



State of Ohio Environmental Protection Agency

Southeast District Office

2195 Front Street
Logan, Ohio 43138

TELE: (740) 385-8501 FAX: (740) 385-6490
www.epa.state.oh.us

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

April 30 2008

Re: Morgan County
MIBA Bearings US, LLC
CEI – CSI 2008
Permit #0IC00000*KD
NPDES #OH0048372
Correspondence (IWW)

Ms. Heidi Suhoski, Env. Health & Safety Coord.
MIBA Bearings US, LLC
5037 North State Route 60
McConnelsville, Ohio 43756

Subject: Comments from the Compliance Sampling Inspection (CSI) of MIBA Bearings.
Please Respond by May 23, 2008.

Dear Ms. Suhoski:

On April 8, 2008, a CSI of the MIBA Bearings facility was conducted by the Ohio EPA, Southeast District, Division of Surface Water. Ohio EPA Water Quality personnel Randy Spencer and Kelly Capuzzi collected samples while I conducted the inspection. The results of the sampling are still unknown. We were accompanied by Kelly Smith, Unit Manager, MIBA, McConnelsville and you. The following are comments from the inspection:

- Permit violations
- Covering areas for storm water compliance

Permit Violations:

We discussed the permit violations for pH, copper and lead. We also discussed that MIBA has consistently been on the U.S. EPA quarterly noncompliance list numerous times for metals violations. MIBA has recently taken action to resolve the violations. If these actions are inadequate and violations persist, we will be recommending formal enforcement action.

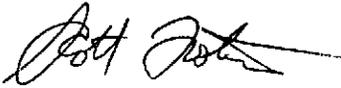
Covering Areas for Storm Water Compliance:

The area for storage of recyclable materials from MIBA's factory is currently not covered by a roof. Also, MIBA has gravel areas that are used for storage areas for various materials. These are also uncovered and fall under the requirements of the storm water management plan. If these areas were to be covered, a storm water management plan may no longer be required. It was also noted that the roll off storage area had metal and wood debris on the ground.

MIBA Bearings US, LLC
Page 2

I rated the Operations and Maintenance marginal because of the above mentioned items. Please respond to this letter by May 23, 2008. Feel free to call me with any additional questions or comments at (740) 380-5227.

Sincerely,



Scott Foster
Environmental Specialist 2
Division of Surface Water

SF/dh

Enclosure

c: Aaron Wolfe, SEDO, DSW, Ohio EPA
c: Kelly Smith, Unit Manager, MIBA

**NPDES
Compliance Inspection Report**

A. NATIONAL DATA SYSTEM CODING

Permit No.	NPDES No.	Date	Inspection Type	Inspector	Facility Type
01C00000*KD	OH0048372	April 8, 2008	C	S	2

B. FACILITY DATA

Name and Location of Facility Inspected	Entry Time	Permit Effective Date
MIBA Bearings US, LLC 5037 N. State Route 60 McConnelsville, Ohio 43756	9:00 a.m.	May 1, 2006
	Exit Time	Permit Expiration Date
	11:15 a.m.	January 31, 2011

Name(s) and Title(s) of On-Site Representative(s)	Phone Number(s)
Heidi Suhoski, Environmental Health and Safety Coordinator Kelly Smith, Unit Manager	(740) 962-4242 Ext. 1001 (740) 962-4242 Ext. 1414
Name, Address and Title of Responsible Official	Phone Number
Kelly Smith, Unit Manager MIBA Bearings US, LLC 5037 N. State Route 60 McConnelsville, Ohio 43756	(740) 962-4242 Ext. 1414

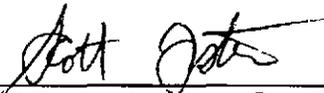
C. AREAS EVALUATED DURING INSPECTION

<u>S</u> Permit	<u>S</u> Flow Measurement	<u>N/A</u> Pretreatment
<u>S</u> Records/Reports	<u>N</u> Laboratory	<u>S</u> Compliance Schedules
<u>M</u> Operations & Maintenance	<u>S</u> Effluent/Receiving Waters	<u>S</u> Self-Monitoring Program
<u>S</u> Facility Site Review	<u>S</u> Sludge Storage/Disposal	<u>-</u> Other
<u>N/A</u> Collection System		

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

D. SUMMARY OF FINDINGS/COMMENTS (attach additional sheets if necessary)

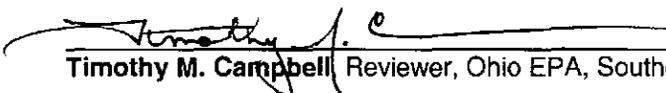
See attached letter.



