Ohio Environmental Protection Agency
John R. Kasich, Governor
Mary Taylor, Lt. Governor
Scott J. Nally, Director

Re: Mercer County
The Fremont Company
IDP Inspection

March 7, 2012

Mr. James Fox, Manager
The Fremont Company
802 North Front Street
Fremont, Ohio 43420

Dear Mr. Fox:

On February 9, 2012, an inspection was made of the pretreatment facilities serving The Fremont Company Rockford Plant. Mr. Jim Gibson was present and provided information and a tour of the facility.

We are in receipt of your self-monitoring reports covering the months of January 2010 through June 2011. Our review indicates violations of the limits established in your Indirect Discharge Permit and these violations are enclosed with this letter.

We are happy to see that there has been some improvement in your compliance. You continue to work with the Village of Rockford in an effort to determine if an upgrade to their treatment system would be adequate to bring you into compliance with the limits in your permit. We have not received any information recently on this decision. If we do not receive this information in a timely manner, we will have no choice but to refer your facility for escalated enforcement action.

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 M Sharp

Michelle M. Sharp
Division of Surface Water

/jlm
Enclosure
pc: Jim Gibson, Plant Manager, The Fremont Company Rockford Plant
ec: Ryan Laake, DSW, CO
Inspection Tracking

Northwest District Office
347 North Dunbridge Road
Bowling Green, OH 43402-9398

419 | 352 8461
419 | 352 8468 (fax)
www.epa.ohio.gov

Violation Date	Station	Reporting Code	Parameter	Limit Type	Limit	Reported Value
1/12/2010	002	80082	CBOD 5 day	1D Conc	2160	2550.
1/12/2010	002	00402	pH, Minimum	1D Conc	5.0	4.5
1/26/2010	002	00402	pH, Minimum	1D Conc	5.0	4.6
2/9/2010	002	00402	pH, Minimum	1D Conc	5.0	4.6
2/23/2010	002	00402	pH, Minimum	1D Conc	5.0	4.7
3/9/2010	002	80082	CBOD 5 day	1D Conc	2160	2190.
3/9/2010	002	00402	pH, Minimum	1D Conc	5.0	4.5
3/23/2010	002	80082	CBOD 5 day	1D Conc	2160	2810.
3/23/2010	002	00402	pH, Minimum	1D Conc	5.0	4.4
4/13/2010	002	80082	CBOD 5 day	1D Conc	2160	2710.
4/13/2010	002	00402	pH, Minimum	1D Conc	5.0	4.8
4/27/2010	002	00402	pH, Minimum	1D Conc	5.0	4.7
5/11/2010	002	00402	pH, Minimum	1D Conc	5.0	4.2
5/25/2010	002	00402	pH, Minimum	1D Conc	5.0	4.5
7/20/2010	002	80082	CBOD 5 day	1D Conc	2160	3350.
8/3/2010	002	00402	pH, Minimum	1D Conc	5.0	4.8
8/18/2010	002	80082	CBOD 5 day	1D Conc	2160	2290.
8/18/2010	002	00402	pH, Minimum	1D Conc	5.0	4.6
9/1/2010	002	00402	pH, Minimum	1D Conc	5.0	4.8
9/28/2010	002	00402	pH, Minimum	1D Conc	5.0	4.7
10/12/2010	002	00402	pH, Minimum	1D Conc	5.0	4.8
10/28/2010	002	80082	CBOD 5 day	1D Conc	2160	2340.
10/28/2010	002	00402	pH, Minimum	1D Conc	5.0	4.8
11/9/2010	002	00402	pH, Minimum	1D Conc	5.0	4.9
11/30/2010	002	80082	CBOD 5 day	1D Conc	2160	2410.
11/30/2010	002	00402	pH, Minimum	1D Conc	5.0	4.7
12/7/2010	002	00402	pH, Minimum	1D Conc	5.0	4.7
12/22/2010	002	80082	CBOD 5 day	1D Conc	2160	3220.
12/22/2010	002	00402	pH, Minimum	1D Conc	5.0	4.7
1/4/2011	002	00402	pH, Minimum	1D Conc	5.0	4.66
1/18/2011	002	00402	pH, Minimum	1D Conc	5.0	4.63
3/2/2011	002	00402	pH, Minimum	1D Conc	5.0	4.64
3/16/2011	002	00402	pH, Minimum	1D Conc	5.0	4.52
3/30/2011	002	00402	pH, Minimum	1D Conc	5.0	4.88
4/5/2011	002	00402	pH, Minimum	1D Conc	5.0	4.53
5/17/2011	002	00402	pH, Minimum	1D Conc	5.0	4.6
5/24/2011	002	00530	Total Suspended Solids	1D Conc	490	1130.
5/24/2011	002	00402	pH, Minimum	1D Conc	5.0	4.53
6/7/2011	002	00402	pH, Minimum	1D Conc	5.0	4.61
6/22/2011	002	80082	CBOD 5 day	1D Conc	2160	2260.
6/22/2011	002	00402	pH, Minimum	1D Conc	5.0	4.59

