



**Environmental  
Protection Agency**

Ted Strickland, Governor  
Lee Fisher, Lt. Governor  
Chris Korleski, Director

October 1, 2010

Mr. Clint Herring  
INEOS ABS (USA) Corporation  
365 Three Rivers Parkway  
Addyston, Ohio 45001

**Re: INEOS ABS (USA) Corp. – OH0009946;11F00001\*JD – CEI  
NOTICE OF VIOLATION**

Dear Mr. Herring:

On September 3, 2010, I met with Jessica Reece and conducted a NPDES Compliance Evaluation Inspection (CEI) at INEOS ABS (USA) Corporation. The purpose of this inspection was to evaluate compliance with the terms of the NPDES permit. Please note that the report, by its format, tends to highlight negative areas.

As indicated in the attached CEI report, most areas received a Satisfactory rating. One area received a rating of Marginal. These reasons are included in the attached write up.

Thank you for the time extended during your inspection. If you would have any questions, please contact me at this office at 937.285.6108.

Sincerely,

Marianne Piekutowski  
Environmental Specialist 2  
Division of Surface Water

Enclosures

Cc: Jessica Reece, INEOS ABS (USA) Corp.



State of Ohio Environmental Protection Agency  
Southwest District Office

NPDES Compliance Inspection Report

Section A: National Data System Coding					
Permit #	NPDES#	Month/Day/Year	Inspection Type	Inspector	Facility Type
OH0009946	11F00001*JD	9/3/2010	C	S	2

Section B: Facility Data		
Name and Location of Facility Inspected	Entry Time	Permit Effective Date
INEOS ABS Corporation 356 Three Rivers Parkway Addyston, Ohio 45001	10:45 am	3/1/2009
	Exit Time	Permit Expiration Date
	2:15 pm	7/31/2012
Name(s) and Title(s) of On-Site Representatives	Phone Number(s)	
Jessica Reece/WWTP Engineer	513.467.2321	
Name, Address and Title of Responsible Official	Phone Number	
Clint Herring, Plant Manager INEOS ABS (USA) Corporation 356 Three Rivers Parkway Addyston, Ohio 45001	513.467.2400	

Section C: Areas Evaluated During Inspection					
(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)					
S	Permit	N	Flow Measurement	N	Pretreatment
S	Records/Reports	N	Laboratory	S	Compliance Schedule
S	Operations & Maintenance	M	Effluent/Receiving Waters	S	Self-Monitoring Program
S	Facility Site Review	N	Sludge Storage/Disposal	N	Other
N	Collection System				

Section D: Summary of Findings (Attach additional sheets if necessary)			
See attached report.			
Inspector		Reviewer	
	10/1/10		10/1/10
Marianne Piekutowski Division of Surface Water Southwest District Office	Date	Martyn Burt Compliance & Enforcement Supervisor Division of Surface Water Southwest District Office	Date

Sections E thru K: Complete on all inspections as appropriate  
Y – Yes, N – No, N/A – Not Applicable, N/E – Not Evaluated

**Section E: Permit Verification**

Inspection observations verify the permit

- (a) Correct name and mailing address of permittee ..... Y
- (b) Correct name and location of receiving waters..... Y
- (c) Do Categorical Standards apply?...If yes, list applicable standards.. Y  

40 CFR 414 Subpart D
- (d) Product(s) and production rates conform with permit application (Industries)..... Y
- (e) Flows and loadings conform with NPDES permit..... Y
- (f) Treatment processes are as described in permit application... Y
- (g) All discharges are permitted..... Y
- (h) Number and location of discharge points are as described in permit..... Y
- (i) Storm water discharges properly permitted..... Y

Comments/Status:

**Section F: Compliance**

- (a) Any significant violations since the last inspection..... N
- (b) Appropriate Non-compliance notification of violations..... Y
- (c) Permittee is taking actions to resolve violations..... Y
- (d) Permittee has a compliance schedule..... Y
- (e) Compliance schedule contained in...NPDES Permit Compliance Schedule
- (f) Permittee is in compliance with schedule..... Y
- (g) Has biomonitoring shown toxicity in discharge since last inspection Y

Comments/Status:

d) Hexachlorobutadiene and hexachlorbenzene for the mixing zone phase out. They were not found.

g) The toxicity levels are down on 001.

