### New York State Department of Environmental Conservation

### Division of Environmental Remediation

Bureau of Hazardous Site Control, Room 252 50 Wolf Road, Albany, New York 12233-7010

Phone: (518) 457-8807 • FAX: (518) 457-8989

Website: www.dec.state.ny.us



November 29, 2000

Mr. Dan Hoffman
Industrial Wastes Chemist
Oneida County
Department of Water Quality
& Water Pollution Control
51 Leland Avenue
P.O. Box 442
Utica, New York 13503-0442

Re:

Groundwater Permit No. GW-040, Semi-Annual Report: May 30, 2000 to November 30, 2000, Formerly City of Utica, Primoshield Plating, Inc., Site #6-33-027, Onieda

**County Sewer District** 

Dear Mr. Hoffman:

This letter is to inform you that the semi-annual report for the above-referenced site will be delayed due to mechanical failure of the pump on the day we visited the site to collect samples earlier this month. We are in the process of bidding a contract to perform the repairs so that the site is operating as soon as possible. As soon as the site is operating, we will collect samples and submit the report.

In addition, until further notice, please send reporting requirements notices and reporting forms to Jack Marsch, NYSDEC Region 6 Sub-Office, Division of Environmental Remediation, State Office Building, Utica, NY 13501. Jack's office phone number is (315) 793-2554.

If you have any questions on this matter, you can call me at (518) 457-0927. Thank you for your understanding.

Sincerely,

Susan M. Lasdin, P.E. Environmental Engineer 2

Susan MLosd

Operations and Maintenance Section
Bureau of Hazardous Site Control

Division of Environmental Remediation

cc: D. Sweredoski, Region 6, Watertown

J. Marsch, Region 6 Sub-Office, Utica

J. Rider, Chief, Operations and Maintenance Section

C. Hoffman, BHSC

G. Momberger, BHSC

T. Koch, BHSC

R. Lupe, Bureau of Program Management

Premosheld Ste # 633027 11/00 PoTW sample

## DIVISION OF ENVIRONMENTAL REMEDIATION

SAMPLING FORMS CHECKLIST

	from Billsolo
DY .	Fill out LAB WORK REQUEST form to obtain a lab assignment. This applies to central office personnel only. Sue did called lab 10/30/00 bottles toarrive up 11/3/00
	Fill out SAMPLE CONTAINER LOG after verifying types and quantities received and send to Burton Pine in room 252. The lab's sample container request form can be used in place of the DER form.
	Save AIRBILL (bill of lading) from lab for shipping sample kit to you. Write site name on the airbill and send a copy to Burton Pine.
<u> </u>	Fill out a CONTRACT LAB SAMPLE INFORMATION SHEET, form 74-15-1, for each sample. enclosed blanks w/ copies from 4/10/00 event.
	Fill out the CONTRACT LAB CHAIN OF CUSTODY form. Send a copy to Burton Pine.
	Fill out an AIRBILL for shipping samples to the lab. Write the site T & A CODE in area 1, REFERENCE NUMBER (for UPS Airbill) or in area 4, BILLING REFERENCE (for Airborne Express Airbill).  Send a copy of the airbill to Burton Pine.
	Send the GREEN copy of the SAMPLE INFORMATION SHEET and the CHAIN OF CUSTODY FORM with the samples to the lab.
	Send the WHITE copy of the SAMPLE INFORMATION SHEET TO Sue Barbuto in room 392 at 50 Wolf Road.
	Retain the YELLOW copy of the SAMPLE INFORMATION SHEET for your file and send a copy to Burton Pine.



# ONEIDA COUNTY DEPARTMENT OF WATER QUALITY & WATER POLLUTION CONTROL

51 Leland Ave, PO Box 442, Utica, NY 13503-0442 (315)-798-5656 FAX 724-9812

Ralph J. Eannace, Jr.
County Executive

Steven P. Devan, P.E. Commissioner

SUSAN M. LASDIN NYSDEC-DIV ENV REMED 50 WOLF ROAD ALBANY NY 12233 PRIMOSHIELD c/o NYSDEC GW-040 1212 ST.VINCENT ST UTICA NY 13501

October 1, 2000

Re: Semi-Annual Report Requirements

Oneida County Groundwater Discharge Permits require that self-monitoring reports and certification statements be submitted on a semi-annual basis; the report due dates are May 31 and November 30 of each year.

Every day a report is late is considered a Violation of Pretreatment Standards. In addition to daily violations, the Federal General Pretreatment Regulations [40 CFR 403.8(F)(2)(vii)] have defined reports late by more than thirty (30) days as being in "Significant Non-Compliance" (SNC).

To avoid possible enforcement actions because of late reports, take your semi-annual self-monitoring samples well in advance of the due date to allow for the turn-around time necessary to receive the results from your contract laboratory.

Note: As a result of USEPA & NYSDEC pretreatment audits the OCSD requires that your contract laboratory include a method reference and chain of custody information with all analytical reports. The laboratories are required to use methods listed in 40 CFR 136 for pretreatment compliance monitoring.

Please disregard this notice if you have already submitted your report.

Sincerely,

THE ONEIDA COUNTY DEPARTMENT OF WATER QUALITY & WATER POLLUTION CONTROL

R.D. Hoffman

Industrial Wastes Chemist



### ONEIDA COUNTY SEWER DISTRICT REPORTING FORM

Submit To: ATTN: PRETREATMENT ONEIDA COUNTY SEWER DISTRICT PO BOX 442 UTICA NY 13503		From NYSDEC DIV ENV REMEDIATION HAZARDOUS SITE CONTROL, ROOM 260 A 50 WOLF ROAD ALBANY NY 12333-7010		Site PRIMOSHIEL  1212 ST. VINC UTICA NY 13	ENT STREET
REPORTING PERIOD:		to			
SAMPLING RESULTS:					
For Semi-Annual Reporting listed. Attach signed Report		e of the Primoshield Site	discharge to the sanital	ry sewer is analyzed	for the pollutants
In response to any violation consecutive sampling events resampling result is due with Attach signed Report Certification ATTACH COPIES OF ALL SHIPMENTS FOR THE RE	s which are in f hin thirty (30) of cation.  CONTRACT	till compliance with Perrolays; a complete report was LABORATORY REPORT	nit Limits. Submit all r vith all three resamplin	esults for all sample g results is due withi	s taken. The first n sixty (60) days.
POLLUTANT PARAMETER	DAILY MAXIMUM LIMIT	ANALYSIS SAMPLE #1	ANALYSIS SAMPLE #2	ANALYSIS SAMPLE #3	
Date Sampled	LIMIT	<del></del>		<del></del>	
Sample Number	T -				
Discharge Flow (Note 1)	<del> </del>	<del></del>			
pH	5.0-12	5			
Cadmium, mg/L	1.0				-
Chromium, mg/L	5.0				
Copper, mg/L	3.0			<del>                                     </del>	
Lead, mg/L	5.0				
Nickel, mg/L	2.0				
Zinc, mg/L	4.0				
Cyanide, mg/L	3.0				
Total VOCs (Note 2)					
1) Attach monthly flow total 2) Total VOCs using EPA M					
Signature:		Date:			

## ONEIDA COUNTY SEWER DISTRICT INDUSTRIAL USER REPORT CERTIFICATION

Submit To: ATTN: PRETREATMENT	From NYSDEC DIV ENV REMEDIATION	Site PRIMOSHIELD SITE				
	HAZARDOUS SITE CONTROL, ROOM 260A	1212 ST.VINCENT STREET				
PO BOX 442	50 WOLF ROAD	UTICA NY 13501				
UTICA NY 13503	ALBANY NY 12333-7010					
ATTACH TO REPORT DATED:						
REPORTING PERIOD:	to					
The following certification of information provided in industrial user reports is made in compliance with the General Pretreatment Regulations.						
1. Compliance or Non-Compliance Status:	Ref = 40 CFR 403.12(b)(6)					
Check A or B. If B is checked, attach a statement describing O&M and/or pretreatment required; include the shortest schedule by which you can provide the required O&M and/or pretreatment.						
[ ] A. I certify that Pretreatment Standards	are being met on a consistent basis.					
[ ] B. I certify that Pretreatment Standards are NOT being met on a consistent basis, and that additional operation and maintenance (O&M) and/or additional pretreatment is required to achieve compliance with Pretreatment Standards and Requirements.						
2. Information Certification: Ref = 40 CFR	403.6(a)(2)(ii)					
accordance with a system designed to assure Based on my inquiry of the person or person information, the information submitted is, t	ment and all attachments were prepared under my ender that qualified personnel properly gather and evaluates who manage the system, or those persons directly the best of my knowledge and belief, true, accurate gralse information, including the possibility of fine the possibility of the possibility of fine the possibility of the possibility of the possibility of fine the possibility of the pos	ate the information submitted. y responsible for gathering the te, and complete. I am aware that				
Authorized Signature:						
Title:	······································					
Date:	<del></del>					

PLEASE ATTACH THIS CERTIFICATION TO THE SEMI-ANNUAL & OTHER REPORTS THAT YOU SUBMIT TO THE ONEIDA COUNTY SEWER DISTRICT.

### ONEIDA COUNTY SEWER DISTRICT INDUSTRIAL USER REPORT CERTIFICATION

Submit To: ATTN: PRETREATMENT ONEIDA COUNTY SEWER DISTRICT PO BOX 442 UTICA NY 13503		Site PRIMOSHIELD 1212 ST.VINCENT STREET UTICA NY 13501
ATTACH TO REPORT DATED:		<del>-</del>
REPORTING PERIOD:	to	·
The following certification o reports is made in compliance		
1. Compliance or Non-Complian	ce Status: Ref = 40	CFR 403.12(b)(6)
Check A or B. If B is checked and/or pretreatment required; you can provide the required	include the shortes O&M and/or pretreats	t schedule by which
[ ] A. I certify that Pretreat consistent basis.		being met on a - 110
[ ] B. I certify that Pretreat consistent basis, and t (O&M) and/or additional compliance with Pretreat	tment Standards are that additional oper L pretreatment is re	NOT being met on a
2. Information Certification:	Ref = 40 CFR 403.6(	a)(2)(11)
I certify under penalty of law were prepared under my directing system designed to assure that evaluate the information submit or persons who manage the system responsible for gathering the is, to the best of my knowledge complete. I am aware that there submitting false information,	ion or supervision in qualified personne teed. Based on my interest on those person information, the inguity and belief, true, the are significant procluding the possi	n accordance with a l properly gather and nquiry of the person s directly formation submitted accurate, and enalties for
imprisonment for knowing viola	±1 - 29€ +=	
Authorized Signature:	e san 1967	
Title:		
Date:		

PLEASE ATTACH THIS CERTIFICATION TO THE SEMI-ANNUAL & OTHER REPORTS THAT YOU SUBMIT TO THE ONEIDA COUNTY SEWER DISTRICT.

## Conditions for Acceptance of Wastewater Discharged from Groundwater Cleanup & Site Remediation:

1. Site Information Required: The Permittee must inform the OCSD of all contaminants found or suspected to be present at the site, and the pretreatment option to be used prior to discharge to the sewers. The Permittee must provide copies of analytical data, and a written descriptive outline about the site and the cleanup procedure. This information was provided in a 02-16-96 letter from O'Brien & Gere Engineers, and is still considered valid by the NYSDEC.

### 2. Monitoring & Reporting:

- a) Self-monitor all permit parameters once every other week for the first two months of discharge, and promptly submit the results as received to the OCSD.
- b) After the two month startup period, perform semi-annual self-monitoring. The semi-annual reports are due May 31 & November 30 of each year.
- c) Based on analytical data for the site, the OCSD waives its standard self-monitoring requirements for Combustible Gas \*LEL, Odor, and Oil & Grease.
- d) Sampling and analysis of the sewered discharge must be performed using methods presented in 40 CFR 136 for Environmental Analysis.
- e) Monthly flow data must be submitted with the semi-annual report. The flow data may consist of actual flow measurements or best engineering estimates.

#### 3. Discharge Limits:

POLLUTANT PARAMETER Total Flow, gal/month pH	LIMIT No Limit 5.0-12.5 1.0	NOTES
Cadmium, mg/L Chromium, mg/L	5.0	
Copper, mg/L Lead, mg/L	3.0 5.0	
Nickel, mg/L Zinc, mg/L	2.0 4.0	
Cyanide, mg/L Total VOCs, mg/L	3.0 2.0	a,b

- a) Total Volatile Organics is the sum of all detectable VOCs substances as determined using the EPA 624 Method.
- b) As the OCSD does not accept RCRA Hazardous Waste, individual VOCs (see list in 9-b of this permit) must not exceed concentrations listed in the TCLP Regulation (40 CFR 261.24 Table 1).
- 4. Other Approvals Prior To Discharge: As each Town, Village or City discharging to the OCSD owns the sewer lines and collection system, the Permittee must obtain permission from the local governing Municipality in which the cleanup project site is located, to discharge the wastewater into their Municipal sewers.

- 5. Charges and Fees: Rates are established through County Legislation.
  Billing will be handled separately from permitting, with the current
  rates as follows:
  - a) Permit Administrative Fee: \$100 for all or part of the period January 1 thru December 31.
  - b) Volume Charge: A semi-annual charge based on the volume of wastewater discharged, as measured and reported by the Permittee. The 1997 rate is \$1.58 per 1,000 gallons. If rate changes occur, written notification will be sent.
  - c) Late Payment Charge: 10% will be added to all charges which are paid after the late date posted on the bill. Failure to make timely payment may result in permit revocation.
- 6. Permit Changes: The OCSD unconditionally reserves the right to amend or rescind this approval without prior notice.
- 7. Wastewater Not Approved by This Permit: Wastewater stored in containers other than treatment system process tanks cannot be directly discharged to the sewer system as a groundwater discharge. It must be hauled under NYSDEC Part 364 & OCSD Hauler Permits for discharge at the designated Hauler Manhole at the OCSD Plant, or hauled to a NYSDEC permitted disposal facility.
- 8. Fines and Penalties: Failure to follow any Permit conditions can result in Enforcement & Penalties against the Permittee as provided for in Local Law No.4 of 1994, the Oneida County Sewer Use Rules & Regulations.
- 9. Special Permit Conditions:

Clarification & Additions to Standard Permit Conditions:

- a) All wastewater generated from this Superfund site clean-up must be pretreated through carbon columns prior to discharge to the sewers.
- b) The contaminants listed below were stored on site, or detected in soil and/or groundwater samples: Cadmium, Chromium, Lead, Nickel, Zinc, Cyanide; VOCs including Trichloroethene (TCE), 1,1,1-Trichloroethane (TCA), 1,1,1-Dichloroethane (DCA), and Methylene chloride.
- c) The following pollutant groups were below detectable limits: 'Acid Extractable/Base Neutral (EPA Method 625) and Pesticide/PCBs (EPA Method 608).
- d) The OCSD requires construction of a monitoring facility for taking representative samples of the discharge using manual grab sampling techniques. The sample taps were described in the 02-16-96 O'Brien & Gere application letter.