



State of Ohio Environmental Protection Agency

Northwest District Office

347 North Dunbridge Road
Bowling Green, OH 43402-9398

TELE: (419) 352-8461 FAX: (419) 352-8468
www.epa.state.oh.us

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

Re: Mercer County
M&R Eggs
IDP Inspection

February 26, 2008

Mr. Robert Gornichec, President
P. O. Box 307
Fort Recovery, Ohio 45846

Dear Mr. Gornichec:

On January 16, 2008, a pretreatment compliance inspection was conducted of the M&R Eggs facility located in the Village of Fort Recovery. The inspection consisted of a tour of the facility and the completion of an inspection checklist. Mr. Greg Fortkamp, maintenance supervisor, was present and offered information.

The compliance schedule contained in your permit required you to submit a permit to install before January 1, 2007; however, to this date we have not received an application. We have received the data from the pilot testing that you completed using the DynamOx machine, but have not been contacted with a decision to proceed with this pretreatment process. **Please inform us within 14 days of the date of this letter how you intend to proceed with achieving compliance with your permit.**

We are in receipt of your self-monitoring reports covering the months of January 2007 through June 2007. Our review indicates violations of the conditions of your Indirect Discharge Permit. The specific violations are below.

Violation Date	Parameter	Limit Type	Limit	Reported Value	Violation Date
1/16/2007	Total Suspended Solids	1D Conc	1150	2500.	1/16/2007
1/16/2007	CBOD 5 day	1D Conc	2500	4995.	1/16/2007
2/1/2007	CBOD 5 day	1D Conc	2500	3931.	2/1/2007
2/12/2007	CBOD 5 day	1D Conc	2500	3987.	2/12/2007
3/2/2007	CBOD 5 day	1D Conc	2500	3358.5	3/2/2007

Mr. Robert Gornichec, President
February 26, 2008
Page 2

3/26/2007	Total Suspended Solids	1D Conc	1150	1300.	3/26/2007
3/26/2007	CBOD 5 day	1D Conc	2500	3430.5	3/26/2007
4/9/2007	CBOD 5 day	1D Conc	2500	3567.	4/9/2007
5/7/2007	CBOD 5 day	1D Conc	2500	4485.	5/7/2007
6/4/2007	CBOD 5 day	1D Conc	2500	3316.5	6/4/2007
6/4/2007	pH, Minimum	1D Conc	5.0	4.58	6/4/2007
6/12/2007	Total Suspended Solids	1D Conc	1150	1530.	6/12/2007
6/12/2007	CBOD 5 day	1D Conc	2500	4035.	6/12/2007
6/20/2007	Total Suspended Solids	1D Conc	1150	1430.	6/20/2007
6/20/2007	CBOD 5 day	1D Conc	2500	3886.5	6/20/2007
6/25/2007	CBOD 5 day	1D Conc	2500	4050.	6/25/2007

The final limits in your permit went effective on October 1, 2007. These limits are more stringent than those used to determine violations from January 2007, through June 2007. We have not received your data from July 2007, through January 1, 2008; therefore, we are not able to determine your compliance with the final limits. Continued violation of the permit limits may be cause for enforcement action by Ohio EPA.

Our completed inspection report is enclosed for your records. If you have any questions, please feel free to call me at (419) 373-3019.

Sincerely,



Michelle Sharp
Division of Surface Water

/llr

Enclosure

pc: ~~DSWQ-NWDO-File-w/enclosures~~
Julia Zhang, DSW, CO - w/enclosures
Mr. Greg Fortkamp - w/enclosures



PRETREATMENT INSPECTION REPORT

Ohio Environmental Protection Agency

FACILITY NAME M&R Eggs		PERMIT NUMBER 2DP00073	FACILITY NUMBER
INSPECTION TYPE P	INSPECTOR M.Sharp	FACILITY TYPE 2	DATE CONDUCTED 1/16/2008

GENERAL INFORMATION
NAME AND LOCATION OF FACILITY M&R Eggs 2360 Wabash Road Fort Recovery, Ohio 45846
MAILING ADDRESS OF FACILITY M&R Eggs P.O. Box 307 Fort Recovery, Ohio 45846
CONTACT (NAME/TITLE/PHONE) Mr. Greg Fortkamp/Maintenance Supervisor

FACILITY EVALUATION													
(S = Satisfactory, M = Marginal, U = Unsatisfactory NE=Not Evaluated)													
<table border="1"> <tr><td>M</td><td>Pretreatment</td></tr> <tr><td>S</td><td>Site/Facility Review</td></tr> <tr><td> </td><td> </td></tr> </table>	M	Pretreatment	S	Site/Facility Review			<table border="1"> <tr><td>NE</td><td>Chemical Storage</td></tr> <tr><td>S</td><td>Self Monitoring</td></tr> <tr><td> </td><td> </td></tr> </table>	NE	Chemical Storage	S	Self Monitoring		
M	Pretreatment												
S	Site/Facility Review												
NE	Chemical Storage												
S	Self Monitoring												
* See inspection letter													

Names(s) and Signature(s) of Inspector(s)	Agency / Office / Telephone	Date
Michelle Sharp	Ohio EPA/NWDO/419-373-3019	
<i>Michelle Sharp</i>		3-3-08
Signature of Reviewer		Date
<i>Elizabeth A. Wick</i>	Ohio EPA/NWDO/419-373-3002	
Elizabeth A. Wick, P.E.		2/20/08

INDUSTRIAL USER INSPECTION CHECKLIST

Facility:	M&R Eggs	Date of inspection: January 16, 2008
OH Number:	OHP000206	IDP Number: 2DP00073
Facility Representative:	Mr. Greg Fortkamp	Inspector(s): Michelle Sharp

COMPLIANCE

1. Date of last pretreatment inspection: March 29, 2007

2. Has the facility been in compliance with its permit limits since the last inspection? N
If no, explain:

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

If any of the above five answers is no, explain:
Are not meeting final limits established in their permit.

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

FACILITY OPERATIONAL CHARACTERISTICS

5. Number of Employees: 33
6. Shifts/Day: 2 Shifts (1 production & 1 cleaning)
7. Production Days/Year: 260
8. Hours/shift: 9-10 Hour

9. Any production changes since the last inspection? Y
If yes, explain:
Have added an organic line and continue to have an increase in production.

10. General facility description and operations:
Washing and packaging of eggs.

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

12. Any expansion or production increase expected within the next year? Y
If yes, explain:
More organic lines and a third shift are possible.

WASTEWATER TREATMENT

13. Provide a schematic diagram and description of the wastewater treatment system:
14. Was a PTI issued for the treatment system? NA
15. Were there any modifications to the treatment system since the previous inspection? N
- If yes, was a PTI obtained? NA
- PTI Number: _____ Date: _____
16. What is the treatment mode of operation? Continuous
- If batch, list the frequency and duration:
17. Who is responsible for operating the treatment system?
Greg Fortkamp
18. How often is the treatment system checked?
Daily.
19. Is there an alarm system for the system? Y
Explain: High level.
20. Is there an operations and maintenance manual? Y
21. Is an inventory of critical spare parts maintained? Y
If yes, list:
22. Are there any bypasses in the system? N
If yes, describe the location:
- Have bypasses occurred since the last inspection? NA
- Was the POTW notified? NA

WASTEWATER TREATMENT CONTINUED

23. Are residuals or sludges generated? Y

Method of disposal:
Mike's Sanitation

Frequency and amount of disposal:
Once per month.

Name of hauler/landfill/disposal facility:
Mike's Sanitation.

Is any sludge generated subject to RCRA regulations? N

If land applying sludge, is there a sludge management plan? 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. Egg Wash	End of tank before lift station	5,500			
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
Total Regulated Process Flow		5,500			
Non-contact Cooling					
Blowdown					
Reverse Osmosis Condensate					
Demineralizer Regeneration					
Filter Backwash					
Compressor Condensate					
Storm Water					
Other Dilute Flows					
Unregulated Flows (provide list)					
Sanitary		500			
TOTAL FLOW		6,000			

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:
Effluent pipe of the three-stage separation tank located in the southwest portion of the property.
27. Is the facility sampling at the location(s) described in the permit? Y
If no, describe the actual location:
28. Is the location(s) where the facility is sampling representative? Y
If no, indicate a representative location:
29. Is the flow measured or estimated? Estimated
If measured, how often is the meter calibrated?

If estimated, describe method of estimation:
Water Usage.
30. Is pH monitored continuously? N
If yes, how often is the meter calibrated?
31. Does the facility collect its own samples? Y
If no, specify the sample collector:
32. Are appropriate sampling procedures followed?
Monitoring frequencies Y
Sample collection (grab for pH, O&G, CN, phenols, VOCs, hexavalent chromium) Y
Flow proportioned samples Y
Proper preservation techniques Y
Sample holding times Y
Chain-of-custody forms Y
33. Are samples analyzed in accordance with 40 CFR 136? Y
34. Laboratory conducting analyses:
Brookside Lab

TOXICS MANAGEMENT

- | | |
|--|--------|
| 35. Are any listed toxic organics used in the facility?
If yes, identify organics: | N |
| 36. Does the facility have a current toxic organic management plan(TOMP)?
If yes, is it being implemented? | N
N |
| 37. Has the facility had any uncontrolled releases or spills to the POTW since
the previous inspection? If yes, please explain: | N |
| 38. Does the facility need a spill prevention plan or slug discharge control plan?
If yes, does the facility have a written plan? | N
N |
| 39. Identify any potential slug load or spill areas: | |

REQUIRED FOLLOW-UP ACTIONS