Harrison 2019 Pretreatment Program Annual Report

Yates, Adam

Mon 8/31/2020 6:03 PM

To: Randy Reese <randy.reese@cityofharrison.com>;

Cc:Healey, Richard <HEALEYR@adeq.state.ar.us>; Ramsey, David <RAMSEY@adeq.state.ar.us>; Allen-Daniel, Leslie <ALLEN-DANIEL@adeq.state.ar.us>;

Randy,

City of Harrison's April 2020 Pretreatment Program Annual Report was received, reviewed, and deemed complete and compliant according to the reporting requirements of 40 CFR 403.12(i).

Thank you for your timely submittal. If you have any questions or concerns on this matter, please feel free to contact me.

Kindly,

Adam Yates | State Pretreatment Coordinator Division of Environmental Quality | Office of Water Quality 5301 Northshore Drive | North Little Rock, AR 72118 t: (501) 682-0617 | e: <u>yates@adeq.state.ar.us</u>



4/9/2020

Department of Public Works

Pretreatment Department Randy Reese Pretreatment Coordinator 1508 Silver Valley Road Harrison, Arkansas 72601 Office: 870.741.4426 Fax: 870.741.5022 www.cityofharrison.com randy.reese@cityofharrison.com

To: Adam Yates

ADEQ 5301 Northshore Drive North Little Rock Arkansas 72118

Re: 2020 Pretreatment Performance Summary

Dear Mr Yates:

Please find enclosed the 2020 Pretreatment Performance Summary. If you have any questions or need any additional information, I can be reached at (870)741-4426 or my email is <u>randy.reese@cityofharrison.com</u>.

Sincerely

Randy Refese Pretreatment Coordinator

/ Certified Mail #7100 1870 0002 3983 3442

MONITORING RESULTS FOR THE ANNUAL PRETREATMENT REPORT

REPORTING YEAR: _____01-01____, 2019___TO ____12-31____, 2019__

 TREATMENT PLANT: City of Harrison
 NPDES PERMIT #AR0034321

 AVERAGE POTW FLOW:
 MGD
 % IU FLOW:
 %

METALS,	MAHC (Total) (μg/l)	Total) Once/quarter				WQ level/ limit (µg/l)	EFFLUENT DATES SAMPLED (µg/l) Once/quarter				LABORATORY ANALYSIS		
CYANIDE and PHENOLS											EPA MQL	EPA Method	Detection Level
		Date	Date	Date	Date	(2)	Date	Date	Date	Date	(μg/l) (1)	Used (1)	Achieved (µg/l)
		3/5/19	6/10/19	7/10/19	_12/16/19		2/26/19	5/16/19	7/10/19	10/24/19			
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	<0.100	.342	<.100	.230	7.0	<0.100	<.100	<.100	<.100	0.5	200.8	0.5
Copper	290.0	21.8	61.3	15.3	21.9	41.1	1.79	2.72	4.42	2.71	0.5	200.8	0.5
Lead	50.0	1.46	7.75	.842	3.07	18.7	<0.500	<.500	<.500	<.500	0.5	200.8	0.5
Mercury	.03	.052	0.199	0.00955	0.069	.010	0.00372	0.00467	0.00337	0.00489	.005	1631E ng/L 245.1 mg/L	0.5
Nickel	470.0	3.15	14.4	263	5.44	422.0	2.28	7.65	16.7	7.77	0.5	200.8	0.5
Selenium	10.0	<1.00	1.03	<1.00	<1.00	5.6	<1.00	<1.00	<1.00	<1.00	5	200.8	5.0
Silver	80.0	0.360	1.82	.177	.579	20.0	<0.100	<0.100	<.100	<.100	0.5	200.8	0.5
Zinc	300.0	131	297	57.5	117	372.9	36.1	39.2	30.6	48.7	20	200.8	20
Chromium	1000.0	1.17	7.92	<1.00	1.73	1255.0	<1.00	<1.00	<1.00	<1.00	10	200.8	10
Cyanide	20.0	<.005	<.005	<.005	<.005	5.8	<.005	<.005	<.005	<.005	10	4500CNE	10
Arsenic	80.0	<0.500	.781		<.500		<0.500	<.500	<.500	<.500	0.5	200.8	0.5
Molybdenum	70.0	1.25	1.87	1.32	3.28	N/A	1.22	1.57	1.29	<1.00		200. <u>8</u>	1.0
Phenols	N/A	12.70	.0199	.0127	.0067	N/A	<5.000	<.0050	.0061	.0064	5	420.1	5.0
Beryllium		<0.500	<.500	<.500	<.500		<.500	<.500	<.500	<.500	0.5	200.8	0.5
Thallium	N/A	<0.200	<.200	<.200	<.200	N/A	<.200	<.200	<.100	<.200	0.5	200.8	0.5
Flow, MGD	N/A	1.661	1.261	1.595	1.966	N/A	2.696	2.812	1.865	2.843			
(3)													
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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

