



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

July 31, 2013

Mr. William Donohue, Plant Manager
PCS Purified Phosphates – Cincinnati
10818 Paddy's Run Road
Harrison, Ohio 45030

**RE: Compliance Evaluation Inspection
NPDES Permit 1IE00001*GD/OH0009211**

Dear Mr. Donohue:

On July 9, 2013, Joe Miller and I conducted a compliance evaluation inspection at the PCS Purified Phosphates facility on Paddy's Run Road. Attached is a copy of my inspection report. All areas evaluated were rated acceptable, with the exception of effluent quality, which was rated marginal, due to the recent permit violations. A notice of violation is included in the Summary of Findings at the end of the report. No response to this inspection is necessary.

I've also included a General Lab Criteria check list for our inspections of on-site labs that perform analytical tests for reported effluent quality. Please have your lab staff review the applicable sections for compliance with the approved methods.

If you have any questions regarding the report or my inspection, please contact me at (937) 285-6101 or at Mary.Osika@epa.ohio.gov.

Sincerely,

A handwritten signature in cursive script, appearing to read "Mary Osika", is written over a horizontal line.

Mary Osika
Environmental Specialist II
Division of Surface Water

MO/tb

Enclosures



State of Ohio Environmental Protection Agency
Southwest District Office

NPDES Compliance Inspection Report

| Section A: National Data System Coding | | | | | |
|--|-----------|----------------|-----------------|-----------|---------------|
| Permit # | NPDES# | Month/Day/Year | Inspection Type | Inspector | Facility Type |
| 1IE00001*GD | OH0009211 | 7/9/2013 | Compliance | State | Industrial |

| Section B: Facility Data | | |
|--|------------|------------------------|
| Name and Location of Facility Inspected | Entry Time | Permit Effective Date |
| PCS Purified Phosphates – Cincinnati 10818 Paddy's Run Road Harrison, Ohio | 12:30 pm | October 1, 2011 |
| | Exit Time | Permit Expiration Date |
| | 2:55 pm | September 30, 2016 |
| Name(s) and Title(s) of On-Site Representatives | | Phone Number(s) |
| Angela Carbonell, Operations/Engineering Superintendent | | (513) 738-7475 |
| Josh Rohman, Laboratory Supervisor | | (513) 738-7472 |
| Donald Nickels, Maintenance Foreman | | (402) 267-2915 |
| Doug Engel, Plant Manager, Joplin Operations | | (417) 626-4440 |
| Name, Address and Title of Responsible Official | | Phone Number |
| William Donohue, Plant Manager PCS Purified Phosphates – Cincinnati 10818 Paddy's Run Road Harrison, Ohio 45030 | | (402) 690-3394 |

| Section C: Areas Evaluated During Inspection | | | | | |
|---|--------------------------|---|---------------------------|---|-------------------------|
| (S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated) | | | | | |
| S | Permit | S | Flow Measurement | N | Pretreatment |
| S | Records/Reports | N | Laboratory | N | Compliance Schedule |
| S | Operations & Maintenance | M | Effluent/Receiving Waters | S | Self-Monitoring Program |
| S | Facility Site Review | S | Sludge Storage/Disposal | N | Other |
| N | Collection System | | | | |

| Section D: Summary of Findings (Attach additional sheets if necessary) | |
|--|--|
| See attached sheet at end of report for Summary of Findings. | |
| Inspector | Reviewer |
| Date: 7/31/2013 | Date: 8/1/13 |
| Mary Osika Environmental Specialist Division of Surface Water Southwest District Office | Martyn Burt Compliance & Enforcement Supervisor Division of Surface Water Southwest District Office |

Sections E thru K: Complete on all inspections as appropriate
Y – Yes, N – No, N/A – Not Applicable, N/E – Not Evaluated

Section E: Permit Verification

Inspection observations verify the permit

- (a) Correct name and mailing address of permittee Y
- (b) Correct name and location of receiving waters..... Y
- (c) Do Categorical Standards apply?...If yes, list applicable standards.. N

40 CFR Part 422 does not apply
- (d) Product(s) and production rates conform with permit application (Industries)..... N/A
- (e) Flows and loadings conform with NPDES permit..... Y
- (f) Treatment processes are as described in permit application... N
- (g) All discharges are permitted..... Y
- (h) Number and location of discharge points are as described in permit..... Y
- (i) Storm water discharges properly permitted..... Y

Comments/Status:

(f) The treatment process in use at the facility is pH neutralization and filtration using powdered cellulose. The facility does not use diatomaceous earth filtration, carbon adsorption or ion exchange for wastewater treatment. The latter two treatment processes were used on a trial basis at the time of the last renewal application.

Section F: Compliance

- (a) Any permit violations since the last inspection..... Y
- (b) Appropriate Non-compliance notification of violations..... Y
- (c) Permittee is taking actions to resolve violations..... Y
- (d) Permittee has a compliance schedule..... N
- (e) Compliance schedule contained in...N/A
- (f) Permittee is in compliance with schedule..... N/A
- (g) Has biomonitoring shown toxicity in discharge since last inspection N/E

Comments/Status:

See Summary of Findings for permit violations.

Section G: Operation & Maintenance

Treatment Works:

Treatment facility properly operated and maintained

- (a) Standby power available.....generator or dual feed Y
- i. What does the back-up power source operate.....

All treatment units
- ii. How often is the generator tested under load.....

weekly
- (b) Which components have an alarm system available for power or equipment failures.....

low/high level indicator lights on control panel

Alarms will be integrated into the new PLC system.
- (c) All treatment units in service other than backup units..... Y
- (d) What method is used for scheduling routine & preventative maintenance (PCS uses PM software.)..... Y
- (e) Any major equipment breakdown since last inspection..... N
- (f) Operation and maintenance manual provided and maintained..... Y
- (g) Any plant bypasses since last inspection..... N
- (h) Any plant upsets since last inspection..... N

Comments/Status:

Viewed small storage tank where pH neutralization occurs with mixing. Viewed plate and frame filter in water treatment building .

Section H: Sanitary Wastewater Disposal / Sludge Management

Method of Sanitary Wastewater Disposal – sewage holding tank, contents hauled 1/week to a publicly owned facility

- (a) Method of Sludge Disposal... Land Application
 Haul to Another NPDES Permittee
 Haul to a Mixed Solid Waste Landfill
 No sludge is produced

Comments/Status:

Section I: Self-Monitoring Program

Flow Measurement:

- (a) Primary/Secondary flow measuring devices operated and maintained..... Y
Type of device (e.g. weir with ultrasonic level sensor):
- (b) Calibration frequency adequate Y
(Date of last calibration: done annually)
- (c) 24-hour recording instruments operated and maintained..... Y
- (d) Flow measurement equipment adequate to handle full range of flows..... Y
- (e) Actual flow discharged is measured..... Y
- (f) Flow measuring equipment inspection frequency
Daily Weekly monthly other

Comments/Status:

Section I: Self-Monitoring Program (con't)

Sampling:

- (a) Sampling location(s) are as specified by permit..... Y
- (b) Parameters and sampling frequency agree with permit..... Y
- (c) Permittee uses required sampling method..... Y
- (d) Monitoring records (i.e., flow, pH, DO) maintained for a minimum of three years including all original strip chart recordings (i.e, continuous monitoring instrumentation, calibration and maintenance records)..... Y

Comments/Status:

Section I: Self-Monitoring Program (con't)

Laboratory:

General

- (a) Does the Quality Assurance Manual contain written Standard Operating Procedures (SOP's) for all analysis performed onsite..... N/E
- (b) Do SOP's include the following if applicable:
- Title
 - Scope and Application
 - Summary
 - Sample Handling and
 - Procedure
 - Calculations
 - Quality Control
 - Maintenance

- Preservation
- Interferences
- Apparatus and Materials
- Reagents
- Corrective Action
- Reference (Parent Method)

Note: Standard Methods 1020A establishes that "Quality assurance (QA) is the definitive program for laboratory operation that specifies the measure required to produce defensible data of known precision and accuracy. "Standard operating procedures are to be used in the laboratory in sufficient detail that a competent analyst unfamiliar with the method can conduct a reliable review and/or obtain acceptable results." SOPs should be developed for each analytical procedure.