**Section G: Operation & Maintenance**

**Treatment Works:**

Treatment facility properly operated and maintained

(a) Standby power available.....generator  or dual feed ..... Y

i. What does the back-up power source operate.....

There is a generator for the wastewater plant. The rest of the plant has a dual feed with an automatic transfer.

ii. How often is the generator tested under load.....

Weekly start up testing, and monthly tests under load done by electrical engineers.

(b) Which components have an alarm system available for power or equipment failures.....

Almost everything is on the PROVOX system for alarms. There are radios and fire alarms if all the power goes out.

(c) All treatment units in service other than backup units..... Y

(d) What method is used for scheduling routine & preventative maintenance (calendar, software, etc.).....

Maintenance at WWTP is done during the plant shutdown. There is a maintenance coordinator for each area. They schedule mechanics. There is an Excel spreadsheet with the backlog of any maintenance.

(e) Any major equipment breakdown since last inspection..... Y

(f) Operation and maintenance manual provided and maintained..... Y

(g) Any plant bypasses since last inspection..... N

(h) Any plant upsets since last inspection..... Y

**Comments/Status:**

h) BOD and pH in December 2009.

**Section H: Sludge Management**

- (a) Method of Sludge Disposal...  Land Application  
 Haul to Another NPDES Permittee  
 Haul to a Mixed Solid Waste Landfill

\*if one of the selected methods is land application, complete applicable charts.

**Class A - Exception Quality Sewage Sludge (monitoring station 584)**

Pathogen Reduction Alternative	84370 Vector Attraction Reduction Options							
	Option 1 -38% Volatile Solids Reduction	Option 2 -Anaerobic Bench Scale Analysis	Option 3 -- Aerobic Bench Scale Analysis	Option 4 -- Specific Oxygen Uptake Rate	Option 5 -- Aerobic Time and Temperature	Option 6 -- Alkali Addition	Option 7 -- >75% Percent Solids without Unstabilized Solids	Option 8 - >75% Percent Solids with Unstabilized Solids
Alternative 1 – Time and Temperature Regime (84369)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative 2 – High pH and High Temperature (84369)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative 3 – Other Processes (84369)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative 4 – Unknown Processes (84369)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative 5 – Composting (84397)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative 5 – Heat Drying (84397)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative 5 – Heat Treatment (84397)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative 5 – Thermophilic Aerobic Digestion (84397)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative 5 – Beta Ray Irradiation (84397)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative 5 – Gamma ray Irradiation (84397)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative 5 – Pasteurization (84397)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative 6 - Approved Equivalent Process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Class B Sewage Sludge (monitoring station 581)**

Pathogen Reduction Alternative	84370 Vector Attraction Reduction Options									
	Option 1 -38% Volatile Solids Reduction	Option 2 -Anaerobic Bench Scale Analysis	Option 3 – Aerobic Bench Scale Analysis	Option 4 – Specific Oxygen Uptake Rate	Option 5 – Aerobic Time and Temperature	Option 6 – Alkali Addition	Option 7 – >75% Percent Solids without Unstabilized	Option 8 - >75% Percent Solids with Unstabilized	Option 9 – Land Injection	Option 10 – Immediate Incorporation
Alternative 1 - Geometric Mean of Seven Fecal Samples (84369)	<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"/>
Alternative 2 - Aerobic Digestion (46396)	<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"/>
Alternative 2 - Air Drying (46396)	<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"/>
Alternative 2 - Anaerobic Digestion (46396)	<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"/>
Alternative 2 – Composting (46396)	<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"/>
Alternative 2 - Lime Treatment (46396)	<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"/>
Alternative 3 – Approved Equivalent Process	<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"/>

- (a) Has amount of sludge generated changed significantly since the last inspection..... N
- (b) How much sludge storage is provided at the plant.....
- (c) Records kept in accordance with State and Federal law (5 years according to OAC 3745-40-06)..... N/A
- (d) Any complaints received in last year regarding sludge..... N
- (e) 5/8" screen at headworks for facilities that land apply sludge..... N/A
- (f) Are sludge application sites inspected to verify compliance with NPDES permit..... N/A
- (g) Is a contractor used for sludge disposal..... N/A  
 If so, what is the name of the contractor.....

**Comments/Status:**

**Section I: Self-Monitoring Program**

**Flow Measurement:**

- (a) Primary/Secondary flow measuring devices operated and maintained..... Y  
Type of device (e.g. weir with ultrasonic level sensor):  

001 - Magmeter; 002 - Weir with manual reading done every day.
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- (b) Calibration frequency adequate ..... Y  
(Date of last calibration: Quarterly. Replaced sensor)
- (c) 24-hour recording instruments operated and maintained.....Y
- (d) Flow measurement equipment adequate to handle full range of flows..... Y
- (e) Actual flow discharged is measured..... Y
- (f) Flow measuring equipment inspection frequency  
Daily Weekly monthly other

**Comments/Status:**

c) 001 for the magmeter, and 002 for the thermometer.  
f) The weir on 002 is checked daily, and the magmeter is checked quarterly unless there is an alarm.

**Section I: Self-Monitoring Program (con't)**

**Sampling:**

- (a) Sampling location(s) are as specified by permit..... Y
- (b) Parameters and sampling frequency agree with permit..... Y
- (c) Permittee uses required sampling method..... Y  
(see GLC page)
- (d) Monitoring records (i.e., flow, pH, DO) maintained for a minimum of three years including all original strip chart recordings (i.e. continuous monitoring instrumentation, calibration and maintenance records)..... Y

**Comments/Status:**

**Section I: Self-Monitoring Program (con't)**

**Laboratory:**

*General*

- (a) Does the Quality Assurance Manual contain written Standard Operating Procedures (SOP's) for all analysis performed onsite..... Y
- (b) Do SOP's include the following if applicable..... Y
  - Title
  - Scope and Application
  - Summary
  - Sample Handling and Preservation
  - Interferences
  - Apparatus and Materials
  - Reagents
  - Procedure
  - Calculations
  - Quality Control
  - Maintenance
  - Corrective Action
  - Reference (Parent Method)

*Note: Standard Methods 1020A establishes that "Quality assurance (QA) is the definitive program for laboratory operation that specifies the measure required to produce defensible data of known precision and accuracy. Standard operating procedures are to be used in the laboratory in sufficient detail that a competent analyst unfamiliar with the method can conduct a reliable review and/or obtain acceptable results." SOPs should be developed for each analytical procedure.*

- (c) EPA approved analytical testing procedures used (40 CFR 136.3).. Y
- (d) If alternate analytical procedures are used, proper approval has been obtained..... N
- (e) Analyses being performed more frequently than required by permit. Y
- (f) If (e) is yes, are results in permittee's self-monitoring report..... Y
- (g) Satisfactory calibration and maintenance of instruments/equipment. Y (see score from GLC page)
- (h) Commercial laboratory used..... Y  
 Parameters analyzed by commercial lab: *BOD, TSS, pH, NH3, TKN, Organics, DO, Conductivity, Bioassay, Hg*  
 Lab name: *Cardinal Laboratories, Alloway does some of the organics, Low Level Hg, and the bioassay.*

**Discharge Monitoring Report Quality Assurance (DMRQA)**

- (a) Participation in latest USEPA quality assurance performance sampling..... Y  
 Date: 08/09/2010
- (b) Were any parameters "Unsatisfactory"..... Y
- (c) Reasons for "Unsatisfactory" parameters.....

Low level TRC was "Unsatisfactory" due to rounding because the instrument only reads to two digits. This affected the number of significant figures. This was addressed.

**Comments/Status:**

**Section J: Effluent/Receiving Water Observations**

**Outfall # 001**

Outfall Description: This is a diffuser. It is underwater. It is the discharge for the wastewater treatment plant.

Receiving Stream: Ohio River

Receiving Stream Description: Bathing water, WWH, Agricultural, Industrial, and Public Water Supply.

**Outfall # 002**

Outfall Description: This outfall takes the cooling water, storm waters and contact cooling water to the Ohio River. There is a weir, and it goes to a flume into the river.

