



**Environmental
Protection Agency**

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



1IH0001220100525

PREBLE

P&G PET CARE - LEWISBURG PROD SUPPLY

WARE, MAUREEN

2010/05/25

**Environmental
Protection Agency**

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

File: Preble
Jan 5
sewerage

May 25, 2010

Kimberly Walker, Plant Engineering Leader
P&G Pet Care
6571 State Route 503 N.
P.O. Box 862
Lewisburg, Ohio 45338

RE: P&G Pet Care WWTP Compliance Evaluation Inspection (CEI)

Dear Ms. Walker:

On May 20, 2010 I conducted a CEI at the P&G Pet Care WWTP facility. A copy of my inspection report is enclosed. The inspection report contains two marginal ratings, one for Flow Measurement and the other for Self-Monitoring Program.

The compliance inspection included a more in depth examination of the laboratory than has been done previously. The intent is to assist P&G Pet Care in being able to document that the data produced by the laboratory is "true and accurate" and is therefore defensible. Please note that the NPDES permit in part III states that the permittee shall "Periodically calibrate and perform maintenance on all monitoring and instrumentation at intervals to ensure accuracy of measurements". Furthermore the certification statement required with the submittal of discharge monitoring reports asks the signer to certify "I believe the submitted information true, accurate and complete."

Please respond by June 21, 2010 with a description of how P&G Pet Care intends to correct the deficiencies of the WWTP laboratory identified in the attached General Laboratory Criteria report. In addition, the report must include a description of how P&G Pet Care will address the marginal ratings noted in the CEI.

If you have any questions or comments concerning the contents of this letter, please feel free to contact me at (937) 285-6103.