Scott Foster, Inspector, Ohio EPA, Southeast District Office

4/30/08

Date



Timothy M. Campbell, Reviewer, Ohio EPA, Southeast District Office

4/30/08

Date

E. PERMIT VERIFICATION

Inspection Observations Verify the Permit	Yes	No	N/A	N/E
a. Correct name and mailing address of permittee	X			
b. Correct name and location of receiving waters	X			
c. Product(s) and production rates conform with permit application (industries)	X			
d. Flows and loadings conform with NPDES permit	X			
e. Treatment processes are as described in permit application/briefing memo	X			
f. New treatment process(es) added since last inspection		X		
g. Notification given to state of new, different, or increased discharges			X	
h. All discharges are permitted	X			
i. Number and location of discharge points are as described in permit	X			

Comments:

F. COMPLIANCE SCHEDULES/VIOLATIONS

	Yes	No	N/A	N/E
a. Any significant violations since the last inspection	X			
b. Permittee is taking actions to resolve violations	X			
c. Permittee has compliance schedule	X			
d. Compliance schedule contained in: <u>Part I, C. of current permit</u>	X			
e. Permittee is meeting compliance schedule	X			

Comments:

G. OPERATION AND MAINTENANCE

Treatment Facility Properly Operated and Maintained	Yes	No	N/A	N/E
a. Standby power available: Generator ____ Dual Feed <u>X</u>	X			
b. Adequate alarm system available for power or equipment failures	X			
c. All treatment units in service other than backup units		X		
d. Sufficient operating staff provided: # of shifts <u>2</u> Days/Week <u>5/6</u>	X			
e. Operator holds unexpired license of class required by permit Class: ____			X	
f. Routine and preventive maintenance schedule/performed on time	X			
g. Any major equipment breakdown since last inspection		X		
h. Operation and maintenance manual provided and maintained	X			
i. Any plant bypasses since last inspection				X
j. Regulatory agency notified of bypasses: ____ on MORS ____ 800 Number			X	
k. Any hydraulic and/or organic overloads experienced since last inspection		X		

Comments: Facility is experiencing problems with metals removal.

H. SLUDGE MANAGEMENT

a. Sludge Management Plan (SMP): N/A Submitted Date
 - Approval Number
 - Not submitted
 - N/A

	Yes	No	N/A	N/
b. Sludge Management Plan current			X	
c. Sludge adequately disposed (Method: <u> </u>)			X	
d. If sludge is incinerated, where is ash disposed of? <u> </u>			X	
e. Is sludge disposal contracted (Name: <u>Envirosafe</u>)	X			
f. Has amount of sludge generated changed significantly since last inspection		X		
g. Adequate sludge storage provided at plant			X	
h. Land application sites monitored and inspected per SMP			X	
i. Records kept in accordance with state and federal law	X			
j. Any complaints received in last year regarding sludge			X	
k. Is sludge adequately processed (digestion, dewatering, pathogen control)	X			

Comments:

I. SELF-MONITORING PROGRAM

Part 1 - Flow Measurement	Yes	No	N/	N/
a. Primary flow measuring device properly operated & maintained. Type of device: <u> </u> ultrasonic & parshall flume <u> </u> calculated from influent <u> </u> weir <u> X </u> Other <u> </u> ultrasonic & weir <u> </u> Specify: <u>Electrical and Flume</u>	X			
b. Calibration frequency adequate (date of last calibration: <u>Yearly</u>)	X			
c. Secondary instruments (totalizers, recorders etc.) properly operated and maintained	X			
d. Flow measurement equipment adequate to handle expected ranges of flows	X			
e. Actual flow discharged is measured	X			
f. Flow measuring equipment inspection frequency: <u> X </u> Daily <u> </u> Weekly <u> </u> Monthly <u> </u> Other				

Part 2 - Sampling	Yes	No	N/A	N/E
a. Sampling location(s) are as specified by permit	X			
b. Parameters and sampling frequency agree with permit	X			
c. Permittee uses required sampling method	X			
d. Sample collection procedures are adequate	X			
i. Samples refrigerated during compositing	X			
ii. Proper preservation techniques used	X			
Conform with 40 CFR 136.3	X			
e. Monitoring records (e.g., flow, pH, D.O., etc.) maintained for a minimum of three years including all original strip chart recordings (e.g., continuous monitoring instrumentation, calibration, and maintenance records)	X			
f. Adequate records maintained of sampling date, time, exact location, etc.	X			

Comments: Coshocton Environmental, chemistry and biology samples; Alloway, toxicity

Part 3 Laboratory General	Yes	No	N/A	N/E
a. EPA approved analytical testing procedures used (40 CFR 136.3)				X
b. If alternate analytical procedures are used, proper approval has been obtained				X
c. Analyses being performed more frequently than required by permit				X
d. If (c) is yes, are results reported in permittee's self-monitoring report				X
e. Commercial laboratory used	X			
1. Parameters analyzed by commercial lab: <u>All except PH, DO, CL2</u>				
2. Lab name: <u>Coshocton Environmental, Allaway</u>				

Comments:

J. EFFLUENT/RECEIVING WATER OBSERVATIONS

Outfall #	Oil Sheen	Grease	Turbidity	Visible Foam	Visible Float Solids	Color	Other
001	None	None	None	None	None	Clear	

Comments: 601- No visible contaminants

K. MULTIMEDIA OBSERVATIONS

	Yes	No	N/A	N/E
a. Are there indications of sloppy housekeeping or poor maintenance in work and storage areas or laboratories		X		
b. Do you notice staining or discoloration of soils, pavement, or floors		X		
c. Do you notice distressed (unhealthy, discolored, dead) vegetation		X		
d. Do you see unidentified dark smoke or dustclouds coming from sources		X		
e. Do you notice any unusual odors or strong chemical smells		X		
f. Do you see any open or unmarked drums, unsecured liquids, or damaged containment facilities		X		

If any of the above are observed, ask the following questions:

1. What is the cause of the conditions?
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: