



State of Ohio Environmental Protection Agency

Southwest District Office

401 E. Fifth St.
Dayton, Ohio 45402

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

June 23, 2009

RE: Pretreatment Compliance Inspection and
Notice of Significant Non-Compliance

Ms Debbie Stultz
Beach Manufacturing Company
PO Box 870
St. Paris, OH 43072

Dear Ms. Stultz:

On June 4, 2009 I met with you to conduct a pretreatment compliance inspection. You did not provide a response to my previous inspection and issues from that inspection continue into this year.

As we discussed during our meeting, it is absolutely necessary for you to submit self-monitoring results missing for the period of August through December 2008. You have recently received instructions via e-mail on how to address this deficiency which must be addressed immediately.

Other findings that I need you to address are as follows:

1. To provide an accurate written record to track the possession, handling, and location of samples and data from collection through reporting each sampling event should include a chain-of-custody sheet to document:
 - The date and time the sample was collected (start and stop for composite samples);
 - Who collected the samples;
 - How composite samples were collected (aliquot volume, aliquot collection frequency);
 - The volume of collected composite sample (prior to portioning into analysis bottles); and
 - Who had possession of the sample from collection until analysis was performed, including dates and times when the sample was transferred from person to person.

Please note that this is the third consecutive year I have asked for this sampling documentation to be done. Completed chain of custody sheets should be sent to you with the analytical reports to be made part of your records.

Ms. Debbie Stultz
June 23, 2009
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2. As I requested, you recently collected a sample of wastewater from the fluorozirconic acid tank prior to it being dumped. I ask that you provide me a copy of the analytical report when it becomes available.

Please provide a written response to this inspection letter by July 13, 2009 indicating your intentions to address the items I have presented. If you have any questions about this letter please call me at (937) 285-6095.

Sincerely,



Matt Walbridge
Pretreatment Coordinator
Division of Surface Water

ENCLOSURE

CC: Elliot Baggs – Beach Mfg.
Ryan Laake – Ohio EPA / Central Office / DSW
Rodney Callison – Village of Saint Paris



Ohio Environmental Protection Agency

PRETREATMENT INSPECTION REPORT

PERMIT NUMBER
1DP00001*CP

PERMIT APPLICATION NUMBER
OHP000011

DATE CONDUCTED
June 4, 2009

INSPECTION TYPE
I

INSPECTOR
S

FACILITY TYPE
2

TIME IN
1200

TIME OUT
1320

GENERAL INFORMATION

NAME AND LOCATION OF FACILITY

**Beach Manufacturing Company
500 S. Springfield Street
St. Paris, OH 43072**

POTW RECEIVING DISCHARGE

Village of St. Paris WWTP

MAILING ADDRESS OF FACILITY

**Beach Manufacturing Company
PO Box 870
St. Paris, OH 43072**

**Mr. Elliot Baggs
Beach Manufacturing Company
PO Box 129
Donnelsville, OH 45319-0129**

CONTACT (NAME/TITLE/PHONE)

**Ms. Debbie Stultz / Plant Manager / (937) 663-5531
debbiestultz@beachmfgco.com**

FACILITY EVALUATION (See Inspection letter for more complete description)

(S = Satisfactory, M = Marginal, U = Unsatisfactory, NA = Not Applicable)

S	Sampling Procedures	NA	Compliance schedule requirements
U	Reporting (1)	NA	Notification
S	Compliance with effluent limits (2)	NA	Other -

(1) No data has been submitted for August through December 2009. (2) Analytical reports on-site show compliance

Name and Signature of Inspector(s) Matt Walbridge	Agency / Office / Telephone Ohio EPA / Southwest District Office / (937) 285-6095	Date 6-23-09
Signature of Reviewer Mary G. Burt	Agency / Office / Telephone Ohio EPA / Southwest District Office / (937) 285-6034	Date 6/24/09

INDUSTRIAL USER INSPECTION CHECKLIST

Facility **Beach Manufacturing Company**

Date of inspection: **June 4, 2009**

Permit Application Number: **OHP000011**

IDP Number: **1DP00001*CP**

Facility Representative: **Ms. Debbie Stultz**

Inspector(s): **Matt Walbridge**

COMPLIANCE

1. Date of last pretreatment inspection: **June 30, 2008**
2. Has the facility been in compliance with its permit limits since the last inspection? **Y / N**
If no, explain:

As was the case in the previous inspection, this determination based on observing their analytical reports on-site which they have failed to report for the period of August through December 2008.

3. Is the facility in compliance with all other requirements?
- | | |
|----------------------------------------------------|-------------------|
| Sampling procedures | Y / N / NA |
| Reporting (late reporting, failure to report, etc) | Y / N / NA |
| Compliance schedules | Y / N / NA |
| Submitted BMR and 90 day compliance reports | Y / N / NA |
| Any other requirements | Y / N / NA |

If any of the above five answers is no, explain:

No self-monitoring results for the period of August through December 2008.

4. Was the facility required to perform any actions as a result of the last inspection? **Y / N**
Explain any unresolved actions:

Continue to need to record the volume of collected sample to ensure that it is consistent with expectations.

FACILITY OPERATIONAL CHARACTERISTICS

5. Number of Employees: **~11**
6. Shifts/Day: **1**
7. Production Days/Year week : **3 (w/ occasional 1/2-day Fridays)8.** Hours/shift: **8**
(Two weeks off at the beginning of July and approximately a week off in December)
9. Any production changes since the last inspection? **Y / N**
If yes, explain:

(Mostly truck components from hot and cold-rolled steel)

10. General facility description and operations:

Job Shop parts washing and painting operation (powder coat).

FACILITY OPERATIONAL CHARACTERISTICS CONTINUED

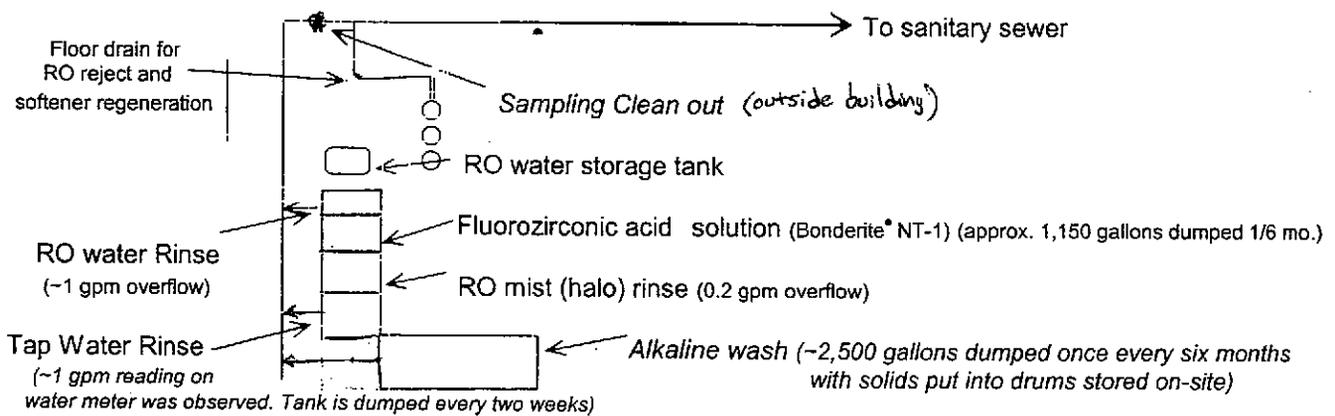
11. Any change in materials used in production since the last inspection? Y/N
 If yes, explain:

12. Any expansion or production increase expected within the next year? Y/N
 If yes, explain:

WASTEWATER TREATMENT

13. Provide a schematic diagram and description of the wastewater treatment system:

Mill Street



14. Was a PTI issued for the treatment system? N.A. Y/N

15. Were there any modifications to the treatment system since the previous inspection? N.A. Y/N

If yes, was a PTI obtained? N.A. Y/N

PTI Number: Date:

16. What is the treatment mode of operation? N.A. (No treatment) Batch / Continuous / Combination

If batch, list the frequency and duration:

17. Who is responsible for operating the treatment system?

Dee Harvey

18. How often is the treatment system checked?

**Stages are checked three times throughout the day.
 (Flow rates, spray patterns, conductivity, pH, chemical titrations)**

WASTEWATER TREATMENT CONTINUED

19. Is there an alarm system for the system? Y / N
Explain:

High level alarms on all tanks except rinse tank.

