



Environmental
Protection Agency

John R. Kasich, Governor
Mary Taylor, Lt. Governor
Scott J. Nally, Director

August 16, 2012

Mr. Mark Kreimer
Kreimer's Bierhaus Restaurant
6052 State Route 128
P.O. Box 111
Miamitown, Ohio 45041

**RE: NPDES Permit 1PZ00064*BD/OH0118354
Compliance Evaluation Inspection**

Dear Mr. Kreimer:

On August 8, 2012, I met with Dan Wuebbler to inspect the wastewater treatment plant serving this restaurant. Attached is a copy of my inspection report. Please review the issues noted in the comment sections with your contract operator. A Notice of Violation is enclosed within the report which outlines the permit violations during the review period.

The NPDES permit for this facility is set to expire soon. Ohio EPA will be sending you a draft copy of your new 5-year permit during the 30-day public notice period. I believe you should have a copy of it by now. If not, please contact me and I will send you a copy. There are a few new changes to the permit. If you have any questions about the changes or about the inspection report, please call me at (937) 285-6101.

Sincerely,

Mary Osika
Environmental Specialist
Division of Surface Water

MO/ff

Enclosure

cc: Dan Wuebbler, EWS
Dave Ellert, Hamilton County Public Health

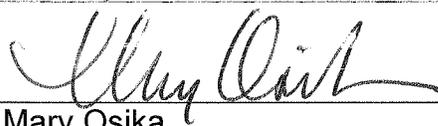
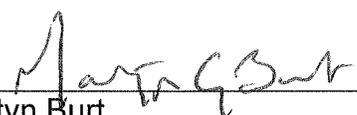


State of Ohio Environmental Protection Agency
Southwest District Office

NPDES Compliance Inspection Report
Semi-Public Sewage Disposal Inspection Form

Section A: National Data System Coding					
Permit #	NPDES#	Month/Day/Year	Inspection Type	Inspector	Facility Type
1PZ00064*BD	OH0118354	8/8/2012	C	S	1

Section B: Facility Data		
Name and Location of Facility Inspected	Entry Time	Permit Effective Date
Kreimer's Bierhaus 6052 State Route 128 Miamitown, Ohio	10:00 am	October 1, 2007
	Exit Time	Permit Expiration Date
	10:50 am	Sept. 30, 2012
Name(s) and Title(s) of On-Site Representatives		Phone Number(s)
Dan Wuebbler, contract operator		(513) 526-1765
Name(s), Address and Title(s) of Operator of Record		Phone Number(s)
Dan Wuebbler, Operator I Environmental Wastewater Service 8054 Blanchetta Drive Cincinnati, Ohio 45239		(513) 526-1765
Name, Address and Title of Responsible Official		Phone Number
Mark Kreimer, Owner 6052 SR 128 P.O. Box 111 Miamitown, Ohio 45041		(513) 353-2168

Ohio EPA Inspector	Ohio EPA Reviewer
 Mary Osika Environmental Specialist Division of Surface Water Southwest District Office	 Martyn Burt Compliance & Enforcement Supervisor Division of Surface Water Southwest District Office
8/16/2012 Date	8/17/2012 Date

Permit # : 1PZ00064*BD

NPDES #: OH0118354

Average Daily Design Flow:	4,860 Gallons/Day
Plant Serves:	Restaurant/bar
Average Daily Flow: (Period of Review):	Gallons/Day ()
Method of flow monitoring:	estimate
Type of alarms for plant:	visual

Pretreatment

Type of Pretreatment: **Trash Trap**
Does the Trash Trap need pumped: **Yes**
Maintenance of pretreatment components is: **Good**

Comments/Status:

The grease trap is pumped out once a month typically. At the time of the inspection, the trap was due to be pumped.

**Secondary Treatment
(Aeration)**

Color of sludge: **Light Brown**
Quality of Sludge: **Medium**
Foam: **None present**
Odor: **No objectionable odor present**

	Yes	No		Yes	No
Aeration is taking place	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plant is septic	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Blowers are operating	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Blowers are on a timer	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Skimmers are operating	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plant is flooded	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Diffusers are operating	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Grating is present	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sludge return is operating	<input checked="" type="checkbox"/>	<input type="checkbox"/>			

Maintenance of aerating equipment is...**Good**

Comments/Status:

The roof over the wastewater treatment plant is too low. There is not enough head clearance. There is poor visibility and no fresh air in the enclosure. The metal grating is rusted and is dangerous to walk on. The entry door is also a safety hazard for workers. These are safety issues that the owner should address for the workers and inspectors that have to enter the housing.

