



**Environmental  
Protection Agency**

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



\*11A0001020100805\*

MONTGOME W CARROLLTON PARCHMENT CO

OSIKA, MARY

2010/08/05



**Environmental  
Protection Agency**

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

August 5, 2010

Len Levy  
Ahlstrom West Carrollton LLC.  
1 South Elm Street  
P.O. Box 49098  
West Carrollton, Ohio 45449-49098

RE: Compliance Evaluation Inspection  
NPDES Permit 11A00010\*ID

Dear Mr. Levy:

On July 30, 2010, I met with Brandon Carpenter to inspect the wastewater treatment system at Ahlstrom West Carrollton and the discharge to Owl Creek. Attached is a copy of my Compliance Evaluation Inspection Report regarding compliance with the NPDES Permit.

All areas evaluated were rated as satisfactory with the exception of effluent/receiving waters (marginal) and compliance schedules (unsatisfactory). The attached summary details the effluent limit excursions in the Notice of Violation.

Please respond to the areas noted in the Summary of Findings that require a response. If you have any questions regarding the compliance evaluation inspection, please call me at (937) 285-6101.

Sincerely,

Mary Osika  
Environmental Specialist  
Division of Surface Water

Enclosures

cc: Brandon Carpenter, Ahlstrom West Carrollton



## Summary of Findings/Comments

The facility continues to run one parchment line now, 3 shifts per day, 5 days a week. The average daily flow rate from the facility to Owl Creek during the review period (July 2009 – June 2010) is approximately 0.680 MGD. The design flow rate which permit load limits are based is 0.700 MGD.

Attached to this summary is a Notice of Violation for effluent limit exceedances of the NPDES permit for this facility during the review period of July 2009 through June 2010. Twenty eight (28) exceedances are listed during the review period. It is noted that the TDS permit limit exceedances did not violate the 2003 calculated wasteload allocation numbers. The copper violations in August 2009 did exceed the calculated wasteload allocation numbers.

An inspection of Owl Creek on July 30, 2010 showed the presence of nuisance biological growth downstream of the discharge point from Ahlstrom West Carrollton's discharge pipe which is a violation of general effluent limitations in Part III, General Conditions of the NPDES permit and Ohio Water Quality Standards under Ohio Administrative Code 3745-1-04 (E).

Ohio EPA and Ahlstrom are currently negotiating the terms of a set of proposed Director's Findings and Orders in order to address the non-compliance of the NPDES permit for this facility.

### Areas requiring a response

Regarding data collected for pH and temperature by Ahlstrom staff, there needs to be Standard Operating Procedures written for collecting the daily data and the associated calibration/operation of the instruments used for taking samples and collecting data. There currently is no written schedule for performing yearly calibration of monitoring equipment used for data collection of pH and temperature. Ahlstrom depends upon trained personnel's knowledge of their operating procedures for this equipment.

Attached is a General Lab Criteria check sheet that Ohio EPA is now employing in inspections at facilities that either collect their own samples/data or have their own labs. Use this check sheet as a guide to implement log books/ SOPs for topics pertinent to Ahlstrom such as pH, temperature, refrigerator, and sample collection/handling. Ahlstrom will need to follow the specific manufacturers recommendations regarding the instrumentation for continuous pH monitoring.

A response is requested regarding Ahlstrom preparing written SOPs for treatment system instrumentation maintenance/calibration and data collection.





State of Ohio Environmental Protection Agency  
Southwest District Office

NPDES Compliance Inspection Report

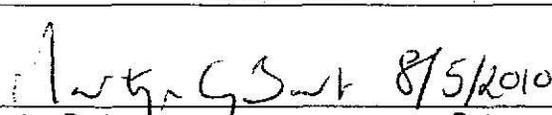
Section A: National Data System Coding					
Permit #	NPDES#	Month/Day/Year	Inspection Type	Inspector	Facility Type
11A00010*ID	OH0045322	7/30/2010	C	S	Industrial

Section B: Facility Data		
Name and Location of Facility Inspected	Entry Time	Permit Effective Date
Ahlstrom West Carrollton LLC 1 South Elm Street West Carrollton, Ohio	10:00 am	August 1, 2003
	Exit Time	Permit Expiration Date
	11:00 am	June 30, 2007
Name(s) and Title(s) of On-Site Representatives		Phone Number(s)
Brandon Carpenter, Technical Director		(937) 859-3621
Name, Address and Title of Responsible Official		Phone Number
Len Levy, Plant Manager 1 South Elm Street P.O. Box 49098 West Carrollton, Ohio 45449-0098		(937) 247-1247

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	N	Laboratory	U	Compliance Schedule
S	Operations & Maintenance	M	Effluent/Receiving Waters	S	Self-Monitoring Program
S	Facility Site Review	N	Sludge Storage/Disposal	S	Other
N	Collection System				

**Section D: Summary of Findings (Attach additional sheets if necessary)**

See attached sheet for summary of findings.

