

## NIAGARA FALLS WATER BOARD WASTEWATER FACILITIES ENFORCEMENT DIVISION

#### SELF-MONITORING REPORT SIGNIFICANT INDUSTRIAL USERS

PERMIT NO. <u>49</u>

QUARTER <u>3rd 2016</u>

INDUSTRY NAME: \_\_\_\_Occidental Chemical Corporation, c/o Glenn Springs Holdings, Inc.

Pursuant to federal pretreatment reporting requirements and the Niagara Falls Water Board Regulations Part 1960, Significant Industrial Users shall submit periodic self-monitoring and compliance reports. Such reports shall be submitted using this form, according to the following schedule:

Quarterly	- - -	1 <sup>st</sup> Quarter by February 29 <sup>th</sup> 2 <sup>nd</sup> Quarter by May 31 <sup>st</sup> 3 <sup>rd</sup> Quarter by August 31 <sup>st</sup> 4 <sup>th</sup> Quarter by November 30 <sup>th</sup>
Semi-Annual	-	by February 29 <sup>th</sup> and by August 31 <sup>st</sup>

Each section of this report form shall be filled out for those parameters listed in Section "C" of the company's Wastewater Discharge Permit. The analysis results must be reported in both concentration and mass. In addition, the calculated annual average load (lbs/day) for each pollutant shall also be reported.

The samples shall be collected at the monitoring points identified in the user permit. Identification of those points in this report should be as listed on page two (2) of the User Permit.

# SELF-MONITORING REPORT Significant Industrial Users (SIUs)

### PAGE 2

PART II of the report is the Compliance Monitoring section. The user is obligated to determine if the analysis results indicates compliance. All violations noted should be brought to the Niagara Falls Water Board – Wastewater Facilities attention immediately upon noting and should also be reported in this section. The analysis result should be compared against all applicable federal, state, and local standards and limitations. If no violations are noted then **"NO VIOLATIONS"** should appear on the report.

Pursuant to 40 CFR Part 403.12g of the Federal Standards, all violations noted must be followed up by a sample recollect/analysis and the results submitted to the Niagara Falls Water Board within thirty (30) days of first becoming aware of the violation.

Pursuant to 40 CFR Part 403.12g all Periodic Self-Monitoring Reports must be signed by a "responsible company official" certifying the following statement:

I, certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signed:

Branch

Title:

**Operations Coordinator** 

Date:

August 31, 2016\_\_\_\_

## PART I

# ANALYTICAL RESULTS

SIU PERMIT NAME: Occidental Chemical Corp., c/o Glenn Springs Holdings, Inc.

SIU PERMIT NO.: <u>49</u>

SAMPLE LOCATION: Hyde Park

	RES	ULTS	RES	ULTS	ANNUAL AVERAGE	ANNUAL AVERAGE
	µg/L	/ μg/L	lbs/day	/ Ibs/day	µg/L	lbs/day
DATE SAMPLED: 6/21/2016						
24-HOUR FLOW IN MGD		0.048				
TOTAL PHOSPHOROUS		405		0.162	241	0.142
Vinyl Chloride		490		0.196	303	0.183

#### PART II

## **COMPLIANCE MONITORING**

#### SIU NAME: Occidental Chemical Corporation, c/o Glenn Springs Holdings, Inc.

#### PERMIT NO.: <u>49</u>

					-	
			SAMPLE			TYPE**
VIOLATION		FLOW	POINT	ACTUAL*	PERMIT	LIMIT
PARAMETER	DATE	[MGD]	LOCATION	DISCHARGE	LIMIT	VIOLATED
	DATE		LOCATION	DISCHARCE		VIOLATED
No Violations						

#### NOTES:

- \* Actual discharge list actual analytical results and appropriate units.
- \*\* Type Limit Violated List Type:
- A.A. = Annual Average
- D.M. = Daily Maximum
- L.L. = Local Limits (Regulation 1960.5)

ADMIN\WINWORD\ZAEPFEL\SIU\SELF-MONITORING REPORT FORM - BLANK

#### CHAIN OF CUSTODY RECORD

SHIP TO (LABORATORY NAME):										SAMPLE RESULTS REPORTING TO:													
CRA / GLENN SPRINGS ALS				HYDE PARK QUARTERLY EFFLUENT										Joel S	el Spring								
1565 Jefferson Road, Building 300, Sui					ite 360										Fax: (7	716) 283	-2856 Pho	one: (716) 99	8-6975				
Rochester, New York 14623						1												th Street	t				
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Hyde Park SAMPLER(S)				JS			1	bel Om															
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06/20/16	10:00 AM	HP62116 EFFE	3			X			2		2		Comp	osite A	<u>, В, С</u>	and D	In Lab			AS MARKI			
06/20/16	2:00 PM	HP 62116 EFFC	2			X			2		2	L	Comp	osite A	., B, C	and D	In Lab			PHENOL 8oz AG			
06/21/16	7:00 AM	HP62116 EFFI	)			x			2		2	<b>_</b>	Comp	osite A	<u>, В, С</u>	and D	In Lab			* Bottles:			
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