



**NIAGARA FALLS WATER BOARD
WASTEWATER FACILITIES
ENFORCEMENT DIVISION**

**SELF-MONITORING REPORT
SIGNIFICANT INDUSTRIAL USERS**

PERMIT NO. 49

QUARTER 1st 2017

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 st Quarter by February 28 th |
| | - | 2 nd Quarter by May 31 st |
| | - | 3 rd Quarter by August 31 st |
| | - | 4 th Quarter by November 30 th |
| Semi-Annual | - | by February 28 th |
| | | and |
| | - | by August 31 st |

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: _____



Title: Operations Coordinator

Date: February 28, 2017_____

ANALYTICAL RESULTS

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

SIU PERMIT NO.: 49

SAMPLE LOCATION: Hyde Park

[illegible]

COMPLIANCE MONITORING

PERMIT NO.: 49

NOTES:

L.L. = Local Limits (Regulation 1960.5)

Page 1 of 1

DATE **R1613097** **5**
GHD Services Inc.
Hyde Park 273-402-D02-3100

A standard 1D barcode is located at the bottom of the label, below the company name and address.



Cooler Receipt and Preservation Check Form

R1613097

5

GHD Services Inc.
Hyde Park 273-402-D02-3100Project/Client GHD Folder Number _____Cooler received on 12/14/16 by: @COURIER: ALS UPS FEDEX VELOCITY CLIENT

1	Were Custody seals on outside of cooler?	<u>(Y)</u> N
2	Custody papers properly completed (ink, signed)?	<u>(Y)</u> N
3	Did all bottles arrive in good condition (unbroken)?	<u>(Y)</u> N
4	Circle: <u>Wet Ice</u> Dry Ice Gel packs present?	<u>(Y)</u> N

5a	Perchlorate samples have required headspace?	Y N <u>(NA)</u>
5b	Did VOA vials, Alk, or Sulfide have sig* bubbles?	Y <u>(N)</u> NA
6	Where did the bottles originate?	<u>ALS/ROC</u> CLIENT
7	Soil VOA received as: Bulk Encore 5035set	<u>(NA)</u>

8. Temperature Readings Date: 12/14/16 Time: 1410 ID: IR#7 (IR#8) From: Temp Blank Sample Bottle

Observed Temp (°C)	<u>0.1</u>	<u>0.4</u>	<u>0.7</u>	<u>0.9</u>	<u>1.3</u>	<u>0.9</u>	
Correction Factor (°C)	<u>+2.0</u>	<u>+0.8</u>	<u>+0.8</u>	<u>+0.9</u>	<u>+2.0</u>	<u>+0.8</u>	
Corrected Temp (°C)	<u>2.1°</u>	<u>1.2°</u>	<u>1.5°</u>	<u>1.8°</u>	<u>3.3°</u>	<u>1.7°</u>	
Within 0-6°C?	<u>(Y)</u> N	<u>(Y)</u> N	<u>(Y)</u> N	<u>(Y)</u> N	<u>(Y)</u> N	<u>(Y)</u> N	Y N
If <0°C, were samples frozen?	Y N	Y N	Y N	Y N	Y N	Y N	Y N

If out of Temperature, note packing/ice condition: _____ Ice melted _____ Poorly Packed _____ Same Day Rule _____

& Client Approval to Run Samples: _____ Standing Approval _____ Client aware at drop-off _____ Client notified by: _____

All samples held in storage location: R-002 by @ on 12/14/16 at 1425
5035 samples placed in storage location: _____ by _____ on _____ at _____Cooler Breakdown: Date: 12/14/16 Time: 1655 by: @

- Were all bottle labels complete (i.e. analysis, preservation, etc.)? (YES) NO
- Did all bottle labels and tags agree with custody papers? (YES) NO
- Were correct containers used for the tests indicated? (YES) NO
- Were 5035 vials acceptable (no extra labels, not leaking)? (YES) NO
- Air Samples: Cassettes / Tubes Intact _____ Canisters Pressurized _____ Tedlar® Bags Inflated (NA)

Explain any discrepancies: _____

pH	Reagent	Yes	No	Lot Received	Exp	Sample ID	Vol. Added	Lot Added	Final pH
≥12	NaOH								
≤2	HNO ₃								
≤2	H ₂ SO ₄	<u>✓</u>		<u>Client</u>					
<4	NaHSO ₄								
Residual Chlorine (-)	For CN Phenol and 522			If +, contact PM to add Na ₂ S ₂ O ₃ (CN), ascorbic (phenol).					
	Na ₂ S ₂ O ₃	-	-						
	ZnAcetate	-	-						
	HCl	**	**	<u>4115022</u>					

Yes=All samples OK

No=Samples were preserved at The lab as listed

PM OK to Adjust: _____

**Not to be tested before analysis – pH tested and recorded by VOAs on a separate worksheet

Bottle lot numbers: Client 6-195-001

Other Comments: _____

CLRES	BULK
DO	FLDT
HPROD	HGFB
HTR	LL3541
PH	SUB
SO3	MARRS
ALS	REV

PC Secondary Review: _____

*significant air bubbles: VOA > 5-6 mm : WC > 1 in. diameter