### Gage, Hannah

From:	Yates, Adam
Sent:	Thursday, July 13, 2017 4:10 PM
То:	harrison Kathryn Catlin (kathryn.catlin@cityofharrison.com); Harrison tim holt
Cc:	Gage, Hannah; Johnson, Lindsay; McWilliams, Carrie; Healey, Richard; Allen-Daniel, Leslie
Subject:	AR0034321_Harrison May 2017 Pretreatment Program Annual Report_20170428
Attachments:	Harrison Pretreatment Program Annual Report.pdf

#### Kathryn,

City of Harrison's May 2017 Pretreatment Program Annual Report was received, reviewed, and deemed complete and compliant with the reporting requirements of 40 CFR 403.12(i). If you have any questions or concerns, please feel free to contact me.

Kindly,

Adam Yates Engineer, NPDES Permits Section Office of Water Quality Arkansas Department of Environmental Quality Phone: (501) 682-0617 Fax: (501) 682-0880

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# $\begin{array}{c} \mathbf{D} \mathbf{e} \mathbf{p} \mathbf{a} \mathbf{r} \mathbf{t} \mathbf{m} \mathbf{e} \mathbf{n} \mathbf{t} \mathbf{o} \mathbf{f} \\ \mathbf{P} \mathbf{u} \mathbf{b} \mathbf{lic} \ \mathbf{W} \mathbf{o} \mathbf{r} \mathbf{k} \mathbf{s} \end{array}$

Pretreatment Department Tim Holt Pretreatment Coordinator 1508 Silver Valley Road Harrison, Arkansas 72601 Office: 870.741.4426 Fax: 870.741.5022 www.cityofharrison.com tim.holt@cityofharrison.com

Certified Mail #70143490000032457362

04-25-17

To: Adam Yates ADEQ 5301 Northshore Drive North Little Rock Arkansas 72118

Re: 2016 Pretreatment Performance Summary

Dear Mr Yates:

Please find enclosed the 2016 Pretreatment Performance Summary. If you have any question or comments, I can be reached at 870-741-5527.

Sincerely,

Kathryn Catlin Wastewater Systems Manager

Cc: Lindsey Johnson ADEQ #70101870000239833718

#### MONITORING RESULTS FOR THE ANNUAL PRETREATMENT REPORT

REPORTING YEAR: 01-01 ,2016 TO 12-31 ,2016

TREATMENT PLANT: City of Harrison NPDES PERMIT #AR0034321

AVERAGE POTW FLOW: \_\_\_\_\_\_MGD % IU FLOW: \_\_\_\_\_%

METALS, CYANIDE and PHENOLS	MAHC (Total) (µg/l)	]		TES SAMPLE g/l) quarter	D	WQ level/ limit (µg/l)	E	-	TES SAMPLI g/1) quarter	EPA MQL	BORATORY AI	VALYSIS Detection Level	
	(2)	Date	Date	Date	Date	(2)	Date	Date	Date	Date	(µg/l) (1)	Used (1)	Achieved (µg/l)
		2-8-16	5-1 <b>8-1</b> 6	7-6-16	10-25-16	÷	2-8-16	5-18-16	7-6-16	10-25-16	(1)		(PB-7)
Antimony	N/A	<1.00	<1.00	<1.00	<1.00	N/A	<1.00	<1.00	<1.00	_<1.00	60	200.8	60
Cadmium	20.0	0.125	0.173	.109	.125	7.0	<0.100	<0.100	<.100	<.100	0.5	200.8	0.5
Copper	290.0	41.4	44.0	23.6	30.5	41.1	3.50	11.7	2.74	6.65	0.5	200.8	0.5
Lead	50.0	1.34	3.13	1.32	1.91	18.7	<0.500	0.728	<.500	<.500	0.5	200.8	0.5
Mercury	.03	.106	.042	.095	.328	.010	.026	.0193	.00786	.0076	.005	1631E ng/L 245.1 mg/L	0.5
Nickel	470.0	<u>2.78</u>	4.47	5.69	9.11	422.0	11.9	5.31	2.33	8.67	0.5	200.8	0.5
Selenium	10.0	<1.00	<1.00	<1.00	<1.00	5.6	<1.00	<1.00	<1.00	<1.00	5	200.8	5.0
Silver	80.0	0.287	0.727	.390	.350	20.0	<0.100	0.677	<.100	<.100	0.5	200.8	0.5
Zinc	300.0	117	187	99.1	_140	372.9	53.1	85.9	49.2	93.7	20	200.8	20
Chromium	1000.0	<1.00	3.69	2.47	7.46	1255.0	<1.00	<1.00	<1.00	<1.00	10	200.8	10
Cyanide	20.0	<5.00	<5.00	<5.00	<5.00	5.8	<5.00	<5.00	<5.00	<5.00	10	4500CNE	10
Arșenic	80.0	<0.500	<0.500	<.500	<.500	····-	<0.500	<0.500	<.500	.766	0.5	200.8	0.5
Molybdenum	70.0	1.35	4.16	3.94	3.58	N/A	3.31	3.79	1.99	3.57		200.8	1.0
Phenols	N/A	23.10	25.3	6.8	18.7	N/A	<5.00	<5.00	<5.00	6.4	. 5	420.1	5.0
Beryllium		<0.500	<0.500	<.500	<.500		<0.500	<0.500	<.500	<.500	0.5	200.8	0.5
Thallium	N/A	<0.100	<0.100	<.100	<.100	N/A	<0.100	<0.100	<.100	< 100	0.5	200.8	_0.5 -
Flow, MGD	N/A					N/A			- 				
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(1) It is advised that the influent and effluent samples are collected considering flow detention time through each plant. Analytical MQLs must be met for the effluent (and SHOULD be met for the influent) so the data can also be used for Local Limits assessment and NPDES application purposes.

(2) This value was calculated during the development of TBLL based on State WQ criteria, EPA guidance and either ADEQ Pretreatment staff Excel spreadsheets or the Permittee's consultant with concurrence from Pretreatment staff.

(3) Record the name of any pollutant [40 CFR 122, Appendix D, Table II and/or Table V] detected and the concentration at which they were detected.

MAHL - Maximum Allowable Headworks Level / MAHC - Maximum Allowable Headworks Concentration

WQ - "Water Quality Levels not to exceed" OR actual permit limit.

## ATTACHMENT A PRETREATMENT PROGRAM STATUS REPORT UPDATED SIGNIFICANT INDUSTRIAL USERS LIST

				ntrol								
Industrial User Name	NAICS Code	40 CFR XXX	Document		New User	Times Inspected	Times Sampled		Permit Limits			
		or N/A	Y/N	Last Action				BMR	90-day Compliance	Semi Annual	Self Monitoring	
Claridge	3354	467	Yes	2010	No	2	5	N/A	N/A	N/A	N/C	рН
Extrusion	3471			 								
Claridge	2531	466	Yes	2010	No	1	0	N/A	N/A	N/A	N/A	
Products	2542									-		
Anchor	3479 3363	433	Yes	2010	No	2	5	N/A	N/A	N/A	С	
Die Cast	, 3469									•		
Pace	3363	464	Yes	2010	No	2	5	N/A	N/A	N/A	N/C	Zinc
Industries												
	<del></del>											

Industrial User	Nature Violaț	e of ion	Number of Action Taken Compliance Schedule						Current	Comments		
Name	Reports	Limits	N.O.V.	A.O.	Civil	Criminal	Other	Collected	Date Issued	Date Due	Status	Commentes
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**ATTACHMENT B** SIGNIFICANT VIOLATIONS - ENFORCEMENT ACTIONS TAKEN

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#### ATTACHMENT C

# PRETREATMENT PERFORMANCE SUMMARY (PPS)

NOTE: ALL QUESTIONS REFER TO THE INDUSTRIAL PRETREATMENT PROGRAM AS APPROVED BY ADEQ. THE PERMITTEE SHOULD NOT ANSWER THE QUESTIONS BASED ON CHANGES MADE TO THE APPROVED PROGRAM WITHOUT DEPARTMENT AUTHORIZATION.

I. General Information

Control Authority Name <u>City of Harrison</u> Address P.O. Box 1715 1508 Silver Valley Road City <u>Harrison</u> State/Zip <u>Arkansas</u> 72601 Contact Person <u>Randy Reese</u> Position <u>Pretreatment Coordinator</u> Contact Telephone 870-741-4426 NPDES Permit Nos. AR0034321 Reporting Period January 1 2016 December 31 2016 (Beginning Month and Year) (Ending Month and Year) Total Number of Categorical IUs 4\_\_\_\_\_ Total Number of Significant Noncategorical IUs 0 Total Number of Non-Significant (yet permitted) IUs 2 II. <u>Significant Industrial</u> User Compliance SIGNIFICANT INDUSTRIAL USERS Categorical NonCategorical 1) No. of SIUs Submitting BMRs/Total \_0/0 N/A 2) No. of SIUs Submitting 90-Day Compliance 0/0 N/A 3) No. of SIUs Submitting Semiannual Reports/ Total No. Required. . . . . . . . . . . . . 0/0 0/0 4) No. of SIUs Meeting Compliance Schedule/ Total No. Required to Meet Schedule . . . 0/0 0/0 5) No. of SIUs in Significant Noncompliance/ 0/0 6) Rate of Significant Noncompliance for all SIUs (categorical and noncategorical) . . 0/0

# III. Compliance Monitoring Program

		SIGNIFICANT Categorical	INDUSTRIAL USERS NonCategorical
1:)	No. of Control Documents Issued/Total No. Required	4/4	0/0
2)	No. of Nonsampling Inspections Conducted.	8/0	0/0
3)	No. of Sampling Visits Conducted	. 7/0	0/0_
4)	No. of Facilities Inspected (nonsampling)	. 4/0	_0/0
5)	No. of Facilities Sampled	. <u>3/0</u>	0/0

#### IV. Enforcement Actions

	、		INDUSTRIAL USERS NonCategorical
1)	No. of Compliance Schedules Issued/No. of Schedules Required	0/0	0/0
2)	No. of Notices of Violations Issued to SIUs	2	0
3)	No. of Administrative Orders Issued to SIUs	0	0
4)	No. of Civil Suits Filed	0	0
5)	No. of Criminal Suits Filed	0	0
6)	No. of Significant Violators (attach newspaper publication)	0	0
7)	Amount of Penalties (not surcharges) Collected (total dollars/IUs assessed)	_0/0	0/0
8)	Other Actions (sewer bans, etc.)	0_	0

The following certification must be signed in order for this form to be considered complete:

I certify that the information contained herein is complete and accurate to the best of my knowledge.

Authorized Representative

, <u>2017</u> 25 Date