Receiving Stream: Ohio River

Receiving Stream Description: Bathing water, WWH, Agricultural, Industrial, and Public Water Supply.

**Comments/Status:**

The signs was been washed away at some point when the river rose. They have been replaced.

**Section K: Multimedia Observations**

- (a) Are there indications of sloppy housekeeping or poor maintenance in work and storage areas or laboratories..... N
- (b) Do you notice staining or discoloration of soils, pavement or floors.. N
- (c) Do you notice distressed (unhealthy, discolored, dead) vegetation.. Y
- (d) Do you see unidentified dark smoke or dust clouds coming from sources other than smokestacks..... N
- (e) Do you notice any unusual odors or strong chemical smells..... N
- (f) Do you see any open or unmarked drums, unsecured liquids, or damaged containment facilities..... N

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

- (1) What is the cause of the condition?
- (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/Status:**

a) & c) The weeds in waste treatment had been treated with an herbicide. They were brown and dying. These should be removed from the area.

a) The paint in waste treatment still needs to be redone. It is flaking and peeling. Coating the aeration tanks is scheduled to be done at the end of the calendar year.

Permit # : OH0009946  
NPDES # : 11F00001\*JD

# General Lab Criteria

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

Comments: :

Criteria	Standard Methods Requirement		Rating
<b>Drying Oven (Suspended Solids)</b>		Acceptable?	
• Temperature Recordkeeping	• Temperature recorded with each use <sup>4</sup>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>NR</b>
	• Log book maintained <sup>2</sup>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
• Calibration Frequency / Documentation	• Thermometer calibrated annually with NIST traceable thermometer <sup>1,2</sup> . Correction factor posted on thermometer / equipment <sup>1</sup>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
• Other	• Thermometer temperature in 0.5° C increments <sup>5</sup>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	• Acceptable temperature range is 103° – 105° F <sup>4</sup>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	• Instrument manual available	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Comments: :

# General Lab Criteria

Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>pH Meter</b>		<b>Acceptable?</b>		<b>NR</b>
• 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) <sup>3</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Logbook maintained <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Minimum of 2 point calibration	• Calibration per manufacturer specification and calibration buffers must bracket anticipated result <sup>7</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Slope Documentation / Acceptability	• Slope acceptable range indicated on benchsheet <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Buffer Expiration Date	• Buffers must not be expired	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Other	• Instrument manual available	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Teflon covered magnetic stirrer or equivalent for mixing <sup>8</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments: :				

Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>Dissolved Oxygen Meter</b>		<b>Acceptable?</b>		<b>NR</b>
• Calibration Method	• Air or known DO calibration method <sup>10</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Calibration per manufacturer specification <sup>10</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Calibration Frequency / Documentation	• Logbook maintained <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Calibration verification required at least once each day the meter is used. <sup>3</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Other	• Small to no bubble present under membrane (must be smaller than the lead in number 2 pencil) <sup>11</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Instrument manual available	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments:				

# General Lab Criteria

Criteria	Standard Methods Requirement		Rating
<b>Incubator, (CBOD/ E-Coli)</b>			<b>Acceptable?</b>
<ul style="list-style-type: none"> <li>• Temperature Recordkeeping</li> </ul>	<ul style="list-style-type: none"> <li>• Temperature checked / recorded twice daily for each shelf in use<sup>1</sup>(E-Coli)</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<ul style="list-style-type: none"> <li>• Temperature checked / recorded daily<sup>2</sup> (CBOD)</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<ul style="list-style-type: none"> <li>• Acceptable temperature range (CBOD) is 20° C ±1.0<sup>9,12</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<ul style="list-style-type: none"> <li>• Acceptable temperature range (E-Coli) is 35° C ±0.5<sup>9,22</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<ul style="list-style-type: none"> <li>• Logbook maintained<sup>2</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<ul style="list-style-type: none"> <li>• Temperature Calibration / Documentation</li> </ul>	<ul style="list-style-type: none"> <li>• Thermometer calibrated annually with NIST traceable thermometer<sup>1,2</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<ul style="list-style-type: none"> <li>• Temperature correction information posted on incubator<sup>1</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<ul style="list-style-type: none"> <li>• E-Coli can use multiple tubes (five 20 ml or ten 10 ml), or mfg's multi-well tray</li> </ul>	<ul style="list-style-type: none"> <li>• E-coli Ultraviolet lamp (365 nm wave length, 6 W bulb)<sup>23</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<ul style="list-style-type: none"> <li>• Other</li> </ul>	<ul style="list-style-type: none"> <li>• Instrument manual available</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<ul style="list-style-type: none"> <li>• Temperature Log (thermometer reads to 0.5 Celsius).<sup>1</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Comments: :			

