



State of Ohio Environmental Protection Agency

**Southeast District Office**

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Logan, Ohio 43138

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Ted Strickland, Governor  
Lee Fisher, Lieutenant Governor  
Chris Korleski, Director

May 5, 2010

**Re:** Morgan County  
Miba Bearings US, LLC  
2010 CEI  
Correspondence (IWW)

Ms. Heidi Suhoski  
Environmental Health and Safety Coordinator  
Miba Bearings US, LLC  
5037 North State Route 60  
McConnelsville, Ohio 43756

Dear Ms. Suhoski:

On April 8, 2010, I conducted a Compliance Evaluation Inspection at Miba Bearings located in McConnelsville, Ohio. Ron Hardesty and you represented Miba Bearings and accompanied me during the inspection. The purpose of the inspection was to determine Miba's compliance with NPDES Permit Number 01C00000\*KD and the Ohio Water Pollution Control Act, Revised Code Chapter 6111.

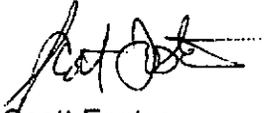
As a result of the inspection and review of our files, I have the following comments:

1. A lot of improvements were made in the facility. The PH monitoring system and adjustment system for chemical addition has been replaced with new probes, flow meters, and chemical adjust equipment. All electrical connection boxes have been replaced for the PH system and reference probes have been installed as a back up to the main system.
2. The sanitary plant has been cleaned out, sludge removed and one of the sand filters has been replaced.
3. Miba has complied with the DFFO's issued to them in October of 2009 and has met the compliance schedule contained in its' NPDES permit. The permit has been modified to remove the compliance schedule and add additional codes for PH monitoring. Also, we have received a letter from Miba's attorney asking for termination of its orders. It is currently under review in our Columbus office.

Attached is a copy of the inspection report which indicates satisfactory ratings for all areas inspected. Miba should take the appropriate actions to maintain the facility in compliance with all terms and conditions of the NPDES permit.

The Ohio EPA strongly encourages pollution prevention as the preferred approach for waste management. The first priority of pollution prevention is to eliminate the generation of wastes and pollutants at the source (source reduction). For those wastes or pollutants that are generated, the second priority is to recycle or reuse them in an environmentally sound manner. You can benefit economically, help preserve the environment, and improve your public image by implementing pollution prevention programs. For more information about pollution prevention, including fact sheets and U.S. EPA's Facility Pollution Prevention Guide, (EPA/600/R-92/088), you may contact the Ohio EPA Pollution Prevention Section at (614) 644-3469 or me for additional information.

Sincerely,



Scott Foster  
Environmental Specialist 2  
Division of Surface Water

SF/dh

Enclosure

c: Bernie Anderson, Plant Manager, MIBA Bearings  
c: Kelly Smith, Unit Manager, MIBA Bearings

**NPDES**  
Compliance Inspection Report

**A. NATIONAL DATA SYSTEM CODING**

Permit No.	NPDES No.	Date	Inspection Type	Inspector	Facility Type
OIC00000*KD	OH0048372	April 8, 2010	C	S	2

**B. FACILITY DATA**

Name and Location of Facility Inspected	Entry Time	Permit Effective Date
MIBA Bearings US, LLC 5037 N. State Route 60 McConnelsville, Ohio 43756	9:32 a.m.	May 1, 2006
	Exit Time	Permit Expiration Date
	1:15 p.m.	January 31, 2011

Name(s) and Title(s) of On-Site Representative(s)	Phone Number(s)
Heidi Suhoski, Environmental Health and Safety Coordinator	(740) 962-4242 Ext. 1001
Kelly Smith, Unit Manager	(740) 962-4242 Ext. 1414
Ron Hardesty, Environmental Technician	(740) 962-4242 Ext. 1416
Name, Address and Title of Responsible Official	Phone Number
Kelly Smith, Unit Manager MIBA Bearings US, LLC 5037 N. State Route 60 McConnelsville, Ohio 43756	(740) 962-4242 Ext. 1414

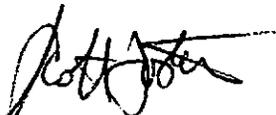
**C. AREAS EVALUATED DURING INSPECTION**

<u>S</u> Permit	<u>S</u> Flow Measurement	<u>N/A</u> Pretreatment
<u>S</u> Records/Reports	<u>S</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>S</u> Sludge Storage/Disposal	<u>N/A</u> Other
<u>N/A</u> Collection System		

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

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

See attached letter.

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

5/5/10  
\_\_\_\_\_  
Date

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

5/7/10  
\_\_\_\_\_  
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			

Comments:

**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: <u>Part I, C. of current permit</u>	X			
e. Permittee is meeting compliance schedule	X			

Comments: a.,b.,c.,d.,e., -Miba was issued DFFO's in October of 2009. Have complied and permit has been modified and compliance schedule removed.

**G. OPERATION AND MAINTENANCE**

Treatment Facility Properly Operated and Maintained	Yes	No	N/A	N/E
a. Standby power available: Generator ____ Dual Feed <u>X</u>	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: # of shifts <u>3</u> Days/Week <u>5/6</u>	X			
e. Operator holds unexpired license of class required by permit Class: <u>A</u>	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 Number			X	
k. Any hydraulic and/or organic overloads experienced since last inspection	X			

Comments:

## H. SLUDGE MANAGEMENT

a. Sludge Management Plan (SMP):           N/A           Submitted Date  
          -           Approval Number  
          -           Not submitted  
          -           N/A

	Yes	No	N/A	N/
b. Sludge Management Plan current			X	
c. Sludge adequately disposed (Method: <u>          </u> )			X	
d. If sludge is incinerated, where is ash disposed of? <u>          </u>			X	
e. Is sludge disposal contracted (Name: <u>Zemba's</u> )	X			
f. Has amount of sludge generated changed significantly since last inspection	X			
g. Adequate sludge storage provided at plant			X	
h. Land application sites monitored and inspected per SMP			X	
i. Records kept in accordance with state and federal law	X			
j. Any complaints received in last year regarding sludge			X	
k. Is sludge adequately processed (digestion, dewatering, pathogen control)	X			

Comments: Item f., decreased.

## I. SELF-MONITORING PROGRAM

Part 1 - Flow Measurement	Yes	No	N/	N/
a. Primary flow measuring device properly operated & maintained. Type of device: <u>001</u> ultrasonic & parshall flume <u>          </u> calculated from influent <u>          </u> weir <u>          X          </u> Other <u>002</u> ultrasonic & weir <u>          </u> Specify: <u>001-5/13/09 002-6/23/09</u>	X			
b. Calibration frequency adequate (date of last calibration: <u>see above</u> )	X			
c. Secondary instruments (totalizers, recorders etc.) properly operated and maintained	X			
d. Flow measurement equipment adequate to handle expected ranges of flows	X			
e. Actual flow discharged is measured	X			
f. Flow measuring equipment inspection frequency: <u>          X          </u> Daily <u>          </u> Weekly <u>          </u> Monthly <u>          </u> Other				

Part 2 - Sampling	Yes	No	N/A	N/E
a. Sampling location(s) are as specified by permit	X			
b. Parameters and sampling frequency agree with permit	X			
c. Permittee uses required sampling method	X			
d. Sample collection procedures are adequate	X			
i. Samples refrigerated during compositing	X			
ii. Proper preservation techniques used	X			
Conform with 40 CFR 136.3	X			
e. Monitoring records (e.g., flow, pH, D.O., etc.) maintained for a minimum of three years including all original strip chart recordings (e.g., continuous monitoring instrumentation, calibration, and maintenance records)	X			
f. Adequate records maintained of sampling date, time, exact location, etc.	X			

Comments: Coshocton Environmental, chemistry and biology samples; Alloway, toxicity

Part 3, Laboratory - General		Yes	No	N/A	N/E
a.	EPA approved analytical testing procedures used (40 CFR 136.3)				X
b.	If alternate analytical procedures are used, proper approval has been obtained				X
c.	Analyses being performed more frequently than required by permit				X
d.	If (c) is yes, are results reported in permittee's self-monitoring report				X
e.	Commercial laboratory used	X			
	1. Parameters analyzed by commercial lab: All except PH, DO, CL2				
	2. Lab name: Coshocton Environmental, Alloway				

Comments: DMRQA 29 completed 9/21/09-All results Satisfactory

#### J. EFFLUENT/RECEIVING WATER OBSERVATIONS

Outfall #	Oil Sheen	Grease	Turbidity	Visible Foam	Visible Float Solids	Color	Other
001	None	None	None	None	None	Clear	

Comments: 001- No visible contaminants

#### K. MULTIMEDIA OBSERVATIONS

	Yes	No	N/A	N/E
a. Are there indications of sloppy housekeeping or poor maintenance in work and storage areas or laboratories		X		
b. Do you notice staining or discoloration of soils, pavement, or floors		X		
c. Do you notice distressed (unhealthy, discolored, dead) vegetation		X		
d. Do you see unidentified dark smoke or dustclouds coming from sources		X		
e. Do you notice any unusual odors or strong chemical smells		X		
f. Do you see any open or unmarked drums, unsecured liquids, or damaged containment facilities		X		

If any of the above are observed, ask the following questions:

1. What is the cause of the conditions?
2. Is the observed condition or source a waste product?
3. Where is the suspected contaminant normally disposed?
4. Is this disposal permitted?
5. How long has the condition existed and when did it begin?

Comments: