OhioEPA
State of Ohio Environmental Protection Agency

Southeast District Office

2195 Front Street
Logan, Ohio 43138

TELE: (740) 385-8501 FAX: (740) 385-6490
www.epa.state.oh.us

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

May 14, 2010

Re: Ross County
City of Chillicothe
Compliance Inspection
Correspondence (PWW)

Mayor and Council
City of Chillicothe
35 South Paint Street
Chillicothe, Ohio 45601

Dear Mayor and Council:

On May 5, 2010, I conducted a Compliance Evaluation Inspection (CEI) of the Chillicothe Wastewater Treatment Plant. The purpose of the inspection was to determine the facility's compliance status with the terms and conditions of NPDES Permit Number 0PD00003*MD. Mr. Wayne Grigsby, Plant Superintendent was present during the inspection.

At the time of my inspection, all treatment units other than backup units were found to be in operation and well maintained. Inspection of the final effluent was observed relatively clear with no objectionable odor and the facility found to be in substantial compliance with the terms and conditions of your NPDES permit. Enclosed is a copy of my detailed inspection report of the treatment works in addition to the lab inspection which was conducted with Shana Bennett, lab technician.

If you have any questions please call me at (740) 380-5416.

Sincerely,

Jake Greuey
District Representative
Division of Surface Water

JJG/jg

Enclosure

c: Wayne Grigsby, Superintendent

NPDES
Compliance Inspection Report

A. NATIONAL DATA SYSTEM CODING

Permit No.	NPDES No.	Date	Inspection Type	Inspector	Facility Type
0PD00003*MD	OH0024406	May 5, 2010	C	S	1

B. FACILITY DATA

Name & Location of Facility Inspected	Entry Time	Permit Effective Date
Chillicothe WWTP 405 Environmental Way Chillicothe, Ohio 45601	9:30 a.m.	August 1, 2009
	Exit Time	**Permit Expiration Date**
	12:00 p.m.	January 31, 2014

Name(s) & Title(s) of On-Site Representative(s)	Phone Number(s)
Wayne Grigsby, Superintendent	740-774-1223
Name, Address, & Title of Responsible Official	**Phone Number**
Mayor and Council City of Chillicothe 35 S. Paint Street Chillicothe, Ohio 45601	740-774-1185

C. AREAS EVALUATED DURING INSPECTION

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

Jake Greuey

Jake Greuey, Inspector, Ohio EPA, Southeast District Office — Date 5/17/10

Timothy M. Campbell

Timothy M. Campbell, Reviewer, Ohio EPA, Southeast District Office — Date 5/18/10

Sections E through K: Complete on all inspections as appropriate (N/A = Not Applicable; N/E = Not Evaluated)

E. PERMIT VERIFICATION

Inspection Observations Verify the Permit	YES	NO	N/A	N/E
a. Correct name & mailing address of permittee	X			
b. Correct name & location of receiving waters	X			
c. Product(s) & production rates conform with permit application (industries)			X	
d. Flows & 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 & 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: ____			X	
e. Permittee is meeting compliance schedule			X	

Comments:

G. OPERATION AND MAINTENANCE

Treatment Facility Properly Operated & Maintained	YES	NO	N/A	N/E
a. Standby power available: Generator: X 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: 3 Days/Week: 7	X			
e. Operator holds unexpired license of class required by permit. Class: IV	X			
f. Copy of certificate of Operator of Record displayed on-site	X			
g. Minimum operator staffing requirements fulfilled (OAC 3745-7)	X			
h. Routine & preventive maintenance schedule/performed on time	X			
i. Any major equipment breakdown since last inspection		X		
j. Operation & maintenance manual provided & maintained	X			
k. Any plant bypasses since last inspection		X		
l. Regulatory agency notified of bypasses: ____ on MORS ____ 800 No.			X	
m. Any hydraulic and/or organic overloads experienced since last inspection		X		

Record Keeping	YES	NO	N/A	N/E
a. Log book provided	X			
b. Log book kept on-site	X			
c. Log book contains the following:				
1. Identification of treatment works	X			
2. Date/time of arrival/departure of ORC	X			
3. Daily record of operation and maintenance activities	X			

4. Laboratory results (unless documented on bench sheets)	X			
5. Identification of person making log entries	X			
d. Is the ORC submitting written notification to Ohio EPA and permittee when a collection system overflow, treatment plant bypass or effluent limit violation has occurred	X			

Comments:

Collection System	YES	NO	N/A	N/E
a. Percent combined system: 0 %			X	
b. Any collection system overflows since last inspection: CSO ___ SSO: ___		X		
c. Regulatory agency notified of overflow (SSOs)			X	
d. CSO O&M plan provided and implemented			X	
e. CSOs monitored and reported in accordance with permit			X	
f. Portable pumps used to relieve system			X	
g. Lift station alarm systems provided and maintained	X			
h. Are lift stations equipped with permanent standby power or equivalent	X			
i. Is there an inflow/infiltration problem (separate sewer system), or were there any major repairs to collection system since last inspection		X		
j. Any complaints received since last inspection of basement flooding		X		
k. Are any portions of the sewer system at or near capacity		X		

Comments:

H. SLUDGE MANAGEMENT

	YES	NO	N/A	N/E
a. Sludge adequately disposed. Method: Land Application	X			
b. If sludge is incinerated, where is ash disposed of?			X	
c. Is sludge disposal contracted? Name: W.D. Farms	X			
d. Has amount of sludge generated changed significantly since last inspection		X		
e. Adequate sludge storage provided at facility	X			
f. Land application sites monitored and inspected per state rules	X			
g. Records kept in accordance with state rules	X			
h. Any complaints received in last year regarding sludge		X		
i. Is sludge adequately processed (digestion, dewatering, pathogen control) in accordance with Ohio EPA rules	X			

Comments:

I. SELF-MONITORING PROGRAM

Part 1 – Flow Measurement	YES	NO	N/A	N/E
a. Primary flow measuring device properly operated & maintained. Type of device: ____ ultrasonic & parshall flume ____ calculated from influent ____ weir __X__ other ____ ultrasonic & weir specify: Magnetic Insertion	X			
b. Calibration frequency adequate. Date of last calibration: May 1, 2009	X			
c. Secondary instruments (totalizers, recorders, etc.) properly operated & 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: __X__ Daily ____ Monthly ____ Weekly ____ Other				

Comments:

Part 2 – Sampling	YES	NO	N/A	N/E
a. Sampling locations(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, & maintenance records)	X			
f. Adequate records maintained of sampling date, time, exact location, etc.	X			

Comments:

Part 3 – Laboratory, General	YES	NO	N/A	N/E
a. Written Standard Operating Procedures (SOPs) for all analysis performed on-site	X			
b. EPA approved analytical testing procedures used (40 CFR 136.3)	X			
c. If alternate analytical procedures are used, proper approval has been obtained			X	
d. Analyses being performed more frequently than required by permit		X		
e. If (c) is yes, are results reported in permittee's self-monitoring report			X	
f. Commercial laboratory used: Parameters analyzed by commercial lab: Metals, O&G, Mercury, Nitrate Lab name: Ginosko Laboratories and Enviroscience for Bioassays	X			

Comments:

Part 4 – Laboratory, Quality Control/Quality Assurance	YES	NO	N/A	N/E
a. Quality assurance manual provided and maintained		X		
b. Satisfactory calibration and maintenance of instruments and equipment	X			
c. Adequate records maintained	X			
d. Results of latest U.S. EPA quality assurance performance sampling program: Date: July 1, 2009 X Satisfactory _____ Marginal _____ Unsatisfactory				

Comments:

J. EFFLUENT/RECEIVING WATER OBSERVATIONS

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

Comments:

K. MULTIMEDIA OBSERVATIONS

Collection System	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:

General Lab Criteria

Facility: City of Chillicothe WWTP, 0PD00003*MD

Criteria	Standard Methods Requirement	Acceptable?		Rating
Balance				
• Standard Weights	• Either NIST Class s or ASTM/ANSI Class 1 weights[1,2]	☒ Yes	☐ No	A
• Calibration Frequency /Documentation	• Calibration verification required at least once each day the balance is used.[3]	☒ Yes	☐ No	
• Cleanliness, air movement, vibration	• Cleanliness of balance is a must and air movement and vibration needs to be kept to a minimum[1]	☒ Yes	☐ No	
• Other	• Service and recalibrate annually (manufacturer representative or comparable)[1]	☒ Yes	☐ No	
	• Must be able to measure to 0.1 grams[4]	☒ Yes	☐ No	
	• Instrument manual available	☒ Yes	☐ No	
	• Log book maintained[6]	☐ Yes	☒ No	
Comments:				

Criteria	Standard Methods Requirement	Acceptable?		Rating
Drying Oven (Suspended Solids)				
• Temperature Recordkeeping	• Temperature recorded with each use[4]	☒ Yes	☐ No	A
	• Log book maintained[6]	☒ Yes	☐ No	
• Calibration Frequency /Documentation	• Thermometer calibrated annually with NIST traceable thermometer[1,2]. Correction factor posted on thermometer/ equipment[1]	☒ Yes	☐ No	
• Other	• Thermometer temperature in 0.1° C increments[5]	☒ Yes	☐ No	
	• Acceptable temperature range is 103° – 105° F [4]	☒ Yes	☐ No	
	• Instrument manual available	☒ Yes	☐ No	
Comments:				

Criteria	Standard Methods Requirement	Acceptable?		Rating
pH Meter				
• Calibration Frequency / Documentation	• Calibration verification required for testing over long period of time (e.g. 12 hrs.), or after a large number of samples (every 10 samples)[3]	☒ Yes	☐ No	A
	• Logbook maintained[9]	☒ Yes	☐ No	
• Minimum of 2 point calibration	• Calibration per manufacturer specification and calibration buffers must bracket anticipated result[7]	☒ Yes	☐ No	
• Slope Documentation /Acceptability	• Slope acceptable range indicated on benchsheet[2]	☒ Yes	☐ No	
• Buffer Expiration Date	• Buffers must not be expired	☒ Yes	☐ No	
• Other	• Instrument manual available	☒ Yes	☐ No	
	• Teflon covered magnetic stirrer or equivalent for mixing[8]	☒ Yes	☐ No	
Comments:				

Criteria	Standard Methods Requirement	Acceptable?		Rating
Dissolved Oxygen Meter				
• Calibration Method	• Air or known DO calibration method[10]	☒ Yes	☐ No	A
	• Calibration per manufacturer specification[10]	☒ Yes	☐ No	
• Calibration Frequency /Documentation	• Logbook maintained[9]	☒ Yes	☐ No	
	• Calibration verification required at least once each day the meter is used.[3]	☒ Yes	☐ No	

General Lab Criteria

• Other	• Small to no bubble present under membrane (must be smaller than the lead in number 2 pencil)[11]	☒ Yes	☐ No	
	• Instrument manual available	☒ Yes	☐ No	

Comments:

Criteria	Standard Methods Requirement	Acceptable?		Rating
Incubator (CBOD/E-Coli)				
• Temperature Recordkeeping	• Temperature checked/recorded twice daily for each shelf in use[1]	☒ Yes	☐ No	A
	• Acceptable temperature range (CBOD) is 20° C ±1.0°[12]	☒ Yes	☐ No	
	• Acceptable temperature range (E-Coli) is 35° C ±0.5°[22]	☐ Yes	☐ No	
	• Logbook maintained[9]	☒ Yes	☐ No	
• Temperature Calibration/ Documentation	• Thermometer calibrated annually with NIST traceable thermometer[1, 2]	☒ Yes	☐ No	
	• Temperature correction information posted on incubator[1]	☒ Yes	☐ No	
• E-Coli can use multiple tubes (five 20 ml or ten 10 ml), or mfg's multi-well tray	• E-coli Ultraviolet lamp (365 nm wave length, 6 W bulb)[23]	☐ Yes	☐ No	
• Other	• Instrument manual available	☒ Yes	☐ No	
	• Temperature Log (thermometer reads to 0.1 Celsius).[5]	☒ Yes	☐ No	

Comments: Lab currently only conducts fecal coliform analysis per their permit and will not conduct e-coli for bacteria monitoring until their permit is renewed.

Criteria	Standard Methods Requirement	Acceptable?		Rating
Refrigerator				
• Temperature Recordkeeping	• Temperature Log (thermometer reads to 0.1 Celsius).[5]	☒ Yes	☐ No	A
• Temperature Calibration/ Documentation	• Thermometer calibrated annually with NIST traceable thermometer[1, 2]	☒ Yes	☐ No	
• Other	• Thermometer held in water bath.[1]	☒ Yes	☐ No	
	• Refrigerator temperature ≤6° Celsius.[13]	☒ Yes	☐ No	
	• Do not store volatile solvents, food, or beverages.[14]	☒ Yes	☐ No	

Comments:

Criteria	Standard Methods Requirement	Acceptable?		Rating
Chlorine Meter				
• Calibration Frequency /Documentation	• pH / millivolt meter read to 0.1 mV[15]	☐ Yes	☐ No	A
	• Calibration verification required for testing over long period of time (e.g. 12 hrs.), or after a large number of samples (every 10 samples)[3]	☐ Yes	☒ No	
• Calibration Method	• Calibration using three iodate solutions 0.2, 1.0, 5.0 milliliters or calibration per manufacturer specification[16]	☐ Yes	☒ No	
	• Standards used for calibration not expired	☐ Yes	☐ No	
• Slope Documentation /Acceptability	• Calibration curve (acceptable slope)	☐ Yes	☐ No	
• Other	• Electrode free of deposits and foreign material	☐ Yes	☐ No	
	• Log book being maintained.[9]	☒ Yes	☐ No	
	• Instrument manual available	☒ Yes	☐ No	

Comments: Lab uses the HACH pocket colorimeter with an accuracy of .02 mg/l for residual chlorine measurements which does not use an electrode so the above questions relating to electrodes were non-applicable. Instrument is provided by manufacturer with no calibration necessary and is sent to manufacturer per manufacturer's specifications.

General Lab Criteria

Criteria	Standard Methods Requirement	Acceptable?		Rating
Ammonia Meter				
• Calibration Frequency /Documentation	• Calibration verification required for testing over long period of time (e.g. 12 hrs.), or after a large number of samples (every 10 samples)[3]	☒ Yes	☐ No	A
	• Log book being maintained[9]	☒ Yes	☐ No	
• Slope acceptability	• Verify calibration slope is acceptable (per mfg. spec.).	☒ Yes	☐ No	
• Calibration Method	• Standards used for calibration (3 ammonia solutions of 10 mg/l, 1 mg/l, and 0.1 mg/l) or per mfg. spec.[17]	☒ Yes	☐ No	
	• Standards used for calibration not expired	☒ Yes	☐ No	
• Other	• Electrode free of deposits and foreign material	☒ Yes	☐ No	
	• Teflon covered magnetic stirrer or equivalent for mixing[18]	☒ Yes	☐ No	
	• Instrument manual available	☒ Yes	☐ No	
Comments:				

Criteria	Standard Methods Requirement	Acceptable?		Rating
Sample Collection/Handling				
• Sample Labeling	• Samples container labeled (description, date, time, preservative added, initialed).[19]	☒ Yes	☐ No	A
• Chain of Custody	• Chain of custody (description, date, time, signature).[19]	☒ Yes	☐ No	
• Other	• Composite samples refrigerated during sample collection[14]	☒ Yes	☐ No	
	• Equipment blanks utilized[14]	☐ Yes	☒ No	
	• SOP for cleaning of sampling equipment	☒ Yes	☐ No	
	• Logbook being maintained[9]	☒ Yes	☐ No	
Comments:				

Criteria	Standard Methods Requirement	Acceptable?		Rating
Desiccator				
• General criteria	• Properly working seals.	☒ Yes	☐ No	A
	• Desiccant fresh (blue color)	☒ Yes	☐ No	
• Documentation	• Log book being maintained[9]	☒ Yes	☐ No	
Comments:				

Criteria	Standard Methods Requirement	Acceptable?		Rating
Bench sheets				
• General criteria	• Date(s)[2]	☒ Yes	☐ No	A
	• Analyst initials[2]	☒ Yes	☐ No	
	• Blue or black ink pen[2]	☒ Yes	☐ No	
	• Calibration information[2]	☒ Yes	☐ No	
	• Equations, calculations, units for all measurements, notations, and results present[2]	☒ Yes	☐ No	
	• Corrections, single line through, initialed and dated[2]	☒ Yes	☐ No	
Comments:				

Criteria	Standard Methods Requirement	Acceptable?		Rating
Hot Water Bath (Fecal Coliform/E. Coli)				
• Temperature Recordkeeping	• Temperature Log (thermometer reads 0.2° C)[21]	☒ Yes	☐ No	A
	• Incubator temperature 44.5° C ± 0.2°[21/24]	☒ Yes	☐ No	
• Temperature Calibration /	• Thermometer calibrated annually with NIST traceable thermometer[1,2]	☒ Yes	☐ No	

General Lab Criteria

Documentation	• Log book being maintained[9]	☒ Yes	☐ No	
• Water Level	• Thermometer total immersion or partial (line on thermometer to ID immersion depth)[1,5]	☒ Yes	☐ No	
Comments:				

Criteria	Standard Methods Requirement	Acceptable?		Rating
Autoclaves/Steam Sterilizers				
• All apparatus utilized is adequately sterilized before use	• Sterilizing temperature 121° C [25]	☒ Yes	☐ No	M
	• 10 to 30 minutes time based on material being sterilized[26]	☒ Yes	☐ No	
• Documentation	• Verify the autoclave temperature weekly by using a maximum registering thermometer (MRT) to confirm that 121°C has been reached as measured in the exhaust.[1]	☐ Yes	☒ No	
	• Date, contents, sterilization time and temperature, total time in autoclave, and analyst's initials should be recorded each time the autoclave is used[1]	☐ Yes	☒ No	
• Temperature Calibration/ Documentation	• Thermometer calibrated annually with NIST traceable thermometer[1,2]	☒ Yes	☐ No	
	• Log book being maintained[9]	☐ Yes	☒ No	
• Performance Checks	• Test monthly for efficacy using a biological such as commercially available *Geobacillus stearothermophilus* in spore strips, suspensions, or capsules[1]	☐ Yes	☒ No	

Comments: A logbook is currently not being maintained for the autoclave recording when it is being used, what temperatures materials are sterilized at and how long items are being sterilized. Recording the exhaust temperature of the autoclave is impractical due to the system setup. Proper temperatures are utilized although better documentation should be done.

Number of Criteria Rated:	**Acceptable**	12
	Marginal	1
	Unacceptable	
	Total Number of Areas Rated	13

Acceptable Ratings – No action required (recommend SOP's written or updated, perform DMRQA's for all onsite analysis, recommend voluntary lab analyst certification, written response not required).

Marginal Ratings – Improvements required, written response required (recommend SOP's be written or updated, recommend they perform DMRQA's for all onsite analysis, recommend voluntary lab analyst certification, require deficiencies to be addressed in written response).

Unsatisfactory Rating - Improvements required, written response required, NOV issued (recommend SOP's be written or updated, recommend they perform DMRQA's for all onsite analysis, recommend voluntary lab analyst certification, require deficiencies to be addressed in written response to NOV).

Consider recommending PAI Audit from DES when:	>60% of ratings are Marginal >45% of ratings are a combination of Marginal or Unacceptable >30% of ratings are Unacceptable

General Lab Criteria

Notation of Referenced Method

1	Method 9020-B, Item 4	14	Method 1060A, Item 1
2	Method 1020-A, Item 1	15	Method 4500-Cl I, Item 2
3	Method 1020-B, Item 10	16	Method 4500-Cl I, Item 4
4	Method 2540-B, Item 2	17	Method 4500-NH3 D, Item 4
5	Method 2550-B, Item 1	18	Method 4500-NH3 D, Item 2
6	Method 1020-B, Item 1	19	Method 1060-B, Item 2
7	Method 4500-H B, Item 4	20	Method 1060-B, Item 1
8	Method 4500-H B, Item 2	21	Method 9222D, Item 1
9	Method 1020-B, Item 2	22	Method 9223 B, Item 2
10	Method 4500-O B, Item 3	23	Method 9223 B, Item 3
11	Method 4500-O G, Item 3	24	Method 1603, Item 2
12	Method 5210-B, Item 5	25	Method 9030-B, Item 3
13	CFR 136.3, Table II	26	Method 9020 B, Table IV

Equipment Logbook Content - all maintenance performed on a piece of equipment should be documented in the logbook. This should include parts replacement and routine maintenance activities. Entries should include date, maintenance performed and initials of person making entry.

Preservation and Holding Times

Parameter	Container	Min. Sample Size (mL)	Sample Type	Preservation	Maximum Storage Time	
					Recommended	Regulatory
BOD / CBOD	P, G	1000	G, C	Refrigerate ≤6° C	6h	48h
TSS	P, G	200	G, C	Refrigerate ≤6° C	7 d	7 d
pH	P, G	50	G	Analyze immediately	0.25h	0.25 h
NH3-N	P, G	500	G, C	Analyze as soon as possible or add H_2SO_4 to pH <2, Refrigerate ≤6° C	7 d	28 d
TRC	P, G	500	G	Analyze immediately	0.25h	0.25 h
DO (electrode)	G, BOD Bottle	300	G	Analyze immediately	0.25h	0.25 h
Temperature	P, G	--	G	Analyze immediately	0.25h	0.25 h
Metals, general	P, G	1000	G, C	For dissolved filter immediately and add HNO_3 to pH <2	6 months	6 months
Purgeables by purge and trap	G (PTFE lined lid)	40 (X2)	G	HCl to pH<2, Refrigerate ≤6° C	7 d	14 d
Base/Neutrals and acids	G (solvent rinsed or baked)	1000	C, G	Refrigerate ≤6° C	7 d	7 days until extraction 40 days after extraction
Pesticides	G (PTFE lined lid)	1000	C	Refrigerate ≤6° C	7 d	7 days until extraction 40 days after extraction
Fecal Coliform / E-Coli	G, P (Sterilized)	100	G	Refrigerate ≤10° C If chlorine present, add sodium thiosulfate tablet	6 hrs transport Start analysis within 2 hrs of receipt in lab.	
Oil and Grease	G	1000	G	HCl or H_2SO_4 to pH <2, Refrigerate ≤6° C	28 d	28 d

General Lab Criteria

Approved Standard Methods	
CBOD / BOD 5 Day	Std Methods 5210-B
Ammonia, Selective Electrode Method	Std Methods 4500-NH3 D
Total Residual Chlorine, DPD Colorimetric Method	Std Methods 4500-Cl G
Total Suspended Solids, Dried at 103-105 °C	Std Methods 2540-D
Dissolved Oxygen, Membrane Electrode Method	Std Method 4500-O G
pH, Electrometric Method	Std Methods 4500-H+ B
Fecal Coliform, Membrane Filter Procedure	Std Methods 9222D
Escherichia Coli, Enzyme Substrate Test	Std Method 9223B
Escherichia Coli Membrane Filtration Procedure	EPA Method 1603
Oil and Grease	USEPA 1664A or Std Methods 5520B
Metals, general	USEPA 200, Std Methods 3111B or C, or 3120B
Volatiles (Purgeables by purge and trap)	USEPA 6210, Std Methods 624
Semi-Volatiles (Base/Neutrals and acids)	USEPA 6410, Std Methods 625
Pesticides	USEPA 6410 and 6630, Std Methods 608