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Custom Metal Finisher's, Inc.
P. O. Box 725
Walnut Ridge, Arkansas 72476

Rufus Torrence, Jr.
Pretreatment Engineer
ADEQ
5301 Northshore Drive
Little Rock, Arkansas 72118

April 16, 2009

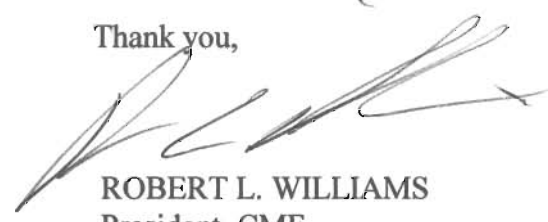
RE: SAR

Dear Sir:

Enclosed please find the SAR for Custom Metal Finisher's, Inc., for April 2009. Laboratory analysis results for metals including cyanide, and the chain-of-custody, are enclosed.

If you have any questions, please feel free to contact me.

Thank you,



ROBERT L. WILLIAMS
President, CMF

cc: WR Mayor
WR Water Supt

Enc: SAR
Chain-of-Custody
Laboratory Results

NPDES PERMIT FILE
NPDES # AR 0046566
AFIN # 38-00040

Permit PN

Correspondence

✓ Technical Backup
5-4-09 Date Scanned

SEMI-ANNUAL REPORT FOR INDUSTRIAL USERS REGULATED BY 40CFR413

Use of this form is not an EPA/ADEQ requirement

Return to: Water Div/NPDES Pretreatme

(1) IDENTIFYING INFORMATION	
<p>A. LEGAL NAME & MAILING ADDRESS Custom Metal Finishers, Inc. P. O. Box 725 Walnut Ridge, AR 72476</p>	<p>B. FACILITY & LOCATION ADDRESS Custom Metal Finishers, Inc. One Custom Road Walnut Ridge, AR 72476</p>
<p>C. FACILITY CONTACT: <u>Robert Williams</u> TELEPHONE NUMBER: <u>(870) 886-7781</u></p>	
(2) REPORTING PERIOD—FISCAL YEAR From Mar 1 to Feb 28/29 (Both Semi-Annual Reports must cover Fiscal Year)	
<p>A. MONTHS WHICH REPORTS ARE DUE <u>Apr</u> & <u>OCT</u></p>	<p>B. PERIOD COVERED BY THIS REPORT FROM: <u>Oct 08</u> TO: <u>Apr 09</u></p>
(3) DESCRIPTION OF OPERATION	
<p>A. REGULATED PROCESSES</p> <p><u>Subparts)</u></p> <p>CHECK EACH APPLICABLE BLOCK</p> <p><input checked="" type="checkbox"/> A - Electroplating Common Metals</p> <p><input type="checkbox"/> B - Electroplating Precious Metals</p> <p><input type="checkbox"/> C - [Reserved]</p> <p><input type="checkbox"/> D - Anodizing</p> <p><input type="checkbox"/> E - Coating</p> <p><input type="checkbox"/> F - Chemical Etching and Milling</p> <p><input type="checkbox"/> G - Electroless Plating</p> <p><input type="checkbox"/> H - Printed Circuit Board Manufacture</p>	<p>B. CHANGES: <small>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.</small></p> <p>No major changes have been made in the regulated processes since filing the last SAR.</p>
<p>C. Number of Regular Employees at this Facility: <u>6</u></p>	<p>[Reserved]</p>

(4) FLOW MEASUREMENT (COND)

B. INDIVIDUAL PROCESS FLOWS DISCHARGED TO POTW IN GALLONS PER DAY

Process	Type of Discharge	Date: <u>04/06/09</u>	Date:
Regulated (Total)	Continuous	12000	
Regulated (Cyanide)	NA	NA	
§403.6(e) Unregulated*	NA	NA	
§403.6(e) Dilute	NA	NA	
Cooling Water	Continuous	4500	
Sanitary	Continuous	200	
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
- Complexation Destruction
- Cyanide Destruction
- Other _____
- None