Permit #: 1PZ00064*BD

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**Secondary Treatment
(Settling)**

Clarity: **Cloudy**
Condition of Weir: **Clean**
Weir is level: **Yes**
Effluent in weir: **Light Solids**
Clarifier walls need scraped: **No**

Overall maintenance of settling components is: **Good**

Comments/Status:

Tertiary Treatment

	Yes	No		Yes	No
Surface sand Filters: Slow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Subsurface	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Distribution box operating	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Beds alternated	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Are filters ponding/flooding	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Beds raked	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Sand filters overgrown	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Chlorination present	<input type="checkbox"/>	<input checked="" type="checkbox"/>
UV present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Dechlorination present	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Overall maintenance of components is: **Excellent**

Comments/Status:

Upflow gravel filter present after clarifier.

Sludge Handling/Storage Disposal

Hauler name: **Ace**
Disposal Site: **MSD-Cincinnati**
Sludge wasted from: **Clarifier**
How often is sludge wasted: **2/year**
Sludge drying beds: **No** Sludge holding tank: **No**

Overall maintenance of components is: **N/A**

Comments/Status:

Permit # : 1PZ00064*BD

NPDES #: OH0118354

Plant Discharge

Discharge point is a: **River**
Name of discharge point: **Great Miami**
Discharge is visible: **No**

Quality of Effluent: **Clear**

Comments/Status:

Checked sample port, no discharge seen.

Operator Requirements

Operator Class requirement: I Comply: **Yes**
Operator Log Book: **No**
Records checked: **Chain of Custody for Lab Samples**

Comments/Status:

The operator needs to keep a log book at the site noting name of facility, time in/out, maintenance done and samples taken.

The chain of custody form needs to identify the person taking the samples and the lab name and address. There should be information on preservative methods used on the samples. The owner should keep the final copy of the chain of custody as part of the records for the NPDES permit.

The attached General Lab Criteria should be reviewed by the owner and contract operator to ensure that all applicable procedures are followed for sampling and analysis of wastewater at this treatment plant.

Permit #: 1PZ00064*BD

NPDES #: OH0118354

Notice of Violation

During the period of review, the following NPDES permit violations were noted. Please be advised that failure to comply with the terms and conditions of your NPDES permit may be cause for enforcement action resulting in monetary penalties.

**EFFLUENT LIMIT VIOLATIONS
(Period of Review: 6/1/2010 – 7/1/2012)**

Permit No	Reporting Period	Station	Reporting Code	Parameter	Limit Type	Limit	Reported Value	Violation Date
1PZ00064*BD	June 2010	001	00610	Nitrogen, Ammonia (NH3	30D Conc	1.0	1.1	6/1/2010
1PZ00064*BD	June 2010	001	00300	Dissolved Oxygen	1D Conc	6.0	5.4	6/2/2010
1PZ00064*BD	August 2010	001	00610	Nitrogen, Ammonia (NH3	30D Conc	1.0	1.1	8/1/2010
1PZ00064*BD	June 2011	001	00610	Nitrogen, Ammonia (NH3	30D Conc	1.0	1.4	6/1/2011
1PZ00064*BD	June 2011	001	50060	Chlorine, Total Residu	1D Conc	0.019	.1	6/1/2011
1PZ00064*BD	August 2011	001	00610	Nitrogen, Ammonia (NH3	30D Conc	1.0	1.1	8/1/2011
1PZ00064*BD	March 2012	001	00530	Total Suspended Solids	30D Conc	12	16.	3/1/2012
1PZ00064*BD	March 2012	001	80082	CBOD 5 day	30D Conc	10	12.	3/1/2012
1PZ00064*BD	June 2012	001	00610	Nitrogen, Ammonia (NH3	30D Conc	1.0	1.2	6/1/2012

