage Area	<input checked="" type="checkbox"/> Bulk storage (barrels sit on top of "containment pans")

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: Time constraints did not allow for a comprehensive review of many chemicals, but there were two full notebooks of them.

Chemical storage comments: Adequate, no comment.

Chemical handling procedures (totes, dolly, buckets, hardline, etc.): Forklifts, barrel dollies and totes.

Attachment E: Spill/Slug Control Plan (Slug discharge potential deemed negligible)

Does the facility have a Spill/Slug-control plan? Slug discharge potential deemed negligible. 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? | <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 checked="" type="checkbox"/> no <input type="checkbox"/> N/A |
| 5. Are worker personnel provided training in the event of a spill or slug discharge? | <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> N/A |

If no:

- | | |
|--|---|
| Does the facility have Spill/Slug Notification Procedures posted? | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no |
| Is it posted in areas where chemicals are used and stored? | <input type="checkbox"/> yes <input checked="" 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 |
| Has 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)

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 point(s):

Sampling / Monitoring Point: For this site visit, samples were taken directly from the top of each of their two (2) final rinse tanks. Each sample was taken from a well mixed area of the rinse tanks' overflow to the city.

Total Flow Monitoring Point: 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. Sample bottles are simply lowered upright into the final phosphatizing rinse tanks until an adequate volume is captured.

Where is the sample point located? See above.

<input checked="" type="checkbox"/> End of Process (rinse tanks)	<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? 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 Facility rep. indicated they were going take grab samples to capture one sample per hour per 8 hour shift and manually composite those samples in a larger plastic container. For this site visit grab samples were taken ~3 hours apart for a representative "composite".

IU Self-Monitoring Results reviewed: (From last semi-annual report) 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: Semi-Annually

<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 checked="" type="checkbox"/> CN'(t)	<input type="checkbox"/> CN'(a-c)
<input type="checkbox"/> TTO-Vol	<input type="checkbox"/> TTO-B/N	<input type="checkbox"/> TTO-A.E.	<input type="checkbox"/> TTO-Pest	<input type="checkbox"/> Cr(hex)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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: 1/18/06

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: This inspector's observations concluded there were not large quantities of toxic organics on-site that could possibly enter the City's sewer system in toxic amounts.

Arkansas Department of Environmental Quality
 5301 Northshore Drive
 North Little Rock, AR 72118

Laboratory Contact: Jeff Ruehr
Attachment A-1
 Ruehr@adeq.state.ar.us
 501-682-0955

Client: Special Samples **Client Sample ID:** L.A. Tank #1
Lab ID: 2011-3324 **Collection Date:** 10/19/2011 8:34:00 AM
Matrix: Water

Analyses

Total Metals by EPA 200.8

EPA 200.8

Batch: 11103101 Run: 1

	Result	Reporting Limit	MDL	Qual	Unit
Aluminum	<20.0	20.0	20		ug/L
Antimony	<10.0	10.0	5		ug/L
Arsenic	8.33	1.00	0.5		ug/L
Barium	18.0	10.0	2.0		ug/L
Beryllium	<0.5	0.5	0.1		ug/L
Boron	446	25.0	5.0		ug/L
Cadmium	<1.00	1.00	0.3		ug/L
Calcium	18.2	0.04	0.04		mg/L
Chromium	<1.00	1.00	0.3		ug/L
Cobalt	<1.00	1.00	0.5		ug/L
Copper	9.29	1.00	0.5		ug/L
Iron	483	20.0	10.0		ug/L
Lead	<1.00	1.00	0.1		ug/L
Magnesium	8.27	0.1	0.1		mg/L
Manganese	14.0	1.00	0.2		ug/L
Nickel	16.8	2.5	0.5		ug/L
Potassium	6.87	1.00	0.05		mg/L
Selenium	<2.00	2.00	0.5		ug/L
Silver	<5.00	5.00	1.0		ug/L
Sodium	246	0.04	0.02		mg/L
Thallium	<2.5	2.5	0.05		ug/L
Vanadium	<2.5	2.5	1.0		ug/L
Zinc	5.39	3.00	2.0		ug/L
Dilution Factor	1.00				
Analyzed By	Joe Semberski				
Analysis Date/Time	Oct 27 2011 6:11PM				
Prep By					
Prep Date/Time					

Arkansas Department of Environmental Quality
 5301 Northshore Drive
 North Little Rock, AR 72118

Laboratory Contact: Jeff Ruehr
Attachment A2
 Ruehr@adeq.state.ar.us
 501-682-0955

Client: Special Samples **Client Sample ID:** L.A. Tank #2
Lab ID: 2011-3325 **Collection Date:** 10/19/2011 8:40:00 AM
Matrix: Water

