



State of Ohio Environmental Protection Agency

**Southeast District Office**

2195 Front Street  
Logan, Ohio 43138

TELE: (740) 385-8501 FAX: (740) 385-6490  
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Ted Strickland, Governor  
Lee Fisher, Lieutenant Governor  
Chris Korleski, Director

August 6, 2009

**Re:** Muskingum County  
AK Steel Corporation  
2009 CEI - Permit # 01D00002\*ID  
Correspondence (IWW)

Mr. Cory Levensgood, Env. Engineer  
AK Steel Corporation  
1724 Linden Avenue  
P.O. Box 1520  
Zanesville, Ohio 43702

Dear Mr. Levensgood:

On June 30, 2009, Jake Greuey, with Ohio EPA, and I conducted a Compliance Evaluation Inspection (CEI) at the AK Steel facility located in Zanesville, Ohio. The inspection was conducted to determine AK Steel's compliance status with their NPDES permit. We were accompanied by you. A copy of the inspection report is attached and a copy of the Compliance Sampling Inspection test results from the sampling events conducted on April 20 and April 21, 2009 is also attached.

Please contact me at (740) 380-5227 with any comments or questions.

Sincerely,

Scott Foster  
Environmental Specialist 2  
Division of Surface Water

SF/dh

Enclosure

**NPDES**  
Compliance Inspection Report

**A. NATIONAL DATA SYSTEM CODING**

Permit No.	NPDES No.	Date	Inspection Type	Inspector	Facility Type
01D00002*ID	OH0006858	June 30, 2009	C	S	2

**B. FACILITY DATA**

Name and Location of Facility Inspected	Entry Time	Permit Effective Date
AK Steel Corporation, Zanesville Works 1724 Linden Avenue Zanesville, Ohio 43701	9:00 a.m.	April 1, 2008
	Exit Time	Permit Expiration Date
	10:30 a.m.	March 31, 2011

Name(s) and Title(s) of On-Site Representative(s)	Phone Number(s)
Cory Levensgood, Environmental Engineer	(740) 450-5599
Name, Address and Title of Responsible Official	Phone Number
Susan Taylor, Plant Manager	(740) 450-5600

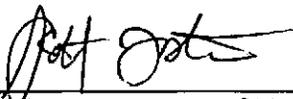
**C. AREAS EVALUATED DURING INSPECTION**

<u>S</u> Permit	<u>S</u> Flow Measurement	<u>N</u> Pretreatment
<u>S</u> Records/Reports	<u>N</u> Laboratory	<u>S</u> Compliance Schedules
<u>S</u> Operations & Maintenance	<u>S</u> Effluent/Receiving Waters	<u>S</u> Self-Monitoring Program
<u>S</u> Facility Site Review	<u>N/A</u> Sludge Storage/Disposal	<u>--</u> Other
<u>N/A</u> Collection System		

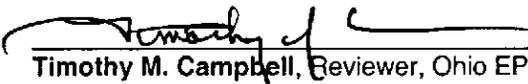
(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated; N/A = Not Applicable)

**D. SUMMARY OF FINDINGS/COMMENTS** (attach additional sheets if necessary)

See attached letter.

  
\_\_\_\_\_  
Scott Foster, Inspector, Ohio EPA, Southeast District Office

8/5/09  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Timothy M. Campbell, Reviewer, Ohio EPA, Southeast District Office

8/6/09  
\_\_\_\_\_  
Date

**E. PERMIT VERIFICATION**

Inspection Observations Verify the Permit	Yes	No	N/A	N/E
a. Correct name and mailing address of permittee	X			
b. Correct name and location of receiving waters	X			
c. Product(s) and production rates conform with permit application (industries)	X			
d. Flows and loadings conform with NPDES permit	X			
e. Treatment processes are as described in permit application/briefing memo	X			
f. New treatment process(es) added since last inspection		X		
g. Notification given to state of new, different, or increased discharges			X	
h. All discharges are permitted	X			
i. Number and location of discharge points are as described in permit	X			

**F. COMPLIANCE SCHEDULES/VIOLATIONS**

	Yes	No	N/A	N/E
a. Any significant violations since the last inspection		X		
b. Permittee is taking actions to resolve violations			X	
c. Permittee has compliance schedule		X		
d. Compliance schedule contained in: _____			X	
e. Permittee is meeting compliance schedule			X	

**G. OPERATION AND MAINTENANCE**

Treatment Facility Properly Operated and Maintained	Yes	No	N/A	N/E
a. Standby power available: Generator: _____ Dual Feed: _____		X		
b. Adequate alarm system available for power or equipment failures	X			
c. All treatment units in service other than backup units	X			
d. Sufficient operating staff provided: No. of shifts: _____ Days/Week: _____	X			
e. Operator holds unexpired license of class required by permit Class: _____			X	
f. Routine and preventive maintenance schedule/performed on time	X			
g. Any major equipment breakdown since last inspection		X		
h. Operation and maintenance manual provided and maintained				X
i. Any plant bypasses since last inspection		X		
j. Regulatory agency notified of bypasses: _____ on MORS _____ 800 No.			X	
k. Any hydraulic and/or organic overloads experienced since last inspection		X		