B. COMMENTS ON TREATMENT SYSTEM

C. THE INDUSTRIAL USER MUST PERFORM SAMPLING AND ANALYSIS ON THE EFFLUENT FROM ALL REGULATED PROCESSES (AFTER TREATMENT, IF APPLICABLE). THE USER MUST SAMPLE THE EFFLUENT ON THE SAME DAY WHEN THE FLOW IS MEASURED. THE DATE BELOW MUST MATCH THE DATE IN SECTION 4.B ABOVE. ZERO CONCENTRATIONS ARE NOT ACCEPTABLE; LIST THE DETECTION LIMIT IF CONCENTRATION WAS BELOW DETECTION LIMIT.

Pollutant (mg/l)	Cd	Cr	Cu	Pb	Ni	Zn	Tot Metals ¹	CN, T ²	CN, A ²	TTO ³
Max for 1 day	1.2	7.0	4.5	0.6	4.1	12	19.5	1.9	5.0	4.57 2.13
Monthly Ave	0.7	4.0	2.7	0.4	2.6	6.6	6.8	1.0	2.7	
Date: <u>4/6/09</u>	0.04	21	0.10	0.04	0.01	30				
Date:										

Parameters in shaded blocks apply when the Regulated Process Flow in Section 4.B above exceeds 10,000 gal per calendar day.

¹Per 40CFR413.02(e) Tot Metals include Cr, Cu, Ni & Zn only.

²ADEQ present policy for cyanide monitoring for §413 CIUs is identical to §433 CIUs.

³Provide TTO total from lab report here or provided certification in Section 6.B below.

"Filter Discharge"

Sample Location One Custom Road

Sample Type (Grab or Composite) Composite (24-hr comp every 2 hr over 24-hr period)

Number of Samples and Frequency Collected 1 sample semi-annually

40CFR136 Preservation and Analytical Methods Use: Yes No

(6) CERTIFICATION

[Reserved]

B. CHECK ONE: REQUIRED TOXIC ORGANIC ANALYSIS ATTACHED TTO CERTIFICATION PROVIDED BELOW

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 Pollution Control and Ecology.

ROBERT L. WILLIAMS
(Typed Name)

(Owner or authorized representative)

Date of Signature 04/16/09

CORPORATE ACKNOWLEDGEMENT (Optional)

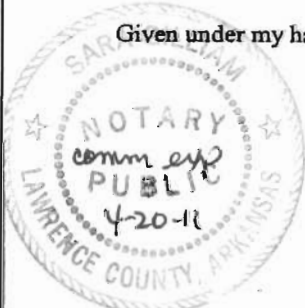
STATE OF ARKANSAS)
COUNTY OF Lawrence)

Before me, the undersigned authority, on this day personally appeared

Robert L. Williams of
Custom Metal Finishers, Inc.

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 16th day of April, 2009



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

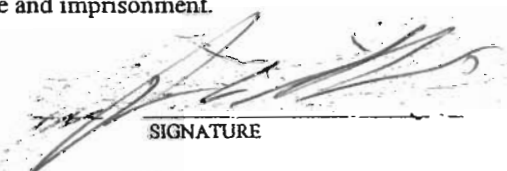
Custom Metal Finishers, Inc. has no toxic or organic solvents such as trichloethylene or perchlorethylene or trichlorethane #1.1.1 or paint solvents or lacquer thinners or cyanide.

(9) SIGNATORY REQUIREMENTS [40CFR403.12(f)]

I certify under penalty of law that I have personally examined and am familiar with the information in this semi-annual compliance report and all attachments, and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the report, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

ROBERT L. WILLIAMS
NAME OF CORPORATE OFFICER OR AUTHORIZED REPRESENTATIVE

President, CMF
OFFICIAL TITLE


SIGNATURE
04/16/09
DATE SIGNED



Custom Metal Finishers, Inc.
ATTN: Mr. Robert Williams
PO BOX 725
Walnut Ridge, AR 72476

Dear Mr. Robert Williams:

Project Description: One (1) water sample(s) received on April 9, 2009
SAR APR 09

This report is the analytical results and supporting information for the sample submitted to American Interplex Corporation (AIC) on April 9, 2009. The following results are applicable only to the sample identified by the control number referenced above. Accurate assessment of the data requires access to the entire document. Each section of the report has been reviewed and approved by the laboratory director or a qualified designee.