Analyses

Total Metals by EPA 200.8

EPA 200.8

Batch: 11103101 Run: 1

	<u>Result</u>	<u>Reporting Limit</u>	<u>MDL</u>	<u>Qual</u>	<u>Unit</u>
Aluminum	47.8	40.0	20		ug/L
Antimony	<20.0	20.0	5		ug/L
Arsenic	23.0	2.00	0.5		ug/L
Barium	30.5	20.0	2.0		ug/L
Beryllium	<1.00	1.00	0.1		ug/L
Boron	412	50.0	5.0		ug/L
Cadmium	<2.00	2.00	0.3		ug/L
Calcium	13.7	0.08	0.04		mg/L
Chromium	2.11	2.00	0.3		ug/L
Cobalt	<2.00	2.00	0.5		ug/L
Copper	13.8	2.00	0.5		ug/L
Iron	9550	40.0	10.0		ug/L
Lead	<2.00	2.00	0.1		ug/L
Magnesium	0.97	0.2	0.1		mg/L
Manganese	70.3	2.00	0.2		ug/L
Nickel	53.1	5.00	0.5		ug/L
Potassium	9.94	2.00	0.05		mg/L
Selenium	<4.00	4.00	0.5		ug/L
Silver	<10.0	10.0	1.0		ug/L
Sodium	263	0.08	0.02		mg/L
Thallium	<5.00	5.00	0.05		ug/L
Vanadium	<5.00	5.00	1.0		ug/L
Zinc	56.7	6.00	2.0		ug/L
Dilution Factor	1.00				
Analyzed By	Joe Semberski				
Analysis Date/Time	Oct 28 2011 9:54AM				
Prep By					
Prep Date/Time					

Arkansas Department of Environmental Quality
 5301 Northshore Drive
 North Little Rock, AR 72118

Laboratory Contact: Jeff Ruehr
Attachment A-3
 Ruehr@adeq.state.ar.us
 501-682-0955

Client: Special Samples **Client Sample ID:** L.A. Tank #1A
Lab ID: 2011-3326 **Collection Date:** 10/19/2011 11:36:00 AM
Matrix: Water

Analyses

<i>Total Metals by EPA 200.8</i>		<i>EPA 200.8</i>	<i>Batch: 11103101 Run: 1</i>		
	<u>Result</u>	<u>Reporting Limit</u>	<u>MDL</u>	<u>Qual</u>	<u>Unit</u>
Aluminum	<40.0	40.0	20		ug/L
Antimony	<20.0	20.0	5		ug/L
Arsenic	9.48	2.00	0.5		ug/L
Barium	30.5	20.0	2.0		ug/L
Beryllium	<1.00	1.00	0.1		ug/L
Boron	479	50.0	5.0		ug/L
Cadmium	<2.00	2.00	0.3		ug/L
Calcium	21.3	0.08	0.04		mg/L
Chromium	<2.00	2.00	0.3		ug/L
Cobalt	<2.00	2.00	0.5		ug/L
Copper	14.4	2.00	0.5		ug/L
Iron	1020	40.0	10.0		ug/L
Lead	<2.00	2.00	0.1		ug/L
Magnesium	8.08	0.2	0.1		mg/L
Manganese	22.3	2.00	0.2		ug/L
Nickel	26.5	5.00	0.5		ug/L
Potassium	7.20	2.00	0.05		mg/L
Selenium	<4.00	4.00	0.5		ug/L
Silver	<10.0	10.0	1.0		ug/L
Sodium	262	0.08	0.02		mg/L
Thallium	<5.00	5.00	0.05		ug/L
Vanadium	<5.00	5.00	1.0		ug/L
Zinc	16.1	6.00	2.0		ug/L
Dilution Factor	2.00				
Analyzed By	Joe Semberski				
Analysis Date/Time	Oct 28 2011 10:13AM				
Prep By					
Prep Date/Time					

Arkansas Department of Environmental Quality
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Laboratory Contact: Jeff Ruehr
Attachment A 4 Ruehr@adeq.state.ar.us
 501-682-0955

Client: Special Samples **Client Sample ID:** L.A. Tank #2B
Lab ID: 2011-3327 **Collection Date:** 10/19/2011 11:34:00 AM
Matrix: Water

Analyses

Total Metals by EPA 200.8

EPA 200.8

Batch: 11103101 Run: 1

	<u>Result</u>	<u>Reporting</u>	<u>MDL</u>	<u>Qual</u>	<u>Unit</u>
		<u>Limit</u>			
Aluminum	<40.0	40.0	20		ug/L
Antimony	<20.0	20.0	5		ug/L
Arsenic	38.9	2.00	0.5		ug/L
Barium	26.5	20.0	2.0		ug/L
Beryllium	<1.00	1.00	0.1		ug/L
Boron	453	50.0	5.0		ug/L
Cadmium	<2.00	2.00	0.3		ug/L
Calcium	12.6	0.08	0.04		mg/L
Chromium	2.89	2.00	0.3		ug/L
Cobalt	<2.00	2.00	0.5		ug/L
Copper	19.0	2.00	0.5		ug/L
Iron	15900	40.0	10.0		ug/L
Lead	<2.00	2.00	0.1		ug/L
Magnesium	0.73	0.2	0.1		mg/L
Manganese	129	2.00	0.2		ug/L
Nickel	102	5.00	0.5		ug/L
Potassium	15.6	2.00	0.05		mg/L
Selenium	<4.00	4.00	0.5		ug/L
Silver	<10.0	10.0	1.0		ug/L
Sodium	331	0.08	0.02		mg/L
Thallium	<5.00	5.00	0.05		ug/L
Vanadium	<5.00	5.00	1.0		ug/L
Zinc	37.5	6.00	2.0		ug/L

Dilution Factor 2.00
 Analyzed By Joe Semberski
 Analysis Date/Time Oct 28 2011 10:18AM
 Prep By
 Prep Date/Time