



INDUSTRIAL WASTE COMPLIANCE INSPECTION REPORT

NPDES / WQM Permit No. <div style="border: 1px solid black; padding: 2px; text-align: center;">PA0002208</div>	Mo/Day/Year <div style="border: 1px solid black; padding: 2px; text-align: center;">09/02/20</div>	Entry Time <div style="border: 1px solid black; padding: 2px; text-align: center;">0900</div>	Exit Time <div style="border: 1px solid black; padding: 2px; text-align: center;">1200</div>	Inspection Type <div style="border: 1px solid black; padding: 2px; text-align: center;">CEI</div>	eFACTS Inspection ID <div style="border: 1px solid black; padding: 2px; text-align: center;">3076501</div>
Facility Name: Shell Chemical Appalachia Petrochemicals Complex			Permittee Name: Shell Chemical Appalachia LLC		
Physical Location Address/Directions: 300 Frankfort Road Monaca PA 15061					
Permittee Address: 300 Frankfort Road Monaca PA 15061			Permit Expiration Date: 6/30/20 Renewal Due Date: 1/2/20		
Municipality: Potter Township		County: Beaver		Type(s) of IW Discharge(s): Groundwater/Stormwater (IWTP in construction)	
Responsible Official: H. James Sewell Title: Environmental Manager			Facility Representative: Jason Schultz Title: Environmental Engineer Waste and Water		
Business Phone: 724-709-2411 Cell Phone: 281.731.3287 Email: jim.sewell@shell.com			Business Phone: 724-709-2501 Cell Phone: 814-227-8934 Email: jason.schultz2@shell.com		
24-Hour Emergency Contact Person / Phone / Email: Shell Security 412-728-0126					
VIOLATIONS*:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> None Identified During Inspection <input type="checkbox"/> Pending Results of Sample Analysis				
--Violations of effluent limits in Part A of the NPDES Permit [25 Pa. Code 92a.44]. Explanation was given in eDMR regarding violations. No further response is necessary.					
<input type="checkbox"/> continued on page B					
Recommendations/Comments:					
--Address slippage issue at 376 south ramp and power lines					
Person Interviewed: Jason Schultz		Date: 9/2/20	Inspector: Shawn P. Bell		Date: 9/2/20
Signature: [Report sent by Email]		Phone No.: 724-709-2442	Signature: <i>Shawn P. Bell</i>		Phone No.: 412-442-4051
Title: Environmental Engineer Waste and Water			Title: Water Quality Specialist		
Email: jason.schultz2@shell.com			Email: shawbell@pa.gov		
This document is official notification that a representative of the Department of Environmental Protection inspected the above facility. The findings of this inspection are shown above and on any attached pages. *Any violations which were noted during the inspection are indicated. Violations may also be discovered upon examination of the results of laboratory analyses of the discharge and/or review of Department records.					

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Comments

This compliance evaluation inspection was conducted for routine monitoring.

Present on behalf of Shell were Jason Schultz Environmental Engineer; Jim Sewell, Environmental Manager; Kimberley Kaal, Environmental Regulatory Lead, and Shawn P. Bell, Water Quality Specialist, PA DEP.

ADMINISTRATIVE REVIEW:

The facility NPDES Permit has been administratively extended. A renewal application was sent to the Department and received on 09/12/2019.

The permit was last amended for a second time on August 17, 2018. The Part II permit #0417201 was amended on Jan 25, 2019.

The following exceedances were indicated on electronic DMRs submitted for monitoring periods of June 2019 through July 2020:

<u>Parameter</u>	<u>Monitoring Period</u>	<u>Outfall</u>	<u>Reported Value</u>	<u>Permit Limit</u>
Total Suspended Solids (Average Monthly)	APR 2019-JUN 2019	015	<35.5 mg/L	30 mg/L
Total Suspended Solids (Daily Maximum)	APR 2019-JUN 2019	015	180 mg/L	100 mg/L

The exceedances at Outfall 015 were attributed to sampling procedures. Additional samples were taken with improved sampling procedures and were compliant. Corrective actions were indicated in the comment section on the eDMR. A violation is noted for these exceedances, as indicated on Page 1. No further explanation is necessary

SITE INSPECTION:

-Construction of the main works site continues to progress, along with the IWTP.

-There will be a phased start up at the site. The IWTP will be on line first. Due to the pandemic, the timeline has been extended approximately a year to 18 months.

-The facility uses water as a dust suppressant and routinely does street sweeping to minimize the dust/solids exposure. They also ensure all vehicles depart the site from one gate to go through a wheel wash to reduce dust/solids from leaving the site.

-The fuel and truck wash out areas were improved due to minor pollution incidents that were reported, contained, and cleaned up. None of these reported events made it to an outfall or receiving stream. The company has added cement in this area to prevent spills from going into the soil and on the ground. Solids from these operations are hauled off site. There are spill kits located throughout the facility.

-Separate PPC plan is used for construction. A new PPC plan will be used once site is operational.

-Outfall 006, 007 Near entrance on the left as you enter the site. Had been cleaned out. There was no discharge currently at any of the outfalls.

-Outfalls 013, 014 were not discharging. These outfalls are in the vicinity of the fueling area.

-Outfall 004 Near AC (Accidentally Contaminated SW Pond) discharges to Poorhouse Run. No discharge currently.

-Outfall 001 will be the main process wastewater outfall. It was just built. Not completed nor discharging at this time.

