



State of Ohio Environmental Protection Agency
Southwest District

401 East Fifth Street
Dayton, Ohio 45402-2911

TELE: (937)285-6357 FAX: (937)285-6249
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Ted Strickland, Governor
Lee Fisher, Lt. Governor
Chris Korleski, Director

May 21, 2008

Mayor and Council
City of Eaton
328 North Maple Street
Eaton, Ohio 45320

Re: Eaton -- PCI -- 2008 NOTICE OF VIOLATION

Ladies and Gentlemen:

On March 12 and 31, 2008, I conducted a pretreatment compliance inspection (PCI) of the City of Eaton's approved pretreatment program. The City was represented by Andy Eddy. The PCI followed a checklist designed by Ohio EPA to evaluate all major aspects of the City's pretreatment program. A discussion of the required actions is given below.

The City has been conducting all of its required sampling and inspections, however, the low level mercury local limits justification has not yet been submitted. This was required as a part of a compliance schedule in the City's NPDES permit. This submittal was due in January 2007. It was also required as part of the 2007 audit report. The City has collected the low level influent and effluent sampling at the wastewater treatment plant, and was in the process of obtaining the necessary background data at the time of my inspection. Since the compliance schedule milestone has been missed by more than 90 days, the City is in Significant Non-Compliance with its NPDES permit. This justification must be submitted as soon as possible. This letter will serve as the Notice of Violation for missing this milestone.

REQUIRED ACTIONS

1. Low Level Mercury Technical Justification

The City must submit its technical justification for the low level mercury local limit. This must be submitted by July 31, 2008. If this is not submitted, then enforcement against the City must be escalated.

2. Parker Hannifin

- a. Enforcement action must be taken for the May 2007 zinc violation and the late report from April 2007. This must be completed by June 13, 2008.
- b. The sample type must be noted on the chain-of-custody forms. This must begin immediately.



May 21, 2008
Page 2

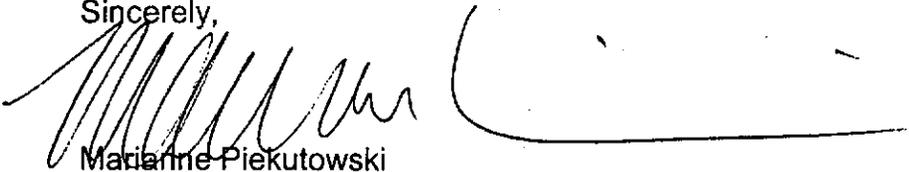
3. Bullen Ultrasonic

The City must ensure the facility is taking its Total Toxic Organics (TTOs) samples correctly. This parameter consists of a composite sample for the 624 (Base, Neutral, Acids) compounds, and a grab sample for the 625 (Volatile Organics) compounds. The facility is not currently sampling for all of the necessary parameters. This must be completed on the next self-monitoring event.

Please notify this office, in writing, by June 6, 2008 of your intentions to implement the above within six (6) months of the date of this report. Also, please provide a progress report by October 17, 2008 (five months from the report date) describing the status of each of the required actions. Failure to resolve the noted required actions within six months will result in enforcement against the City for failure to enforce its pretreatment program.

The assistance provided by your staff was appreciated. If you would have any questions, please contact me at 937.285.6108.

Sincerely,



Marianne Piekutowski
District Pretreatment Coordinator
Division of Surface Water

Enclosures

Cc: Andy Eddy, Eaton
Ryan Laake, DSW/CO



State of Ohio Environmental Protection Agency
Southwest District Office

Pretreatment Compliance Inspection Report

Section A: National Data System Coding					
Permit #	NPDES#	Month/Day/Year	Inspection Type	Inspector	Facility Type
1PC00001*ID	OH0020907	03/31/2008	P	S	1

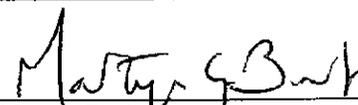
Section B: Facility Data	
Name and Location of Facility Inspected	Entry Time
City of Eaton WWTP 901 South Barron Street Eaton, Ohio 45320	9:00 am
	Exit Time
	2:00 pm
Name(s) and Title(s) of On-Site Representatives	Phone Number(s)
Andy Eddy, Superintendent	937.456.7157
Responsible Official(s)	Coordinator's Mailing Address
Mayor and Council City of Eaton 328 North Maple Street Eaton, Ohio 45320	City of Eaton Division of Public Works P.O. Box 27 Eaton, Ohio 45320

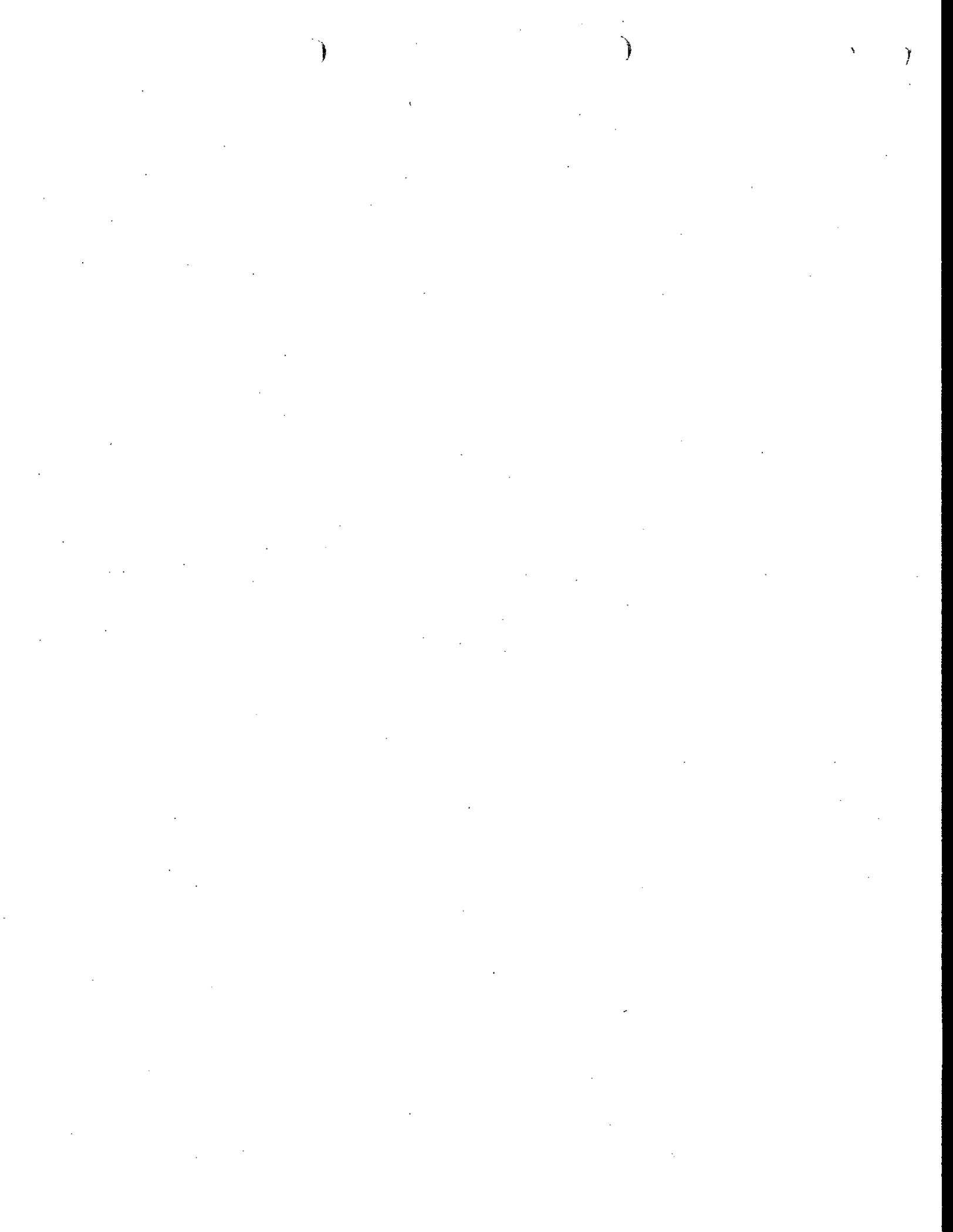
Section C: Areas Evaluated During Inspection
(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

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

See attached report.