OhioEPA

PRETREATMENT INSPECTION REPORT

Ohio Environmental Protection Agency

FACILITY NAME	PERMIT NUMBER	FACILITY NUMBER
The Fremont Company Rockford Plant	*2DP00082*	

INSPECTION TYPE	INSPECTOR	FACILITY TYPE	DATE CONDUCTED
P	*M.Sharp*	*2*	*February 9, 2012*

GENERAL INFORMATION

NAME AND LOCATION OF FACILITY
The Fremont Company Rockford Plant
150 Hickory Street
Rockford, Ohio 45882

MAILING ADDRESS OF FACILITY
The Fremont Company
802 North Front Street
Fremont, Ohio 43420

CONTACT (NAME/TITLE/PHONE)
Mr. Jim Gibson / Plant Manager / 419-363-2924 Ext. 108

FACILITY EVALUATION

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

NA	Pretreatment	S	Chemical Storage
S	Site/Facility Review	M	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	
Michelle Sharp		3/6/12
Signature of Reviewer Thomas Poffenbarger Thomas Poffenbarger, P.E.	Ohio EPA/NWDO/419-373-3000	Date 3/5/12

INDUSTRIAL USER INSPECTION CHECKLIST

Facility:	The Fremont Company Rockford Plant	Date of inspection: February 9, 2012
OH Number:	OHP000226	IDP Number: 2DP00082
Facility Representative:	Mr. Jim Gibson	Inspector(s): Ms. Michelle Sharp

COMPLIANCE

1. Date of last pretreatment inspection: March 10, 2010

2. Has the facility been in compliance with its permit limits since the last inspection? Y
   If no, explain:
   Has been in compliance 90% of the time

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:
   The facility's compliance has improved.

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: 54
6. Shifts/Day: 3 Shifts
7. Production Days/Year: 270
8. Hours/shift: 8-9 Hour
9. Any production changes since the last inspection? Y
   If yes, explain:
   Added a steak sauce line.

10. General facility description and operations:
    Food processing plant (tomato ketchup and BBQ sauce), heated cooking & packaging, and warehousing.

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? N
    If yes, explain:

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? NA

    If batch, list the frequency and duration:

17. Who is responsible for operating the treatment system? NA

18. How often is the treatment system checked? NA

19. Is there an alarm system for the system? NA
    Explain:

20. Is there an operations and maintenance manual? NA

21. Is an inventory of critical spare parts maintained? NA
    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? N

Method of disposal:

Frequency and amount of disposal:

Name of hauler/landfill/disposal facility:

Is any sludge generated subject to RCRA regulations? NA

If land applying sludge, is there a sludge management plan? NA

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. East		47000	50,000		
2. West		8300	6,000		
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
Total Regulated Process Flow		55300	55300		
Non-contact Cooling					
Blowdown					
Boiler Condenstate		40% of	East Flow		
Demineralizer Regeneration					
Filter Backwash					
Compressor Condensate					
Storm Water					
Other Dilute Flows					
Unregulated Flows (provide list)					
Sanitary		50 People	2 Sanitary Lines		
TOTAL FLOW					

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: East Manhole & West Manhole

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? Measured

    If measured, how often is the meter calibrated? Once per year

    If estimated, describe method of estimation:

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	NA
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: Jones and Henry

TOXICS MANAGEMENT

35. Are any listed toxic organics used in the facility? N
    If yes, identify organics:

36. Does the facility have a current toxic organic management plan(TOMP)? NA
    If yes, is it being implemented? NA

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? N
    If yes, does the facility have a written plan? NA

39. Identify any potential slug load or spill areas:

REQUIRED FOLLOW-UP ACTIONS