-Outfall 021 vegetation was planted in this area and seems to have improved the control of sediment and runoff in this area.

- There is a significant amount of slippage at the Monaca exit off 376 traveling south to route 18 that should be addressed. It is near the power lines.



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Facility Description & Regulated Activities	
Industrial Activity: Construction/Pre-Commissioning of petrochemical complex for polyethylene production SIC / NAICS Code(s): SIC 3339	
Wastewater/contaminant source(s): Stormwater & surface runoff exposure during construction activity Planned changes in production and/or industrial activities since last insp: <input checked="" type="checkbox"/> N/A Changes in treatment and/or to facility since last insp: <input checked="" type="checkbox"/> N/A Changes in wastewater quantity or quality since last insp: <input type="checkbox"/> new pollutants <input type="checkbox"/> Increased flow or conc. <input checked="" type="checkbox"/> N/A	
Sanitary discharge to: <input type="checkbox"/> On-site STP, outfall/permit #: <input type="checkbox"/> with IWW <input type="checkbox"/> Onlot <input checked="" type="checkbox"/> Public sewer <input type="checkbox"/> Other: Sewage Compliance Inspection Report attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Separate inspection conducted	
Removed substances: <input type="checkbox"/> Treatment sludge <input type="checkbox"/> Backwash solids <input type="checkbox"/> Screenings <input type="checkbox"/> Spent mat'l/media <input checked="" type="checkbox"/> Other: Hauling/Disposal to: Carbon Limestone Landfill by: Republic Services per permit # 28726 (Part C I. B.)	
Facility/Activities Notes: Vehicle tire wash water is collected and shipped off site. Industrial process remains under construction.	
Compliance & Enforcement History <input type="checkbox"/> N/A	
Schedule in Permit: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A In compliance with schedule: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> could not confirm Violations: Last 12 months or since last inspection: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O Enforcement Actions: Last 12 months or since last CEI: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O Legal Agreement: Consent Order & Agreement, Consent Decree or Order executed: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/O <input type="checkbox"/> N/A Date executed: Obligation(s) due next: Date due: In compliance with legal agreement: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> could not confirm	
Compliance & Enforcement Notes: Compliance schedule is associated with IMP 101 as Outfall 001, which is not yet active.	
Monitoring (NPDES Permit Part A / WQM Permit)	
Influent/Intake sampling location & observations: Multimedia filter on Interim Stormwater Treatment System <input checked="" type="checkbox"/> N/O <input type="checkbox"/> N/A Effluent/Discharge sampling location: Outfalls as applicable After all treatment: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O <input type="checkbox"/> N/A Instream sampling location(s) & observations: <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	
Sample Collection: <input checked="" type="checkbox"/> Manually <input type="checkbox"/> Auto sampler, T: _____, controlled by: <input type="checkbox"/> Flow meter <input type="checkbox"/> Other Type: <input checked="" type="checkbox"/> Grab <input type="checkbox"/> 8-hour comp <input type="checkbox"/> 24-hour comp <input type="checkbox"/> Other Min. aliquot ≥100 ml: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O Composites: <input type="checkbox"/> Flow proportional <input checked="" type="checkbox"/> Time proportional <input type="checkbox"/> Not proportional Sample location, collection, frequency, measurements representative of the monitored activity: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O	
Sample Handling & Analysis: Properly preserved during collection, storage and shipping: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/O Storage temperatures recorded using NIST traceable thermometer: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/O Analyzed within the required holding time: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/O Parameters analyzed, test methods, sample frequencies & types in accordance with permit: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/O	
Monitoring systems: <input type="checkbox"/> SCADA <input type="checkbox"/> PLC <input type="checkbox"/> Continuous meter for _____ Calibrated: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	
On-site Analysis: <input checked="" type="checkbox"/> pH <input checked="" type="checkbox"/> DO <input checked="" type="checkbox"/> TRC <input type="checkbox"/> T <input type="checkbox"/> NPDES parameters <input type="checkbox"/> Process control <input checked="" type="checkbox"/> N/O <input type="checkbox"/> N/A Meters calibrated: pH: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/O <input type="checkbox"/> N/A DO: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/O <input type="checkbox"/> N/A pH buffers current: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/O TRC meter checked against standards: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/O <input type="checkbox"/> N/A	
On-site Laboratory: <input checked="" type="checkbox"/> Registered/Accredited-by-Rule or <input type="checkbox"/> Accredited <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O <input type="checkbox"/> N/A Lab Supervisor (accredited labs): N/O Lab ID: 04-00610 <input type="checkbox"/> N/A Accredited parameters: Multiple <input type="checkbox"/> N/A	
Contract Laboratory & City: Test America--Pittsburgh PA Lab ID: 02-00416 <input type="checkbox"/> N/A Parameters analyzed: All NPDES Parameters except pH, TRC	
Monitoring Notes: Samples are collected by Bechtel and transported to the lab by Quick Courier.	



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Recordkeeping	(NPDES Permit Part A / WQM Permit)
Monitoring Records: Retained on-site / Up to date: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/O Required info recorded: collector, location, sample date/time, analyst, method/QL, results: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/O Data are consistent with data from monitoring system(s) and as reported on the DMR: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/O Records reviewed / parameters confirmed on-site:	
On-Site Logs: Daily operations log: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/O Up-to-date: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/O <input type="checkbox"/> N/A Includes: <input type="checkbox"/> Visual observations <input type="checkbox"/> Process adjustments <input type="checkbox"/> Problems and concerns Routine maintenance log: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/O Repair log: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/O Records, Reports, Logs available: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Retained (3 years): <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O	
Permit(s) at the facility: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O Permit terms and conditions reviewed by responsible official and/or facility representative: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O	
Recordkeeping Notes:	
Reporting	(NPDES Permit Part A / WQM Permit)
Monitoring Reports: <input type="checkbox"/> DMR On time: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/O <input checked="" type="checkbox"/> eDMR Prepared correctly: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O <input checked="" type="checkbox"/> Supplemental Reports & Forms Includes all results: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O Monitoring period reviewed: mon(s)/yr: May 2019/June 2020 Parameters assessed: All	
Annual Report: Date received: May 1, 2020 On time: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O <input type="checkbox"/> N/A Date reviewed: 09/02/20 Report complete & acceptable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O <input type="checkbox"/> N/A	
Notifications to DEP: Planned changes/alterations to production/process reported: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Planned changes/alterations to treatment reported: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Incident reported: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Other required notifications: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Reporting Notes:	
Flow Measurement	(NPDES Permit Part A / WQM Permit) <input type="checkbox"/> N/A
Location(s): Multiple outfalls Effluent measured after all withdrawals: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A System/Device(s): <input checked="" type="checkbox"/> Full Pipe <input type="checkbox"/> Flume, uniform flow, free of debris/deposits: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O <input checked="" type="checkbox"/> Weir, clean with nappe space: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O	
Meter: <input type="checkbox"/> Ultrasonic <input type="checkbox"/> Transducer <input type="checkbox"/> Magnetic <input type="checkbox"/> Bubbler <input type="checkbox"/> Float <input type="checkbox"/> Other: Inspected: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Other: Location: Maximum meter range: MGD	
Recorder: <input type="checkbox"/> Totalizer <input type="checkbox"/> Daily Chart <input type="checkbox"/> 7-Day Chart <input type="checkbox"/> SCADA/Electronic <input type="checkbox"/> Other: Capable of recording design flow: <input type="checkbox"/> Yes <input type="checkbox"/> No Calibration Range:	
Meter/Recorder Operable: <input type="checkbox"/> Yes <input type="checkbox"/> No Maintained (meter, clean & clear): <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O Issues with measurement / recording: <input type="checkbox"/> Yes: <input type="checkbox"/> No <input type="checkbox"/> N/O	
Calibration frequency: <input type="checkbox"/> Semi-annual <input type="checkbox"/> Annual <input type="checkbox"/> Other: Date of last calibration: (N/O)	
Flow Measurement Notes: .Flow data for other discharge points is calculated on Annual Stormwater Inspection Report.	



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Chemical Additives (NPDES Permit Parts B & C / WQM Permit) N/A

Production/process chemical additives used for cleaning, disinfection, maintenance: Yes No N/O N/A
 Name(s), purpose:

Chemical Additives Usage form submitted: Yes No N/O
 Chemical Additives Usage form attached Additive(s) in use approved: Yes No N/O
 New chemicals & changes to product name or formulations submitted & approved: Yes No N/O N/A
 Chemical additive usage restricted to maximum rate: Yes No N/O N/A

Chemical Additives Notes:

Treatment Units/Equipment & Treatment Chemicals (NPDES Permit Part B / WQM Permit) N/A

As-built drawings on-site: Yes No N/O Treatment chemicals used: Yes No N/O N/A
 Units/Equipment per permit: Yes No N/O Treatment chemicals authorized: Yes No N/O

Treatment Unit or Equipment	Total	On-Line	Not Operable	Date Inoperable / Date Expected to Return to Service	Observations/Comments Chemical(s) Used & Purpose
West Pond	1	1	0		
AC Pond	1	1	0		
Diversion Box	1	0	0		
Screens	2	0	0		
Pipe Oil Skimmer	1	0	0		
Oil Sump Pump	1	0	0		66 gpm
Transfer Pumps	2	0	0		1 standby; 1 in service (330 gpm)
Flow Equalization & Oil Removal (FEOR)	2	0	0		88,300 cu ft (22 hrs of dry storage; 12 hrs wet storage)
Oil Skimmers	2	0	0		1 for each FEOR
Recovered Oil Tank	1	0	0		2 days storage
Oil Skimmer Pumps	2	0	0		1 standby; 1 in service (66 gpm)
Reinforce Concret tan to AC pond	1	0	0		
Bioreactors	2	0	0		

Treatment Unit / Equipment Notes:



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Effluent / Receiving Water Evaluation				
Outfall #: 001 Stream: Ohio River				
Effluent Type(s):	Field Measurements: Upstream Outfall Downstream			
Permit Flow, MGD:	Flow, MGD			
DEP Sample Collection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	pH, S.U.			
DEP Collector #:	Conductivity, µmhos/cm			
Sample Date / Time: ____ / ____	Dissolved Oxygen, mg/L			
Sample Location:	Total Residual Chlorine, mg/L			
Temperature, °C				
Outfall Observations: No Discharge; Construction of IWTP not complete				<input type="checkbox"/> Not Observed
Upstream Observations:				<input type="checkbox"/> Not Observed
Downstream Observations:				<input type="checkbox"/> Not Observed
Outfall #: Stream:				
Effluent Type(s):	Field Measurements: Upstream Outfall Downstream			
Permit Flow, MGD:	Flow, MGD			
DEP Sample Collection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	pH, S.U.			
DEP Collector #:	Conductivity, µmhos/cm			
Sample Date / Time: ____ / ____	Dissolved Oxygen, mg/L			
Sample Location:	Total Residual Chlorine, mg/L			
Temperature °C				
Outfall Observations: OK				<input type="checkbox"/> Not Observed
Upstream Observations:				<input checked="" type="checkbox"/> Not Observed
Downstream Observations:				<input checked="" type="checkbox"/> Not Observed
Outfall #: Stream:				
Effluent Type(s):	Field Measurements: Upstream Outfall Downstream			
Permit Flow, MGD:	Flow, MGD			
DEP Sample Collection: <input type="checkbox"/> Yes <input type="checkbox"/> No	pH, S.U.			
DEP Collector #:	Conductivity, µmhos/cm			
Sample Date / Time: ____ / ____	Dissolved Oxygen, mg/L			
Sample Location:	Total Residual Chlorine, mg/L			
Temperature °C				
Outfall Observations:				<input type="checkbox"/> Not Observed
Upstream Observations:				<input type="checkbox"/> Not Observed
Downstream Observations:				<input type="checkbox"/> Not Observed



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Aquaculture Module																																																																																																													
Facility production criteria / designation: <input type="checkbox"/> CAAP <input type="checkbox"/> AAPF <input type="checkbox"/> Seafood with ELGs <input type="checkbox"/> Other:																																																																																																													
Production facility: <input type="checkbox"/> Hatchery <input type="checkbox"/> Fish farm <input type="checkbox"/> Other: <input type="checkbox"/> Cold water <input type="checkbox"/> Warm water																																																																																																													
Species produced:																																																																																																													
Monthly production, lbs: Total: _____ Max: _____ Maximum feeding month: _____ lbs fed: _____ Total pounds raised during most recent production year: _____																																																																																																													
Water source: _____ Intake or ambient monitoring required: <input type="checkbox"/> Yes <input type="checkbox"/> No																																																																																																													
Type of facility system (containment, flow-through, recirculating, net pen, other): _____ Design Flow: _____																																																																																																													
Type(s) and description of rearing units (raceway, pond, tank, net, screen, cages, other):																																																																																																													
Type of real-time feed monitoring system (cameras, sonar, upweller systems, other): <input type="checkbox"/> N/A																																																																																																													
Treatment system in use: _____ Design Flow: <input type="checkbox"/> N/A																																																																																																													
Drug / Chemical Usage: Name(s), Rate(s):																																																																																																													
Chlorine Usage: <input type="checkbox"/> Disinfection <input type="checkbox"/> Other: <input type="checkbox"/> N/A																																																																																																													
Waste removal schedule: _____ Date waste material last removed: _____ Waste handling practices: _____																																																																																																													
Aquaculture Notes:																																																																																																													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;">Complete modules: A, B, C, D, G-Effluent Others as applicable: E-Chem, F-O&M, N-PPC, O&P&Q-BMP, R&S-Photos</th> <th style="width: 5%;">YES</th> <th style="width: 5%;">NO</th> <th style="width: 5%;">N/A</th> <th style="width: 15%;">Unable to Determine</th> </tr> </thead> <tbody> <tr><td>Influent samples collected immediately upstream of production activities.</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Chemical additives identified and approved [complete Page E]</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Drugs, chemicals and usage rates in accordance with NOI or as approved</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>DEP notified regarding the investigation and/or use of animal health drugs that may be discharged</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Drug Use Report submitted, complete and correct [annually for GPs; quarterly for Ind. permits]</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Complete Annual Reports, inc. BMP review, submitted by December 31 (GPs only)</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Monitoring of bypass discharge</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Compliance schedule in permit, or BMP Plan implementation schedule on track</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Hatchery Management Plan (for TSS & water use minimization)</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>PPC Plan available on-site Date updated: _____ [complete & include Page L]</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>BMP plan available on-site Date updated: _____</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Methods for storing and handling chemicals, feed, drugs, and pesticides minimize the potential for pollution to occur</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Equipment and facilities are maintained in an operational condition</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Recordkeeping of feed amounts, cleaning, spills, inspections, repairs, waste removal & disposal</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Discharge of uneaten feed and waste products minimized</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Escape of non-native species prevented</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Proper handling and disposal of animal fatalities</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Proper waste (screenings, sludges) & manure handling, 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G-Effluent Others as applicable: E-Chem, F-O&M, N-PPC, O&P&Q-BMP, R&S-Photos	YES	NO	N/A	Unable to Determine	Influent samples collected immediately upstream of production activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Chemical additives identified and approved [complete Page E]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Drugs, chemicals and usage rates in accordance with NOI or as approved	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DEP notified regarding the investigation and/or use of animal health drugs that may be discharged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Drug Use Report submitted, complete and correct [annually for GPs; quarterly for Ind. permits]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Complete Annual Reports, inc. BMP review, submitted by December 31 (GPs only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Monitoring of bypass discharge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Compliance schedule in permit, or BMP Plan implementation schedule on track	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hatchery Management Plan (for TSS & water use minimization)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PPC Plan available on-site Date updated: _____ [complete & include Page L]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BMP plan available on-site Date updated: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Methods for storing and handling chemicals, feed, drugs, and pesticides minimize the potential for pollution to occur	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equipment and facilities are maintained in an operational condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Recordkeeping of feed amounts, cleaning, spills, inspections, repairs, waste removal & disposal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Discharge of uneaten feed and waste products minimized	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Escape of non-native species prevented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper handling and disposal of animal fatalities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper waste (screenings, sludges) & manure handling, management, disposal and application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personnel trained on proper O&M and in spill prevention and response	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BMPs implemented & maintained [include any other BMPs on Page N]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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INDUSTRIAL WASTE COMPLIANCE INSPECTION REPORT

Cooling Water Module						<input checked="" type="checkbox"/> N/A				
Cooling Water Source: <input type="checkbox"/> Surface water <input type="checkbox"/> Groundwater <input type="checkbox"/> Reuse <input type="checkbox"/> Public water supply Intake or ambient monitoring required: <input type="checkbox"/> Yes <input type="checkbox"/> No Intake/influent field measurement - parameters & results: <input type="checkbox"/> None taken										
Cooling Water Intake Structure: # at facility: <input type="checkbox"/> N/A Controls: <input type="checkbox"/> None <input type="checkbox"/> Bar screen <input type="checkbox"/> Traveling screen <input type="checkbox"/> Pumps <input type="checkbox"/> Fish handling system <input type="checkbox"/> Other:										
Cooling Water System: <input type="checkbox"/> Tower <input type="checkbox"/> Pond <input type="checkbox"/> Heat exchanger <input type="checkbox"/> Other Circulation: <input type="checkbox"/> Once through, dissipation (heat reduction) method: <input type="checkbox"/> Closed cycle recirculation <input type="checkbox"/> N/A <input type="checkbox"/> Reused as process water <input type="checkbox"/> Other:										
Treatment to control: <input type="checkbox"/> Fouling <input type="checkbox"/> Corrosion <input type="checkbox"/> Scale <input type="checkbox"/> Microbiologic <input type="checkbox"/> Other condition: <input type="checkbox"/> N/A <input type="checkbox"/> Chemical addition <input type="checkbox"/> Other treatment: <input type="checkbox"/> Filtration Type: <input type="checkbox"/> Separator <input type="checkbox"/> Screen filter <input type="checkbox"/> Disc filter <input type="checkbox"/> Sand filter										
Seasonal Use: Cooling Water: Days per year: Duration: Frequency: <input type="checkbox"/> N/A Treatment: Days per year: Duration: Frequency: <input type="checkbox"/> N/A										
# of Outfalls:										
Wastewaters:	Discharges to:	Storm drain	Sanitary sewer	Waterway	Other:	Outfall #				
<input type="checkbox"/> Non-contact cooling water		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/> Contact cooling water		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/> Cooling system condensate		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/> Other heat exchanger:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/> Cooling tower blowdown		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/> Boiler blowdown		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/> Scrubber water		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
NCCW / CCW Description:										
Discharge observations: <input type="checkbox"/> Not Observed										
Cooling Systems Notes:										
Also complete pages: A, B, C, D, G										
Others, as applicable/needed: E-Chem/Treatment, F-O&M, N-PPC, O&P&Q-BMP, R&S-Photos										
Cooling water intake structures are operational, operating properly, and maintained							YES	NO	N/A	Unable to Determine
Screenings properly handled and disposed of							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling water systems are operational, operating properly, and maintained							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Blowdown procedure developed and implemented							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Treatment units or equipment operational and maintained [Page E, if needed]							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All chemical additives and treatment chemicals identified and approved [Page E, if needed]							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drift controlled, minimized or eliminated							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PPC or other plan available Date last updated: [use Page L, if needed]							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plan used since last inspection. Date of incident:							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Current staff trained in spill prevention and response Date of last training:							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical storage & handling methods minimize potential pollution incidents							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



INDUSTRIAL WASTE COMPLIANCE INSPECTION REPORT

Groundwater Cleanup Module				<input checked="" type="checkbox"/> N/A
EC&B Program: <input type="checkbox"/> Act 2 Land Recycling <input type="checkbox"/> Storage Tanks, facility ID: <input type="checkbox"/> HSCA <input type="checkbox"/> Other: <input type="checkbox"/> N/A				
Type of Groundwater Contamination: <input type="checkbox"/> Gasoline <input type="checkbox"/> Other petroleum products <input type="checkbox"/> Chlorinated organics <input type="checkbox"/> Other:				
Wells: # Pumping rate(s):				
Influent Sampling: Location: _____ Prior to treatment: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O <input type="checkbox"/> N/A				
Treatment System: <input type="checkbox"/> Pump & Treat <input type="checkbox"/> EQ tank <input type="checkbox"/> Filter <input type="checkbox"/> Activated carbon <input type="checkbox"/> Separators <input type="checkbox"/> Other: Media used:				
Frequency of Operation: Days/week: Hours/day: Seasonal use:				
Criteria / conditions used to determine when the system will be operated and which wells will be operated:				
Treatment Additives used: <input type="checkbox"/> Chemical <input type="checkbox"/> Biological <input type="checkbox"/> N/A Additive name(s): Location(s) & amounts (lbs or gals) of addition:				
Backwash & cleaning wastewater management/disposal, description:				
GWCU Notes:				
Also complete pages A, B, C, D, G, N				
If needed, complete Modules: E-Chems/Treatment, O&P&Q-BMPs, R&S-Photos				
Records related to permitting, operation, and monitoring retained for the minimum time specified in the NPDES permit	YES	NO	N/A	Unable to Determine
Treatment units and equipment are: [Page E, if needed]				
operational	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
operating properly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All chemical additives and treatment chemicals identified & approved [Page E, if needed]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical usage within max rates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemicals properly stored, handled and contained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potential for a spill, leak, or discharge prevented from occurring, especially in areas without secondary containment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Operations and maintenance manuals available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recommended procedures followed, including replacing consumables.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preparedness, Prevention, and Contingency (PPC) plan current, valid, available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Updated within the past 12 months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date of last update:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staff trained in spill prevention and response	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date of last training:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DEP notified of any spills, leaks or discharges since the last DEP inspection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Complete Annual Reports submitted to DEP by January 28 (GPs only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Waste disposal records available (e.g. media, sludge, backwash, spent material).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Retained for at least five (5) years	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



INDUSTRIAL WASTE COMPLIANCE INSPECTION REPORT

Industrial Stormwater Module	(NPDES Permit Part C III.A.)			
No Exposure Certification: Date issued: <input checked="" type="checkbox"/> N/A	Renewal submitted on time: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A			
Applicable SIC Code(s): 3339	PAG-03 Appendices: <input type="checkbox"/> N/A			
Facilities, Materials & Activities exposed to stormwater that could be or are pollutant sources:				
<input type="checkbox"/> Manufacturing & processing materials, activities & equipment (e.g., cleaning, maintenance)			<input type="checkbox"/> N/O	<input checked="" type="checkbox"/> N/A
<input checked="" type="checkbox"/> Material handling station(s) (e.g., loading, unloading, and dispensing bulk materials)			<input type="checkbox"/> N/O	<input type="checkbox"/> N/A
<input checked="" type="checkbox"/> Material storage (stockpiles) and equipment storage area(s)			<input type="checkbox"/> N/O	<input type="checkbox"/> N/A
<input checked="" type="checkbox"/> Fuel storage area(s) / filling stations (e.g., coal piles, tanks for petroleum products)			<input type="checkbox"/> N/O	<input type="checkbox"/> N/A
<input checked="" type="checkbox"/> Waste handling and storage (e.g., dumpsters, empty drums, used oil)			<input type="checkbox"/> N/O	<input type="checkbox"/> N/A
Description(s): Added some cement in fueling area to minimize impact of minor pollution incidents				
Volume or pollutant (nature or quantity of pollutants) changed since last insp:				
same impervious surfaces on-site			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> N/O <input type="checkbox"/> N/A
new bulk chemicals or solid wastes			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> N/O <input type="checkbox"/> N/A
new site alterations prevent off-site flow onto site			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> N/O <input type="checkbox"/> N/A
Authorized non-stormwater discharges occur: <input checked="" type="checkbox"/> Yes (Hydrostatic test water) <input type="checkbox"/> No <input type="checkbox"/> N/O <input type="checkbox"/> N/A				
Stormwater Treatment: <input type="checkbox"/> Oil/Water separator <input type="checkbox"/> Wetlands <input type="checkbox"/> Chemical addition <input type="checkbox"/> N/A				
<input checked="" type="checkbox"/> Other: Various BMPs-Structural & Non-Structural				
Discharge to HQ/EV waters (individual permit req'd): <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/O <input type="checkbox"/> N/A				
ABACT BMPs: <input type="checkbox"/> Treatment BMPs <input type="checkbox"/> Pollution Prevention <input type="checkbox"/> Land Disposal <input type="checkbox"/> Stormwater Reuse				
Type(s) used:				
Also complete pages A, B, C, D, L, O&P-BMP If needed, complete pages: N-PPC, Q-Specific BMPs, R&S-Photos				
protected from exposure to precipitation or runoff	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DEP notified no later than 30 days [general permit] / 45 days [individual permit] prior to changes in facility or activity that effect volume or pollutant concentration	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Structures or devices installed to collect representative samples, if required	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stormwater monitoring & reporting are per the permit requirements	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Record of sample results contains required info [11 items] & retained for 3 years	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effluent limits and benchmark values met	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Semi-annual inspections conducted	Date of latest inspection: Sep 24, 2019			
Annual inspection during a stormwater discharge	Date of latest inspection: Sep 24, 2019			
Inspection & monitoring reports available on-site	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Complete Annual Reports submitted to DEP by May 1 st	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Collected screenings, slurries, sludges & other solids properly handled & disposed of	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unauthorized non-stormwater discharges (includes spills & leaks) prevented	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floor drains / secondary containment discharge to treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Facility clear of excessive dust or air-borne particulates	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potential for leaks, spills & other releases exposed to stormwater minimized	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exposure minimized / prevented in all areas that could be or are pollutant sources	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



INDUSTRIAL WASTE COMPLIANCE INSPECTION REPORT

Industrial Stormwater Module				
	YES	NO	N/A	Unable to Determine
Control measures (BMPs) properly implemented, operated and maintained [see also Page N]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Implemented BMPs effective in preventing runoff contamination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employees/contractors trained, no less than annually, on pollution prevention practices, BMPs & emergency response. Date of last training: 08/2019 [see also Page L]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PPC plan modified to address problems noted during inspections Date modified: MAR 2018	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stormwater specific PPC plan requirements:				
Potential sources of pollutants identified that may affect stormwater discharges	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preventative measures and BMPs identified & implemented to reduce / eliminate pollutants contacting stormwater from routine activities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Areas with high potential for soil erosion identified by permittee	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SARA Title III facilities: Plan identifies releases of "Water Priority Chemicals" in previous 3 yrs Plan includes evaluation of activities that may result in stormwater discharge of Priority Chems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Construction activity stormwater discharges permitted Permit #: Post-construction stormwater management plan available; facilities/BMPs maintained	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Industrial Stormwater Notes: *Exceedances are listed on Page 2.				
Industrial Stormwater Outfall Evaluation				
Number of stormwater outfalls: 16 (Includes IMPs) # of New Added / Identified: 0 # Removed: 4 (See comments below) Number of regulated stormwater outfalls: 16 # evaluated: 11 during inspection				
	Outfall	Upstream	Downstream	
Outfall #: 021 Stream: Poorhouse Run Exposed sources: Fill stored near drainage ditch; Parking lots Treatment: BMP(s) in use: Vegetation and socks Notes: Improved since last inspection with increased vegetation that appears to be doing a better job at capturing runoff/solids.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Outfall #: 006 Stream: Poorhouse Run Exposed sources: Stormwater runoff Treatment: Solids settling BMP(s) in use: Retention--South Pond (Culvert to receiving stream) Notes: Overflow--Outfall 007; Both outfalls had been cleaned out since last visit	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Outfall #: 008 Stream: Poorhouse Run Exposed sources: Stormwater runoff Treatment: Solids settling BMP(s) in use: Retention-West Pond Notes: Overflow--Outfall 009 No discharge at either; Not observed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Industrial Stormwater Outfall Notes: Outfalls 114, 020, 813 and IMP 113 have been removed as part of Amendment 2 to permit PA0002208 dated August 17, 2018.				



INDUSTRIAL WASTE COMPLIANCE INSPECTION REPORT

Industrial Stormwater Outfall Evaluation			
Number of stormwater outfalls: 16		# of New Added / Identified: 0 # Removed: 4	
Number of regulated stormwater outfalls: 16 # evaluated: 11			
	Outfall	Upstream	Downstream
Outfall #: 010 Stream: Poorhouse Run Exposed sources: Treatment: BMP(s) in use: Notes: Outfall 012 is overflow; Not observed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #: 004 Stream: Poorhouse Run Exposed sources: Treatment: BMP(s) in use: Notes: observed pond & outfall; no discharge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #: 005 Stream: Ohio Rlver Exposed sources: A spring discharging from hillside; construction activities Treatment: BMP(s) in use: Notes: Groundwater discharges from Mall Lot 2; not observed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #: 015 Stream: Ohio River Exposed sources: Treatment: BMP(s) in use: Notes: Groundwater Seep; not observed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #: 013, 014 &16 Stream: Ohio River Exposed sources: Treatment: BMP(s) in use: Notes: 016- Not observed; 013-Water is held 5-7 days after rain event, before discharge; No Discharge Outfall 014 is overflow No Discharge	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Outfall #: Stream: Exposed sources: Treatment: BMP(s) in use: Notes:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Industrial Stormwater Outfall Notes: Outfall 002, 003, and 011 were also not observed.			



INDUSTRIAL WASTE COMPLIANCE INSPECTION REPORT

Preparedness, Prevention, and Contingency Plan (PPC)					
Plan(s) in use: <input type="checkbox"/> PPC <input type="checkbox"/> Spill Prevention Control & Countermeasure (SPCC) <input type="checkbox"/> Release Prevention <input type="checkbox"/> Other:					
Significant facility or operational changes that affects discharge potential since last inspection: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/O <input type="checkbox"/> N/A Description of changes:					
Plan used during incident since last inspection: <input type="checkbox"/> Yes, date of use: <input type="checkbox"/> No <input type="checkbox"/> N/O Description of incident:					
YES NO N/A Unable to Determine					
Current PPC plan available on-site	Date of last review/update:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reviewed annually		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plan Contains:					
1. current facility staff list with contact information		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. current DEP phone & emergency numbers		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. site layout drawings locating potential pollutant materials / activities		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. actions to be taken in response to spills or other pollution incidents		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. security measures prevent entry that could result in unintentional pollutant discharge		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. training plan for employees and contractors, at least annually		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. incident reporting procedure		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. procedure to notify DEP and affected entities		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. contact information for upstream and downstream users		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. contractors/companies that would respond to an accident / incident (responsible for cleanup, containment, disposal)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plan Implementation:					
Inspections & monitoring conducted. Records / incident reports available on-site		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Site layout drawings reflect current conditions / activities		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Control measures (containment, access) and response items used and maintained		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spills & leaks: identified substances, cause, remediation, action to prevent occurrences		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Current staff trained on pollution prevention & emergency response measures Date of last training:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DEP notified of spills or pollution incidents		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Failures of plan identified by permittee (since last inspection):		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plan Update: Date of last update: <input type="checkbox"/> N/A					
To correct failures identified during plan use		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To address significant facility or operational changes with pollution potential		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To address needed changes in the emergency response procedure		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
With current list of staff, emergency contacts and equipment		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PPC Plan Notes:					