	NAICS Code			40.000		ntrol					Compliance Sta	atus (C ,	NC, or SNC)	
Industrial User Name		40 CFR XXX or N/A	Document		New User	Times Inspected	Times Sampled	Report		ports		Permit Limits		
		OF 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	С			
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	С			
Industries														

ATTACHMENT B SIGNIFICANT VIOLATIONS - ENFORCEMENT ACTIONS TAKEN

Nature of Violation			Numbe	r of Act	ion Taken		Penalties	Compliance Schedule		Current	Comments
Reports	Limits	N.O.V.	A.O.	Civil	Criminal	Other	Collected	Date Issued	Date Due	Status	Conditerres
							·				
									l		
					,			-			
	Violat	Violation	Violation	Violation Numbe	Violation Number of Act.	Violation Number of Action Taken	Violation Number of Action Taken	Violation Penalties Collected	Reports Limits N.O.V. A.O. Civil Criminal Other Collected Date	Reports Limits N.O.V. A.O. Civil Criminal Other Collected Date Date	Reports Limits N.O.V. A.O. Civil Criminal Other Collected Date Date

*No significant violations or enforcement for this period

ATTACHMENT C

PRETREATMENT PERFORMANCE SUMMARY (PPS)

NOTE: ALL QUESTIONS REFER TO THE INDUSTRIAL PRETREATMENT PROGRAM <u>AS APPROVED</u> 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 ____City of Harrison

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 2019 December 31 2019

(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. Significant Industrial User Compliance

			INDUSTRIAL USERS NonCategorical
1)	No. of SIUs Submitting BMRs/Total No. Required	0/0	<u>N/A</u>
2)	No. of SIUs Submitting 90-Day Compliance Reports/No. Required	0/0	<u>N/A</u>
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/ Total No. of SIUs	0/4_	_0/0
6)	Rate of Significant Noncompliance for all SIUs (categorical and noncategorical) .		_0

III. Compliance Monitoring Program

		SIGNIFICANT Categorical	INDUSTRIAL USERS NonCategorical
1)	No. of Control Documents Issued/Total No. Required	4/4	
2)	No. of Nonsampling Inspections Conducted.	10	
3)	No. of Sampling Visits Conducted	. 10	
4)	No. of Facilities Inspected (nonsampling)	4	
5)	No. of Facilities Sampled	3	_0

IV. Enforcement Actions

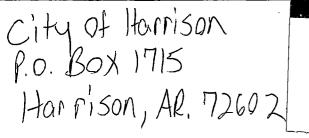
			INDUSTRIAL USERS NonCategorical
1)	No. of Compliance Schedules Issued/No. of Schedules Required	0/0	_0/0
2)	No. of Notices of Violations Issued to SIUs	0	0
3)	No. of Administrative Orders Issued to SIUs	0	0
4)	No. of Civil Suits Filed	0	0
5)	No. of Criminal Suits Filed	0	0
6)	No. of Significant Violators (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

Date







ADEQ/Adam Vates 5301 Northshore Prive N. Little Rock, AR. 72118