NR

Criteria	Standard Methods Requirement		Rating
<b>Refrigerator</b>			<b>Acceptable?</b>
<ul style="list-style-type: none"> <li>• Temperature Recordkeeping</li> </ul>	<ul style="list-style-type: none"> <li>• Temperature Log (thermometer reads to 0.5 Celsius).<sup>5</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<ul style="list-style-type: none"> <li>• Temperature Calibration / Documentation</li> </ul>	<ul style="list-style-type: none"> <li>• Thermometer calibrated annually with NIST traceable thermometer<sup>1,2</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<ul style="list-style-type: none"> <li>• Other</li> </ul>	<ul style="list-style-type: none"> <li>• Thermometer held in water bath.<sup>1</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<ul style="list-style-type: none"> <li>• Refrigerator temperature ≤6° Celsius.<sup>13</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	<ul style="list-style-type: none"> <li>• Do not store volatile solvents, food, or beverages.<sup>14</sup></li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Comments:			

NR

# General Lab Criteria

Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>Chlorine Meter</b>		<b>Acceptable?</b>		
• Calibration Frequency / Documentation	• pH / millivolt meter read to 0.1 mV <sup>15</sup>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<b>NR</b>
	• Calibration verification required for testing over long period of time (e.g. 12 hrs.), or after a large number of samples (every 10 samples) <sup>3</sup>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
• Calibration Method	• Calibration using three iodate solutions 0.2, 1.0, 5.0 milliliters or calibration per manufacturer specification <sup>16</sup>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Standards used for calibration not expired	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
• Slope Documentation / Acceptability	• Calibration curve (acceptable slope)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Other	• Electrode free of deposits and foreign material	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	• Log book being maintained. <sup>2</sup>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Instrument manual available	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments: : Use a photospectrometer. Participated in the DMRQA. Regular reading was acceptable. The low level was off due to rounding. A copy of the test method and SOP were provided during inspection.				

Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>Ammonia Meter</b>		<b>Acceptable?</b>		
• 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) <sup>3</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<b>NR</b>
	• Log book being maintained <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Slope acceptability	• Verify calibration slope is acceptable (per mfg. spec.).	<input type="checkbox"/> Yes	<input type="checkbox"/> 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. <sup>17</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Standards used for calibration not expired	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Other	• Electrode free of deposits and foreign material	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Teflon covered magnetic stirrer or equivalent for mixing <sup>18</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Instrument manual available	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments: :				

# General Lab Criteria

Criteria	Standard Methods Requirement	Acceptable?		Rating																														
<b>Sample Collection/Handling</b>																																		
• Sample Labeling	• Samples container labeled (description, date, time, preservative added, initialed). <sup>19</sup>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<b>NR</b>																														
• Chain of Custody	• Chain of custody (description, date, time, signature). <sup>19</sup>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No																															
• Other	• Composite samples refrigerated during sample collection <sup>14</sup>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No																															
	• Equipment blanks utilized <sup>14</sup>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No																															
	• SOP for cleaning of sampling equipment	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No																															
	• Logbook being maintained <sup>2</sup>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No																															
<p>Comments: Sampling procedures and replacing bottle is in preventative maintenance on a quarterly basis. The tubing is replaced when it doesn't work any more. The changing of the bottle is noted on the log sheet.</p>																																		
<b>Desiccator</b>																																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Criteria</th> <th style="width: 50%;">Standard Methods Requirement</th> <th colspan="2" style="width: 15%;">Acceptable?</th> <th style="width: 10%;">Rating</th> </tr> </thead> <tbody> <tr> <td>• General criteria</td> <td>• Properly working seals.</td> <td><input type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> <td rowspan="3" style="text-align: center; vertical-align: middle;"><b>NR</b></td> </tr> <tr> <td></td> <td>• Desiccant fresh (blue color)</td> <td><input type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> </tr> <tr> <td>• Documentation</td> <td>• Log book being maintained<sup>2</sup></td> <td><input type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> </tr> <tr> <td colspan="5"> <p>Comments:</p> </td> </tr> </tbody> </table>					Criteria	Standard Methods Requirement	Acceptable?		Rating	• General criteria	• Properly working seals.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<b>NR</b>		• Desiccant fresh (blue color)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	• Documentation	• Log book being maintained <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<p>Comments:</p>											
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<p>Comments:</p>																																		

