

Peltier, Hannah

From: Torrence, Rufus
Sent: Friday, May 17, 2013 10:34 AM
To: gwinkle@parker.com
Cc: moliver@parker.com; Peltier, Hannah
Subject: AR0035602 AFIN 56-00389 ARP001034 ContiTech/Continental Site Visit for Compliance Assurance: Inspection
Attachments: CTT_40CFR433_Diagram.doc; CTT Insp 20130424.doc; CTT Lab Report.doc



May 16, 2013

Gary Wrinkle, Facility Manager
ContiTech AG/Continental
748 Hwy 463 South
Trumann, AR 72472

Re: April 24, 2013 Site Visit for Compliance Assurance: Inspection
(AR0035602, Tracking No. ARP001034, AFIN 56-00389)

Dear Mr. Wrinkle:

Part of ADEQ responsibility to EPA is to ensure that inspections of industries regulated by categorical pretreatment standards (40 CFR Part 405 – 471) are performed on a periodic basis. These industries are referred to as Categorical Industrial Users (CIUs) if they discharge the regulated wastewater into the local Publicly Owned Treatment Works (POTW). In accordance to 40 CFR 403.12(e), these CIUs must submit periodic reports to the Control Authority (ADEQ or Department) and in accordance with 40 CFR 403.8(f)(2)(v) be inspected by the Control Authority at least bi-annually

ContiTech has processes (Etching & Coating) in the Trumann facility that are regulated by 40 CFR Part 433 and discharges to the City of Trumann POTW. Therefore, ContiTech is a CIU. On Wednesday (April 24, 2013), the Department conducted an inspection of ContiTech's facility.

The Department appreciates ContiTech taking the time on Wednesday to show ADEQ Engineer (Rufus Torrence) the facility in Trumann. The inspection consisted of inspecting the shop operations (constructing

automobile HVAC units), acid wash tank and tank sampling. During the inspection, we took a sample of the regulated wastewater that will enter the local POTW. The ADEQ lab analysis is attached. ContiTech wastewater complies with the limits in 40 CFR 433. ContiTech must treat the wastewater in the tank to meet 40 CFR433 limits. In the future, ContiTech should verify compliance with all 40 CFR 433 limits prior to batch discharging the wastewater. ContiTech must demonstrate compliance during the batch discharge by grabbing a composite sample during the batch discharge.

Please note that ContiTech must not purposely dilute the wastewater to achieve compliance. In accordance with 40 CFR 403.6(d) and 40 CFR Part 433; Subpart A—Metal Finishing, “*No User subject to the provisions of this subpart shall augment the use of process wastewater or otherwise dilute the wastewater as a partial or total substitute for adequate treatment to achieve compliance with this limitation [40CFR433.17(c)].*” Please complete the attached schematic to certify that ContiTech is not purposely diluting the wastewater to achieve compliance.

Finally, ContiTech must continue sampling (at least semi-annually) all regulated wastewater for 40 CFR 433 metals and cyanide before it enters the POTW. ContiTech has submitted an approved Toxic Organic Management Plan (TOMP) for the 40 CFR 433.11(e) toxic organics. ContiTech must follow the TOMP and update it as necessary.

The Department appreciates ContiTech’s continued efforts in periodic reporting.

If you have any questions or concerns, please contact the Department at (501) 682-0626 or torrence@adeq.state.ar.us.

Sincerely,

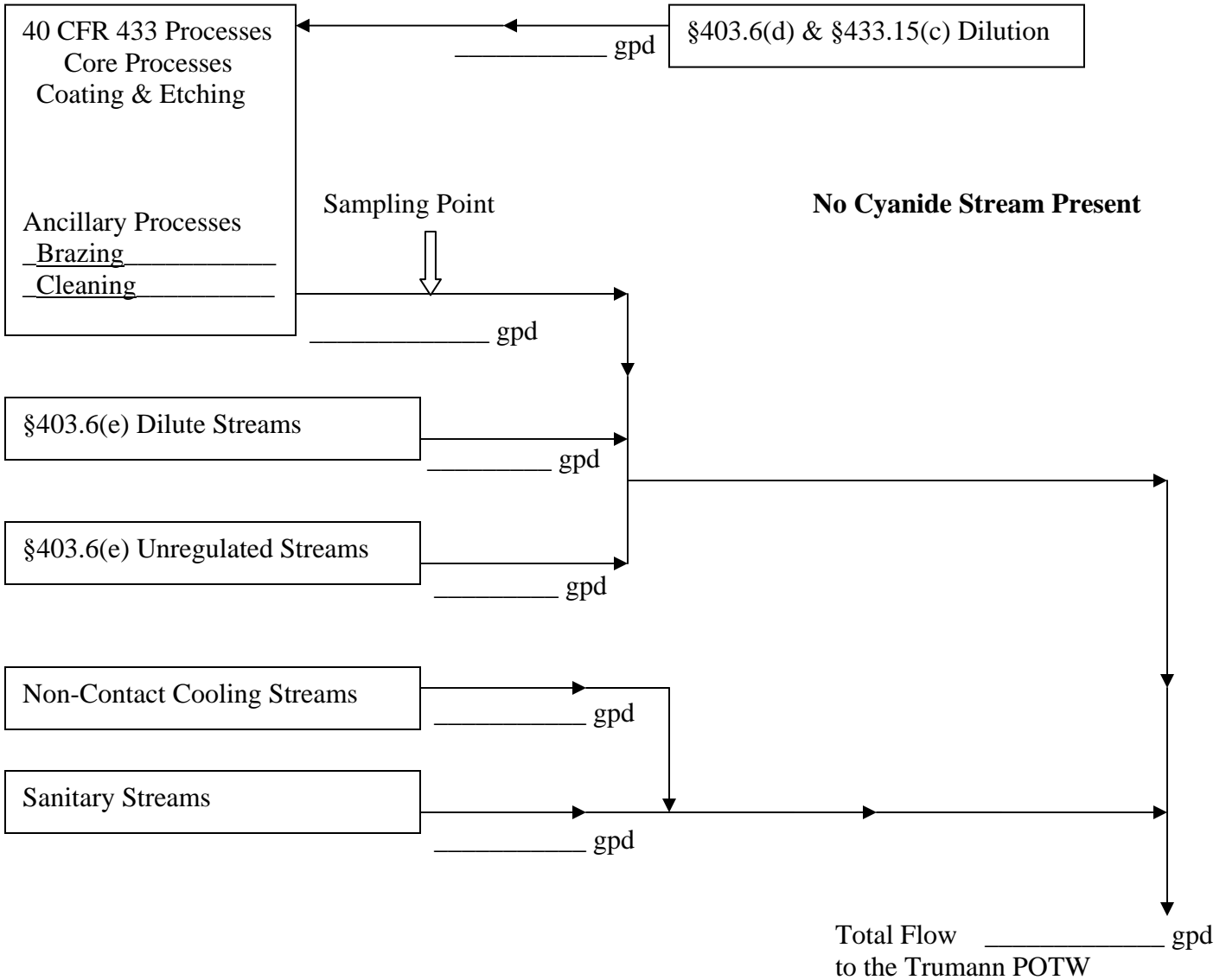


Rufus Torrence,
ADEQ Engineer

Cc: Malcolm Oliver, Tool Room Supv

Attachments: ADEQ Lab Analysis
ADEQ Inspection Report dated April 24, 2013

ContiTech/Continental Trumann, Arkansas



If a stream is not present, show NOT PRESENT or N/P. If a stream is present, the wastewater can enter the POTW but currently has no flow, show 0.0 gpd. If a stream is present but the wastewater cannot enter the POTW, show Zero Discharge or Z/D. If an unregulated stream is present but the User has decided not to declare it at this time, show N/P.

Signature of §403.12(b) Professional

Date


I certify under penalty of law that I have personally examined and am familiar with the information in this document and that this document was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated 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.

Facility Manager or the authorized §403.12(l) official

Date
CTT_40CFR433_Diagram.doc (April 30, 2013)

Pretreatment Industrial Inspection

Facility Information

Facility Name: ContiTech AG		Site Address: 748 Hwy 463 South	
<i>aka Continental Fluid Technology</i>		Trumann, AR 72472-3829	
Signatory Authority (Name & Title): Gary Wrinkle, Facility Manager			
Phone: (870) 483-0512		Mailing Address (if different): (Same)	
Fax: (870) 483-5453			
Address: 748 Hwy 463 South		Corporate Owner Name and address (if applicable):	
Trumann, AR 72472-3829		ContiTech North America, Inc (Continental, Inc)	
Phone: (870) 483-0512		Montvale, NJ	
Fax: (870) 483-5453		Phone: (201) 930-0600	
Contact Person (Name & Title):		Fax: (201) 930-0050	
Malcolm Oliver, Tool Room Team Leader		Corporate Contact: Francisco Hidalgo	
e-mail: moliver@parker.com		e-mail: francisco.hidalgo@contitech-usa.com	
Facility Permit # ARP001034		Last Inspection Date: March 22, 2011	
POTW (City) IU discharges to: Trumann Waterworks		POTW's NPDES # AR0035602	
Industrial Classification:	<input checked="" type="checkbox"/> Categorical	AFIN 56-00389	
If Categorical, list which CFR #(s) the facility is subject to: 40 CFR 433.17			
Table of Contents			
I. Summary of Inspection		Page	of
A. Inspection Objectives			
B. Inspection Analysis			
II. Pre-Inspection Meeting		Page	of
A. General Information			
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 <input checked="" type="checkbox"/> no <input type="checkbox"/>	Page	of
B. Pollution Prevention Activities	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Page	of
C. Pretreatment System	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Page	of
D. Chemical Storage	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Page	of
E. Spill/Slug Control Plan	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Page	of
F. Self-Monitoring/TOMP	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Page	of
Comments : <i>This facility recently opened. This facility is a small prototype shop and actual mass production takes place in the Mexico facility.</i>			
Inspector's Name (Print): Rufus Torrence		Signature: 	
IU Rep's Name (Print) Malcolm Oliver		Signature: (Not Applicable)	
Date and Time Inspection Ended: April 24, 2013 @ 11:40 pm			

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: <i>Compliance Assurance</i>			
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 checked="" 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 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:			
B. Inspection Analysis			
Were there any deficiencies/violations identified and noted during the inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Provide a brief narrative of deficiencies/violations or other concerns in the following areas:			
Records Review			
Process Area(s)			
Pretreatment System: <i>ContiTech must not purposely dilute the wastewater to achieve compliance. Refer to 40 CFR 433.13(c) and 40 CFR 403.6(d) for more details.</i>			
Self Monitoring Procedures			
Diversion/Sewer Meters			
Spill/Slug Control Plan			
Sampling Point			
Chemical Storage			

II. Pre-Inspection Meeting			
A. General Information			
Date and Time Inspection Started: <i>April 24, 2013 @ 10:35 am</i>		SIC code(s): <i>3714</i>	
IU Reps/Titles		Control Authority Reps/Titles	
<i>Malcolm Oliver, HSEF</i>		<i>Rufus Torrence, Engineer</i>	
End product(s): <i>Automobile HVAC prototypes</i>		Approx. # of units produced: <i>N/A</i>	
Days of Operation: <i>Monday thru Friday</i>		Days of Production (if different): <i>Same</i>	
Hours of Operation: <i>8 to 5</i>		Hours of Production (if different): <i>Same</i>	
Shift 1, hrs.: to	Shift 2, hrs.: to	Shift 3, hrs.: to	
# of Employees: <i>20</i>	Peak Mos.:	"Off" Mos.:	
Are there any scheduled plant shutdowns? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> If yes, when?			
Are there designated plant clean-up days? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" 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 type="checkbox"/> No <input checked="" type="checkbox"/>			
If Yes, explain:			
Are there any Safety Concerns or Identified Hazards that the inspector should be aware of: <input type="checkbox"/> Yes. <input checked="" type="checkbox"/> No			
If Yes, explain:			
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"/> N/A <input type="checkbox"/> If yes, obtain copy of updated schematic for facility file.			
Processes? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> If yes, explain:			
Production Levels? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> If yes, explain:			
Raw materials? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> If yes, explain:			
Flow rates? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> If yes, explain			
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"/>			
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 type="checkbox"/> no <input type="checkbox"/> N/A <input checked="" type="checkbox"/>			
Production and flows verified for Production-Based Standards? yes <input type="checkbox"/> no <input type="checkbox"/> N/A <input checked="" type="checkbox"/>			
What is the current avg. production rate and process flow? <i>Not Applicable</i>			
Is the prod. rate or flow substantially different (+/- 20%) from those used in calculating limits? yes <input type="checkbox"/> no <input type="checkbox"/>			
<i>Not Applicable</i>			

Attachment A: Industrial Process(es)