Data has been validated using standard quality control measures performed on at least 10% of the samples analyzed. Quality Assurance, instrumentation, maintenance and calibration were performed in accordance with guidelines established by the cited methodology.

AMERICAN INTERPLEX CORPORATION

By _____

A handwritten signature in black ink, appearing to read 'John Overbey', is written over a horizontal line. Below the line, the name 'John Overbey' and title 'Laboratory Director' are printed.

John Overbey
Laboratory Director

Enclosure(s): Chain of Custody



Custom Metal Finishers, Inc.
PO BOX 725
Walnut Ridge, AR 72476

ANALYTICAL RESULTS

AIC No. 128225-1

Sample Identification: CMF 1,2 04/06/09 10:00am 04/07/09 10:00am

Analyte	Method	Result	RL	Units	Batch	Qualifier
Total Cyanide	SM4500-CN C,E	< 0.01	0.01	mg/l	W28649	
Cyanides Amenable to Chlorination	SM4500-CN G	< 0.01	0.01	mg/l	W28665	
Cadmium	EPA 200.8	< 0.004	0.004	mg/l	S25303	
Chromium	EPA 200.8	0.21	0.007	mg/l	S25303	
Copper	EPA 200.8	0.010	0.006	mg/l	S25303	
Lead	EPA 200.8	< 0.04	0.04	mg/l	S25303	
Nickel	EPA 200.8	< 0.01	0.01	mg/l	S25303	
Zinc	EPA 200.8	0.30	0.002	mg/l	S25303	

CHAIN OF CUSTODY / ANALYSIS REQUEST FORM

Client: <i>Custom Metal SAR APR 09</i>			PO No.		NO OF BOTTLES	ANALYSES REQUESTED							AIC CONTROL NO: <i>12822.5</i>	
Project Reference: <i>R. Williams</i>			SAMPLE MATRIX			cadmium	chromium	copper	nickel	lead	zinc	cyanide	AIC PROPOSAL NO:	
Project Manager: <i>R. Williams</i>			W	S	Carrier: <i>4PS</i>									
Sampled By:			G	C	A	S	Received Temperature C <i>2 C</i>					Remarks		
AIC No.	Sample Identification	Date/Time Collected	B	P	R	L								
<i>1</i>	<i>CMF1</i>	<i>10:00am (040609)</i> <i>12:00pm</i> <i>2:00pm</i> <i>4:00pm</i> <i>6:00pm</i> <i>8:00pm</i> <i>10:00pm (040709)</i> <i>12:00am</i> <i>2:00am</i> <i>4:00am</i> <i>6:00am</i> <i>8:00am</i> <i>10:00am</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
													<i>2</i>	<i>cyanide sample (CMF2) - sent in bottle with preservatives provided by Am Int Lab</i>
														<i>A</i>
		Container Type												
		Preservative												
G = Glass P = Plastic V = VOA vials H = HCl to pH2 T = Sodium Thiosulfate NO = none S = Sulfuric acid pH2 N = Nitric acid pH2 B = NaOH to pH12 Z = Zinc acetate													Field pH calibration on _____ @ _____ Buffer:	
Turnaround Time Requested: (Please circle) NORMAL or EXPEDITED IN _____ DAYS					Relinquished By:			Date/Time		Received By:		Date/Time		
Expedited results requested by: _____					Relinquished By:			Date/Time		Received in Lab By: <i>Shane Parker</i>		Date/Time: <i>4-9-09 10:30am</i>		
Who should AIC contact with questions: <i>R. Williams</i>					Comments: <i>Preserved w/ nitric acid to pH < 2</i>									
Phone: <i>(870) 896-7781</i> Fax: <i>NA</i>														
Report Attention to: <i>R. Williams</i>														
Report Address to: <i>CMF P.O. Box 725 Walnut Ridge, AR 72476</i>														