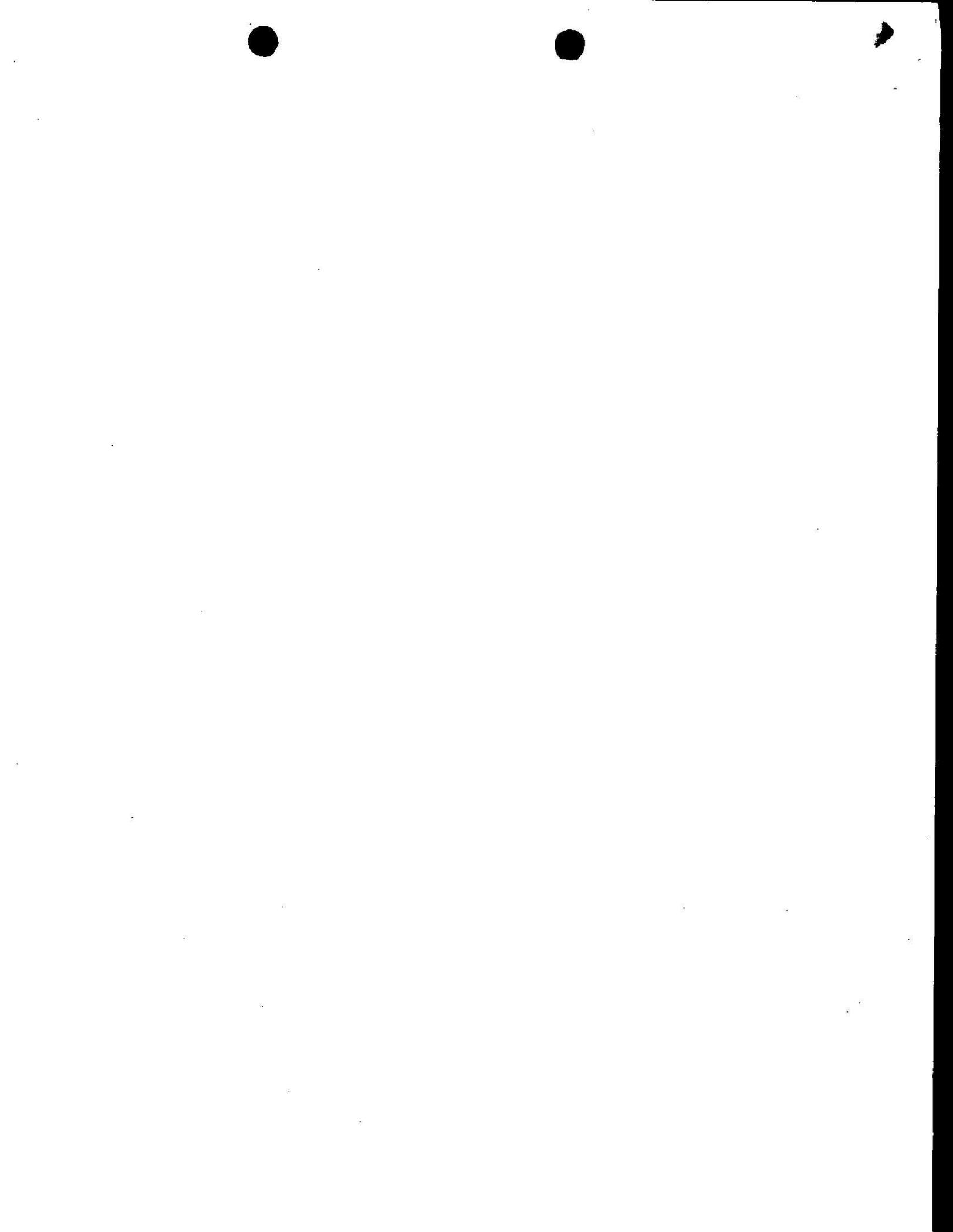
Sincerely,



Maureen M. Ware
Division of Surface Water

enclosures

cc: Preble County Health Dist.
MW/ca



Permit #: 11H00012
 NPDES #: OH0072770



State of Ohio Environmental Protection Agency
 Southwest District Office

NPDES Compliance Inspection Report

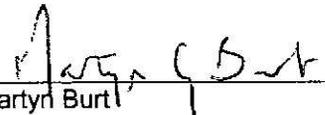
Section A: National Data System Coding					
Permit #	NPDES#	Month/Day/Year	Inspection Type	Inspector	Facility Type