INDUSTRIAL WASTE COMPLIANCE INSPECTION REPORT

Best Management Practices (BMPs)		(NPDES Permit Part C)				
BMPs applicable to all:	Implemented			Operational		
	YES	NO	Unable to Determine	YES	NO	Unable to Determine
Pollution Prevention and Exposure Minimization:						
1. Grading, berming or curbing used to prevent runoff and to divert run-on away from areas that contain polluted stormwater.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Materials, equipment, and activities located so that potential leaks and spills are contained, able to be contained or diverted before discharge.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Spills and leaks cleaned up promptly using dry methods (e.g., absorbents).	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Leaky vehicles and equipment stored indoors or, if stored outdoors, use drip pans and absorbents.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Spill/overflow protection equipment used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Vehicle and/or equipment cleaning operations performed indoors, under cover, or in bermed areas that prevent runoff & run-on, & also capture any overspray.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Fluids are drained from equipment and vehicles that will be decommissioned. Equipment and vehicles that are unused for extended periods of time, are inspected at least monthly for leaks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Dumpster lids closed when not in use. Discharges are controlled for dumpsters and roll off boxes that do not have lids (e.g., with secondary containment, treatment). Dry weather discharges from dumpsters or roll off boxes prevented.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Contamination of stormwater runoff from fueling areas is minimized: fueling areas covered; oil/water separators or oil and grease traps installed in fueling area storm drains; berms used to prevent run-on to and runoff from fueling areas; spill/overflow protection and cleanup equipment used; dry cleanup methods used; collected stormwater runoff treated and/or recycled.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Employees trained (no less than annually) on pollution prevention practices as contained in the PPC Plan.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pollution Prevention and Exposure Minimization Notes: *Items 4, 5, 6, 7, 8 & 10 were not directly observed during this inspection but general compliance was noted						
Good Housekeeping						
1. A routine cleaning and maintenance program implemented for: impervious areas where particulate matter, dust or debris may accumulate; and areas where material loading & unloading, storage, handling & processing occur.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Materials stored in appropriate containers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Discharge of waste, garbage and floatable debris minimized by keeping exposed areas free of them, or by intercepting them before they are discharged.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Floor drain connections to storm sewers are eliminated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Drip pans, drain boards and drying racks are used to direct drips back into a fluid holding tank for reuse. Fluids are drained from all equipment and parts prior to disposal. Used fluids are promptly transferred to the proper container. Drip pans and containers are emptied and cleaned.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Waste materials (oil, solvents, batteries, etc) are labeled & recycling is tracked.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Hosing down an area is prohibited where the practice would result in the discharge of pollutants to a municipal or other stormwater collection system that conveys pollutants off-site unless proper treatment is provided.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good Housekeeping Notes: Wheel wash area is operational. *Items 1, 2, 5, & 6 were not directly observed during this inspection but general compliance was noted. Item 4 was not applicable at the time of this inspection.						



INDUSTRIAL WASTE COMPLIANCE INSPECTION REPORT

Best Management Practices (BMPs)		(NPDES Permit Part C)					
BMPs applicable to all:		Implemented			Operational		
		YES	NO	Unable to Determine	YES	NO	Unable to Determine
Erosion & Sediment Controls:							
1. Erosion and pollutant discharges minimized by stabilizing exposed soils. Flow velocity dissipation devices placed at discharge locations that minimize channel and stream bank erosion and scour in the immediate vicinity of outfalls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Earth disturbances are conducted, and any post-construction stormwater management BMPs are maintained, in accordance with Ch. 102.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Written permission obtained from DEP to use polymers or other chemicals to treat stormwater.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Erosion & Sediment Controls Notes: *Item 3 was not applicable at the time of this inspection.							
Spill Prevention & Response:							
1. Organized inventory maintained of materials on-site. Containers susceptible to spillage or leakage labeled.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Material storage and handling procedures implemented: secondary containment & barriers between material storage and traffic areas, or a similar means to prevent the discharge of pollutants from these areas.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Employee and contractor training developed on the procedures for expeditiously stopping, containing, and cleaning up leaks, spills, and other releases. Training conducted no less than annually and documented.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Spill kits on-site, located near areas where spills may occur or where a rapid response can be made.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Appropriate facility personnel notified when a leak, spill, or other release occurs.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Number and amount of hazardous materials & waste eliminated or reduced by substituting non or less hazardous materials.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Leaks, drips & spills cleaned up without using large amounts of water / cleaners. Absorbents used for dry cleanup whenever possible.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spill Prevention & Response Notes: *Item 1: Material Inventory was not reviewed during this inspection. I also observed no containers susceptible to spills or leaks that were not labeled.							
BMP Comments							
Pumping is anticipated for removal of accumulated pond sediments.							



INDUSTRIAL WASTE COMPLIANCE INSPECTION REPORT

Best Management Practices (BMPs)	(NPDES Permit Part C)					
Facility-specific or Sector-specific BMPs	Implemented			Operational		
	YES	NO	Unable to Determine	YES	NO	Unable to Determine
1. Install & use dust control/collection systems around materials handling & transfer activities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Perform all mixing, pouring, cutting and molding activities in buildings with dust control systems.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Store flux materials in enclosed silos or buildings, or otherwise cover materials susceptible to erosion and wind entrainment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Provide for reclamation of/or erosion control on historic waste piles.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facility or Sector Specific BMPs Notes: Sector- and Site-Specific BMPs are listed on Page 67 of the current NPDES Permit (Amendment 1). Required BMPs correspond to Appendix B of the General Stormwater Permit (NPDES PAG 03). *BMP 2: Washout area was observed-Conditions OK. Solids are hauled offsite weekly; area is continuously monitored.						

INDUSTRIAL WASTE COMPLIANCE INSPECTION REPORT

Photographs



Improved vegetation vicinity Outfall 021; view uphill from outfall



View downhill of vicinity Outfall 021



Rip rap and vegetation Outfall 021



Outfall 001

INDUSTRIAL WASTE COMPLIANCE INSPECTION REPORT

Photographs



Outfall 004