**MONITORING VIOLATIONS
(Period of Review: 6/1/2010 – 7/1/2012)**

Permit No	Reporting Period	Station	Reporting Code	Parameter	Sample Frequency	Expected	Reported	Violation Date
1PZ00064*BD	June 2010	001	00550	Oil and Grease, Total	1/Quarter	1	0	06/01/2010
1PZ00064*BD	August 2010	001	00400	pH	1/Quarter	1	0	08/01/2010
1PZ00064*BD	August 2010	001	00550	Oil and Grease, Total	1/Quarter	1	0	08/01/2010
1PZ00064*BD	August 2010	001	00300	Dissolved Oxygen	1/Quarter	1	0	08/01/2010
1PZ00064*BD	December 2010	001	00550	Oil and Grease, Total	1/Quarter	1	0	12/01/2010
1PZ00064*BD	March 2011	001	00550	Oil and Grease, Total	1/Quarter	1	0	03/01/2011
1PZ00064*BD	August 2011	001	00550	Oil and Grease, Total	1/Quarter	1	0	08/01/2011
1PZ00064*BD	March 2012	001	00550	Oil and Grease, Total	1/Quarter	1	0	03/01/2012

General Lab Criteria

Criteria	Standard Methods Requirement	Acceptable?		Rating
pH Meter				
<ul style="list-style-type: none"> • Calibration Frequency / Documentation 	<ul style="list-style-type: none"> • 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	
	<ul style="list-style-type: none"> • Logbook maintained² 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> • Minimum of 2 point calibration 	<ul style="list-style-type: none"> • Calibration per manufacturer specification and calibration buffers must bracket anticipated result⁷ 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> • Slope Documentation / Acceptability 	<ul style="list-style-type: none"> • Slope acceptable range indicated on benchsheet² 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> • Buffer Expiration Date 	<ul style="list-style-type: none"> • Buffers must not be expired 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> • Other 	<ul style="list-style-type: none"> • Instrument manual available 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> • Teflon covered magnetic stirrer or equivalent for mixing⁸ 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments:				
Criteria	Standard Methods Requirement	Acceptable?		Rating
Dissolved Oxygen Meter				
<ul style="list-style-type: none"> • Calibration Method 	<ul style="list-style-type: none"> • Air or known DO calibration method¹⁰ 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> • Calibration per manufacturer specification¹⁰ 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> • Calibration Frequency / Documentation 	<ul style="list-style-type: none"> • Logbook maintained² 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> • Calibration verification required at least once each day the meter is used.³ 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> • Other 	<ul style="list-style-type: none"> • Small to no bubble present under membrane (must be smaller than the lead in number 2 pencil)¹¹ 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> • Instrument manual available 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments:				

General Lab Criteria

Criteria	Standard Methods Requirement		Rating
Incubator (CBOD/ E-Coli)			Acceptable?
• Temperature Recordkeeping	• Temperature checked / recorded twice daily for each shelf in use ¹ (E-Coli)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	• Temperature checked / recorded daily ² (CBOD)	<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 ²	<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 accurate to 0.5 Celsius). ¹	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Comments: :			
Criteria	Standard Methods Requirement		Rating
Refrigerator			Acceptable?
• Temperature Recordkeeping	• Temperature Log (thermometer accurate to 0.5 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	
Comments:			

General Lab Criteria

Criteria	Standard Methods Requirement	Acceptable?		Rating
Chlorine Meter				
<ul style="list-style-type: none"> • Calibration Frequency / Documentation 	<ul style="list-style-type: none"> • pH / millivolt meter read to 0.1 mV¹⁵ 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> • 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	
<ul style="list-style-type: none"> • Calibration Method 	<ul style="list-style-type: none"> • Calibration using three iodate solutions 0.2, 1.0, 5.0 milliliters or calibration per manufacturer specification¹⁶ 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> • Standards used for calibration not expired 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> • Slope Documentation / Acceptability 	<ul style="list-style-type: none"> • Calibration curve (acceptable slope) 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> • Other 	<ul style="list-style-type: none"> • Electrode free of deposits and foreign material 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> • Log book being maintained.² 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> • Instrument manual available 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments: :				
<hr/>				
Criteria	Standard Methods Requirement	Acceptable?		Rating
Ammonia Meter				
<ul style="list-style-type: none"> • Calibration Frequency / Documentation 	<ul style="list-style-type: none"> • 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	
	<ul style="list-style-type: none"> • Log book being maintained² 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> • Slope acceptability 	<ul style="list-style-type: none"> • Verify calibration slope is acceptable (per mfg. spec.). 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> • Calibration Method 	<ul style="list-style-type: none"> • 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	
	<ul style="list-style-type: none"> • Standards used for calibration not expired 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<ul style="list-style-type: none"> • Other 	<ul style="list-style-type: none"> • Electrode free of deposits and foreign material 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> • Teflon covered magnetic stirrer or equivalent for mixing¹⁸ 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<ul style="list-style-type: none"> • Instrument manual available 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments: :				