Inspector	Reviewer
 8/5/2010	 8/5/2010
Mary Osika Environmental Specialist Division of Surface Water Southwest District Office	Martyn Burt Compliance & Enforcement Supervisor Division of Surface Water Southwest District Office



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

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**Section E: Permit Verification**

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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:

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**Section F: Compliance**

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- (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..... Y
- (e) Compliance schedule contained in...NPDES Permit Compliance Schedule
- (f) Permittee is in compliance with schedule..... N
- (g) Has biomonitoring shown toxicity in discharge since last inspection Y

Comments/Status:

(a,c, f) Currently in discussion of proposed Director's Findings and Orders.



**Section G: Operation & Maintenance**

**Treatment Works:**

Treatment facility properly operated and maintained

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

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

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

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

pH meter

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

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

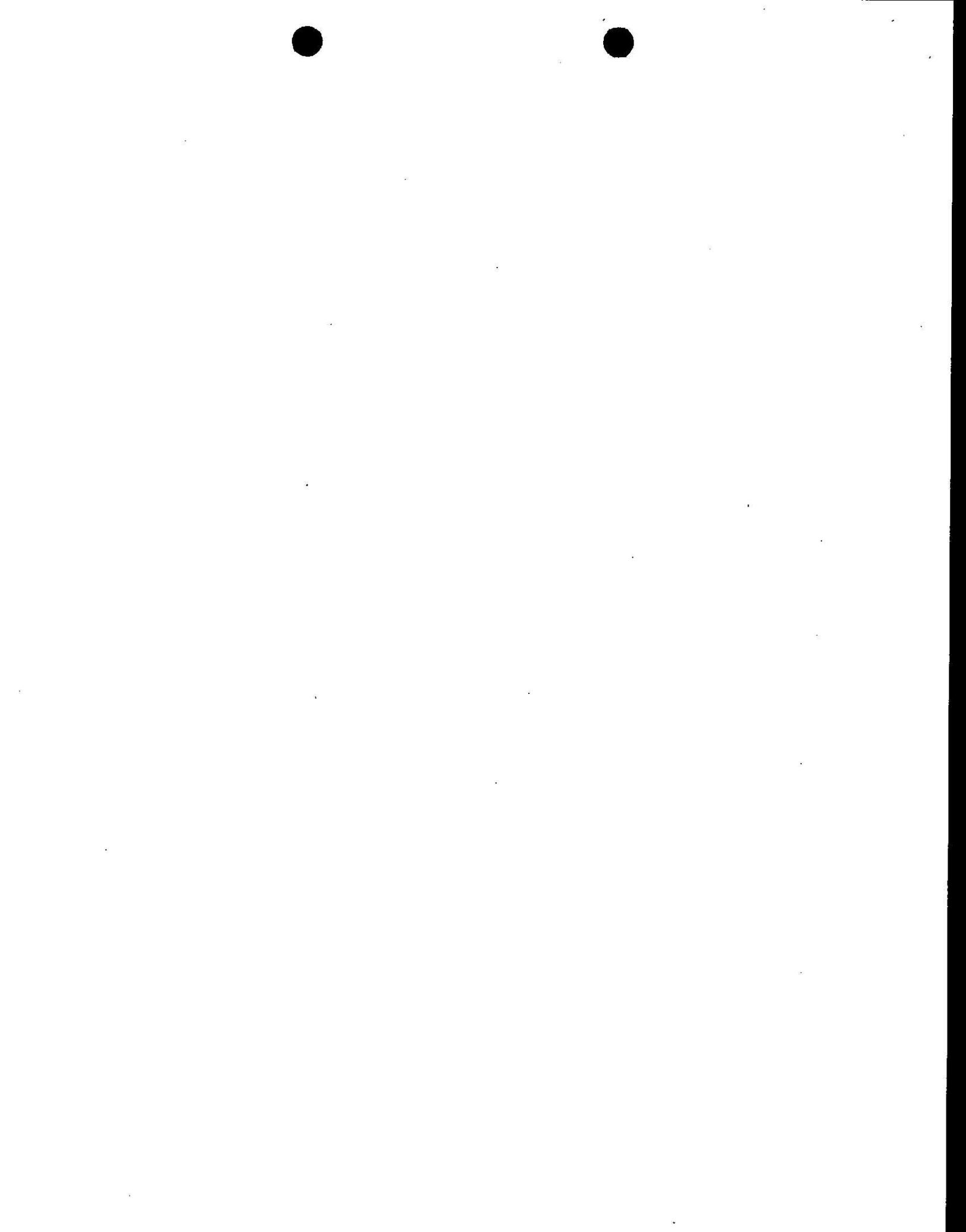
(e) Any major equipment breakdown since last inspection..... N

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

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

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

Comments/Status:



**Section H: Sludge Management**

Not applicable to this industry

**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):  

ultrasonic & pashall flume
----------------------------
- (b) Calibration frequency adequate ..... Y  
(Date of last calibration: March 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:**

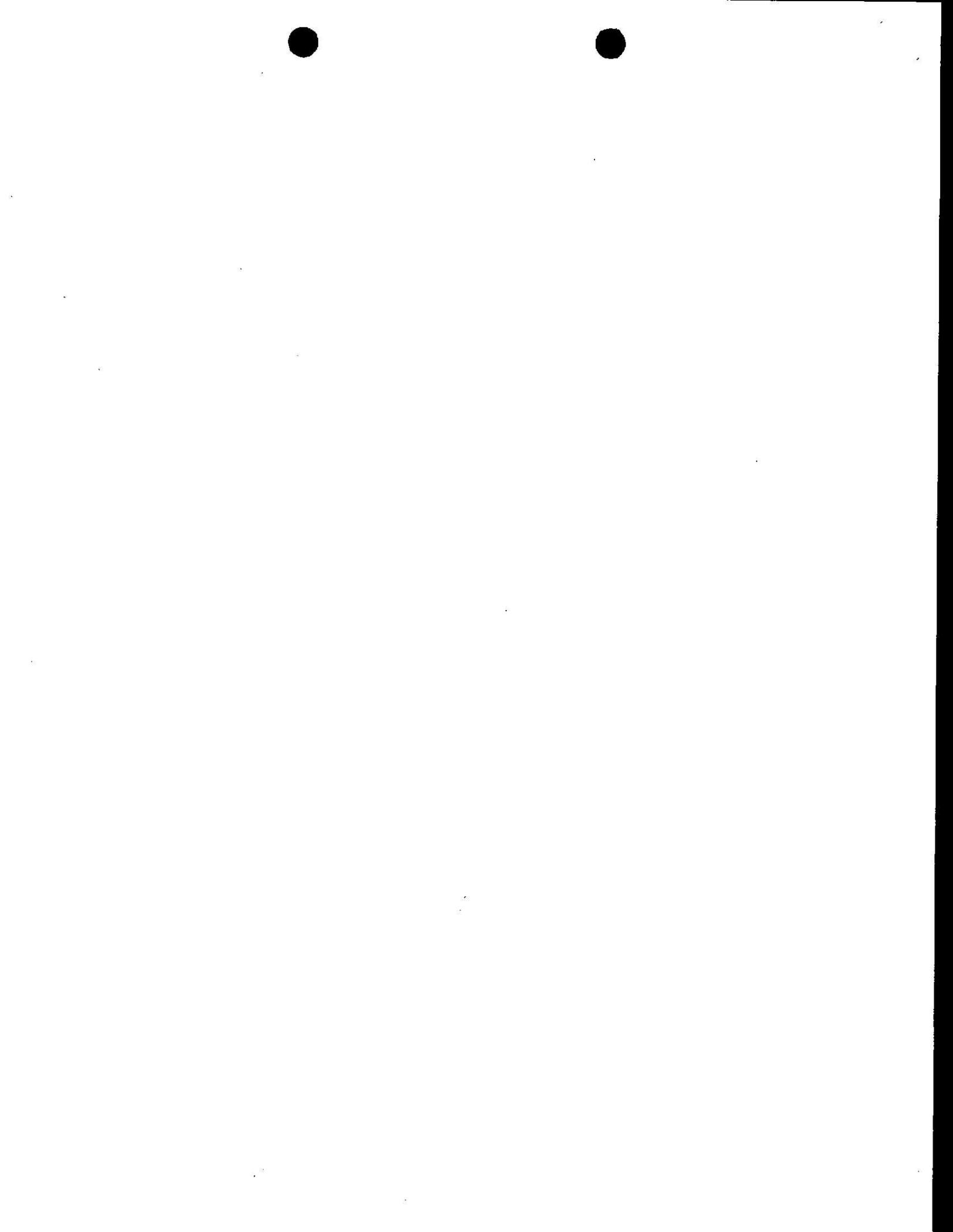
They are operating one parchment machine 3 shifts per day, 5 days per week.

**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..... N
- (b) Do SOP's include the following if applicable:
- Title
  - Scope and Application
  - Summary
  - Sample Handling and Preservation
  - Interferences
  - Apparatus and Materials
  - Reagents
  - Procedure
  - Calculations
  - Quality Control
  - Maintenance
  - Corrective Action
  - Reference (Parent Method)

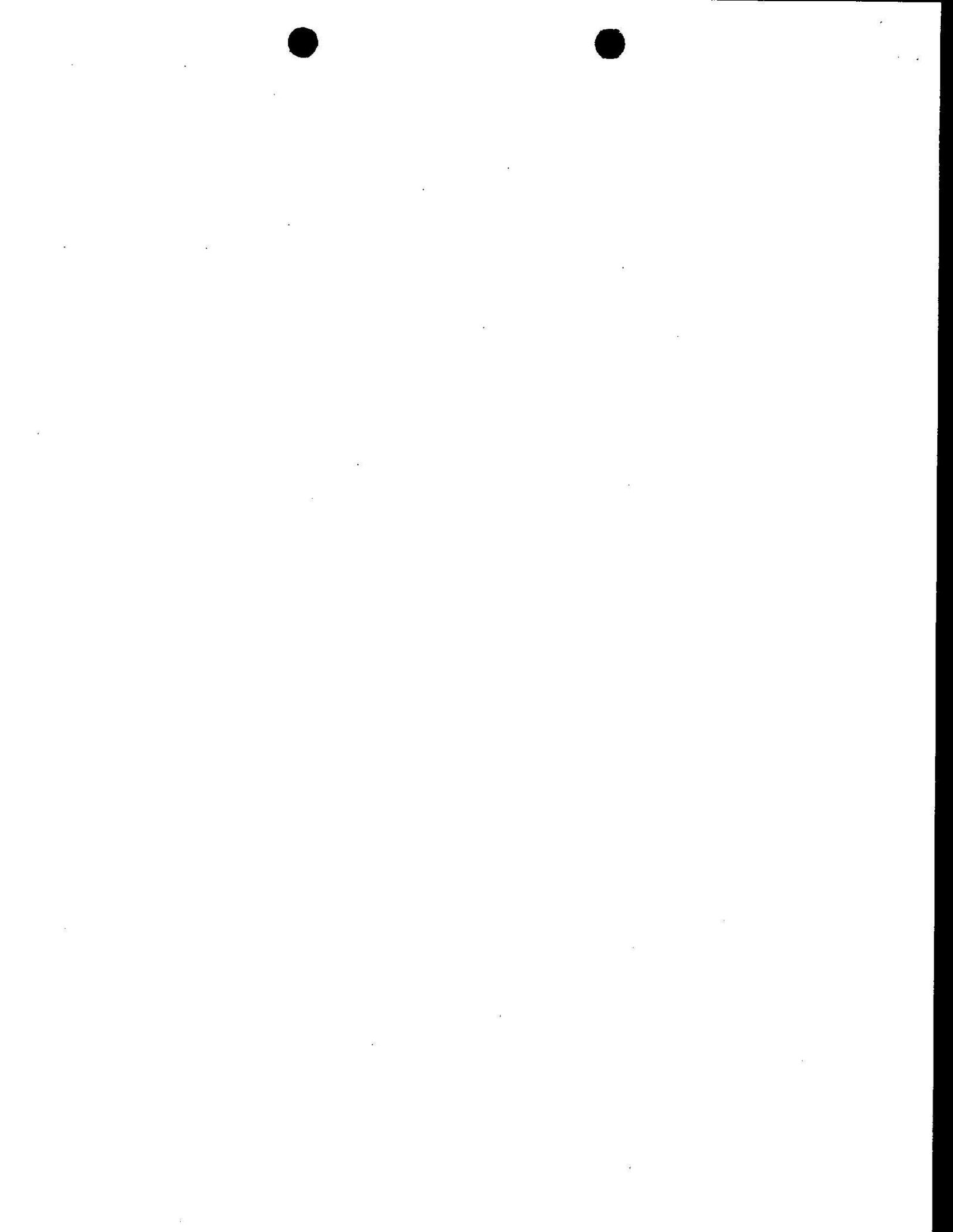
*Note: Standard Methods 1020A establishes that "Quality assurance (QA) is the definitive program for laboratory operation that specifies the measure required to produce defensible data of known precision and accuracy. "Standard operating procedures are to be used in the laboratory in sufficient detail 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. N/E (see score from GLC page)
- (h) Commercial laboratory used..... Y  
Parameters analyzed by commercial lab: Everything except pH and temperature  
Lab name: Belmont Park, EnviroScience

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

- (a) Participation in latest USEPA quality assurance performance sampling..... Y  
Date: Study 29, Sept. 2009
- (b) Were any parameters "Unsatisfactory"..... Y
- (c) Reasons for "Unsatisfactory" parameters.....

1 parameter unsatisfactory for EnviroScience Lab – Chronic toxicity for fathead minnow; corrective action plan taken by lab.



**Comments/Status:**

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

Outfall # 001

Outfall Description: Sampling station 001 observed at parshall flume located in crawl space under building. Nothing unusual noted.

Receiving Stream: Owl Creek

Receiving Stream Description: Outfall area and downstream showed excessive bacteria/fungal growth. Photos taken upstream, outfall and downstream.

**Comments/Status:**

Upstream from outfall location on receiving stream was dry during the inspection. Noted a lot of junk in the creek which is the result of storm water washing solid waste down the creek from unknown dumping areas.

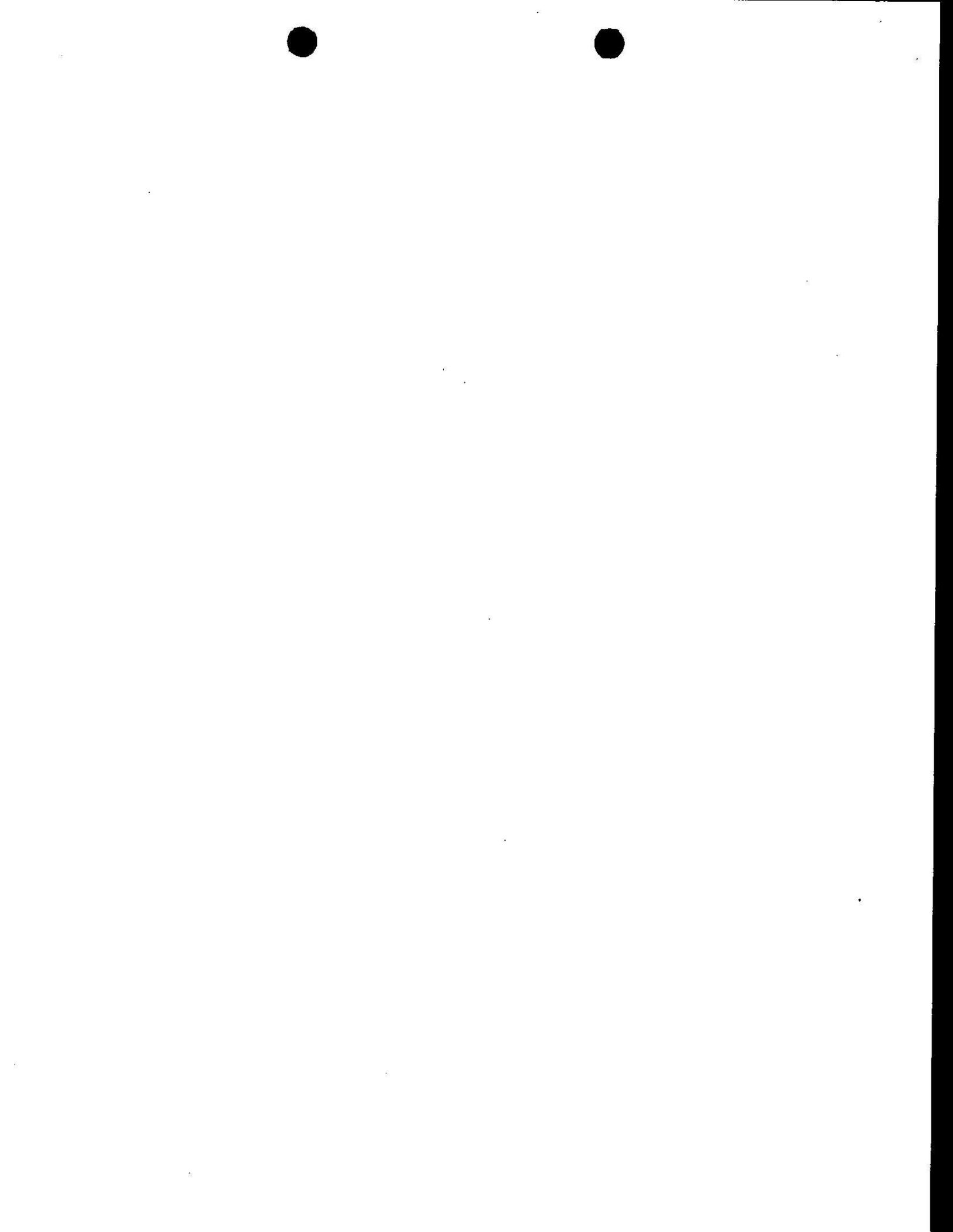
**Section K: Multimedia Observations**

- (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:**



## NOTICE OF VIOLATION

### PERMIT LIMIT EXCEEDANCES AT OUTFALL 001 FROM JULY 2009 – JUNE 2010

<u>Parameter</u>	<u>Date</u>	<u>Permit Limit</u>	<u>Value Reported</u>
Residue, Total Dissolved (monthly average)	July 2009	1500 mg/l 3974 kg/day	2080 mg/l 6061 kg/day
Residue, Total Dissolved (monthly average)	Aug. 2009	1500 mg/l 3974 kg/day	2325 mg/l 6162 kg/day
Copper, Total Recov. (daily max.)	Aug. 18, 2009	42 ug/l 0.1113 kg/day	93.7 ug/l 0.2237 kg/day
<b>Copper, Total Recov. (monthly average)</b>	<b>Aug. 2009</b>	<b>25 ug/l 0.066 kg/day</b>	<b>93.7 ug/l 0.2237 kg/day</b>
Residue, Total Dissolved (monthly average)	Sept. 2009	1500 mg/l 3974 kg/day	1887 mg/l 5199 kg/day
Residue, Total Dissolved (monthly average)	Oct. 2009	1500 mg/l 3974 kg/day	1680 mg/l 4725 kg/day
Residue, Total Dissolved (monthly average)	Nov. 2009	1500 mg/l 3974 kg/day	1707 mg/l 4940 kg/day
Residue, Total Dissolved (monthly average)	Dec. 2009	1500 mg/l 3974 kg/day	1652 mg/l 4008 kg/day
Residue, Total Dissolved (monthly average)	Jan. 2010	1500 mg/l 3974 kg/day	1777 mg/l 4662 kg/day
Residue, Total Dissolved (monthly average)	Feb. 2010	1500 mg/l 3978 kg/day	1570 mg/l 4353 kg/day
Residue, Total Dissolved (monthly average)	Mar. 2010	1500 mg/l 3974 kg/day	1562 mg/l 4164 kg/day
Residue, Total Dissolved (monthly average)	Apr. 2010	1500 mg/l 3974 kg/day	1762 mg/l 4625 kg/day
Residue, Total Dissolved (monthly average)	May. 2010	1500 mg/l 3974 kg/day	1765 mg/l 4872 kg/day

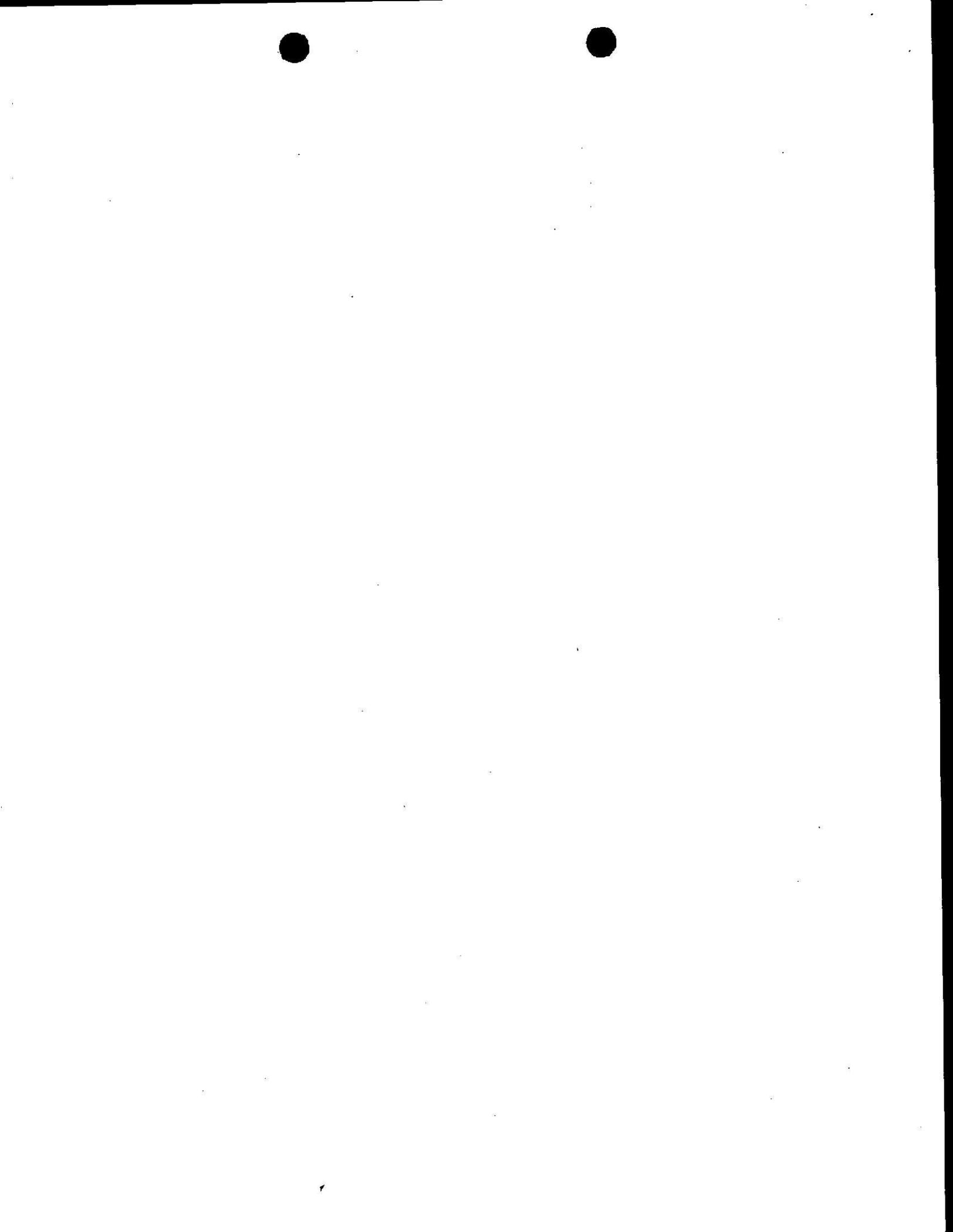


Residue, Total Dissolved (monthly average)	Jun. 2010	1500 mg/l 3974 kg/day	1925 mg/l 5018 kg/day
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Notes -

Loads are calculated based on concentration and flow rate.

Permit exceedences highlighted in **bold** also exceed the 2003 Wasteload Allocations calculated for Residue, Total Dissolved (30 day concentration of 2907 mg/l, loading of 7702 kg/day) and Copper, Total Recoverable (30 day concentration of 44 ug/l, loading of 0.1166 kg/day).



# General Lab Criteria

Criteria	Standard Methods Requirement		Rating
<b>Balance</b>			Acceptable?
• Standard Weights	• Either NIST Class 1 or ASTM/ANSI Class 1 weights <sup>1,2</sup>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
• 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	
	• 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		Rating
<b>pH Meter</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		Rating
<b>Dissolved Oxygen Meter</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>			
<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<sup>o</sup> C ±1.0<sup>o12</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<sup>o</sup> C ±0.5<sup>o22</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: :

Criteria	Standard Methods Requirement		Rating
<b>Refrigerator</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<sup>o</sup> 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:



# General Lab Criteria

Criteria	Standard Methods Requirement	Acceptable?		Rating
<b>Chlorine Meter</b>				
• Calibration Frequency / Documentation	• pH / millivolt meter read to 0.1 mV <sup>15</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• 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	
• Calibration Method	• Calibration using three iodate solutions 0.2, 1.0, 5.0 milliliters or calibration per manufacturer specification <sup>16</sup>	<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. <sup>2</sup>	<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
<b>Ammonia Meter</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	
	• 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		Rating
<b>Sample Collection/Handling</b>		Acceptable?	
• Sample Labeling	• Samples container labeled (description, date, time, preservative added, initialed). <sup>19</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
• Chain of Custody	• Chain of custody (description, date, time, signature). <sup>19</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
• Other	• Composite samples refrigerated during sample collection <sup>14</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	• Equipment blanks utilized <sup>14</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	• SOP for cleaning of sampling equipment	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	• Logbook being maintained <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Comments:

Criteria	Standard Methods Requirement		Rating
<b>Desiccator</b>		Acceptable?	
• 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 <sup>2</sup>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Comments:

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

Comments:



# General Lab Criteria

Criteria	Standard Methods Requirement		Rating
<b>Hot Water Bath (Fecal Coliform/E. Coli)</b>			Acceptable?
• Temperature Recordkeeping	• Temperature Log (thermometer reads 0.2° C) <sup>21</sup>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	• 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		Rating
<b>Autoclaves/Steam Sterilizers</b>			Acceptable?
• 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		Rating
<b>Final Effluent Temperature Monitoring</b>	Acceptable?		
• General Criteria	• Thermometer calibrated annually with NIST traceable thermometer <sup>1,2</sup>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	• Thermometer reads in increments of at least 0.1° C <sup>5</sup>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	• Log book being maintained <sup>2</sup>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Comments:			
<b>Number of Criteria Rated:</b>			
			Acceptable
			Marginal
			Unacceptable
			Total Number of Areas Rated
<p><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).</p>			
<p><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).</p>			
<p><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).</p>			
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

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
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

## Approved Standard Methods

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





**Environmental  
Protection Agency**

**Ted Strickland**, Governor  
**Lee Fisher**, Lt. Governor  
**Chris Korteski**, Director



\*11A0001020100921\*

MONTGOME W CARROLLTON PARCHMENT CO

OSIKA, MARY

2010/09/21



**Environmental  
Protection Agency**

Gov. Strickland, Governor  
Lie. Fisher, Lt. Governor  
Chris Kohersk., Director

September 21, 2010

Mr. Brandon Carpenter  
West Carrollton Parchment Company  
1 S. Elm Street  
P.O. Box 49098  
West Carrollton, Ohio 45449-49098

RE: NOTICE OF VIOLATION  
NPDES Permit 11A00010\*ID, OH0045322

Dear Mr. Carpenter:

I have reviewed your self-monitoring report for the month of August, 2010, for the discharge 001 from the Ahlstrom West Carrollton facility. The review indicates an effluent limit violation in regard to the NPDES permit for this facility. The specific instance of noncompliance is as follows:

**EFFLUENT LIMIT VIOLATION AT OUTFALL 001**

<u>Parameter</u>	<u>Date</u>	<u>Permit Limit</u>	<u>Value Reported</u>
Acute toxicity, c. dubia	8/19/2010	1.0 TUa	3.9 TUa

Please be advised that failure to comply with the effluent limitations or to satisfy the monitoring or reporting requirements of your NPDES permit may be cause for enforcement action pursuant to the Ohio Revised Code Chapter 6111.

We did not receive a noncompliance notification for the above violation. You must reply to this Notice of Violation within 10 days discussing the reason for the toxicity limit exceedance and the actions being taken to prevent further occurrences. If you have any questions, please contact me at (937) 285-6101.

Sincerely,

Mary Osika  
Environmental Specialist  
Division of Surface Water

cc: Len Levy, Ahlstrom West Carrollton

