



**Environmental
Protection Agency**

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



1IH0001120100629

BUTLER

MILLERCOORS LLC

OSTENDORF, ROBE 2010/06/29



**Environmental
Protection Agency**

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

June 29, 2010

Ms. Denise Quinn, Vice President
MillerCoors, LLC
2525 Wayne Madison Road
Trenton, OH 45067

Re: Butler County, MillerCoors, LLC, Compliance Evaluation Inspection

Dear Ms. Quinn:

On June 15, 2010, I conducted a Compliance Evaluation Inspection at MillerCoors, LLC facility (NPDES Permit No. OH0072605; OEPA Permit No. 11H00011*ED). Mark Koch represented the facility during the inspection. A copy of my inspection report is enclosed.

Two areas evaluated as part of the inspection were found to be Marginal. The areas rated as marginal were the Operation and Maintenance section and the Laboratory section. Please note that the report, by its format, tends to highlight negative areas.

The rating of Marginal for the Operation and Maintenance area was due to the extended period of time in which the grit removal system has been inoperable. During the inspection I was informed that this component of the treatment system had been inoperable for approximately 1 year. It was also noted that one of the two screw pumps for the influent was inoperable at the time of the inspection. I would like to take this opportunity to remind the facility that Part III, Item 3 of permit 11H00011*ED requires that "At all times, the permittee shall maintain in good working order and operate as efficiently as possible all treatment or control facilities or systems ...".

The Laboratory section of the inspection was also rated as Marginal. It should be noted that the Ohio EPA has recently modified the inspection criteria with a renewed focus on laboratory procedures. This is the first time that this criterion has been applied at this facility. The rating of Marginal was primarily related to documentation. The facility currently generates a bench-sheet when performing an analysis. The facility then enters the data into a spreadsheet and disposes of the original bench-sheet. I would like to take this opportunity to remind the facility that Part III, Item 7 of permit 11H00011*ED states that the permittee shall keep "All sampling and analytical records (including internal sampling

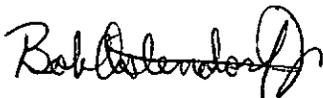
Ms. Denise Quinn
June 24, 2010
Page 2

data not reported" for a minimum of five years. The facility will also need to develop a formal written Standard Operating Procedures for all analysis performed at the WWTP laboratory. The details of the findings can be found in the General Lab Criteria form included with this letter.

Please provide a written response regarding the observations documented in the inspection report and the General Lab Criteria forms to this office by no later than July 23, 2010. The response shall include either the date the corrective actions were completed or the date in which the corrective actions are anticipated being completed.

If you have any questions regarding this matter please feel free to contact me at (937) 285-6107 or via email at: Robert.Ostendorf@epa.state.oh.us.

Sincerely,



Bob Ostendorf Jr.
Division of Surface Water
Permits Section

Enclosures



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
1IH00011*ED	OH0072605	6/15/10	C	S	2

Section B: Facility Data		
Name and Location of Facility Inspected	Entry Time	Permit Effective Date
MillerCoors, LLC 2525 Wayne Madison Rd Trenton, OH 45067	9:00	August 1, 2009
	Exit Time	Permit Expiration Date
	11:30	January 31, 2014
Name(s) and Title(s) of On-Site Representatives	Phone Number(s)	
Mr. Mark Koch, Environmental Engineer	513-844-4238	
Name, Address and Title of Responsible Official	Phone Number	
Ms. Denise Quinn, Vice President MillerCoors, LLC 2525 Wayne Madison Road Trento, OH 45067	513-844-4601	

Section C: Areas Evaluated During Inspection					
(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)					
S	Permit	S	Flow Measurement	N	Pretreatment
S	Records/Reports	M	Laboratory	N	Compliance Schedule
M	Operations & Maintenance	S	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 comment area within each section for details of comments and findings.	
Inspector	Reviewer
 Bob Ostendorf Jr. Division of Surface Water Southwest District Office	 Martyn Burt Compliance & Enforcement Supervisor Division of Surface Water Southwest District Office
6-24-10 Date	6/29/10 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.. N
- (d) Product(s) and production rates conform with permit application (Industries)..... N/A
- (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..... Y
- (b) Appropriate Non-compliance notification of violations..... Y
- (c) Permittee is taking actions to resolve violations..... Y
- (d) Permittee has a compliance schedule..... N
- (e) Compliance schedule contained in...N/A
- (f) Permittee is in compliance with schedule..... N/A
- (g) Has biomonitoring shown toxicity in discharge since last inspection N/A

Comments/Status:

The facility received a renewed permit (effective August 1, 2009) and there was some confusion on the monitoring requirements for Zinc and Total Dissolved Solids. This issue has since been resolved and the facility is monitoring Zinc and Total Dissolved Solids as is required in the permit. The facility has also had a couple of violations related to CBOD. These instances were reported as required. The reason for the violations were explained to be temperature related.

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.....

The facility practices critical bus load shedding. The entire WWTP can be operated using a generator if the need arises.
 - ii. How often is the generator tested under load.....

See above.
- (b) Which components have an alarm system available for power or equipment failures.....
- (c) All treatment units in service other than backup units..... N
- (d) What method is used for scheduling routine & preventative maintenance (calendar, software, etc.).....

Computerized Maintenance Management System
- (e) Any major equipment breakdown since last inspection..... Y
- (f) Operation and maintenance manual provided and maintained..... N
- (g) Any plant bypasses since last inspection..... N
- (h) Any plant upsets since last inspection..... N

Comments/Status:

At the time of the inspection the facility was only operating 3 of the 8 basins available for use. The facility has 2 screw pumps at the head of the WWTP and one of the pumps is currently offline due to needed repairs. Mr. Koch indicated that repairs to the screw pump are forthcoming. It was also discovered that the grit removal system has been offline for approximately 1 yr. Mr. Koch indicated that the facility is also in the process of repairing this piece of equipment.

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)..... Y
- (d) Any complaints received in last year regarding sludge..... N/E
- (e) 5/8" screen at headworks for facilities that land apply sludge..... Y
- (f) Are sludge application sites inspected to verify compliance with NPDES permit..... Y
- (g) Is a contractor used for sludge disposal..... Y
 If so, what is the name of the contractor.....

Comments/Status:

The facilities sludge does not contain sanitary waste and is derived from process related wastewaters. The facility has an approved sludge management plan on file (1MP00004*AM February 16, 2010)

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):

Ultra Sonic level sensor.

- (b) Calibration frequency adequate Y
(Date of last calibration: December 9, 2009)
- (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:

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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:

The facility utilizes bench-sheets when performing onsite analyses. The facility enters the monitoring results into a spreadsheet and then disposes of the original bench-sheet.
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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..... N
 - 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..... Y
- (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: All required by permit except for pH, DO, and temperature.

Lab name: Test America

Discharge Monitoring Report Quality Assurance (DMRQA)

- (a) Participation in latest USEPA quality assurance performance sampling..... Y
Date: Not available at the time of the inspection
- (b) Were any parameters "Unsatisfactory"..... N
- (c) Reasons for "Unsatisfactory" parameters.....

Comments/Status:

Section J: Effluent/Receiving Water Observations

Outfall # 001

Outfall Description: The discharge pipe was not visible at the time of the inspection.

Receiving Stream: Great Miami River

Receiving Stream Description: The Great Miami River was elevated and very turbid at the time of the inspection due to a recent rain event.

Comments/Status:

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.. N
- (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:

During the course of the inspection I noted the tracking of wastewater sludge in or near the storage area. I inquired as to where the adjacent ditch led and was told by Mr. Koch that it did not have an outlet.

