

Wilson, Tabatha

From: Gilliam, Allen
Sent: Thursday, August 28, 2014 10:10 AM
To: Malcolm Oliver
Cc: scottytw@centurytel.net; Fuller, Kim; Wilson, Tabatha
Subject: AR0035602_ContiTechs ARP001034 Aug 2014 semi annual Pretreatment report with ADEQ reply_20140828
Attachments: Semi-Annual Report 8-14.pdf

Malcolm,

ContiTech's August 2014 semi-annual Pretreatment report was electronically received, reviewed, deemed complete and compliant with the Federal Pretreatment reporting requirements in 40 CFR 403.12(e) and more specifically in compliance with its Metal Finishing standards located in 40 CFR 433.17.

Please include your contract lab's analytical results with future semi-annual reports. The QA/QC sheets are not necessary for this office's records, they're for your review to ensure Contitech's samples were validated and accurate. Just the results' sheet is necessary.

One question: If you took only one (1) grab sample, how did you come up with an average Ag value (albeit both were non-detect) different than the maximum value?

Thank you for your timely report remaining in compliance with the Federal Pretreatment Requirements in 40 CFR 403.

Sincerely,

Allen Gilliam
ADEQ State Pretreatment Coordinator
501.682.0625

ec: Scotty Jones, Trumann's Water & Wastewater Manager

E/NPDES/NPDES/Pretreatment/Reports

From: Malcolm Oliver [<mailto:Malcolm.Oliver@fluid.contitech.us>]
Sent: Thursday, August 28, 2014 8:44 AM
To: Gilliam, Allen
Cc: scottytw@centurytel.net
Subject: Contitech Semi-Annual Report

Mr. Gilliam,

Attached is the Semi-Annual waste water report for Contitech in Trumann, AR. The next report will be submitted in February 2015.

Mit freundlichen Grüßen / Best regards

Malcolm Oliver

Engineering Tech
Product Market Segment Air Conditioning
Business Unit ContiTech Fluid Technology
ContiTech North America, Inc.
748 Hwy 463 South
Trumann AR 72472 USA

tel.:870-483-0512 EXT 330
cell: 803-322-0341
fax:870-483-0517

ContiTech North America, Inc.
748 Hwy 463 South
Trumann, AR 72472
Phone 870-483-0512

August 28, 2014

Allen Gilliam
ADEQ NPDES Engineer
Arkansas Department of Environmental Quality
5301 Northshore Drive
North Little Rock, Arkansas 72118

RE: Semi-Annual report

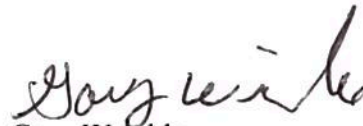
Dear Mr. Gilliam:

Enclosed is the August Semi-Annual report for the ContiTech facility located in Trumann, Arkansas. The next Semi-Annual report will be submitted in February 2015.

Sincerely,



Malcolm Oliver
Engineering Tech



Gary Wrinkle
Facility Manager
Authorized Representative

Enclosure

CC: Scotty Jones, Manager
Trumann Waterworks
106 E Main St.
Trumann, AR 72472

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

CONTITECH
748 Hwy 463 South
Trumann, AR 72472

B. FACILITY & LOCATION ADDRESS

CONTITECH
748 Hwy 463 South
Trumann, AR 72472

C. FACILITY CONTACT: Malcolm Oliver **TELEPHONE NUMBER:** (870)483-0512 **e-mail:** Malcolm.Oliver@fluid.contitech.us

(2) REPORTING PERIOD--FISCAL YEAR From Feb 1 to Jan 31 (Both Semi-Annual Reports must cover Fiscal Year)

A. MONTHS WHICH REPORTS ARE DUE

February & August

B. PERIOD COVERED BY THIS REPORT

FROM: 2/14 **TO:** 8/14

(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

- Cleaning
- Etching
- _____
- _____
- _____

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

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.