General Lab Criteria

Criteria	Standard Methods Requirement	Acceptable?		Rating
Sample Collection/Handling				
• Sample Labeling	• Samples container labeled (description, date, time, preservative added, initialed). ¹⁹	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Chain of Custody	• Chain of custody (description, date, time, signature). ¹⁹	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
• Other	• Composite samples refrigerated during sample collection ¹⁴	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Equipment blanks utilized ¹⁴	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• SOP for cleaning of sampling equipment	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Logbook being maintained ²	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Comments:

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 ²	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Comments:

Criteria	Standard Methods Requirement	Acceptable?		Rating
Bench sheets				
• General criteria	• Date(s) ²	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Analyst initials ²	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Blue or black ink pen ²	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	• Calibration information ²	<input type="checkbox"/> Yes	<input 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 type="checkbox"/> Yes	<input type="checkbox"/> No	

Comments:

General Lab Criteria

Criteria	Standard Methods Requirement	Acceptable?		Rating
Hot Water Bath (Fecal Coliform/E. Coli)				
<ul style="list-style-type: none"> • Temperature Recordkeeping 	<ul style="list-style-type: none"> • Temperature Log (thermometer accurate to 0.2° C)²¹ 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> • Incubator temperature 44.5° C ± 0.2°^{21/24} 		
<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 maintained² 	<input type="checkbox"/> Yes	
<ul style="list-style-type: none"> • Water Level 	<ul style="list-style-type: none"> • 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				
<ul style="list-style-type: none"> • All apparatus utilized is adequately sterilized before use 	<ul style="list-style-type: none"> • Sterilizing temperature 121° C²⁵ 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> • 10 to 30 minutes time based on material being sterilized²⁶ 	<input type="checkbox"/> Yes	
<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 used¹ 	<input type="checkbox"/> Yes	
<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 maintained² 	<input type="checkbox"/> Yes	
<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 stearotherophilus</i> in spore strips, suspensions, or capsules¹ 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Comments:				

General Lab Criteria

Criteria	Standard Methods Requirement	Rating
Final Effluent Temperature Monitoring		Acceptable?
• General Criteria	• Thermometer calibrated annually with NIST traceable thermometer ^{1,2}	<input type="checkbox"/> Yes <input type="checkbox"/> No
	• Thermometer accurate to 0.1° Celsius ⁵	<input type="checkbox"/> Yes <input type="checkbox"/> No
	• Log book being maintained ²	<input type="checkbox"/> Yes <input type="checkbox"/> No
Comments:		
Number of Criteria Rated:		Acceptable
		Marginal
		Unacceptable
		Total Number of Areas Rated
<p>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).</p>		
<p>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).</p>		
<p>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).</p>		
Consider recommending PAI Audit from DES when:	<p>>60% of ratings are Marginal >45% of ratings are a combination of Marginal or Unacceptable >30% of ratings are Unacceptable</p>	

Notation of Referenced Method

- | | |
|----------------------------|------------------------------|
| 1 Method 9020-B, Item 3 | 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-A, 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.

General Lab Criteria

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
NH ₃ -N	P, G	500	G, C	Analyze as soon as possible or add H ₂ SO 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 ₂ SO ₄ to pH <2, Refrigerate $\leq 6^{\circ}\text{C}$	28 d	28 d

Approved Standard Methods	
CBOD / BOD 5 Day	Std Methods 5210-B
Ammonia, Selective Electrode Method	Std Methods 4500-NH ₃ 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