# General Lab Criteria

Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>Hot Water Bath (Fecal Coliform/E. Coli)</b>				
• Temperature Recordkeeping	• Temperature Log (thermometer reads 0.2° C) <sup>21</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<b>NR</b>
	• Incubator temperature 44.5° C ± 0.2° <sup>21/24</sup>			
• Temperature Calibration / Documentation	• Thermometer calibrated annually with NIST traceable thermometer <sup>1,2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Log book being maintained <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Water Level	• Thermometer total immersion or partial (line on thermometer to ID immersion depth) <sup>1,5</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments:				
Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>Autoclaves/Steam Sterilizers</b>				
• All apparatus utilized is adequately sterilized before use	• Sterilizing temperature 121° C <sup>25</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• 10 to 30 minutes time based on material being sterilized <sup>26</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> 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. <sup>1</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Date, contents, sterilization time and temperature, total time in autoclave, and analyst's initials should be recorded each time the autoclave is used <sup>1</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Temperature Calibration / Documentation	• Thermometer calibrated annually with NIST traceable thermometer <sup>1,2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Log book being maintained <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Performance Checks	• Test monthly for efficacy using a biological such as commercially available <i>Geobacillus stearothermophilus</i> in spore strips, suspensions, or capsules <sup>1</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments:				

# General Lab Criteria

Criteria	Standard Methods Requirement	Acceptable?	Rating								
<b>Final Effluent Temperature Monitoring</b>  • General Criteria	• Thermometer calibrated annually with NIST traceable thermometer <sup>1,2</sup> • Thermometer reads in increments of at least 0.1° C <sup>5</sup> • Log book being maintained <sup>2</sup>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>NR</b>								
Comments: The temperature is maintained electronically. The facility maintains maintenance log on the thermometer.											
<b>Number of Criteria Rated:</b>			<table border="1" style="margin-left: auto; margin-right: auto;"> <tr><td style="padding: 2px;">Acceptable</td><td style="text-align: center;">-</td></tr> <tr><td style="padding: 2px;">Marginal</td><td style="text-align: center;">-</td></tr> <tr><td style="padding: 2px;">Unacceptable</td><td style="text-align: center;">-</td></tr> <tr><td style="padding: 2px;">Total Number of Areas Rated</td><td style="text-align: center;">0</td></tr> </table>	Acceptable	-	Marginal	-	Unacceptable	-	Total Number of Areas Rated	0
Acceptable	-										
Marginal	-										
Unacceptable	-										
Total Number of Areas Rated	0										
<b>Acceptable Ratings</b> – 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).											
<b>Marginal Ratings</b> – 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).											
<b>Unsatisfactory Rating</b> - 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: <ul style="list-style-type: none"> <li>&gt;60% of ratings are Marginal</li> <li>&gt;45% of ratings are a combination of Marginal or Unacceptable</li> <li>&gt;30% of ratings are Unacceptable</li> </ul>											

### Notation of Referenced Method

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

# General Lab Criteria

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.