Inspector	Reviewer
 Marianne Piekutowski Division of Surface Water Southwest District Office	 Martyn Burt Compliance & Enforcement Supervisor Division of Surface Water Southwest District Office
5/21/08 Date	5/21/08 Date



POTW PRETREATMENT COMPLIANCE CHECKLIST

PCI CHECKLIST CONTENTS

Section	Page and Acronym	Item
Section I		TU Field Data
Section II		Supplemental Data and Interview
Section III		Evaluation and Summary (Optional)
<input checked="" type="checkbox"/> Attachment A		Pre-Inspection Report
<input checked="" type="checkbox"/> Attachment B		Pretreatment Worksheet
Attachment C		Worksheet
		<input checked="" type="checkbox"/> AWE (Optional) Worksheet
		<input type="checkbox"/> TU Site Visit Form (Optional)
		<input checked="" type="checkbox"/> File Folder Worksheets (Optional)
Attachment D		Supporting Documentation

Control Authority (CA) name and address	Date(s) of PCI
<i>Mayor and Council City of Eaton 328 North Maple Street Eaton, Ohio 45320</i>	<i>March 12, 31, 2008</i>

INSPECTOR(S)

Name	Title/Affiliation	Telephone Number
<i>Mari Piekutowski</i>	<i>Environmental Specialist 2/Ohio EPA Southwest District</i>	<i>937.285.6108</i>

CA REPRESENTATIVE(S)

Name	Title/Affiliation	Telephone Number
<i>Andy Eddy</i>	<i>Superintendent/City of Eaton</i>	<i>937.456.7157</i>

Acronym	Full Name
AO	Administrative Order
BMP	Best Management Practices
BMR	Baseline Monitoring Report
CA	Control Authority
CERCLA	Comprehensive Environmental Remediation, Compensation, and Liability Act
CFR	Code of Federal Regulations
CIU	Categorical Industrial User
CSO	Combined Sewer Overflow
CWA	Clean Water Act
CWF	Combined Wastestream Formula
DMR	Discharge Monitoring Report
DSS	Domestic Sewage Study
EP	Extraction Procedure
EPA	U.S. Environmental Protection Agency
ERP	Enforcement Response Plan
FDF	Fundamentally Different Factors
FTE	Full-Time Equivalent
FWA	Flow-Weighted Average
gpd	gallons per day
IU	Industrial User
IWS	Industrial Waste Survey
MGD	Million Gallons Per Day
MSW	Municipal Solid Waste
N/A	Not Applicable
ND	Not Determined
NOV	Notice of Violation
NPDES	National Pollutant Discharge Elimination System
O&G	Oil and Grease
PCI	Pretreatment Compliance Inspection
PCS	Permit Compliance System
PIRT	Pretreatment Implementation Review Task Force
POTW	Publicly Owned Treatment Works
QA/QC	Quality Assurance/Quality Control
RCRA	Resource Conservation and Recovery Act
RNC	Reportable Noncompliance
SIU	Significant Industrial User
SNC	Significant Noncompliance
SUO	Sewer Use Ordinance
TCLP	Toxicity Characteristic Leachate Procedure
TOMP	Toxic Organic Management Plan
TRC	Technical Review Criteria
TRE	Technical Review Evaluation
TRIS	Toxics Release Inventory System
TSDF	Treatment, Storage, and Disposal Facility
TTO	Total Toxic Organics
UST	Underground Storage Tank
WENDB	Water Enforcement National Data Base

INSTRUCTIONS: Select a representative number of SIU files to review. Provide relevant details on each file reviewed. Comment on all problems identified and any other areas of interest. Where possible, all CIUs (and SIUs) added since the last PCI or audit should be evaluated. Make copies of this section to review additional files as necessary.

IU IDENTIFICATION

FILE <u>1</u> Industry name and address <i>Parker Hannifin 725 North Beech Street Eaton, Ohio 45320</i>	Type of industry <i>Manufacture hydraulic tube fittings.</i>	
IU CLASSIFICATION BY CA: <input checked="" type="checkbox"/> Categorical SIU - 40 CFR <u>433</u> , Category(ies) <u>New Source</u> <input type="checkbox"/> Non-categorical SIU <input type="checkbox"/> Non SIU	Average total flow (gpd) 40,000	Average process flow (gpd) 40,000
	Industry visited during PCI? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

COMPLIANCE STATUS

SNC (period: _____) Noncompliance/corrected Noncompliance/continuing In compliance

EXPLANATION:

Comments

FILE <u>2</u> Industry name and address <i>Bullen Semiconductor Corporation 950 South Franklin Street Eaton, Ohio 45320</i>	Type of industry <i>Grow silicon crystals.</i>	
IU CLASSIFICATION BY CA: <input checked="" type="checkbox"/> Categorical SIU - 40 CFR <u>469</u> , Category(ies) <u>Subpart B</u> <input type="checkbox"/> Non-categorical SIU <input type="checkbox"/> Non SIU	Average total flow (gpd)	Average process flow (gpd)
	Industry visited during PCI? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

COMPLIANCE STATUS

SNC (period: _____) Noncompliance/corrected Noncompliance/continuing In compliance

EXPLANATION:

Comments

Need to address TTO sampling/certification.

IU IDENTIFICATION (Continued)

FILE <u> 3 </u> Industry name and address <i>Weyerhaeuser</i> <i>900 US Route 35 West</i> <i>Eaton, Ohio 45320</i>	Type of industry <i>Manufacture corrugated shipping containers.</i>	
IU CLASSIFICATION BY CA: <input type="checkbox"/> Categorical SIU - 40 CFR _____, _____ Category(ies) _____ <input checked="" type="checkbox"/> Non-categorical SIU <input type="checkbox"/> Non SIU	Average total flow (gpd)	Average process flow (gpd)
	Industry visited during PCI? Yes <input type="checkbox"/> No <input type="checkbox"/>	
COMPLIANCE STATUS		
<input type="checkbox"/> SNC (period: _____) <input type="checkbox"/> Noncompliance/corrected <input type="checkbox"/> Noncompliance/continuing <input checked="" type="checkbox"/> In compliance EXPLANATION:		
Comments		

FILE _____ Industry name and address	Type of industry	
IU CLASSIFICATION BY CA: <input type="checkbox"/> Categorical SIU - 40 CFR _____, _____ Category(ies) _____ <input type="checkbox"/> Non-categorical SIU <input type="checkbox"/> Non SIU	Average total flow (gpd)	Average process flow (gpd)
	Industry visited during PCI? Yes <input type="checkbox"/> No <input type="checkbox"/>	
COMPLIANCE STATUS		
<input type="checkbox"/> SNC (period: _____) <input type="checkbox"/> Noncompliance/corrected <input type="checkbox"/> Noncompliance/continuing <input type="checkbox"/> In compliance EXPLANATION:		
Comments		

IU IDENTIFICATION (Continued)

FILE ____ Industry name and address	Type of industry	
IU CLASSIFICATION BY CA: <input type="checkbox"/> Categorical SIU - 40 CFR _____, _____ Category(ies) _____ <input type="checkbox"/> Non-categorical SIU <input type="checkbox"/> Non SIU	Average total flow (gpd)	Average process flow (gpd)
	Industry visited during PCI Yes <input type="checkbox"/> No <input type="checkbox"/>	

COMPLIANCE STATUS

SNC (period: _____)
 Noncompliance/corrected
 Noncompliance/continuing
 In compliance

EXPLANATION:

Comments

FILE ____ Industry name and address	Type of industry	
IU CLASSIFICATION BY CA: <input type="checkbox"/> Categorical SIU - 40 CFR _____, _____ Category(ies) _____ <input type="checkbox"/> Non-categorical SIU <input type="checkbox"/> Non SIU	Average total flow (gpd)	Average process flow (gpd)
	Industry visited during PCI? Yes <input type="checkbox"/> No <input type="checkbox"/>	

COMPLIANCE STATUS

SNC (period: _____)
 Noncompliance/corrected
 Noncompliance/continuing
 In compliance

EXPLANATION:

