

Gage, Hannah

From: Gilliam, Allen
Sent: Thursday, December 31, 2015 10:02 AM
To: 'lryan@southernaluminum.com'; collen tuggle
Cc: Gage, Hannah; Bernie K. Finch; magnolia russell thomas
Subject: AR0043613_Southern Aluminum ARP001059 Dec 2015 semi annual Pretreatment report_20121231
Attachments: Southern Aluminum Dec 2015 semi Annual Pretreatment Rpt.pdf; Pretreatment Signatory Certification.docx

Colleen,

Southern Aluminum's December 2015 semi-annual Pretreatment report was received on 12/23/15, reviewed, deemed complete and compliant with the reporting requirements in 40 CFR 403.12(e) and more specifically compliant with the Metal Finishing pretreatment standards in 40 CFR 433.17.

No further action is deemed necessary at this time.

Note: the attached chain of custody (C of C) is not complete. The person who did the sampling is shown, but it does not show who it was relinquished by or received by all the way to the lab. Results from a broken C of C may not be admissible in a court of law. Please give this some attention in the future.

If Southern Aluminum's signatory authority/authorized representative has changed from Leon Ryan please submit the 2nd attachment within ten (10) days from the date on this correspondence.

Please reply that you've received this correspondence.

Sincerely,

Allen Gilliam
ADEQ State Pretreatment Coordinator
501.682.0625

ec: Russell Thomas, Magnolia Wastewater Manager
Bernie Finch, Finch Environmental, Consultant to Southern Aluminum

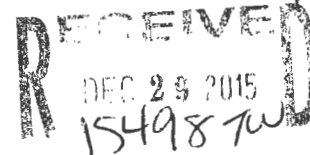
E/NPDES/NPDES/Pretreatment/Reports

From: McConnell, Melissa
Sent: Thursday, December 31, 2015 8:44 AM
To: Gilliam, Allen
Subject: Southern Aluminum Dec 2015 semi annual Pretreatment Rpt.

Finch Environmental, PLC

9 Heritage Park Circle
North Little Rock, Arkansas 72116-8528

*Municipal and Industrial
NPDES Storm Water
Pollution Prevention Plans
Control Plans Environmental Permitting
Reporting Hazardous Waste
Pretreatment*



12/17/2015

Mr. Allen Gilliam
Pretreatment Coordinator
Water Division
ADEQ
5301 Northshore Drive
North Little Rock, AR 72118

Re: Southern Aluminum Company, Inc., Pretreatment Tracking Number ARP001059

Dear Mr. Gilliam,

On behalf of Southern Aluminum Company, please accept this attached Semi-Annual Report. Also included with this submittal is the laboratory analytical results and chain of custody form.

Please accept this submittal and contact me with questions.

Thank you.

Sincerely,

Bernie K. Finch
Finch Environmental, PLC

Attachment

Cc (w/attachments)
Russell Thomas, City of Magnolia

Cc/(w/ attachments)
Colleen Tuggle, Southern Aluminum Company

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

Southern Aluminum
P.O. Box 884
Magnolia, AR 71754

B. FACILITY & LOCATION ADDRESS

Southern Aluminum
5 Highway 82 West
Magnolia, AR 71753

C. FACILITY CONTACT: Colleen Tuggle

TELEPHONE NUMBER: 870.234.8660

e-mail: tuggle@southernaluminum.com

(2) REPORTING PERIOD--FISCAL YEAR 2014 (Both Semi-Annual Reports must cover Fiscal Year)

A. MONTHS WHICH REPORTS ARE DUE

July and December for each semi-annual reporting period.

B. PERIODS COVERED BY THIS REPORT

FROM: July 1, 2015 TO: December 31, 2015

(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

Coating _____

Cleaning _____

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.

None .

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

C. Number of Regular Employees at this Facility 135

135

D. [Reserved]

(4) FLOW MEASUREMENT**INDIVIDUAL & TOTAL PROCESS FLOWS DISCHARGED TO POTW IN GALLONS PER DAY**

Process	Average	Maximum	Type of
Regulated (Core & Ancillary)	See note below	See note below	2882
Regulated (Cyanide)	0	0	N/A
' 403.6(e) Unregulated*	0	0	N/A
' 403.6(e) Dilute	0	0	N/A
Cooling Water**	0	0	N/A
Sanitary**	0	0	N/A
Total Flow to POTW	See note below	See note below	2882

***"Unregulated" has a precise legal meaning; see 40CFR403.6(e).

**Indicate if these Streams commingle with Regulated Streams BEFORE treatment

(5) MEASUREMENT OF POLLUTANTS

A. TYPE OF TREATMENT SYSTEM

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	0.015	0.013	0.032	0.002	0.025	0.045	1.203	0.0100	N/A
Ave Measured	0.015	0.013	0.032	0.002	0.025	0.045	1.203	0.0100	--

Sample Location Flow-weighted composite samples taken of wash tank and rinse tank contributions commingled prior to discharge to municipal collection system. Dip tank did not discharge during the period 07-01-2015 through 12-31-2015.

Sample Type (Grab or Composite) Grab

Number of Samples and Frequency One (1) sample collected 12-02-2015

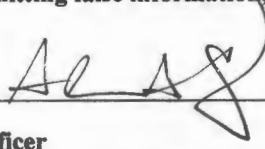
40 CFR 136 Preservation and Analytical Methods Use: Yes No

Indicate Combined Wastestream Factor if Dilution Streams Exist w/Regulated Streams N/A

(6) CERTIFICATION

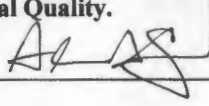
A. Required under 40 CFR 403.12(g)

I certify under penalty of law that 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.

Allison Schultz 
(Typed Name)
Chief Operating Officer
(Corporate Officer or authorized representative)

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

Allison Schultz 
(Typed Name)
Chief Operating Officer
(Corporate Officer or authorized representative)

Date of Signature 12/18/15

Intentionally left blank

'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: None

(8) GENERAL COMMENTS

Flow (Discharge)

Southern Aluminum batch discharges to the City of Magnolia POTW in the following manner:

Rinse Tank (Capacity: 832 gallons)

Wash Tank (Capacity: 2050 gallons)

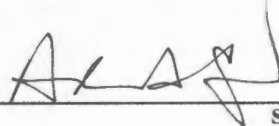
Dip Tank (Capacity: 1000 gallons)*

* Dip Tank did not discharge during the period beginning 07-01-2015 and ending 12-31-2015

(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.

Allison Schultz
NAME OF CORPORATE OFFICER OR AUTHORIZED REPRESENTATIVE


SIGNATURE

Chief Operating Officer
OFFICIAL TITLE

12.18.15
DATE SIGNED

Environmental Services Company, Inc.
 Corporate Office
 13715 West Markham P.O. Box 55146
 Little Rock, AR 72211 Little Rock, AR 72215
 website: www.esclabs.com



Environmental Services Company, Inc.
 Northwest Branch
 1107 Century
 Springdale, AR 72764

Phone: 501-221-2565 Fax: 501-221-1341

CHAIN OF CUSTODY

Phone 479-750-1170 Fax: 479-750-1172

Client Information				Project Information						Requested Parameters							
Company Name:		Southern Aluminum Co., Inc.		Permit/Project #:													
Address:		#5 Hwy 82 West Magnolia, AR 71753		Purchase Order #:													
Telephone:		800-221-0408		Work Order #:													
Fax:		870-234-4665		Sampler Name(s):		JEFF FARRAR Colleen Tuggle											
Contact:		Ms. Colleen Tuggle		and Signature(s):		<i>JM Farrar</i> <i>Colleen Tuggle</i>											
ESC Client Number:		2754															
Sample Identification		Sample Collection				Sample Containers				Cyanide(9)	Metals (See Comments)						
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#								
	1512010358	12-2-15	0430	Grab	Water	Plastic	1 Liter	NaOH+Ascorbic	1	X							
				Grab	Water	Plastic	8 oz	HNO3 to pH <2*	1	X							
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Custody Seals:		Used?	Intact?						
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Turnaround:		Regular	Special						
Relinquished By: (Signature and Printed Name)		Date	Time	Received for Lab By: (Signature and Printed Name)		Date	Time	Were samples properly preserved:		Yes	No						
				<i>for a Cant Dad (at about</i>		<i>12/3/15</i>	<i>1050</i>										
Comments: Cd(48.PS), Cr(24.PS), Cu(29.PS), Pb(82.PS), Ni(28.PS), Ag(47.PS), Zn(30.PS)		Flow Data		Field Test		Time	Analyst	Result	Result	Units							
		Analyst:		pH: 7.1													
		Time:															
		Reading:															
		Units:															
* Per 40 CFR 136.3 Table II Note 19, samples preserved in laboratory.						Fecal Start:				This Document is Page 1 of 1							



Environmental Services Company, Inc.

Corporate Office

13715 West Markham

Little Rock, Arkansas 72211

501-221-2565 (p)

501-221-1341 (f)

Carlsbad, New Mexico

575-887-7-ESC (372)

Springdale, Arkansas

479-750-1170

www.esclabs.com

Sample Receipt Checklist/Sample Condition Report

Client: 2754 Southern Aluminum

Receipt Date: 12/03/15

Work Order/Project #: 12-358

Received by: DWC

PO: _____

Number of Containers: 2

Completed by: DWC

Carrier: _____

Date: 12/02/15

Reviewed by: _____

Date: _____

Shipping Container/cooler in good condition?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	Not Present	<input type="checkbox"/>
Shipping container contains residual ice or cold packs?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	Not Applicable	<input type="checkbox"/>
Custody seals intact on shipping container/cooler?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Not Applicable	<input checked="" type="checkbox"/>
Custody seals intact on sample bottles?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Not Applicable	<input checked="" type="checkbox"/>
Chain of Custody present?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>		
Chain of Custody signed when relinquished and received?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>		
Chain of Custody agrees with sample labels?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>		
Samples in proper container/bottle?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>		
Sample containers intact?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>		
Sufficient sample volume for indicated test?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>		
Container/Temp Blank in compliance?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	Temp: <u>9.9</u> °C	
All samples received within holding time?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>		
Water- VOA vial have zero headspace?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Not Applicable	<input checked="" type="checkbox"/>
Preserved samples at appropriate pH?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	Not Applicable	<input type="checkbox"/>

If sample conditions does not meet Sample Acceptance Policy, contact client for disposition of sample or approval for testing.

Client contacted By: (Signature and Printed Name)	Date	Time	Remarks/Notes
			received on ice

Sample Disposition			Client Signature	Date	Time
Analyze	Resample	Dispose of			

RE: Documentation of authority to sign pretreatment reports.

PURPOSE: Pretreatment rules at 40 CFR 403.12(l) specify who can sign reports required by industries subject to the Pretreatment Regulations in 40 CFR 403. These rules require the information on this form and apply to those signing electronic submissions as well. Accordingly, this form must be provided before ADEQ can accept documents submitted by an individual.

USES: This form establishes who can sign documents for a Permittee provided to ADEQ in compliance with a permit for discharge of wastewater to the sanitary sewer under the Federal Pretreatment and State Waste Discharge permit programs (pretreatment permits).

APPLICABILITY: The below authorization is for submittals required of:
_____ (Name of Company)

CERTIFICATION: I understand: A) the information I provide on this form is governed by rules for civil documents and the Clean Water Act. B) I must submit a new form to ADEQ when this information changes. C) I may need to periodically provide ADEQ a new form so they can verify the information is current and valid.

I am (check one)

A general partner or the proprietor of the business for which the permit is issued. **OR**

A responsible corporate officer. Specifically I am (further check one of the two below)

A president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or a person who performs similar policy- or decision-making functions for the corporation. **OR**

The manager of one or more manufacturing, production, or operating facilities, authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and taking measures to assure compliance with environmental laws and regulations. I have the authority to ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit submittals; and authority to sign documents has been assigned or delegated to me in accordance with corporate procedures.

Signature of the Responsible Official

Date

Name (First Name, MI, Last Name) Typed or Printed

Mailing Address

City, State, and Zip

Title

(

)
Area Code

Phone

Fax

Email Address: _____

(Optional) ___ I hereby designate the following person or position as my Duly Authorized Representative for purposes of signing documents required by the permit issued to this facility:

This person or position has responsibility for the overall operation of the facility from which the Industrial Discharge originates, (e.g. manager, operator, superintendent, or equivalent), or has the overall responsibility for environmental matters for the company.

___ This designation is in addition to prior designations.

___ This designation supersedes all prior authorizations

___ This designation is valid until _____. (If no date given valid until rescinded)

Signature of the Duly Authorized Representative

Name (First Name, MI, Last Name) Typed or Printed

Mailing Address

City, State, and Zip

Title

()

Phone

()

Cell

Email Address: _____

OR ___ I hereby designate the following position as having the authority to sign documents required by the pretreatment permit issued to this facility: _____.

LEGAL CITATIONS:

40 CFR 403.12(l) *Signatory requirements for Industrial User reports.* The reports required by paragraphs (b), (d), and (e) of this section shall include the certification statement as set forth in §403.6(a)(2)(ii), and shall be signed as follows:

(1) By a responsible corporate officer, if the Industrial User submitting the reports required by paragraphs (b), (d), and (e) of this section is a corporation. For the purpose of this paragraph, a responsible corporate officer means:

(i) a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy- or decision-making functions for the corporation, or

(ii) The manager of one or more manufacturing, production, or operating facilities, provided, the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiate and direct other comprehensive measures to assure long-term environmental compliance with environmental laws and regulations; can ensure that the necessary systems are established or actions taken to gather complete and accurate information for control mechanism requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.

(2) By a general partner or proprietor if the Industrial User submitting the reports required by paragraphs (b), (d), and (e) of this section is a partnership, or sole proprietorship respectively.

(3) By a duly authorized representative of the individual designated in paragraph (l)(1) or (l)(2) of this section if:

(i) The authorization is made in writing by the individual described in paragraph (l)(1) or (l)(2);

(ii) The authorization specifies either an individual or a position having responsibility for the overall operation of the facility from which the Industrial Discharge originates, such as the position of plant manager, operator of a well, or well field superintendent, or a position of equivalent responsibility, or having overall responsibility for environmental matters for the company; and

(iii) the written authorization is submitted to the Control Authority.

(4) If an authorization under paragraph (l)(3) of this section is no longer accurate because a different individual or position has responsibility for the overall operation of the facility, or overall responsibility for environmental matters for the company, a new authorization satisfying the requirements of paragraph (l)(3) of this section must be submitted to the Control Authority prior to or together with any reports to be signed by an authorized representative.

403.6(a)(2) *Contents of Application.* Each request shall contain a statement: (ii) ...Any person signing the application statement submitted pursuant to this section shall make the following certification:

I certify under penalty of law that 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.