20. Is there an operations and maintenance manual? Y / N

There is a 'Line Check Sheet' for the production process line that is kept at the line.

21. Is an inventory of critical spare parts maintained? N.A. Y / N
If yes, list:

22. Are there any bypasses in the system? N.A. Y / N
If yes, describe the location:

Have bypasses occurred since the last inspection? N.A. Y / N

Was the POTW notified? N.A. Y / N

23. Are residuals or sludges generated? Y / N

Fluorozirconic acid solution tank is drained every 4 to 6 months (they indicated that the contents are 'diluted' at the time of discharge because of pH).

Alkaline Cleaner tank is drained out once per month and cleaned once per year. Draining includes neutralization with 'cupfuls' of soda ash to pH ~8 and then drained to sewer overnight.

Approximately every year, solids are vacuumed out of the alkaline cleaner tank for storage on-site (done in-house). Eventually, the drums of solids are hauled off-site for disposal.

Method of disposal:

Drums and tank contents to Heritage Crystal Clean

Frequency and amount of disposal:

Fluorozirconic acid solution tank is drained every 4 to 6 months. (Tested for metals once in Oct. '05)

Alkaline cleaner tank (~2,350 gallons) is drained to sewer approximately once per month.

Solids from alkaline cleaner tank are hauled off-site approximately once per year.

Name of hauler/landfill/disposal facility:

Heritage Crystal Clean

Is any sludge generated subject to RCRA regulations? Y / N

If land applying sludge, is there a sludge management plan? N.A. Y / N

PROCESS AND WASTEWATER INFORMATION

24. List all processes generating wastewater, current wastewater flows, and where applicable, production rates as well as values on which the permit limits are based:

REGULATED PROCESS	SAMPLE LOCATION	WASTEWATER FLOW (GPD)		PRODUCTION DATA (SPECIFY UNITS)	
		Permit	Current	Permit	Current
1. Alkaline Wash Tank		Not Limited	2,350 gal 1/mo.	N.A.	N.A.
2. Tap Water Rinse (metered at -1 gpm)			-480 gpd and 1,220 gal dump 1/mo.	N.A.	N.A.
3. RO water Rinse (-0.2 gpm)			-100 gpd and 2,440 gal dump 1/mo.	N.A.	N.A.
4. Fluorozirconic Acid Tank			1,100 gal dump 1/ six mo.	N.A.	N.A.
5. RO water Rinse (metered at -1 gpm)			-480 gpd and 1,000 gal dump 1/mo.	N.A.	N.A.
Total Regulated Process Flow		Not limited	~1,100		
Noncontact Cooling	-	-	-		
Boiler Condensate	-	-	-		
Reverse Osmosis	-	-	ND ⁽²⁾		
Demineralizer Regeneration	-	-	-		
Softener Regeneration	-	-	ND ⁽²⁾		
Filter Backwash	-	-	-		
Compressor Condensate	-	-	-		
Storm water	-	-	-		
Total of Dilute Flows	N.A.	N.A.	ND		
Unregulated Flows	N.A.	-	-		
Sanitary	N.A.	N.A. ⁽¹⁾	N.A. ⁽²⁾		
TOTAL FLOW	N.A.	N.A.	~1,100 ⁽¹⁾⁽²⁾		

(1) Reported total flows are averaging ~900 gpd so regulated process flow should be about 30 % less because of the RO reject rate. This puts process flow at about 550 gpd.
Only process wastewater is present at sampling point. Sanitary, RO reject and Softener regeneration are discharged via a separate line.

25. For the above flows not discharged to the POTW, list point of discharge and permit (if any).

SELF MONITORING

26. Sample location(s) described in the facility's permit:
"Samples shall be collected from the cleanout located outside of the south wall of the main building prior to the effluent mixing with sanitary flow."
27. Is the facility sampling at the location(s) described in the permit? Y / ~~N~~
If no, describe the actual location:
28. Is the location(s) where the facility is sampling representative? Y / ~~N~~
If no, indicate a representative location:
29. Is the flow measured or estimated? **Measured / Estimated**
Main water meter is said to be used. Readings are taken at the beginning and end of sampling events.
If measured, how often is the meter calibrated?
Flow meters have been installed on the feed lines to stages 2, 3 and 5.
If estimated, describe method of estimation:
30. Is pH monitored continuously? ~~Y~~ / N
If yes, how often is the meter calibrated?
31. Does the facility collect its own samples? ~~Y~~ / N
If no, specify the sample collector:
'Cindy' of Advanced Analytics
32. Are appropriate sampling procedures followed? Y / ~~N~~
Monitoring frequencies Y / ~~N~~
Sample collection (grab for pH, O&G, CN, phenols, VOCs) Y / ~~N~~
Flow proportioned samples (**flow rates are constant so time-proportioned samples should be adequate**) ~~Y~~ / N
Proper preservation techniques Y / ~~N~~
Sample holding times Y / ~~N~~
Chain-of-custody forms Y / ~~N~~
33. Are samples analyzed in accordance with 40 CFR 136? Y / ~~N~~
34. Laboratory conducting analyses: **Advanced Analytics**

TOXICS MANAGEMENT

35. Are any listed toxic organics used in the facility? Y / N
If yes, identify organics:
Touch-up primer & paint and xylene-based solvent.
36. Does the facility have a current toxic organic management plan(TOMP)? Y / N
If yes, is it being implemented? Y / N
37. Has the facility had any uncontrolled releases or spills to the POTW since the previous inspection? If yes, please explain: Y / N
38. Does the facility need a spill prevention plan or slug discharge control plan? Y / N
If yes, does the facility have a written plan? N.A. Y / N
39. Identify any potential slug load or spill areas:
None