Comments

General Comments

SECTION I: IU FILE EVALUATION

Industry Name					INSTRUCTIONS: Evaluate the contents of IU files. Enumerate problem areas and explain in comments section below. Use NA (not available) where necessary. Use ND (not determined) where there is insufficient information to evaluate/determine implementation status. Use an "x" in the space when a problem is not noted. Comment on each problem identified. Clearly identify the file that each comment pertains to; also indicate where a comment applies to all the files.	
Parker Hannifin	Bullen Semiconductor	Weyerhaeuser				
File 1	File 2	File 3	File	File	IU FILE REVIEW	Reg. Cite
					A. RCRA NOTIFICATION OF IU	
Y	Y	Y			1. Notified of classification (new IU) or change in classification (U)	403.8(f)(2)(iii)
NA	NA	NA			2. Notified of applicable RCRA standards	403.12(b)&(d)
NA	NA	NA			2. Notified of applicable RCRA standards	403.8(f)(2)(iii)
Comments						

SECTION I: IU FILE EVALUATION (Continued)

File 1	File 2	File 3	File	File	IU FILE REVIEW	Reg. Cite
					B. ISSUANCE OF IU CONTROL MECHANISM	
Y	Y	Y			1. Issuance or reissuance of permit mechanism	403.8(f)(1)(iii)
					2. Control mechanism con...	403.8(f)(1)(iii)
Y	Y	Y			a. Statement of duration (3 years)	
Y	Y	Y			b. Statement of nontransferability w/o prior notification	
Y	Y	Y2			c. Listing of applicable effluent limits (local, categorical standards)	
					d. Self monitoring requirements	
Y	Y	Y			i. Identification of pollutants to be monitored	
Y	Y	Y			ii. Sampling frequen...	
Y	Y	Y			iii. Sampling at locations, discharge points adequately defined	
Y1	Y	Y			iv. Appropriate sample types (grab or composite)	
Y	Y	Y			v. Reporting requirements	
Y	Y	Y			vi. Record-keeping requirements (3 years minimum)	
Y	Y	Y			e. Statement of applicable civil and criminal penalties	
NA	NA	NA			f. Compliance schedules	
Y	Y	Y			g. Requirement to notify CA of slug loadings	
Y	Y	Y			h. Requirement to notify CA of spills, bypasses, upsets, etc.	
Y	Y	Y			i. Requirement to notify CA of significant change in discharge	
Y	Y	Y			j. 24-hour notification of violation/resample requirement	

Comments:

- 1 - Mercury samples for low level (1631) are collected as a grab sample.
- 2 - Have additional limits in the permit that are no longer required.

SECTION I: IU FILE EVALUATION (Continued)

File 1	File 2	File 3	File	File	IU FILE REVIEW		Reg. Cite
					3. CA APPLICATION OF IU PRETREATMENT STANDARDS		
Y	Y	Y			a. Proper classification (sig. cat., sig. non-cat., etc.)		403.8(f)(1)(i)
					b. Proper application of category		
Y	Y	NA			c. Proper classification by category		
Y	Y	NA			d. Proper reclassification as new/existing		
Y	Y	NA			e. Proper application of limits for all regulated pollutants		
NA	NA	NA			f. Proper calculation and application of production-based limits		3.6(c)
NA	NA	NA			g. Proper calculations and application of CWF or BWA		3.6(d)&(e)
Y	Y	Y			3. Application of local limits		
Y	Y	Y			4. Application of most stringent limits		403.8(f)(1)(ii)

Comments:

SECTION I: IU FILE EVALUATION (Continued)

File 1	File 2	File 3	File	File	IU FILE REVIEW	Reg. Cite
					D. COMPLIANCE MONITORING	
					Sampling	403.8(f)(iii)(D)
Y	Y	Y			1. Sampling frequency specified in approved	
Y1	Y1	Y1			2. Documentation of sampling activities (especially chain of custody)	3745-3-03(C)(2)(f)
Y	Y	Y			3. Sampled all parameters for which local or categorical limits applied	
Y	Y	Y			4. Appropriate analytical methods (40 CFR Part 136)	403.8(f)(2)(vi)
					Inspection	403.8(f)(2)(v)
Y	Y	Y			1. Inspected at frequency specified in approved program	
Y	Y	Y			2. Documentation of inspection activities	403.8(f)(2)(vi)
Y	Y2	Y			3. Evaluated need for slug discharge control plan at least every two years	403.8(f)(2)(v)

Comments:

1 - There is no flow data reported.

2- Spill plans, chemical storage areas are discussed. No specific questions for slugload discharge plan.

SECTION I: IU FILE EVALUATION (Continued)

File 1	File 2	File 3	File	File	IU FILE REVIEW	Reg. Cite
					CASE ENFORCEMENT ACTIVITIES	
					1. Response to violation	403.8(f)(2)(vi)
N	NA	NA			a. Discharge	
N	NA	NA			b. Monitoring/reporting violations	
NA	NA	NA			c. Compliance schedule violations	
					2. Proper calculation of SNC	403.8(f)(2)(vii)
NA	NA	NA			a. Chronic	
NA	NA	NA			b. TRC	
NA	NA	NA			c. Pass-through/interference caused by spill or slug	
NA	NA	NA			d. Reporting requirements	
NA	NA	NA			3. Publication for SNC	403.8(f)(2)(viii)
					4. Adherence to approved ERP	403.8(f)(5)
N	NA	NA			a. Proper response to violations	
NA	NA	NA			b. Escalation of enforcement	

Comments:

SECTION I: IU FILE EVALUATION (Continued)

File 1	File 2	File 3	File	File	IU FILE REVIEW	Reg. Cite
					F. SELF-MONITORING AND REPORTING	
Y	Y	Y			1. Sampled at frequency specified in control mechanism regulation	403.12(h)
					2. TPO Requirements met	
NA	?	NA			a. TOMP submitted and updated (if applicable)	
Y	N	NA			b. TPO sample results or certification statement submitted as required	
YI	Y	Y			3. Timely self-monitoring reports in accordance with control mechanism	403.12(e)&(h)
Y	Y3	Y			4. Reported for all required pollutants	403.12(g)(1)&(h)
Y	Y	Y			5. Signatory/certification of reports in accordance with OAC 3745-3-06 (F)	OAC 3745-3-06 (F)
NA	NA	NA			6. Met compliance schedule milestones by required dates	403.12(c)
NA	NA	NA			7. Immediate notification of slug load discharge or accidental spill to sewer	OAC 3745-3-05
22	NA	NA			8. Notified CA within 24 hours of becoming aware of discharge violations	403.12(g)(2)
Y	NA	NA			9. Resampled/reported within 30 days of knowledge of violation	403.12(g)(2)
NA	NA	NA			10. Submission/implementation of slug discharge control plan	403.8(d)(2)(v)
NA	NA	NA			11. Notified CA of significant changes in operation or discharge	403.12(j)

Comments:

1 - One report was 15 days late in April 2007.

2 - Noted the violation in the cover letter. Unclear if the 24 hour notification was provided.

3- TTOs not done.

SECTION I: IU FILE EVALUATION (Continued)

File	File	File	File	File	IU FILE REVIEW	Reg. Cite
					G. OTHER	

Comments:

SECTION I COMPLETED BY: <i>Mari Piekutowski</i>	DATE: <i>March 31, 2008</i>
TITLE: <i>Environmental Specialist 2</i>	TELEPHONE: <i>937.285.6108</i>

SECTION II: SUPPLEMENTAL DATA REVIEW/INTERVIEW

INSTRUCTIONS: Complete this section during the onsite visit based on based on CA activities since the last PCI or audit. Attach documentation where appropriate. Specific data may be required in some cases.

A. CA PRETREATMENT PROGRAM MODIFICATION [403.13]

1. Have you made any changes to the approved program since the last inspection? (Local limits, ERP, SUO, control mechanisms, SIU list, etc.)

Yes	No
	X

If yes, discuss.

2. Have you identified any needed changes?

Yes	No
X	

If yes, describe.

Mercury local limits. The City is the process of pulling the background samples now. The City is sampling at three locations in the collection system that have residential flows only. The City has been sampling at the POTW for low level mercury.

B. IU CHARACTERIZATION [403.8(d)(2)(i)&(ii)]

1. How do you identify and characterize new IUs?
(is IWS used?)

Submit Baseline Monitoring Report. Facility would then be inspected. Involved in the plan review for the Building Department in the Technical Review Committee. Drive-by inspections.

2. How and when do you identify changes in wastewater discharges at existing IUs
(especially to determine if they need to be classified as a SIUs)

Voluntary sampling. Inspections. Quarterly sampling. Self-monitoring. Checks at manholes. PTIs for industries.

SECTION II: SUPPLEMENTAL DATA REVIEW/INTERVIEW

C. CONTROL MECHANISM EVALUATION [403.86(d)(4)(ii)]

1. How many SIUs are not covered by an existing, unexpired permit or other individual control mechanism? [WENB~NOCM][RNC~I] 0 0%

If any, explain.

2. a. How many control mechanisms were allowed to expire prior to reissuance? 2

If any explain.

b. How many control mechanisms were not issued within 180 days of the expiration date of the previous control mechanism? [RNC~II] 0

If any, explain.

c. Do you use an up-to-date IWS or recent discharge application forms prior to permit reissuance?

Yes	No
X	

Use an up to date Baseline Monitoring Report.

SECTION II: SUPPLEMENTAL DATA REVIEW/INTERVIEW

D. APPLICATION OF PRETREATMENT STANDARDS AND REGULATIONS (403.8(f)(2)(v))

1. a. How and when do you evaluate SIUs for the need to develop slug control discharge plans?
(check on CA's definition of slug discharge)

If any, explain.

As part of the annual inspection. Also language in permits regarding plans.

b. How many SIUs were evaluated in the past two years?

All

2. a. Describe any wastes hauled to the POTW.

Do not accept any hauled waste.

b. If any IUs have their wastewater hauled to the POTW, how do you ensure all applicable standards (local and categorical) are met?

Do not accept any hauled waste.

c. List IUs that haul their wastewater to the POTW.

NA

E. COMPLIANCE MONITORING

1. In the past 12 months, how many, and what percentage of, SIUs were the following: [403.8(f)(2)(v)][WENDB~NOIN][RNC II]
(Define the 12 month period 1/15/07 to 1/14/08.)

a. Not sampled or not inspected at least once [WENB~NOIN]

0	0%
---	----

b. Not sampled at least once (all parameters)

0	0%
---	----

c. Not inspected at least once

0	0%
---	----

If any, explain.

2. How many SIUs are in SNC with self-monitoring requirements and were not inspected and/or sampled (in the four most recent full quarters)? [WENB~SNIN]

0

If any, explain.

SECTION II: SUPPLEMENTAL DATA REVIEW/INTERVIEW

ENFORCEMENT

1. Which of the following enforcement actions did you use during the past year?

- a. Notice or letter of violation
- b. Administrative Order
- c. Administrative fine
- d. Show cause hearing
- e. Compliance schedule
- f. Permit revocation
- g. Civil suits
- h. Criminal suits
- i. Termination of service
- j. Other (specify) *Resampling at Parker Hannifin.*

	No.
X	
	X
	X
	X
	X
	X
	X
	X
X	

Explain if appropriate:

2. Did the treatment plant experience any following during the past year?

- a. Interference
- b. Pass through
- c. Fire or explosions (flashpoint, etc.)
- d. Corrosive structural damage
- e. Flow obstructions
- f. Excessive flow rates
- g. Excessive pollutant concentrations
- h. Heat problems
- i. Interference due to O & G
- j. Toxic fumes
- k. Illicit dumping of hauled wastes
- l. Worker health and safety concerns
- m. Other (specify)

Yes	No	Explain
	X	
	X	
	X	
	X	
	X	
X		<i>Rain-related.</i>
	X	
	X	
	X	
	X	
	X	
	X	

If yes, how did you respond?

SECTION II: SUPPLEMENTAL DATA REVIEW/INTERVIEW

F. ENFORCEMENT (continued)	
3. Were you made aware of any hazardous waste discharges to the POTW? [403.12 (j)&(p)]	Yes
	No X

G. GENERAL OBSERVATIONS, INFORMATION ENFORCEMENT	
Have you had any problems (general or specific) implementing your approved program?	Yes
	No X

Additional Comments/Observations/Information:

SECTION II COMPLETED BY:	<i>Mari Piekutowski</i>	DATE:	<i>March 31, 2008</i>
TITLE:	<i>Environmental Specialist 2</i>	TELEPHONE:	<i>937.285.6108</i>
SECTION II COMPLETED BY:	<i>Andy Eddy</i>	DATE:	<i>March 31, 2008</i>
TITLE:	<i>Superintendent</i>	TELEPHONE:	<i>937.456.7157</i>

SECTION III: EVALUATION AND SUMMARY

INSTRUCTIONS: Based on information and data evaluated, summarize the findings of the audit for each program element shown below. Identify all problems or deficiencies based on the evaluation of program components. Clearly distinguish between deficiencies, violations, and effectiveness issues. This is to ensure that the final report will clearly identify required actions versus recommended actions and program modifications.

Description	Recommended Action	Required Action
A. CA PRE-TREATMENT PROGRAM MODIFICATION		
<ul style="list-style-type: none"> Status of program modifications (Ref. 403.18 /Checklist II.A.1) 		
B. LEGAL AUTHORITY		
<ul style="list-style-type: none"> Minimum legal authority requirements (Ref. 403.8(f)(1)/Checklist II.B.2) 	X	
<p><u>RECOMMENDED ACTION:</u> <i>The City should consider incorporating the required provisions of the streamlining rules into its SUO.</i></p>		
<ul style="list-style-type: none"> Adequate multi jurisdictional agreements (Ref. 403.8(f)(1)/Checklist II.B.1) 		

SECTION III: EVALUATION AND SUMMARY

Description	Recommended Action	Required Action
C. IUCR APPLICABILITY		
<ul style="list-style-type: none"> Identify and categorize IUs (Ref. 403.8(f)(2)(ii)/Checklist II.C.2) 		
D. CONTROL MECHANISM		
<ul style="list-style-type: none"> Issuance of individual control mechanisms to all SIUs (Ref. 403.8(f)(1)(iii)/Checklist II.D.1) 		
Adequate control mechanisms (Ref. 403.8(f)(1)(iii)/Checklist I.A.4)		

SECTION III: EVALUATION AND SUMMARY

Description	Recommended Action	Required Action
Adequate control of trucked, railed, and dedicated pipe wastes (Ref. 403.5(b)(8)/ Checklist II.D.3&4)		
APPLICATION OF PRETREATMENT STANDARDS AND REQUIREMENTS		
<ul style="list-style-type: none"> Appropriately categorize, notify, and apply all applicable pretreatment standards (Ref. 403.8(f)(1)(ii)&(iii); 403.5 /Checklist I.A) 		
<ul style="list-style-type: none"> Basis and adequacy of local limits (Ref. 403.8(f)(4);122.21(j)/Checklist II.E.2&3) 		X
<p><i>REQUIRED ACTION:</i> The City must submit the justification for a low level mercury local limits as was required in its NPDES permit. This was due in January 2007.</p>		
COMPLIANCE MONITORING		
<ul style="list-style-type: none"> Adequate sampling and inspection frequency (Ref. 403.8(f)(2)(ii)&(v)/Checklist I.B.1&2, II.F.1) 		

SECTION III: EVALUATION AND SUMMARY

Description	Recommended Action	Required Action
<ul style="list-style-type: none"> Adequate inspections (Ref. 403.8(f)(2)(v)&(vi)/Checklist I.B.1; II.F.1) 		
<ul style="list-style-type: none"> Adequate sampling protocols and analysis (Ref. 403.8(f)(2)(vi)/Checklist I.B.2;II.F.2,3&4) <p><i>REQUIRED ACTION:</i> The City must ensure that the sample type is listed on the chain-of-custody forms for Parker Hannifin on both the self and City monitoring.</p> <p><i>REQUIRED ACTION:</i> The City must ensure the sampling for Total Toxic Organics is being done correctly for Bullen Ultrasonics.</p>		X
<ul style="list-style-type: none"> Adequate IU self-monitoring (Ref. 403.8(f)(2)(iv)/Checklist I.C.1.b;I.F) 		
Notification of changed and hazardous waste discharges (Ref. 403.12(j)&(p)/ Checklist I.C.1.b; II.G.1.b)		

SECTION III: EVALUATION AND SUMMARY

Description	Recommended Action	Required Action
<ul style="list-style-type: none"> Evaluate the need for SIUs to develop slug discharge control plans (Ref. 403.8(f)(2)(v)/Checklist I.B.2.d; II.F.8) 		
<ul style="list-style-type: none"> Monitor to demonstrate continued compliance and resampling after violation(s) (Ref. 403.12(g)(1)&(2);403.8(f)(2)(vi)/Checklist I.A.4.d, C.1.b) 		
G. ENFORCEMENT		
<ul style="list-style-type: none"> Appropriate application of "significant noncompliance" definition (Ref. 403.8(f)(2)(vii) /Checklist I.C.2; II.G.1; Attach B.I.1) 		

SECTION III: EVALUATION AND SUMMARY

Description	Recommended Action	Required Action
Develop and implement an ERP (Ref. 403.8(f)(5)I.C.3;/Checklist II.G.2)		
<ul style="list-style-type: none"> Annually publish a list of IUs in SNC (Ref. 403.8(f)(2)(vii)/Checklist I.C.6; II.G.4) 		
<ul style="list-style-type: none"> Effective enforcement (Ref. 403.8(f)(1)(iv)(A)/Checklist I.C.1.c, 4&5;II.G.2.c&d, 5&6) 		X

REQUIRED ACTION: The City must take enforcement against Parker Hannifin for a May 2007 zinc violation and a late report for April 2007.

SECTION III: EVALUATION AND SUMMARY

Description	Recommended Action	Required Action
II. DATA MANAGEMENT/PUBLIC PARTICIPATION <ul style="list-style-type: none">Effective data management/public participation (Ref. 403.5(c)(3)403.12(o); 403.14/Checklist II.H)		
III. RESOURCES <ul style="list-style-type: none">Adequate resources (Ref. 403.8(f)(3)/Checklist II.I)		

SECTION III: EVALUATION AND SUMMARY

Description	Recommended Action	Required Action
I. ENVIRONMENTAL EFFECTIVENESS/POLLUTION PREVENTION		
<ul style="list-style-type: none"> • Understanding of pollutants from all sources (Checklist II.J.1&2) 		
<ul style="list-style-type: none"> • Documentation of environmental improvements/effectiveness (Checklist II.J.1) 		
<ul style="list-style-type: none"> • Integration of pollution prevention (Checklist II.J.3,4&5) 		

SECTION III: EVALUATION AND SUMMARY

Description	Recommended Action	Required Action
K. ADDITIONAL EVALUATION/STIPULATION		

SECTION III COMPLETED BY:	<i>Mari Piekutowski</i>	DATE:	<i>May 20, 2008</i>
TITLE:	<i>Environmental Specialist 2</i>	TELEPHONE:	<i>937.285.6108</i>

ATTACHMENT A: PRETREATMENT PROGRAM STATUS UPDATE

Pretreatment Pre-Inspection Checklist
PCI/Audit/RI

POTW: *Eaton*

Date of Inspection: *March 12, 31, 2008*

Type of Inspection: *PCI / ~~Audit~~ / ~~RI~~*

Inspector: *Mari Piekutowski*

This checklist must be completed prior to conducting a PCI, audit, or RI. This checklist is designed to coordinate information from a number of sources to provide background information and to help develop an overview of the pretreatment program. Summarize items that should be verified during inspection. If items are get too numerous or get too lengthy to summarize, copy appropriate pages and attach.

Program Deficiencies

Pretreatment related Consent Decree and/or Administrative Orders that were completed or are pending since the last inspection.	<i>None.</i>
NPDES permit compliance schedule items that have been completed or are pending.	<i>Low level mercury technical justification still has not been submitted. This was due in January 2007.</i>
Since the last inspection, has the CA been in RNC or SNC? Why?	<i>Yes. Missing the low level mercury compliance schedule date.</i>
Findings of the last PCI/Audit/RI. Highlight any unresolved issues or corrective actions taken by the CA.	<i>Low level mercury limit justification.</i>

Control Authority Submittals and Reports

Have there been any program modifications since the last inspection? If yes, what is the status?	<i>No.</i>
Was the Annual Report submitted on time? Is it complete?	<i>Yes.</i>
Comments/follow-up questions on the Annual Report	<i>No.</i>
Were the Quarterly Reports submitted on time? Are they complete?	<i>Yes.</i>
Comments/follow-up questions on the Quarterly Industrial User Violation Reports	<i>None.</i>
Identify industries to target for file reviews/inspections, based on the Annual and Quarterly Reports	<i>Review all since there are only 3 SIUs.</i>

MOR Data Review

Effluent violations to discuss.	<i>None.</i>
Sludge quality issues to discuss.	<i>None.</i>

ATTACHMENT B: PRETREATMENT PROGRAM PROFILE

C. TREATMENT PLANT INFORMATION				
INSTRUCTIONS: Complete this section for each treatment plant operated under an NPDES permit issued to the CA.				
1. Treatment plant name Eaton WWTP		2. Location address 901 South Barron Street, Eaton, Ohio 45320		
3. a. NPDES permit number OH0020907; 1PC00001*ID	b. Expiration date July 31, 2009	4. Treatment plant wastewater flows		
		Design 1.9	MGD Actual 1.329 MGD	
5. Sewer System	a. Separate 100%	b. Combined 0%	c. Number of CSOs 0	
6. a. Industrial contribution (MGD) 0.063	b. Number of SIUs discharging to plant 3	c. Percent industrial flow to plant 4.7%		
7. Level of treatment	Type of Process(es)			
a. Primary	<input checked="" type="checkbox"/>	Bar Screen, Grit Chamber, Clarifier		
b. Secondary	<input checked="" type="checkbox"/>	Oxidation Tower, Activated Sludge, Clarifier		
c. Tertiary	<input checked="" type="checkbox"/>	Sand Filter, Disinfection, Dechlorination, Post Aeration		
8. Indicate required monitoring frequencies for pollutants identified in NPDES permit.				
	Influent (Times/Year)	Effluent (Times/Year)	Sludge (Times/Year)	Receiving Stream (Times/Year)
a. Metals	12	12	2-4 (When disposed off)	12
b. Organics(*hexachlorobenzene)	1/12*	1/12*	1/12*	0/12*
c. Toxicity testing	0	0	0	0
d. EP toxicity	0	0	0	0
e. TCLP	0	0	0	0
9. Effluent Discharge				
a. Receiving water name Sevenmile	b. Receiving water classification Warmwater Habitat	c. Receiving water use Primary Contact; Agricultural & Industrial Water Supply		
d. If effluent is discharged to any location other than the receiving water, indicate where.				

ATTACHMENT B: PRETREATMENT PROGRAM PROFILE

C. TREATMENT PLANT INFORMATION (Continued)

	N/A	Yes	No
11. Did the CA submit results of whole effluent biological toxicity testing as part of its NPDES permit application(s)? [122.21(j)(1) and (2)]		X	
a. If yes, did the CA use EPA-approved methods? [122.21(j)(3)]		X	
b. Has there been a pattern of toxicity demonstrated?			X

12. Indicate methods of sludge disposal.			
Quantity of sludge		Quantity of sludge	
a. Land application	59.1	dry tons/year	e. Public distribution
b. Incineration		dry tons/year	f. Lagoon storage
c. Monofill		dry tons/year	g. Other (specify)
d. MSW landfill	212.55	dry tons/year	

D. LEGAL AUTHORITY

1. a. Indicate where the authority to implement and enforce pretreatment standards and requirements is contained (cite legal authority).
Chapters Ordinance 93-3, 921 & 922

b. Date enacted/adopted *August 19, 1991* c. Date of most recent revisions *August 19, 1991*

2. Does the CA's legal authority enable it to do the following? [403.8(f)(1)(i-vii)]

	Yes	No
a. Deny or condition pollutant dischargers [403.8(f)(1)(i)]	X	
b. Require compliance with standards [403.8(f)(1)(ii)]	X	
c. Control discharges through permit or similar means [403.8(f)(1)(iii)]	X	
d. Require compliance schedules and IU reports [403.8(f)(1)(iv)]	X	
e. Carry out inspection and monitoring activities [403.8(f)(1)(v)]	X	
f. Obtain remedies for noncompliance [403.8(f)(1)(vi)]	X	
g. Comply with confidentiality requirements [403.8(f)(1)(vii)]	X	

3. a. How many contributing jurisdictions are there? **0**

List the names of all contributing jurisdictions and the number of SIUs in those jurisdictions.

Jurisdiction Name	Number of CIUs	Number of Other SIUs

ATTACHMENT B: PRETREATMENT PROGRAM PROFILE

D. LEGAL AUTHORITIES			Yes	No
3. b. Has the CA negotiated all legal agreements necessary to ensure that pretreatment standards will be enforced in contributing jurisdictions?			<i>NA</i>	
If yes, describe the legal agreements (e.g., intergovernmental contract, agreement, IU contracts, etc.).				
4. If relying on contributing jurisdictions, indicate which activities those jurisdictions perform.				
	a. IWS update	<i>NA</i>		<i>NA</i>
	b. Permit issuance	<i>NA</i>		<i>NA</i>
sampling	c. Inspection and	<i>NA</i>		<i>NA</i>
	d. Enforcement	<i>NA</i>		<i>NA</i>
	e. Notification of IUs			<i>NA</i>
	f. Receipt and review of IU reports			<i>NA</i>
	g. Analysis of samples			<i>NA</i>
	h. Other (specify)			<i>NA</i>
E. IU CHARACTERIZATION				
1. a. Does the CA have procedures to update its IWS to identify new IUs or changes in wastewater discharges at existing IUs? [403.8(f)(2)(i)]			<i>X</i>	
b. Indicate which methods are to be used to update the IWS.				
	• Review of newspaper/phone book			<i>X</i>
	• Review of water billing records	<i>X</i>		<i>X</i>
	• Review of plumbing/building permits	<i>X</i>		
	• Onsite inspections			<i>X</i>
	• Permit application requirements			<i>X</i>
	• Citizens involvement			
	• Other (specify)			
c. How often is the IWS to be updated?		<i>1/year</i>		
2. Is the CA's definition of "significant industrial user" consistent within the language in the Federal regulations? [403.3(t)(1)]			<i>X</i>	
If no, provide the CA's definition of "significant industrial user."				

ATTACHMENT B: PRETREATMENT PROGRAM PROFILE

F. CONTROL MECHANISM			
1. a. Identify the CA's approved control mechanism (e.g., permit, etc.).	<i>Permit</i>		
b. What is the maximum term of the control mechanism?	<i>Five Years</i>		
2. Does the approved control mechanism include the following? [403.8(f)(1)(iii)]	Yes	No	
a. Statement of duration	X		
b. Statement of nontransferability	X		
c. Effluent limits	X		
d. Self-monitoring requirements			
• Identification of pollutants to be monitored	X		
• Sampling location	X		
• Sample type	X		
• Sampling frequency	X		
• Reporting requirements	X		
• Notification requirements	X		
• Record keeping requirements	X		
e. Statement of applicable civil and criminal penalties	X		
f. Applicable compliance schedule	X		
3. Does the CA have a control mechanism for regulating IU whose wastes are trucked to the treatment plant?	N/A	Yes	No
	X		
4. Does the program identify designated discharge point(s) for trucked or hauled wastes? [403.5(b)(8)]	X		
If yes, described the discharge point(s) (including security procedures).			
<i>This is prohibited by ordinance.</i>			
G. APPLICATION OF STANDARDS			
1. Does the CA have procedures to notify all IUs of applicable pretreatment standards and any applicable requirements under the CWA and RCRA? [403.8(f)(2)(iii)]			
	X		
2. If there is more than one treatment plant, were local limits established specifically for each plant?	N/A	Yes	No
	X		

ATTACHMENT B: PRETREATMENT PROGRAM PROFILE

3. Has the CA technically evaluated the need for local limits for all pollutants [403.5(c)(1); 403.8(f)(4)]							
Partial Technical Evaluation (not all 10 pollutants evaluated)						Local Limit (Numeric) mg/L	
	Headworks Analysis Completed?		Technically Evaluated?		Local Limits Adopted?		
	Yes	No	Yes	No	Yes	No	
a. Arsenic (As)	X		X		X	0.16	
b. Cadmium (Cd)	X		X		X	0.12	
c. Chromium (Cr)	X		X		X	2.8	
d. Copper (Cu)	X		X		X	0.88	
e. Cyanide (CN)	X		X			X	—
f. Lead (Pb)	X		X		X	1.25	
g. Mercury (Hg)	X		X		X	0.0005	
h. Molybdenum (Mo)	X		X		X	0.39	
i. Nickel (Ni)	X		X			X	—
j. Selenium (Se)	X		X			X	—
k. Silver (Ag)	X		X			X	—
l. Zinc (Zn)	X		X		X	1.98	
m. Other (specify)							

H. COMPLIANCE MONITORING				
1. Indicate compliance monitoring and inspection frequency requirements.				
Program Aspect	Approved Program Requirement	NPDES Permit Requirement	State Requirement	Minimum Federal Requirement
a. Inspections				
• CIUs	<i>1/year</i>			1/year
• Other SIUs	<i>1/year</i>			1/year
b. Sampling by				
• CIUs	<i>1/year</i>			1/year
• Other SIUs	<i>1/year</i>			1/year
c. Self-monitoring				
• CIUs	<i>2-12/year</i>			2/year
• Other SIUs	<i>2/year</i>			2/year
d. Reporting by				
• CIUs	<i>2-12/year</i>			2/year
• Other SIUs	<i>2/year</i>			2/year

ATTACHMENT B: PRETREATMENT PROGRAM PROFILE

I. ENFORCEMENT																			
1. Does the CA's program define "significant noncompliance"? If yes, is the CA's definition of "significant noncompliance" consistent with EPA's? [403.8(f)(2)(vii)] If no, provide the CA's definition of "significant noncompliance."	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%; text-align: center;">Yes</th> <th style="width: 50%; text-align: center;">No</th> </tr> <tr> <td style="text-align: center;">X</td> <td></td> </tr> <tr> <td style="text-align: center;">X</td> <td></td> </tr> </table>	Yes	No	X		X													
Yes	No																		
X																			
X																			
2. Does the CA have an approved, written ERP? [403.8(f)(5)]	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%; text-align: center;">Yes</th> <th style="width: 50%; text-align: center;">No</th> </tr> <tr> <td style="text-align: center;">X</td> <td></td> </tr> </table>	Yes	No	X															
Yes	No																		
X																			
3. Indicate the compliance/enforcement options that are available to the POTW in the event of IU noncompliance. [403.8(f)(1)(vi)]																			
a. Notice or letter of violation	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;">X</td></tr> </table>	X	f. Administrative Order	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;">X</td></tr> </table>	X														
X																			
X																			
b. Compliance schedule	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;">X</td></tr> </table>	X	g. Revocation of permit	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;">X</td></tr> </table>	X														
X																			
X																			
c. Injunctive relief	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;"></td></tr> </table>		h. Fines (maximum amount)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;">X</td></tr> </table>	X														
X																			
d. Imprisonment	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;"></td></tr> </table>		<ul style="list-style-type: none"> • Civil \$1,000/day/violation • Criminal \$1,000/day/violation • Administrative \$1,000/day/violation 																
e. Termination of service	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;">X</td></tr> </table>	X																	
X																			
J. DATA MANAGEMENT/PUBLIC PARTICIPATION																			
1. Does the approved program describe how the POTW will manage its files and data?																			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border-bottom: 1px solid black;">Are files/records</td> <td style="width: 15%; border-bottom: 1px solid black; text-align: center;"><input type="checkbox"/></td> <td style="width: 25%; border-bottom: 1px solid black;">computerized?</td> <td style="width: 15%; border-bottom: 1px solid black; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 20%; border-bottom: 1px solid black;">hard copy?</td> <td style="width: 20%; border-bottom: 1px solid black; text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="5"></td> <td style="text-align: center;">both?</td> </tr> </table>	Are files/records	<input type="checkbox"/>	computerized?	<input checked="" type="checkbox"/>	hard copy?	<input type="checkbox"/>						both?	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%; text-align: center;">Yes</th> <th style="width: 50%; text-align: center;">No</th> </tr> <tr> <td></td> <td style="text-align: center;">X</td> </tr> </table>	Yes	No		X		
Are files/records	<input type="checkbox"/>	computerized?	<input checked="" type="checkbox"/>	hard copy?	<input type="checkbox"/>														
					both?														
Yes	No																		
	X																		
2. Are program records available to the public?	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%; text-align: center;">Yes</th> <th style="width: 50%; text-align: center;">No</th> </tr> <tr> <td style="text-align: center;">X</td> <td></td> </tr> </table>	Yes	No	X															
Yes	No																		
X																			
3. Does the POTW have provisions to address claims of confidentiality? [403.8(f)(2)(vii)]	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%; text-align: center;">Yes</th> <th style="width: 50%; text-align: center;">No</th> </tr> <tr> <td style="text-align: center;">X</td> <td></td> </tr> </table>	Yes	No	X															
Yes	No																		
X																			

ATTACHMENT B: PRETREATMENT PROGRAM PROFILE

K. RESOURCES

1. What are the resource allocations for the following pretreatment program components:

- a. Legal assistance
 - b. Permitting
 - c. Inspections
 - d. Sample collection
 - e. Sample analysis
 - f. Data analysis, review, and response
 - g. Enforcement
 - h. Administration?
- TOTAL

FEEs
0.20

2. Identify the sources of funding for the pretreatment program. [403.8(f)(3)]

- a. POTW general operating fund
- b. IU permit fees
- c. Industry surcharges

X
X

- d. Monitoring charges
- e. Other (specify)

X

L. ADDITIONAL INFORMATION

ATTACHMENT B COMPLETED BY:	Andy Eddy	DATE:	March 31, 2008
TITLE:	Superintendent	TELEPHONE:	937.456.7157

FILE REVIEW WORKSHEET

IV. FILE REVIEW WORKSHEET

IU name Pawer Hannifin

INSTRUCTIONS: For each pollutant required to be regulated record the local limit and categorical standard (if applicable) that the CA should be applying and enforcing. Then record that actual discharge limits applied through the control mechanism (permit). Also record the sample type and frequency required by the control mechanism.

Permit issuance date 12/3/07

Permit expiration date 12/3/12

Parameter	mg/L Local Limit	Categorical Standards		Permit Discharge Limits		Required Sample Type	Required Sample Frequency
		Daily Average	Long-Term Average	Daily Average	Long-Term Average		
As	0.16	—	—	0.16	—	Composite (C)	2/yr
Cd	0.12	0.11	0.07	0.11	0.07	C	
Cr	2.8	2.77	1.71	2.77	1.71	C	
Cu	0.88	3.38	2.07	0.88	0.207	C	
Pb	1.25	0.69	0.43	0.69	0.43	C	
Mo	0.39	—	—	0.39	—	C	
Zn	1.98	2.61	1.48	1.98	1.48	C	
Ni	—	3.98	2.38	3.98	2.38	C	
Ag	—	0.43	0.24	0.43	0.24	C	
CNT (T)	—	1.20	0.65	1.20	0.65	Grab (G)	
TTOs	—	2.13	—	2.13	—	C, G	
Hg	0.005	—	—	0.005	—	C	
Comments							
PH	6-10.5Su	—	—	6-10.5Su		G	
O&G	100	—	—	100		G	

PERMIT LIMITS WORKSHEET COMPLETED BY: <u>Man Piekutowski</u> TITLE: <u>Environmental Specialist 2</u>	DATE: <u>3/31/08</u> TELEPHONE: <u>937.285.6108</u>
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FILE REVIEW WORKSHEET (Continued)

V. IU SELF-MONITORING WORKSHEET

IU name Parker Hannifin

INSTRUCTIONS: Review IU self-monitoring reports and data and record the information in the appropriate columns below.

IU Self-Monitoring

Date Sample Collected	Date Report Received	Date Report Due	Days Late	Pollutants Monitored	Sample Type	Pollutants Missing
1/3, 15/07	2/14/07	2/15/07	—	Flow, Cd, Cr, Cu, Pb, Ni, Zn, (COT, E), Mo, Se, pH, BOD, Col, TSS, TTD	N	—
2/4/07	3/13/07	3/15/07	—	Flow, Cd, Cr, Cu, Pb, Ni, Zn, (COT, E), Mo, Se, pH	N	—
?	4/30/07	4/15/07	15	"	N	—
4/11/07	5/15/07	5/15/07	—	"	N	—
5/9, 21-24/07	6/14/07	6/15/07	—	"	N	—
6/6/07	7/13/07	7/15/07	—	"	N	—
7/3, 16-13/07	8/13/07	8/15/07	—	Flow, Cd, Cr, Cu, Pb, Ni, Zn, (COT, E), Mo, Se, pH, TSS, TTD	N	—
8/1/07	8/29/07	9/15/07	—	Flow, Cd, Cr, Cu, Pb, Ni, Zn, (COT, E), Mo, Se, pH	N	—
9/12/07	9/24/07	10/15/07	—	"	N	—

also sampled 10/25/07, 11/07/07, 12/5/07

Do reports indicate 40 CFR Part 136 analytical methods were used?

Yes	No
X	

Were self-monitoring reports signed/certified?

X	
---	--

List any reports not signed/certified.

If subject to TTD certification, were they submitted as required?

sample for TTDs

--	--

IU SELF-MONITORING WORKSHEET COMPLETED BY: <u>man Pietrowski</u> TITLE: <u>environmental specialist</u>	DATE: <u>3/31/08</u> TELEPHONE: <u>937.285.6100</u>
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FILE REVIEW WORKSHEET (Continued)

VI. POTW MONITORING REPORTS WORKSHEET

IU name Parker Hannifin

INSTRUCTIONS: Review POTW monitoring records and enter the information in column 1 and 2. For the other columns either 1) note the actual data in the appropriate columns, or 2) indicate with a yes (Y) or no (N) whether the information was found in the POTW's monitoring records. Indicate if sample type was inappropriate, if chain-of-custody was incomplete, or if analytical methods other than Part 136 methods were used.

Date Sample Collected	Pollutants Monitored	Sample Time	Flow Rate	Sample Type	Preservation Method	Personnel	Chain-of-Custody	40 CFR Part 136 Analytical Techniques
1/17-18/07	BOD, TSS, pH, Cu, Cr, Ni, Pb, Mn, D, 1, 1B, Se, Zn, TKN, NH ₄ , T, DOC	Y	N	Y	N	Y	Y	Y
4/18/07	"	Y	N	Y	Y	Y	Y	Y
7/18-19/07	OPG, AX, T, P, V, B, Cu, Cr, Ni, Pb, Mn, D, 1, 1B, Se, Zn, TKN, NH ₄ , T, DOC	Y	N	Y	Y	Y	Y	Y
10/17-18/07	AX, F, T, P, V, B, Cu, Cr, Ni, Pb, Mn, D, 1, 1B, Se, Zn, TKN, NH ₄ , T, DOC	Y	N	Y	Y	Y	Y	Y

POTW MONITORING REPORTS WORKSHEET COMPLETED BY: <u>Mani Piekutowska</u> TITLE: <u>Environmental Specialist 2</u>	DATE: <u>3/31/08</u> TELEPHONE: <u>937-205 6106</u>
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FILE REVIEW WORKSHEET (Continued)

IX. CIUs WORKSHEET	
IU name <u>Power Generation</u>	
<i>INSTRUCTIONS: Record information from IU file, note any apparent misapplication of the applicable categorical pretreatment standards.</i>	
1. IU category (s) <p style="text-align: center; font-size: 2em;">433</p>	
2. List all applicable subcategories. <p style="text-align: center; font-size: 1.5em;">New Source</p>	
3. a. Does the sampling location contain nonregulated or dilution wastestreams?	Yes No
• CA	<input type="checkbox"/> <input checked="" type="checkbox"/>
• IU	<input type="checkbox"/> <input checked="" type="checkbox"/>
b. If yes, is the CWF applied?	<input type="checkbox"/> <input checked="" type="checkbox"/>
c. If yes, is FWA applied?	<input type="checkbox"/> <input checked="" type="checkbox"/>
4. Is the facility subject to production-based standards?	<input type="checkbox"/> <input checked="" type="checkbox"/>
a. If yes, provide the following information.	
• Average production	NA
• Average process flow	
5. Provide the following information on TTO monitoring and reporting (if applicable).	
a. Date initial scan performed	—
b. Date organic management plan submitted	—
c. Date(s) certifications submitted (in the past 12 months)	—
d. Date(s) monitoring performed (in the past 12 months)	1,7/2007

CIUs WORKSHEET COMPLETED BY: <u>Mari Piekowicz</u> TITLE: <u>Environmental Specialist 2</u>	DATE: <u>3/31/08</u> TELEPHONE: <u>937.285.6108</u>
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FILE REVIEW WORKSHEET

IV. FILE REVIEW WORKSHEET

IU name Bullen Semiconductor Corp.