List process(es) generating wastewater. Note if it's categorical (federally regulated w/pretreatment limits) or not

1. Acid Cleaning/Coating	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	4.	Yes <input type="checkbox"/> No <input type="checkbox"/>
2.	Yes <input 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): **ContiTech has a small tank filled with hydrofluoric acid. The parts are hand held during dipping.**

General observations of facility's indoor housekeeping: **Good**

General observations of area outside facility's building: **Good**

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

<input type="checkbox"/> Process Rinse Overflows	<input type="checkbox"/> Equip. Cleanup	<input type="checkbox"/> Floor Cleanup	<input type="checkbox"/> Spent Bath Solutions
<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"/>	<input type="checkbox"/>	<input type="checkbox"/>

List Major Raw Materials and Chemicals used:

Oils

Check Waste Stream Pollutants of Concern from Process(es)

<input type="checkbox"/> BOD	<input type="checkbox"/> CN ⁻	<input checked="" type="checkbox"/> Metals (List) Cd, Cr, Cu, Pb, Ni, Ag, Zn	<input type="checkbox"/> Solvents (List)
<input type="checkbox"/> TSS	<input type="checkbox"/> Cl ₂		
<input type="checkbox"/> O&G	<input type="checkbox"/> S ⁻		
<input type="checkbox"/> pH	<input type="checkbox"/>		

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 <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Does this facility practice P2? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Environmental Management System in place? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
ISO Certified? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Written Standard Operating Procedures? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Explain:	
Preventative Maintenance Program Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (hydraulic systems, valves, pumps, etc)	
Explain:	
Water Reuse: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Explain:	
Cost Accounting to Track Savings: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Explain:	
Inventory Control / "Green Purchasing": Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (lean manufacturing/"env. friendly purchasing", etc)	
Explain:	
Employee Training: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Explain:	
Spent Solvent Reclamation? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Explain:	
Recycle Paper, Aluminum, Boxes, and Pallets? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Explain:	
Recycle Waste Oil, Solvents, and Lubricants? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Explain:	
Other Activities	
P2 Equipment/Practices in use:	
<input type="checkbox"/> Overflow Alarms	<input checked="" type="checkbox"/> Aqueous Cleaning Solutions
<input type="checkbox"/> Fog Spray Rinsing	<input type="checkbox"/> Countercurrent Rinsing
<input type="checkbox"/> Dragout Collection Trays	<input type="checkbox"/> Seal-Less Pumps
<input 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 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

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 checked="" 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"/>

**This facility is capturing all the regulated wastewater in a surge tank where it can undergo chemical precipitation if necessary.*

Provide Brief Description of Pretreatment System (leaks, cleanliness, equipment not in working order):

200 gallon surge tank

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

System Operator(s) Name:

Does discharge permit require licensed operator? Yes No N/A

Is the System Operator(s) licensed by the State of Arkansas (per Reg. # 3?) 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 Pretreatment System? Batch Continuous Combination

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

Volume of each batch: gallons per

Describe process from which batch originated (spent bath, e.g.):

Approximate duration of batch discharge:

Meter Type	Calibration Procedure and Frequency	Comments (Totalizer Reading)

Attachment D: Chemical Storage Area(s)		
Does the facility have a designated chemical storage area(s)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Was this area(s) visually inspected? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Describe Chemical Storage Area(s)	Are there floor drains in this area?	If yes, where does this drain lead to?
1. <i>Oil & Waste Oil</i>	<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 checked="" type="checkbox"/> Dikes, Berms for Containment ¹	<input 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 type="checkbox"/> Other	
Chemical Inventory List (MSDS) on file? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Were any new MSDS reviewed during the Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
If yes, list below:		
Chemical storage comments: ¹ <i>Drum containment only/ Spill Vats</i>		
Chemical handling procedures (totes, dolly, buckets, hardline, etc):		