C. Number of Regular Employees at this Facility

18

D. [Reserved]

(4) FLOW MEASUREMENT

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

Process	Average	Maximum	Type of Discharge
Regulated (Core & Ancillary)	2250	2250	Batch once per month
Regulated (Cyanide)			
' 403.6(e) Unregulated*			
' 403.6(e) Dilute			
Cooling Water			
Sanitary	750	830	Continuous
Total Flow to POTW			*****

*"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	0.0016	0.083	0.161	< 0.016	0.047	< 0.022	.593	<0.010	0.169
Ave Measured	0.0016	0.083	0.161	< 0.015	0.047	<0.020	.593	<0.010	

Sample Location Sump

Sample Type (Grab or Composite) Grab

Number of Samples and Frequency Collected One, Semi-annual

40CFR136 Preservation and Analytical Methods Use: Yes No

(6) CERTIFICATION

A. [Reserved]

[Reserved]

B. CHECK ONE: ' 433.11(e) TOXIC ORGANIC ANALYSIS ATTACHED X ' 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.

Gary Wrinkle
(Typed Name)


(Corporate Officer or authorized representative)

Date of Signature 8-28-14

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.

Gary Wrinkle
NAME OF CORPORATE OFFICER OR AUTHORIZED REPRESENTATIVE


SIGNATURE

Facility Manager
OFFICIAL TITLE

8-28-14
DATE SIGNED



11701 Interstate 30, Bldg. 1, Ste. 115
 Little Rock, AR 72209
 PHONE: 501-455-3233
 FAX: 501-455-6118

CHAIN OF CUSTODY RECORD

CLIENT INFORMATION		Project Description		Turnaround Time		Preservation Codes:									
ContiTech	Wastewater Sample	1 Day (100%)	1. Cool 4 Degrees Centigrade	4. Thiosulfate for Dechlorination											
748 Hwy. 263 S	Reporting Information	2 Day (50%)	2. Sulfuric Acid (H ₂ SO ₄), pH < 2	5. Hydrochloric Acid(HCl)											
Trumann, AR 72472	Telephone: 870-483-0512	3 Day (25%)	3. Nitric Acid (HNO ₃), pH < 2	6. Sodium Hydroxide (NaOH), pH > 12											
Attn: Malcolm Oliver	Email: moliver@parker.com	5 Day (Reserved)	TEST PARAMETERS		Bottle Type Code										
	Preservative Code:	1.6	1.3												
	Bottle Type:	P	P												
Sampler(s) Signature: <i>Malcolm Oliver</i>		Sampler(s) Printed: <i>Malcolm Oliver</i>		Arkansas Analytical Work Order Number: 1408409-01											
Field Number	SAMPLE COLLECTION Dates	Time/s	Grab	Comp	Number of Bottles	Sample Matrix	IDENTIFICATION/ DESCRIPTION	Cyanide	Cd	Cr	Cu	Pb	Ni	Ag	Zn
	8-19-14	1:30 PM	X		2	Water	Wastewater	X	X						
1. Relinquished by: (Signature) <i>Malcolm Oliver</i>		Date/Time	2. Received by: (Signature) <i>Fedex</i>		3. RECEIVED ON RECEIPT:		REMARKS / SAMPLE COMMENTS								
	8-19-14	2:00 PM			1. CUSTODY SEALS: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No										
					2. CONTAINERS CORRECT: <input type="checkbox"/> Yes <input type="checkbox"/> No										
					3. COC/LABELS AGREE: <input type="checkbox"/> Yes <input type="checkbox"/> No										
					4. RECEIVED ON ICE: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No										
					5. TEMPERATURE ON RECEIPT: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No										
					6. TEMPERATURE GUN ID: <i>HTT #2</i>										
3. Relinquished by: (Signature) <i>Fedex</i>		Date/Time	4. Received by lab: (Signature) <i>Sydney James</i>		FOR COMPLETION BY LAB ONLY										
	8-20-14,	0900													