<b>Preservation and Holding Times</b>						
Parameter	Container	Min. Sample Size (mL)	Sample Type	Preservation	Maximum Storage Time	
					Recommended	Regulatory
BOD / CBOD	P, G	1000	G, C	Refrigerate $\leq 6^{\circ}\text{C}$	6h	48h
TSS	P, G	200	G, C	Refrigerate $\leq 6^{\circ}\text{C}$	7 d	7 d
pH	P, G	50	G	Analyze immediately	0.25h	0.25 h
NH <sub>3</sub> -N	P, G	500	G, C	Analyze as soon as possible or add H <sub>2</sub> SO <sub>4</sub> to pH <2, Refrigerate $\leq 6^{\circ}\text{C}$	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 <sub>3</sub> to pH <2	6 months	6 months
Purgeables by purge and trap	G (PTFE lined lid)	40 (X2)	G	HCl to pH <2, Refrigerate $\leq 6^{\circ}\text{C}$	7 d	14 d
Base/Neutrals and acids	G (solvent rinsed or baked)	1000	C, G	Refrigerate $\leq 6^{\circ}\text{C}$	7 d	7 days until extraction 40 days after extraction
Pesticides	G (PTFE lined lid)	1000	C	Refrigerate $\leq 6^{\circ}\text{C}$	7 d	7 days until extraction 40 days after extraction
Fecal Coliform / E-Coli	G, P (Sterilized)	100	G	Refrigerate $\leq 10^{\circ}\text{C}$ 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 <sub>2</sub> SO <sub>4</sub> to pH <2, Refrigerate $\leq 6^{\circ}\text{C}$	28 d	28 d

<b>Approved Standard Methods</b>	
CBOD / BOD 5 Day	Std Methods 5210-B
Ammonia, Selective Electrode Method	Std Methods 4500-NH <sub>3</sub> 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

**INEOS ABS (USA) CORPORATION**  
**NPDES COMPLIANCE EVALUATION INSPECTION**  
**DATE OF INSPECTION: September 3, 2010**

ITEMS FOR DISCUSSION:

The inspection is being conducted to review compliance at the facility. There were releases to the Ohio River during the past year, and one BOD violation and one pH violation. The pH appears as two violations since the facility's NPDES permit has pH monitoring listed in three places. This is a typographical error in the permit. An administrative modification has been submitted. In addition, the ammonia levels have not exceeded the values in Part II of the facility's NPDES permit since November 2009.

COMPLIANCE EVALUATION:

The facility had the following permit violations in the past 12 months:

Outfall 11F00001001

Parameter	Code	Date	Reported	Units	Permit Limit
BOD	00310	12/22/09	108	mg/L	69 mg/L
pH	00400 & 61942	12/16/09	6.47	SU	6.0 SU

In addition, the following frequency violations were noted at this outfall:

FREQUENCY VIOLATIONS

Parameter	Reporting Code	Violation Date	Sample Frequency	Expected	Reported
Nitrogen, Ammonia	00610	04/08/2010	3/week	3	2
BOD	00310	04/08/2010	1/week	1	0
Total Suspended Solids	00530	04/08/2010	1/week	1	0

This inspection report will be the Notice of Violation for these violations. The facility provided the required 24 hour notification with the reason the violations. An administrative modification has been done to prevent the double pH violation in the future. There were duplicate lines of pH monitoring in the NPDES permit. The frequency violations were the result of a scheduling issue. This has been addressed.

**INEOS ABS (USA) Corporation**

**Page 2**

In addition, on the following dates, flow measurements could not be taken because the Ohio River inundated the flow meter: January 27 – 31, 2010, March 14 – 20, 2010, May 4 – 6, 2010, and July 27 – 31, 2010. Water temperatures could not be taken because the Ohio River inundated the temperature probe: January 27 - 31, 2010. Finally, temperature readings were not obtained on June 28 – 30, 2010 because the temperature probe was not working. All of these items were for outfall 002.

Since the last inspection, there have been three additional releases from the facility. These included a fuel oil spill through outfall 002 on March 11, 2010. In the final spill report, it was estimated approximately 85 gallons of fuel oil reached the Ohio River. There was a sheen noted on the river. The 002 Basin was pumped down approximately a foot, then the sheen was vacuumed out. The basin was then cleaned and put back into service. The leaking tank and gravel around the tank were replaced. The second release was on April 17, 2010. A small amount of foam was seen at the manway for 001, and small bubbles were seen coming from the diffuser. Anti-foam was added to the manway, and the foam dissipated. The anti-foam line in waste treat was unplugged, and the issue was resolved. After it was determined the anti-foam was no longer necessary, it was stopped. The third release was reported on June 2, 2010: It was a spill of magnesium sulfate through outfall 002. It appears there were six extra truckloads of the material unloaded into a set of dual tanks. Production was investigating the cause of additional usage during the month of May. As part of the investigation, it was determined there were bad steam coils on the tanks, and the material got into the condensate. The condensate flowed over the gravel to a clean water sewer. The condensate line was then capped off to keep it from leaking, and the clean water sewer was sandbagged. The gravel in the area was dug up, and replaced with clean fill. The steam coils were to either be fixed or replaced, or a new method for tank heating would be installed.

This letter will serve as the Notice of Violation for these events.

Because of the effluent violations and spills, the facility received a rating of marginal for Effluent/Receiving Waters.

**OBSERVATIONS:**

The coatings on the interior and exteriors of the tanks and clarifiers throughout waste treatment were peeling. The facility should consider recoating the tanks to protect them against corrosion. This is scheduled for December 2010. This would include both of the aeration tanks and the #2 tank used for emergency storage.

The aeration tanks are being operated at a higher pH and MLSS. The sauerkraut-type odors were not noticeable. A musty odor was noted at the aeration tanks. The final DAF had no appreciable odor on the day of the inspection.

**INEOS ABS (USA) Corporation**

**Page 3**

The facility tries to maintain a four to eight foot sludge blanket in the secondary clarifiers. This will vary.

The pad for biofilter has been installed. The biofilter should be completed by December 2010. The aeration tanks are to be covered, and the air from the tanks will be routed to the biofilters. This is expected to be completed by July 2011. This is part of a plan for odor reduction at waste treatment.

The facility has been experimenting with operational changes to reduce the ammonia in the discharge. A summary of this was provided to Ohio EPA.

The outfalls were observed. Outfall 001 is underwater with a diffuser. Outfall 002 was flowing through the weir to the Ohio River. The signage had been washed away, and the signs were missing the day of the inspection. The signs were replaced by September 14, 2010. Documentation of this was provided to Ohio EPA.

The plant maintenance crews had sprayed the weeds growing in the waste treatment area with an herbicide. As a result, there is dead vegetation in this area. The dead vegetation should be removed so it does not interfere with inspection of equipment and lines in the area. In addition, stressed/dead vegetation can be related to environmental stressors in the area. It does not present a positive image.

Divers inspected outfall 001 on June 1, 2010.

The anti-foam added now diluted. It is mainly water unless it is determined more anti-foam is needed. The facility is looking automating this process.

**RECOMMENDED ACTION**

INEOS should consider removing the dead vegetation from waste treatment.

**GENERAL LABORATORY CRITERIA RECOMMENDED ACTIONS**

INEOS must calibrate its temperature probe to a NIST traceable thermometer.

INEOS must develop a standard operating procedure (SOP) for cleaning and maintaining its sampling equipment.

**From:** Marianne Piekutowski  
**To:** [jessica.reece@lustran-polymers.com](mailto:jessica.reece@lustran-polymers.com)  
**Date:** 10/6/2010 11:21 AM  
**Subject:** Re: Inspection Report

Thanks Jessica. I believe this were for the most part typos. The information I had from the diesel was unclear so that's why I put the 85 gallons in the report. The clarification is welcomed. I will print out your email and include it in the file for the corrections. Let me know if you will need anything else from me, let me know.

Mari Piekutowski

>>> <[jessica.reece@lustran-polymers.com](mailto:jessica.reece@lustran-polymers.com)> 10/6/2010 11:17 AM >>>  
Mari,

Hello. I received the inspection report for 2010 and had a few comments, that I believe are typographical errors.

Section G: Major Equipment Breakdown is selected as yes and I believe it should be no.

In the Compliance Evaluation Text pH violation is reported as 6.47 and it was actually 5.47

In Compliance Evaluation Text, fuel oil spill states 85 gallons got to river and the report stated 85 gallons of water go to the Clean Water Basin which was diverted and cleaned up, an estimated 5 gallons got through the clean water basin and to the Ohio River.

Please let me know if you have any questions or if these changes are not acceptable.

Thank you,  
Jessica

Jessica Reece  
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INEOS ABS NAFTA  
Plant Engineer-Utilities  
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Addyston, OH 45001  
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[www.ineos-abs.com](http://www.ineos-abs.com)