Attachment E: Spill/Slug Control Plan	
Does the facility have a Spill/Slug control plan? ¹	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no ¹
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 type="checkbox"/> N/A
(A) Describes discharge practices including non routine batch (slug) discharges	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> N/A
(B) Describes storage and handling of chemicals	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> N/A
(C) Procedures for immediate notification to POTW of slug discharges	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> N/A
(D) 1. Describes measures for controlling toxic/hazardous pollutants	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> N/A
2. Describes procedures and equipment for emergency response	<input type="checkbox"/> yes <input type="checkbox"/> no <input 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 type="checkbox"/> N/A
4. Does the facility have Spill/Slug Notification Procedures posted?	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> N/A
5. Are worker personnel provided training in the event of a spill or slug discharge?	<input 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 type="checkbox"/> no
Is it posted in areas where chemicals are used and stored?	<input type="checkbox"/> yes <input type="checkbox"/> no
If Yes how many?	
Are appropriate personnel provided training in the event of a spill or slug discharge?	<input type="checkbox"/> yes <input type="checkbox"/> no
Have there been any non-routine, episodic discharges or chemical spills in the past year?	<input type="checkbox"/> yes <input type="checkbox"/> no
(Briefly Describe, Include Dates)	
Was the City notified of these occurrences? <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> N/A	
Visual Inspection of Discharge Lines/Points	
Provide description of manhole condition and flow channel of the following where applicable:	
Sampling / Monitoring Point	
Total Flow Monitoring Point	
Upstream Manhole	
Point of Connection:	

¹*No Floor Drains in facility*

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.

Where is the sample point located? *Acid Tank*

<input type="checkbox"/> End of Process	<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: *Arkansas Analytical in Little Rock, AR*

Automatic Sampler or Manual

IU Self-Monitoring Results reviewed: 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:

<input checked="" type="checkbox"/> Cd(t) <i>Twice/yr</i>	<input checked="" type="checkbox"/> Cu(t) <i>Twice/yr</i>	<input checked="" type="checkbox"/> Cr(t) <i>Twice/yr</i>	<input checked="" type="checkbox"/> Ni(t) <i>Twice/yr</i>	<input checked="" type="checkbox"/> Pb(t) <i>Twice/yr</i>
<input checked="" type="checkbox"/> Ag(t) <i>Twice/yr</i>	<input checked="" type="checkbox"/> Zn(t) <i>Twice/yr</i>	<input type="checkbox"/> pH	<input checked="" type="checkbox"/> CN(t)	<input type="checkbox"/> CN(a-c)
<input checked="" type="checkbox"/> TTO-Vol <i>Twice/yr</i>	<input checked="" type="checkbox"/> TTO-B/N <i>Twice/yr</i>	<input checked="" type="checkbox"/> TTO-A.E. <i>Twice/yr</i>	<input checked="" type="checkbox"/> TTO-Pest <i>Twice/yr</i>	<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: *February 28, 2012*

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:



5301 Northshore Drive
North Little Rock, AR 72118
Telephone: 501-682-0744

Client Report For: Contitech AG 2013 1375
Attention:
Client Address:

,

Report Date: May 16, 2013
LAB ID: AR13APR24-10
Comment:

Approved By: _____

Date: May 16, 2013

Client: Special Samples

Client Sample ID: CTT

Lab ID: 2013-1375

Collection Date: 4/24/2013 11:20:00 AM

Matrix: Water

Analyses

Total Metals by EPA 200.8

EPA 200.8

Batch: 13051310 Run: 1

	<u>Result</u>	<u>Reporting Limit</u>	<u>MDL</u>	<u>Qual</u>	<u>Unit</u>
Aluminum	1360	200	20		ug/L
Antimony	<100	100	5		ug/L
Arsenic	<10	10	0.5		ug/L
Barium	<100	100	2.0		ug/L
Beryllium	<5	5	0.1		ug/L
Boron	297	250	5.0		ug/L
Cadmium	<10	10	0.3		ug/L
Calcium	3.80	0.4	0.04		mg/L
Chromium	<10	10	0.3		ug/L
Cobalt	<10	10	0.5		ug/L
Copper	45.2	10	0.5		ug/L
Iron	416	200	10.0		ug/L
Lead	<10	10	0.1		ug/L
Magnesium	<1	1	0.1		mg/L
Manganese	28.4	10	0.2		ug/L
Nickel	<25	25	0.5		ug/L
Potassium	811	10	0.05		mg/L
Selenium	<20	20	0.5		ug/L
Silver	<50	50	1.0		ug/L
Sodium	275	0.4	0.02		mg/L
Thallium	<25	25	0.05		ug/L
Vanadium	<25	25	1.0		ug/L
Zinc	314	30	2.0		ug/L
Dilution Factor	10				
Analyzed By	Robert Graddy				
Analysis Date/Time	May 9 2013 10:21PM				
Prep By					
Prep Date/Time					

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

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