- (c) EPA approved analytical testing procedures used (40 CFR 136.3).. N/E
- (d) If alternate analytical procedures are used, proper approval has been obtained..... N/E
- (e) Analyses being performed more frequently than required by permit. N
- (f) If (e) is yes, are results in permittee's self-monitoring report..... N/A
- (g) Satisfactory calibration and maintenance of instruments/equipment. N/E
- (h) Commercial laboratory used..... Y
Parameters analyzed by commercial lab: all except for pH, TSS
Lab name: Cardinal Labs

Discharge Monitoring Report Quality Assurance (DMRQA)

- (a) Participation in latest USEPA quality assurance performance sampling..... N
Date:
- (b) Were any parameters "Unsatisfactory"..... N/A
- (c) Reasons for "Unsatisfactory" parameters.....

Comments/Status:

(g) General Lab Criteria check list is included in the inspection report for facilities that have their own lab and conduct analyses at the sampling station 001. PCS does TSS in lab and pH in line analyzer.

Section J: Effluent/Receiving Water Observations

Outfall # 001

Outfall Description: Final treated effluent pumped from storage tank to river
Receiving Stream: Great Miami River
Receiving Stream Description: River high due to rain, did not go to discharge point at the river.

Comments/Status:

Section K: Multimedia Observations

- (a) Are there indications of sloppy housekeeping or poor maintenance in work and storage areas or laboratories..... N
- (b) Do you notice staining or discoloration of soils, pavement or floors.. N
- (c) Do you notice distressed (unhealthy, discolored, dead) vegetation.. N
- (d) Do you see unidentified dark smoke or dust clouds coming from sources other than smokestacks..... N
- (e) Do you notice any unusual odors or strong chemical smells..... N
- (f) Do you see any open or unmarked drums, unsecured liquids, or damaged containment facilities..... N

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

- (1) What is the cause of the condition?
- (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/Status:

Summary of Findings/Comments

The purpose of the inspection was to determine compliance with the NPDES permit 11E00001*GD, receive an update on status of PCS construction updates at this facility and to go over status of TMDL study on the Great Miami River.

1. Compliance with the NPDES Permit:

During the review period of October 2011 – June 2013 PCS experienced the following 4 permit limit violations:

Notice of Violation

| Parameter | Limit Type | Limit | Reported Value | Violation Date |
|--------------------|------------|--------|----------------|----------------|
| Copper, Total (Cu) | 1D Conc | 80 | 602. | 6/3/2013 |
| Copper, Total (Cu) | 1D Qty | 0.0133 | .03361 | 6/3/2013 |
| | 30D | | | |
| Copper, Total (Cu) | Conc | 51 | 67.5 | 6/1/2013 |
| pH | 1D Conc | 9.0 | 9.1 | 6/19/2013 |

Please be advised that failure to comply with the effluent limitations or reporting requirements of your NPDES permit may be cause for enforcement action pursuant to the Ohio Revised Code Section 6111.

These effluent limit violations occurred recently and have been investigated by PCS Purified Phosphates. PCS discussed the corrective measures that will be taken to prevent the reoccurrence of the violations in correspondence dated June 17, 2013 and during the facility inspection on July 9, 2013.

2. Status of PCS Purified Phosphates construction activities/BMPs:

PCS has completed construction of a new office building, lab and tank farm. The old tank farm still remains for pending demolition. PCS continues to look for possible sources to accept their phosphorus wastewater, utilize recycling, look for leaks, improve housekeeping and provide education and training of staff to prevent violations of the permit. They will program their copper analyzer to automatically stop the discharge if levels approach the permit limit. They are developing SOPs for locking out the manual valve on the discharge line.

Ohio EPA encourages PCS to look at pollution prevention solutions and offers a contact for ideas and assistance. Michael Kelley at Ohio EPA's Office of Pollution Prevention can be contacted at (614) 644-2930 for assistance.

Permit # : 1IE00001*GD
NPDES #: OH0009211

Summary of Findings/Comments, Continued

3. Status of Ohio EPA's TMDL study on the Lower Great Miami River:

The biological report on Ohio EPA's study of the Lower Great Miami River has been published at our website at :

<http://epa.ohio.gov/portals/35/documents/GMR2012TSD.pdf>

The TMDL report for this part of the river is currently nearing completion. Preliminary information indicates that nutrients are causing some non-attainment of use designations downstream from PCS. The agency is currently establishing a nutrient strategy concerning TMDL recommendations and this can be viewed at our website at:

<http://epa.ohio.gov/dsw/dswrules/nutrientcriteria.aspx>

Ohio EPA will contact point source dischargers for stakeholder outreach as part of the TMDL process.

General Lab Criteria

| Criteria | Standard Methods Requirement | | 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 | | 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 |
| | • Thermometer held in water bath. ¹ | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Other | • 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 | | | | |
| • Calibration Frequency / Documentation | • pH / millivolt meter read to 0.1 mV ¹⁵ | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| | • 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 | |
| • Calibration Method | • Calibration using three iodate solutions 0.2, 1.0, 5.0 milliliters or calibration per manufacturer specification ¹⁶ | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| | • Standards used for calibration not expired | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| • Slope Documentation / Acceptability | • Calibration curve (acceptable slope) | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| • Other | • Electrode free of deposits and foreign material | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| | • Log book being maintained. ² | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| | • Instrument manual available | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Comments: : | | | | |

| Criteria | Standard Methods Requirement | Acceptable? | | Rating |
|---|---|------------------------------|-----------------------------|--------|
| Ammonia Meter | | | | |
| • Calibration Frequency / Documentation | • 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 | |
| | • Log book being maintained ² | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| • Slope acceptability | • Verify calibration slope is acceptable (per mfg. spec.). | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| • Calibration Method | • 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 | |
| | • Standards used for calibration not expired | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| • Other | • Electrode free of deposits and foreign material | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| | • Teflon covered magnetic stirrer or equivalent for mixing ¹⁸ | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| | • Instrument manual available | <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) | | | | |
| • Temperature Recordkeeping | • Temperature Log (thermometer accurate to 0.2° C) ²¹ | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| | • Incubator temperature 44.5° C ± 0.2° ^{21/24} | | | |
| • Temperature Calibration / Documentation | • Thermometer calibrated annually with NIST traceable thermometer ^{1,2} | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| | • Log book being maintained ² | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| • Water Level | • 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 | | | | |
| • All apparatus utilized is adequately sterilized before use | • Sterilizing temperature 121° C ²⁵ | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| | • 10 to 30 minutes time based on material being sterilized ²⁶ | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| • Documentation | • 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 | |
| | • Date, contents, sterilization time and temperature, total time in autoclave, and analyst's initials should be recorded each time the autoclave is used ¹ | <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 | |
| | • Log book being maintained ² | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| • Performance Checks | • Test monthly for efficacy using a biological such as commercially available <i>Geobacillus stearothermophilus</i> in spore strips, suspensions, or capsules ¹ | <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 scaled to 0.1° Celsius and accurate to 0.5° C 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: | | >60% of ratings are Marginal >45% of ratings are a combination of Marginal or Unacceptable >30% of ratings are Unacceptable | |

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 |

General Lab Criteria

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.

| 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 |