INSTRUCTIONS: For each pollutant required to be regulated record the local limit and categorical standard (if applicable) that the CA should be applying and enforcing. Then record that actual discharge limits applied through the control mechanism (permit). Also record the sample type and frequency required by the control mechanism.

Permit issuance date 9/18/07

Permit expiration date 7/30/12

Parameter	Local Limit	Categorical Standards		Permit Discharge Limits		Required Sample Type	Required Sample Frequency
		Daily Average	Long-Term Average	Daily Average	Long-Term Average		
As	0.16	2.09	0.83	0.16	0.83	Composite (C)	2/yr
TTO	—	1.37	—	1.37	—	C, Grab (G)	1/yr
Cd	0.12	—	—	0.12	—	C	2/yr
Cr(VI)	2.8	—	—	2.8	—	C	
Cu	0.88	—	—	0.88	—	C	
Pb	1.25	—	—	1.25	—	C	
Mo	0.39	—	—	0.39	—	C	
Zn	1.98	—	—	1.98	—	C	
Hg	0.0005	—	—	0.0005	—	C	

Comments

Ni, ~~Al~~

pH. D&G - 6.0 - 10.5 su
100 mg/L

Monitor for (W(F_D)(MGT),
Phenols, Chloroform,
Acrylonitrile

Expired 4/30/07 (less than 180 days)

PERMIT LIMITS WORKSHEET
COMPLETED BY:

Mani Pelantowski

DATE: 3/31/08

TITLE: Environmental Specialist 2

TELEPHONE: 937.285.6108

FILE REVIEW WORKSHEET (Continued)

IX. CIUs WORKSHEET	
IU name <u>Bullen Semiconductor Corp.</u>	
<i>INSTRUCTIONS: Record information from IU file, note any apparent misapplication of the applicable categorical pretreatment standards.</i>	
1. IU category (s) <p style="text-align: center; font-size: 2em;">469</p>	
2. List all applicable subcategories. <p style="text-align: center; font-size: 2em;">Subpart B</p>	
3. a. Does the sampling location contain nonregulated or dilution wastestreams?	Yes No
• CA	<input type="checkbox"/> <input checked="" type="checkbox"/>
• IU	<input type="checkbox"/> <input checked="" type="checkbox"/>
b. If yes, is the CWF applied?	<input type="checkbox"/> <input checked="" type="checkbox"/>
c. If yes, is FWA applied?	<input type="checkbox"/> <input checked="" type="checkbox"/>
4. Is the facility subject to production-based standards?	<input type="checkbox"/> <input checked="" type="checkbox"/>
a. If yes, provide the following information.	
• Average production	NA
• Average process flow	
5. Provide the following information on TTO monitoring and reporting (if applicable).	
a. Date initial scan performed	??
b. Date organic management plan submitted	??
c. Date(s) certifications submitted (in the past 12 months)	??
d. Date(s) monitoring performed (in the past 12 months)	??

CIUs WORKSHEET COMPLETED BY: <u>Man Piekutowski</u>	DATE: <u>3/31/08</u>
TITLE: <u>Environmental Specialist</u>	TELEPHONE: <u>937.285.6103</u>

FILE REVIEW WORKSHEET

IV. FILE REVIEW WORKSHEET

IU name *Weberbauer*

INSTRUCTIONS: For each pollutant required to be regulated record the local limit and categorical standard (if applicable) that the CA should be applying and enforcing. Then record that actual discharge limits applied through the control mechanism (permit). Also record the sample type and frequency required by the control mechanism.

Permit issuance date ~~9/10/02~~ *9/10/07* Permit expiration date ~~10/1/07~~ *10/1/12*

Parameter	Local Limit	Categorical Standards		Permit Discharge Limits		Required Sample Type	Required Sample Frequency
		Daily Average	Long-Term Average	Daily Average	Long-Term Average		
As	0.16	NA	NA	0.16	NA	Composite (C)	2/yr
Cd	0.12			0.12		C	
Cr, T	2.0			1.00		C	
Cu	0.88			0.88		C	
Pb	1.25			1.25		C	
Mn	0.39			0.39		C	
Zn	1.98	✓	✓	1.98	✓	C	
Hg	0.005	NA	NA	0.005	NA	C	

Comments

cr, wrong # Have Ni, Ag, Cu(F)

PERMIT LIMITS WORKSHEET
 COMPLETED BY: *Man Piekatawski*
 TITLE: *Environmental Specialist 2*
 DATE: *3/31/08*
 TELEPHONE: *957.285.6108*

FILE REVIEW WORKSHEET (Continued)

V. IU SELF-MONITORING WORKSHEET

IU name Weyerhaeuser

INSTRUCTIONS: Review IU self-monitoring reports and data and record the information in the appropriate columns below.

IU Self-Monitoring

Date Sample Collected	Date Report Received	Date Report Due	Days Late	Pollutants Monitored	Sample Type	Pollutants Missing
1/17/07	2/12/07	2/15/07	—	BOD, TKN, TSS, pH, Cu, Mn, Cr, (SPE), Phenol, Ag, Cd, Cr, Ni, Hg, Ni, Pb, Zn, Fe	Y	Mo, As
7/3/07	7/13/07	7/15/07	—	BOD, TKN, TSS, pH, As, Cd, Cr, Cu, (SPE), Pb, Mo, Ni, Zn, Hg	N	—

Do reports indicate 40 CFR Part 136 analytical methods were used? *7/7/07 report had correct methods*

Yes	No
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Wrong ~~analytical~~ analytical methods. Need 136 not SW

Were self-monitoring reports signed/certified?

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

List any reports not signed/certified.

If subject to TTO certification, were they submitted as required? *NA*

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

IU SELF-MONITORING WORKSHEET COMPLETED BY: <u>Mani Piekutowski</u> TITLE: <u>Environmental Specialist 2</u>	DATE: <u>3/31/08</u> TELEPHONE: <u>937 285 6108</u>
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FILE REVIEW WORKSHEET (Continued)

IX. CIUs WORKSHEET														
IU name <u>Weyerhaeuser</u>														
<i>INSTRUCTIONS: Record information from IU file, note any apparent misapplication of the applicable categorical pretreatment standards.</i>														
1. IU category (s) <p style="text-align: center;">NA</p>														
2. List all applicable subcategories. <p style="text-align: center;">NA</p>														
3. a. Does the sampling location contain nonregulated or dilution wastestreams? <ul style="list-style-type: none"> • CA • IU b. If yes, is the CWF applied? c. If yes, is FWA applied?	<p style="font-size: 2em;">NA</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Yes</th> <th style="width: 50%;">No</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> </tbody> </table>	Yes	No										
Yes	No													
4. Is the facility subject to production-based standards? a. If yes, provide the following information. <ul style="list-style-type: none"> • Average production • Average process flow 	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td> </td></tr> <tr><td> </td></tr> </table> <p style="font-size: 2em;">NA</p>													
5. Provide the following information on TTO monitoring and reporting (if applicable). <ul style="list-style-type: none"> a. Date initial scan performed b. Date organic management plan submitted c. Date(s) certifications submitted (in the past 12 months) d. Date(s) monitoring performed (in the past 12 months) 	<p style="font-size: 2em;">NA</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> </table>												

CIUs WORKSHEET COMPLETED BY: <u>Marci Pietrowski</u> TITLE: <u>Environmental Specialist</u>	DATE: <u>3/31/08</u> TELEPHONE: <u>137-286-6108</u>
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