11H00012	OH0072770	5/20/10	C	S	2

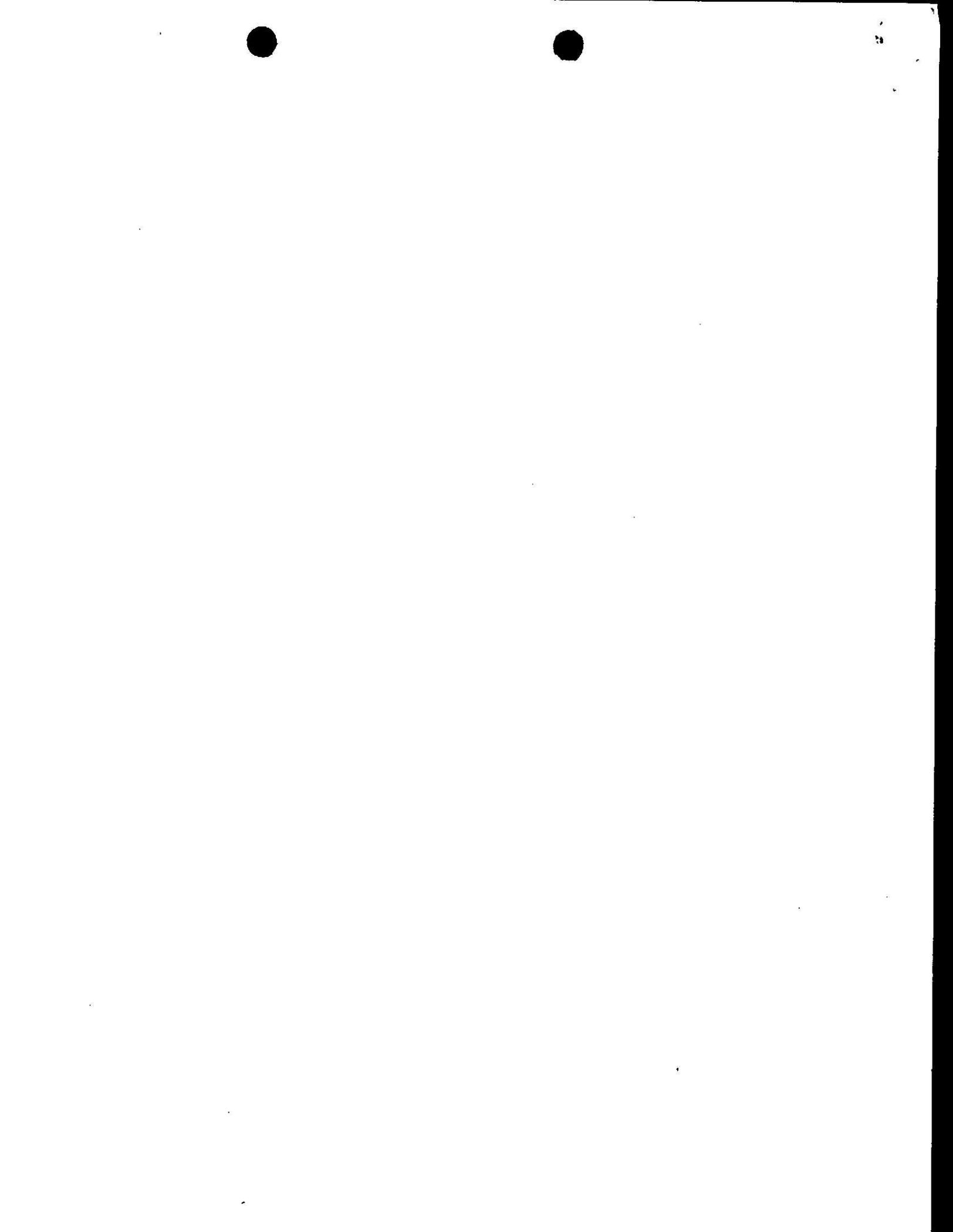
Section B: Facility Data		
Name and Location of Facility Inspected	Entry Time	Permit Effective Date
Proctor & Gamble IAMs Co. 6571 SR 503 Lewisburg, Ohio	9:30 AM	10/1/2008
	Exit Time	Permit Expiration Date
	11:15 AM	09/30/2013
Name(s) and Title(s) of On-Site Representatives	Phone Number(s)	
Kimberly Walker, Plant Engineering Leader	937-415-8815	
Name, Address and Title of Responsible Official	Phone Number	

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

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

Flow Measurement was rated marginal due to the flow meter not being calibrated annually. The Self-Monitoring Program was rated marginal due to a lack of SOP's for parameters tested on-site as well as the equipment used to gather samples.

Inspector	Reviewer
 Maureen M. Ware Division of Surface Water Southwest District Office	 Martyr Burt Environmental Supervisor Division of Surface Water Southwest District Office
5/25/10 Date	5/25/10 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/A
- (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..... 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:

Compliance evaluated from August 2008 through March 2010. Violations for that period are noted on page 7 of this report. The previous operator, Dan Garretson, did email Ohio EPA with explanations for the CBOD5 violations of May and August 2009. Please note however that now violations should be reported via one of the following:
for daily maximum violations
http://www.epa.state.oh.us/portals/35/permits/24-hour_reporting_Form4499_limits.doc
or for all other numerical violations
http://www.epa.state.oh.us/portals/35/permits/24-hour_reporting_Form4498_bypasses.doc



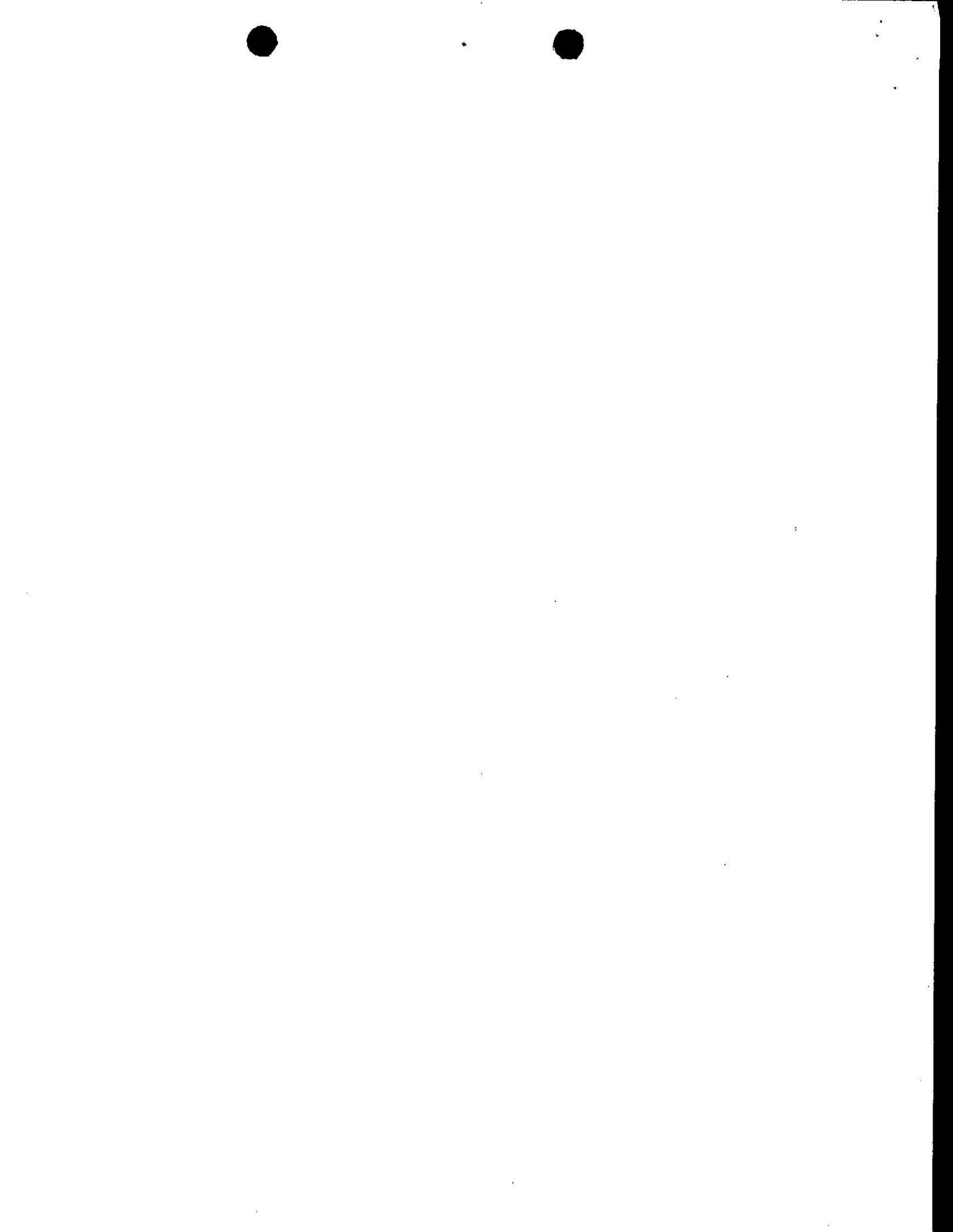
Section G: Operation & Maintenance

Treatment Works:

- Treatment facility properly operated and maintained..... Y
- (a) Standby power availablegenerator or dual feed Y
- i. What does the back-up power source operate.....
- Lights, and pumps in the wetwell. When the power is out, there is little flow to the WWTP as production ceases without power.
- ii. How often is the generator tested under load.....
- 1/week on Monday
- (b) Which components have an alarm system available for power or equipment failures.....
- The 24 hour tank (influent from production facility) and the 7 day tank (effluent after 1st pass in DAF).
- (c) All treatment units in service other than backup units..... Y
- (d) What method is used for scheduling routine & preventative maintenance (calendar, software, etc.).....
- Software
- (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..... N

Comments/Status:

One clarifier went down, but they were able to operate on one clarifier as that is all that is needed with the current flows.





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)
- (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..... N/A
 - 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 know 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.



Permit #: 11H00012
NPDES #: OH0072770

- (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/A
- (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: Everything except D.O., pH, Cl2, temperature, color, odor, and turbidity.

Lab name: Belmont

Discharge Monitoring Report Quality Assurance (DMRQA)

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

Comments/Status:

SOP's must be developed for each parameter reported in the eDMR's. SOP's must be based on the latest version of Standard Methods.

Section J: Effluent/Receiving Water Observations

Outfall # 001

Outfall Description: Pipe

Receiving Stream: Twin Creek

Receiving Stream Description: Clear

Comments/Status:

Section K: Multimedia Observations

- (a) Are there indications of sloppy housekeeping or poor maintenance in work and storage areas or laboratories..... N



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- (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:

The following violations were noted from outfall 001:

Date	Parameter	Limit Type	Limit	Reported
August 2008	CBOD5	1 Day Quantity	2.20	2.23807
May 2009	CBOD5	1 Day Conc.	7.75	8.82
May 2009	CBOD5	1 Day Quantity	2.20	6.17598
May 2009	CBOD5	30 Day Quantity	1.42	2.00932
August 2009	CBOD5	1 Day Conc.	7.75	10.4
June 2009	Fecal Coliform	1 Day Conc.	2000	2900



General Lab Criteria

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	
• 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 ⁶	<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	
	• Log book maintained ⁶	<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 0.1° 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:				

Criteria	Standard Methods Requirement	Acceptable?		Rating
pH Meter				
• Calibration Frequency / Documentation	• Calibration verification required for testing over long period of time (e.g. 12 hrs.), or after a large number of samples (every 10 samples) ³	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	A
	• Logbook maintained ⁹	<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 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	



General Lab Criteria

Comments: The pH meter doesn't use a slope range. It is the HACH Sension 156 model.

Criteria	Standard Methods Requirement	Acceptable?		Rating
Dissolved Oxygen Meter				
• Calibration Method	• Air or known DO calibration method ¹⁰	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	A
	• Calibration per manufacturer specification ¹⁰	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
• Calibration Frequency / Documentation	• Logbook maintained ⁹	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	• Calibration verification required at least once each day the meter is used. ³	<input checked="" 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 checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Instrument manual available	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	

Comments:

Criteria	Standard Methods Requirement	Acceptable?		Rating
Incubator (CBOD/ E-Coli)				
• Temperature Recordkeeping	• Temperature checked / recorded twice daily for each shelf in use ¹	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• 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 ⁹	<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 0.1 Celsius). ⁵	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Comments:

Criteria	Standard Methods Requirement	Acceptable?		Rating
Refrigerator				
• Temperature Recordkeeping	• Temperature Log (thermometer reads to 0.1 Celsius). ⁵	<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	
• Other	• Thermometer held in water bath. ¹	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Refrigerator temperature ≤6° Celsius. ¹³	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Do not store volatile solvents, food, or beverages. ¹⁴	<input type="checkbox"/> Yes	<input type="checkbox"/> No	



General Lab Criteria

Comments:

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	A
	• Calibration verification required for testing over long period of time (e.g. 12 hrs.), or after a large number of samples (every 10 samples) ³	<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 ¹⁶	<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 type="checkbox"/> No	
	• Log book being maintained. ⁹	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	• Instrument manual available	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	

Comments: They use the HACH DR890 - it is an all electric handheld meter that doesn't use a pH/millivolt reading, slope range, or electrodes.

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	
	• Log book being maintained ⁹	<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:

Criteria	Standard Methods Requirement	Acceptable?		Rating
Sample Collection/Handling				
• Sample Labeling	• Samples container labeled (description, date, time, preservative added, initialed). ¹⁹	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	A
• Chain of Custody	• Chain of custody (description, date, time, signature). ¹⁹	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	



General Lab Criteria

• Other	• Composite samples refrigerated during sample collection ¹⁴	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Equipment blanks utilized ¹⁴	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
	• SOP for cleaning of sampling equipment	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	• Logbook being maintained ⁹	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	

Comments: Initials are not put on the bottles, but only one person takes samples, so it is always known who took the sample.

Criteria	Standard Methods Requirement	Acceptable?		Rating
Desiccator				
• 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 ⁹	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Comments:

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

Comments: Only one person ever does the lab work, so initials are not used. For the parameters done on site, no calculations or equations are needed.

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	
	• Incubator temperature 44.5° C ± 0.2° ^{21/24}			
• Temperature Calibration / Documentation	• Thermometer calibrated annually with NIST traceable thermometer ^{1,2}	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Log book being maintained ⁹	<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	
	• 10 to 30 minutes time based on material being sterilized ²⁶	<input type="checkbox"/> Yes	<input type="checkbox"/> No	



General Lab Criteria

<ul style="list-style-type: none"> • Documentation 	<ul style="list-style-type: none"> • 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	
	<ul style="list-style-type: none"> • 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	
<ul style="list-style-type: none"> • Temperature Calibration / Documentation 	<ul style="list-style-type: none"> • Thermometer calibrated annually with NIST traceable thermometer ^{1,2} 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> • Log book being maintained ⁹ 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> • Performance Checks 	<ul style="list-style-type: none"> • 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:

Number of Criteria Rated:	Acceptable	5
	Marginal	0
	Unacceptable	0
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:	<ul style="list-style-type: none"> >60% of ratings are Marginal >45% of ratings are a combination of Marginal or Unacceptable >30% of ratings are Unacceptable
--	--



General Lab Criteria

Notation of Referenced Method

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

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

Preservation and Holding Times

Parameter	Container	Min. Sample Size (mL)	Sample Type	Preservation	Maximum Storage Time	
					Recommended	Regulatory
BOD / CBOD	P, G	1000	G, C	Refrigerate $\leq 6^{\circ}\text{C}$	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



General Lab Criteria

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