General Lab Criteria

MillerCoors, LLC 6/15/10

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

Comments:

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

Comments:

General Lab Criteria

MillerCoors, LLC 6/15/10

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

Comments: *The facility does not maintain an equipment logbook for this unit. At the time of the inspection the facility did not have the range of the acceptable slope recorded on the bench-sheet.*

Criteria	Standard Methods Requirement		Rating
		Acceptable?	
Dissolved Oxygen Meter			NR
• Calibration Method	• Air or known DO calibration method ¹⁰	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	• Calibration per manufacturer specification ¹⁰	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
• Calibration Frequency / Documentation	• Logbook maintained ²	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	• Calibration verification required at least once each day the meter is used. ³	<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) ¹¹	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	• Instrument manual available	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Comments:

General Lab Criteria

MillerCoors, LLC 6/15/10

Criteria	Standard Methods Requirement	Acceptable?		Rating
Incubator (CBOD/ E-Coli)				
• Temperature Recordkeeping	• Temperature checked / recorded twice daily for each shelf in use ¹	<input type="checkbox"/> Yes	<input type="checkbox"/> No	NR
	• Acceptable temperature range (CBOD) is 20° C ±1.0 ° ¹²	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Acceptable temperature range (E-Coli) is 35° C ±0.5 ° ²²	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Logbook maintained ²	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Temperature Calibration / Documentation	• Thermometer calibrated annually with NIST traceable thermometer ^{1,2}	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Temperature correction information posted on incubator ¹	<input type="checkbox"/> Yes	<input type="checkbox"/> 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	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Other	• Instrument manual available	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Temperature Log (thermometer reads to 0.5 Celsius). ¹	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Comments:

Criteria	Standard Methods Requirement	Acceptable?		Rating
Refrigerator				
• Temperature Recordkeeping	• Temperature Log (thermometer reads to 0.5 Celsius). ⁵	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	A
• Temperature Calibration / Documentation	• Thermometer calibrated annually with NIST traceable thermometer ^{1,2}	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
• Other	• Thermometer held in water bath. ¹	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Refrigerator temperature ≤6° Celsius. ¹³	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Do not store volatile solvents, food, or beverages. ¹⁴	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	

Comments: *The thermometer used in the refrigerator is new (<1 yr old). The facility will need to ensure that the thermometer is calibrated annually with an NIST traceable thermometer.*

General Lab Criteria

MillerCoors, LLC 6/15/10

Criteria	Standard Methods Requirement	Acceptable?		Rating
Chlorine Meter				
• Calibration Frequency / Documentation	• pH / millivolt meter read to 0.1 mV ¹⁵	<input type="checkbox"/> Yes	<input type="checkbox"/> No	NR
	• 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	<input 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 ¹⁶	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Standards used for calibration not expired	<input 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 type="checkbox"/> No	
	• Log book being maintained. ²	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Instrument manual available	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments:				

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	<input type="checkbox"/> Yes	<input type="checkbox"/> No	NR
	• Log book being maintained ²	<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. ¹⁷	<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 ¹⁸	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Instrument manual available	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments:				

General Lab Criteria

MillerCoors, LLC 6/15/10

Criteria	Standard Methods Requirement		Rating
Sample Collection/Handling	Acceptable?		U
• Sample Labeling	• Samples container labeled (description, date, time, preservative added, initialed). ¹⁹	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
• Chain of Custody	• Chain of custody (description, date, time, signature). ¹⁹	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
• Other	• Composite samples refrigerated during sample collection ¹⁴	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	• Equipment blanks utilized ¹⁴	<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 ²	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Comments: *The refrigeration unit for the automatic sampler was broken at the time of the inspection. A new refrigeration unit had been purchased but had not been put into use at the time of the inspection. The facilities automatic sampler is of the dipper style. The facility does not have a written SOP for cleaning of sampling equipment. The sample collection jug is washed 2-3 times per week as needed. The samples are analyzed by the same person who collects the sample but this practice has not been documented in a written SOP. The sample bottles used for collecting influent and effluent samples are labeled with the source of the sample but does not record the date and time of the collection. The facility analyzes samples for pH, DO, and temperature. All of these parameters are time sensitive.*