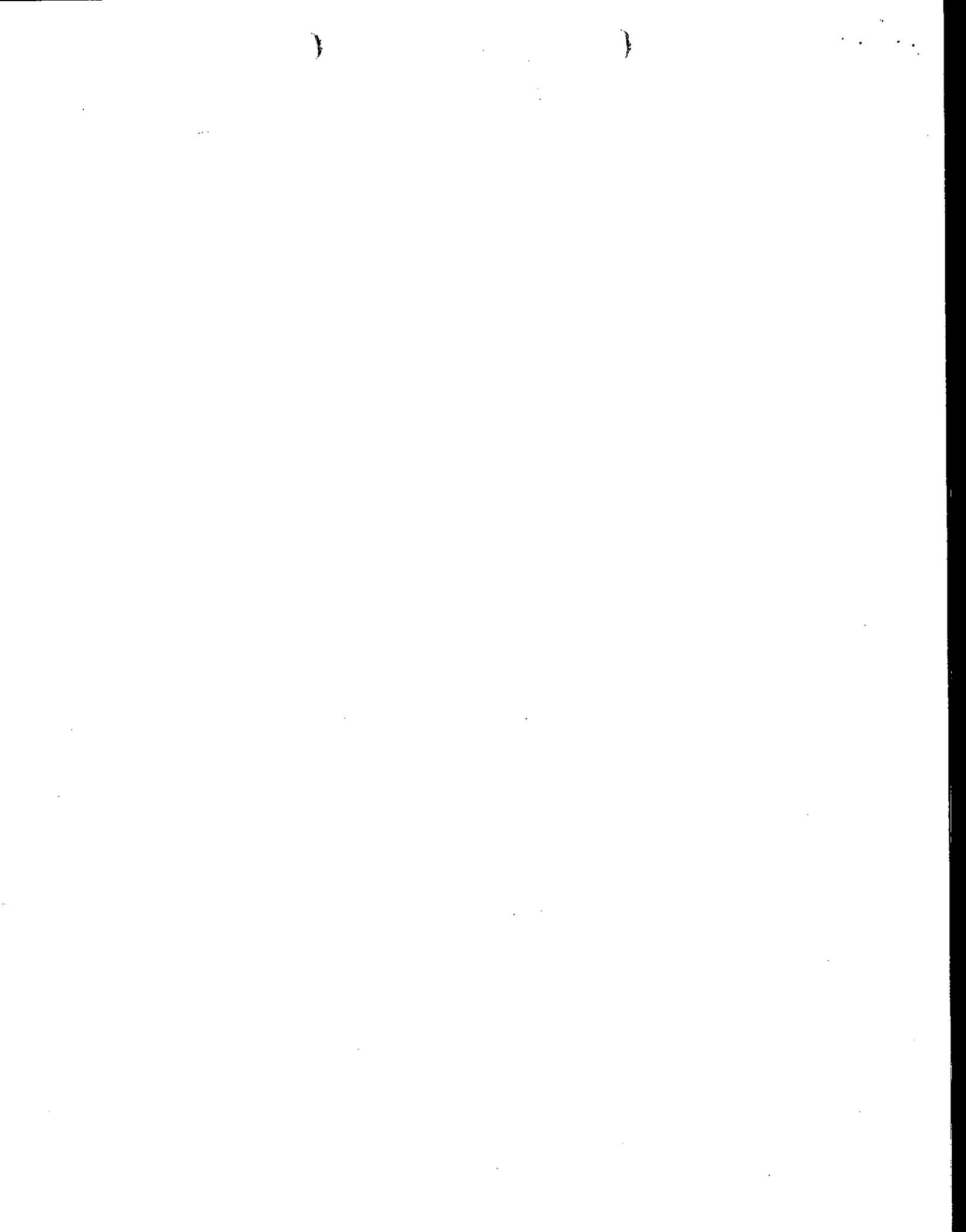
REQUIRED FOLLOW-UP ACTIONS

See inspection letter.

- *Must submit missing monitoring data for period of August through December 2008 ASAP.*
- *Need to use a chain of custody form for each sampling event.*
- *Continue to need to record the volume of the composite sample on the chain of custody sheet.*
- *Need to sample Stage 3 (fluorozirconic acid solution)*

OBSERVATIONS

- *Sample period is 24-hours. At the end of the 8-hour work day, all water to the production line is shut off with a solenoid valve.*
- *It would be nice to have a good water balance for this facility to account for water treatment flows and evaporative losses.*
- *Currently operating about 3 days per week.*
- *Permit needs to require monitoring when discharges from at least the alkaline wash and fluozirconic acid tanks are being dumped.*



Beach Mfg - June 07 thru July 08

	Flow	pH	CN	Cd	Cr	Cu	Pb	Ni	Ag	Zn
6/8/2007	670	10.8	0	0	0	33.3	0	0	0	140
7/10/2007	484	9.4	0	0	0	0	0	0	0	0
8/14/2007	497	8.26	0	0	0	0	0	0	0	102
9/7/2007	678	9.47	0	0	0	0	0	0	0	151
10/3/2007	772	9.21	0	0	0	0	0	0	0	101
11/2/2007	511	9.085	0	0	22.2	0	0	0	0	152
12/10/2007	557	9.339	0	0	0	33.3	0	0	64.4	187
1/8/2008	514	9.095	0	0	0	0	0	0	0	83
2/7/2008		9.471								
3/4/2008	597	8.709	0	0	0	44.4	0	0	0	229
4/3/2008	740	8.843	0	0	0	38.9	0	0	0	161
5/2/2008	463	9.095	0	0	0	30	0	0	0	106
6/12/2008	534	8.546	0	0	0	0	0	0	0	118
7/24/2008		9.534	0	0	0	0	0	0	0	201

Nothing for Aug - December

report # 35266 1-13-09

something came in w/ 35298 also on 13th (not in system)