Criteria	Standard Methods Requirement		Rating
Desiccator	Acceptable?		NR
• General criteria	• Properly working seals.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	• Desiccant fresh (blue color)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
• Documentation	• Log book being maintained ²	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Comments:

Criteria	Standard Methods Requirement		Rating
Bench sheets	Acceptable?		U
• General criteria	• Date(s) ²	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	• Analyst initials ²	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	• Blue or black ink pen ²	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	• Calibration information ²	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	• Equations, calculations, units for all measurements, notations, and results present ²	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	• Corrections, single line through, initialed and dated ²	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Comments: *If an error occurs the facility scribbles through the error and then records the correct data. The facility then enters the data into a spreadsheet and disposes of the original bench-sheet.*

General Lab Criteria

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Criteria	Standard Methods Requirement	Acceptable?		Rating
Hot Water Bath (Fecal Coliform/E. Coli)				
• Temperature Recordkeeping	• Temperature Log (thermometer reads 0.2° C) ²¹	<input type="checkbox"/> Yes	<input type="checkbox"/> No	NR
	• Incubator temperature 44.5° C ± 0.2° ^{23/24}			
• Temperature Calibration / Documentation	• Thermometer calibrated annually with NIST traceable thermometer ^{1,2}	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Log book being maintained ²	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Water Level	• Thermometer total immersion or partial (line on thermometer to ID immersion depth) ^{1,5}	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments:				

Criteria	Standard Methods Requirement	Acceptable?		Rating
Autoclaves/Steam Sterilizers				
• All apparatus utilized is adequately sterilized before use	• Sterilizing temperature 121° C ²⁵	<input type="checkbox"/> Yes	<input type="checkbox"/> No	NR
	• 10 to 30 minutes time based on material being sterilized ²⁶	<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. ¹	<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 ¹	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Temperature Calibration / Documentation	• Thermometer calibrated annually with NIST traceable thermometer ^{1,2}	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Log book being maintained ²	<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 ¹	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments:				

General Lab Criteria

MillerCoors, LLC 6/15/10

Criteria	Standard Methods Requirement		Rating								
Final Effluent Temperature Monitoring	Acceptable?		A								
• General Criteria	• Thermometer calibrated annually with NIST traceable thermometer ^{1,2}	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
	• Thermometer reads in increments of at least 0.1° C ⁵	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
	• Log book being maintained ²	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
Comments: <i>The effluent thermometer is new (<1 yr old). The facility will need to ensure that the effluent thermometer is calibrated annually with an NIST traceable thermometer. The facilities work order procedures document maintenance activities performed on the unit.</i>											
Number of Criteria Rated:			<table border="1"> <tr> <td>Acceptable</td> <td>2</td> </tr> <tr> <td>Marginal</td> <td>1</td> </tr> <tr> <td>Unacceptable</td> <td>2</td> </tr> <tr> <td>Total Number of Areas Rated</td> <td>5</td> </tr> </table>	Acceptable	2	Marginal	1	Unacceptable	2	Total Number of Areas Rated	5
Acceptable	2										
Marginal	1										
Unacceptable	2										
Total Number of Areas Rated	5										
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									

Notation of Referenced Method

- | | |
|----------------------------|------------------------------|
| 1 Method 9020-B, Item 3 | 14 Method 1060A, Item 1 |
| 2 Method 1020-A, Item 1 | 15 Method 4500-CI I, Item 2 |
| 3 Method 1020-B, Item 10 | 16 Method 4500-CI 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-A, 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 |

General Lab Criteria

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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 $\leq 6^{\circ}\text{C}$	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
NH3-N	P, G	500	G, C	Analyze as soon as possible or add H_2SO_4 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_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 $\leq 6^{\circ}\text{C}$	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_2SO_4 to pH <2, Refrigerate $\leq 6^{\circ}\text{C}$	28 d	28 d

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