

0019



State of Utah

JON M. HUNTSMAN, JR.
Governor

GARY HERBERT
Lieutenant Governor

Department of
Environmental Quality

Richard W. Sprott
Executive Director

DIVISION OF WATER QUALITY
Walter L. Baker, P.E.
Director

JKC/007/042 Incoming

August 28, 2008

Mr. Michael Blakey, Plant Manager
Sunnyside Cogeneration Associates
P.O. Box 10
East Carbon, Utah 84520

Subject: Compliance Evaluation Inspection – UPDES Permit No. UTG040025.

Dear Mr. Blakey:

On August 26, 2008 I conducted an inspection in regards to the Star Point Coal Refuse Pile facility and UPDES Permit No. UTG040025. Specifically I observed the sedimentation ponds and outfall locations, and receiving streambed while already in the area. The interview portion of the inspection was conducted with Mr. Rusty Netz of your facility. No deficiencies were observed and no response is required at this time.

Enclosed is a copy of the inspection reports for your records. I appreciate the compliance efforts of you and Mr. Netz in regards to your UPDES Permit. If you have any questions, please contact me at (801) 538-6779 or by e-mail at jstudenka@utah.gov.

Sincerely,

Jeff Studenka, Environmental Scientist
UPDES IES Section

Enclosures

cc (w/encl): Jennifer Meints, EPA Region VIII
Claron Bjork, SE District Health Department
Dave Ariotti, SE District Engineer
Daron Haddock, Division of Oil Gas & Mines

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DIV. OF OIL, GAS & MINING

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United States Environmental Protection Agency
Washington, D.C. 20460

Water Compliance Inspection Report

Section A: National Data System Coding (i.e., ICIS)

Transaction Code N	NPDES U T G 0 4 0 0 2 5	yr/mo/day 0 8 0 8 2 6	Inspection Type C	Inspector S	Fac. Type 2
1	2	3	11	12	17
Remarks					
21					66
Inspection Work Days 2	Facility Self-Monitoring Evaluation Rating 4	BI N	QA N	Reserved	
67	69	70	71	72	80

Section B: Facility Data

Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number) Sunnyside Cogeneration Associates Star Point Coal Mine Refuse Pile Facility Wattis, Utah	Entry Time/ Date 12:30 pm/ 8-26-2008	Permit Effective Date 5-1-2008
	Exit Time/ Date 1:10 pm/ 8-26-2008	Permit Expiration Date 4-30-2013
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) Rusty Netz, Environmental Coordinator Sunnyside Cogeneration Associates (435) 888-4476	Other Facility Data (e.g., SIC NAICS, and other descriptive information) SWPPP on site and last updated April 2007. Former Coal Mining Operations SIC Code 1222 NAICS 212112 SEE ATTACHED	
Name, Address of Responsible Official/Title/Phone and Fax Number Michael Blakey, Plant Manager Sunnyside Cogeneration Associates #1 Power Plant Road Sunnyside, UT 84539 (435) 888-4476	Contacted <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Section C: Areas Evaluated During Inspection (Check only those areas evaluated)

<input checked="" type="checkbox"/> Permit	<input checked="" type="checkbox"/> Self Monitoring Program	<input type="checkbox"/> Pretreatment	<input type="checkbox"/> MS4
<input checked="" type="checkbox"/> Records/Reports	<input type="checkbox"/> Compliance Schedule	<input type="checkbox"/> Pollution Prevention	
<input checked="" type="checkbox"/> Facility Site Review	<input type="checkbox"/> Laboratory	<input checked="" type="checkbox"/> Storm Water	
<input checked="" type="checkbox"/> Effluent/Receiving Waters	<input checked="" type="checkbox"/> Operations & Maintenance	<input type="checkbox"/> Combined Sewer Overflow	
<input checked="" type="checkbox"/> Flow Measurement	<input type="checkbox"/> Sludge Handling/Disposal	<input type="checkbox"/> Sanitary Sewer Overflow	

Section D: Summary of Findings/Comments

(Attach additional sheets of narrative and checklists, including Single Event Violation codes, as necessary)

SEV Codes	SEV Description

Name(s) and Signature(s) of Inspector(s) JEFF STUDENKA, ENVIRONMENTAL SCIENTIST <i>Jeff Studenka</i>	Agency/Office/Phone and Fax Number(s) DWQ (801) 538-6779	Date: 8-28-08
Name and Signature of Management Q A Reviewer MIKE HERKIMER, MANAGER UPDES IES SECTION <i>Mike Herkimer</i>	Agency/Office/Phone and Fax Number(s) DWQ (801) 538-6058	Date: 8/28/08



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Washington, D.C. 20460

Water Compliance Inspection Report

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Remarks					
27					
Inspection Work Days 2	Facility Self-Monitoring Evaluation Rating 4	BI N	QA N	Reserved	
67	69	70	71	72	73 74 75 76 77 78 79 80

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Name, Address of Responsible Official/Title/Phone and Fax Number Michael Blakey, Plant Manager Sunnyside Cogeneration Associates #1 Power Plant Road Sunnyside, UT 84539 (435) 888-4476	<input type="checkbox"/> Not Contacted <input checked="" type="checkbox"/> Contacted Yes No	

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Name and Signature of Management Q A Reviewer MIKE HERKIMER, MANAGER UPDES IES SECTION 	Agency/Office/Phone and Fax Number(s) DWQ (801) 538-6058	Date: 8/28/08

INSPECTION PROTOCOL

UPDES Permit #: UTG040025 – Sunnyside Cogeneration Associates Star Point Coal Pile
Inspection Type: Compliance Evaluation Inspection (CEI) + Storm Water Inspection
Inspection Date: August 26, 2008

Jeff Studenka of the Division of Water Quality (DWQ) visited the Star Point Coal Refuse Pile while already in the area and then conducted the interview portion with Rusty Netz, Environmental Coordinator for Sunnyside Cogeneration Associates (SCA). The purpose for the site visit was explained and a compliance evaluation inspection was performed since the permit coverage was recently renewed. The U.S. EPA Region 8 NPDES Inspection Checklist was completed following a tour of the facility.

FACILITY DESCRIPTION

Location: Former Star Point Mine Site in Wattis, Utah off State HWY. 122 in Carbon County.

Coordinates: Outfall 005 – 39° 31' 38.91" latitude, -111° 00' 41.23" longitude (Pond 5)
Outfall 006 – 39° 31' 47.64" latitude, -111° 00' 14.11" longitude (Pond 6)
Outfall 009 – 39° 31' 37.36" latitude, -111° 00' 33.30" longitude (Pond 9)

Average Flow: 0.0 MGD (only 1 minor discharge in past five years from heavy rainfall Nov. 2004)

Receiving water: Serviceberry Creek (dry)

Processes: Refuse coal from the former Star Point mine is managed by SCA and is regularly trucked to their cogeneration power plant in Sunnyside. Three sedimentation ponds remain on the reclaimed site to capture surface water from runoff events. Over the past five years, there has been only one discharge event. Outfalls 005 & 006 discharged one day in November 2004 from a storm event.

INSPECTION SUMMARY

There were no deficiencies noted during the last inspection for follow up. The outfall locations were observed as well as the dry receiving streambed of Serviceberry Creek. DMR data from the last discharge event for November 2004 were compared to the laboratory bench sheets. Flows and pH are measured on site. Flow is manually calculated with a 5-gal. bucket and stopwatch at the discharging outfall pipe and pH is instantaneously measured with a pH meter calibrated quarterly and before any sampling events. Samples are collected and sent to SGS Labs in nearby Huntington for TSS, TDS, settleable solids, and Oil & Grease. Information provided on the DMR was consistent with the data reported on the bench sheets. The appropriate parameters and numbers of samples were collected as specified in the permit. The Storm Water Pollution Prevention Plan was also verified and current, updated in April 2007 and is kept at SCA offices in Sunnyside, Utah.

USEPA REGION 8 NPDES INSPECTION CHECKLIST

NPDES PERMIT #: UT 600025

INSPECTION DATE: 8-26-08

FACILITY: Sunnyside Cogen's Star Point Refuse Coal Pile
RUSTY NETZ - ENV. Coordinator

on site: 12:30 pm
off site: 12:45 pm →
phone interview → 1:10 pm

I. PERMIT VERIFICATION

YES NO Inspection observations verify information contained in permit.

Yes No N/A 1. Current copy of permit on site.

Yes No N/A 2. Name, mailing address, contact, and phone number are correct in PCS. If not, indicate correct information on Form 3560.

3. Brief description of the wastewater treatment plant:

3 sedimentation ponds for surface water precipitation runoff events.
ALL 3 cleaned out in 2007.

Yes No N/A 4. Facility is as described in permit. If not, what is different? _____

Yes No N/A 5. EPA/State has been notified of any new, different, or increased loading to the WWTP.

Yes No N/A 6. Number and location of discharge points are as described in the permit. 3 (cos, cob + cog)

Yes No N/A 7. Name of receiving water(s) is/are correct. Serviceberry Creek (dry)

Comments:

Permit coverage recently renewed 5-1-08.

II. RECORDKEEPING AND REPORTING EVALUATION

YES NO Records and reports are maintained as required by permit.

Yes No N/A 1. All required information is current, complete, and reasonably available. (@ Sunnyside Cogen offices)

Yes No N/A 2. Information is maintained for the required 3 year period.

3. Sampling and analysis data are adequate and include: Nov. 2007 discharge + sampling event from storm runoff

Yes No N/A a. Dates, times, locations of sampling.

Yes No N/A b. Initials of individual performing sampling.

Yes No N/A c. Referenced analytical methods and techniques in conformance with 40 CFR Part 136.

Yes No N/A d. Results of analyses and calibration.

Yes No N/A e. Dates of analyses (and times if required by permit).

Yes No N/A f. Initials of person performing analyses.

Yes No N/A g. Instantaneous flow at grab sample stations. manual calculation + estimate

- Yes No N/A 4. Sampling and analysis completed on parameters specified in permit.
- Yes No N/A 5. Sampling and analysis done in frequency specified by permit.

Comments: *only one sampling/discharge event upon file review (Nov. 2004 storm event)*

YES NO **DMR completion meets the self-monitoring reporting requirements.**
 Yes No N/A 1. Monitoring for required parameters is performed more frequently than required by permit. Parameter(s) _____

Yes No N/A 2. Analytical results are consistent with the data reported on the DMRs.

Yes No N/A 3. All data collected are summarized on the DMR.

Yes No N/A 4. Monthly, weekly, and/or daily average loading values are calculated properly and reported on the DMR. *(Effluent loadings are calculated using effluent flow.)*

Yes No N/A 5. The geometric mean is calculated and recorded for fecal coliform data.

Yes No N/A 6. Weekly and monthly averaging is calculated properly and reported on the DMR. *TSS*

Yes No N/A 7. The maximum and minimum values of all data points are reported properly.

Yes No N/A 8. The number of exceedances column (No. Ex.) is completed properly.

Comments: *Nov. 2004 DMR audited*

I. WHOLE EFFLUENT TOXICITY TESTING AND REPORTING

No WET testing requirements

ES NO *N/A* WET sampling by permittee adequate to meet the conditions of the permit.

- es No a. Chain of custody used.
- es No b. Method of shipment and preservation adequate *(iced to 4°C)*.
- es No c. Type of sample collected _____ *(as required by permit)*.
- es No d. Holding time met *(received w/in 36 hours)*.

es No N/A 2. Lab reports/chain of custody sheets indicate temperature of sample at receipt by lab.
 a. Indicate temperature _____

es No N/A 3. Permittee has copy of the latest edition of testing methods or Region 8 protocol. *(Latest version is July 1993 - Colorado has its own guidance.)*

es No N/A 4. Permittee reviews WET lab reports for adherence to test protocols.

es No N/A 5. Lab has provided quality control data, i.e., reference toxicant control charts.

Yes No N/A
Yes No N/A
Yes No N/A

- 6. Permittee has asked lab for QC data.
- 7. Permittee maintains copies of WET lab reports on site for required 3 year period, and makes them available for review by inspectors.
- 8. Evaluation and review of WET data by permittee adequate such that no follow up at lab is necessary. (Follow up to be conducted by EPA and/or State.)

Comments:

No WET testing requirements

IV. FACILITY SITE REVIEW

YES NO

Treatment facility properly operated and maintained.

Yes No N/A

- 1. Standby power or other equivalent provision is provided. Specify type:

No power on site or requirements for power

Yes No N/A

- 2. Facility has an alarm system for power or equipment failures. What kind of problems has the facility experienced due to power failures? _____

No equipment on site, no power.

Yes No N/A

- 3. Treatment control procedures are established for emergencies.

Yes No N/A

- 4. Facility can be by-passed (internal, collection system, total). Describe by-pass procedures: _____

Yes No N/A

- 5. Regulatory agency was notified of any bypassing (treated and/or untreated).

Dates: _____

Yes No N/A

- 6. WWTP has adequate capacity to ensure against hydraulic and/or organic overloads.

YES NO N/A

- 7. All treatment units, other than back-up units, are in service. If not, what and why?

3 sedimentation ponds all in service

YES NO N/A

- 8. O&M manual available and up-to-date. monthly inspections, cleaning, etc

YES NO N/A

- 9. Procedures for plant O&M, including preventive maintenance schedules, are established and performed on time. sed. pond maintenance records kept

Yes No N/A

- 10. Adequate spare parts and supplies inventory (including flow meters) are maintained, as well as major equipment specifications and/or repair manuals. No equipment on site

Yes No N/A

- 11. Up-to-date maintenance and repair records are kept for major pieces of equipment.

No equipment on site

12. Number of qualified operators and staff.

How many?	Certification Level
_____	_____
_____	_____
_____	_____

N/A

Yes No N/A 13. Certification level meets State requirement?

14. What procedures or practices are used to train new operators? N/A

V. SAFETY EVALUATION

YES NO Facility has the necessary safety equipment.

Yes No N/A 1. Procedures are established for identifying out-of-service equipment. What are they?
N/A - no equipment on site

Yes No N/A 2. Personal protective clothing provided (safety helmets, ear protectors, goggles, gloves, rubber boots with steel toes, eye washes in labs).

Yes No N/A 3. Laboratory safety devices (eyewash and shower, fume hood, proper labeling and storage, pipette suction bulbs) available.

Yes No N/A 4. Plant has general safety structures such as rails around or covers over tanks, pits, or wells. Plant is enclosed by a fence. No lab on site
NOT enclosed by fence

Yes No N/A 5. Portable hoists for equipment removal available.

Yes No N/A 6. All electrical circuitry enclosed and identified.

Yes No N/A 7. Chlorine safety is adequate and includes:

- a. NIOSH-approved 30-minute air pack.
- b. All standing chlorine cylinders chained in place.
- c. All personnel trained in the use of chlorine.
- d. Chlorine repair kit.
- e. Chlorine leak detector tied into plant alarm system.
- f. Ventilation fan with an outside switch.
- g. Posted safety precautions.

Yes No N/A 8. Warning signs (no smoking, high voltage, nonpotable water, chlorine hazard, watch-your-step, and exit) posted. N/A

Yes No N/A 9. Gas/explosion controls such as pressure-vacuum relief valves, no smoking signs, explosimeters, and drip traps present near anaerobic digesters, enclosed screening or degritting chambers, and sludge-piping or gas-piping structures. N/A

Yes No N/A 10. Emergency phone numbers listed.

Signage + at offices

Yes No N/A 11. Plant is generally clean, free from open trash areas.

Yes No N/A 12. MSDS sheets, if required, are accessible by employees. *at Sunnyside offices*

Comments:

VI. FLOW MEASUREMENT

YES NO FLOW MEASUREMENT MEETS THE REQUIREMENTS AND INTENT OF PERMIT

A. PRIMARY EFFLUENT FLOW MEASUREMENT - *infrequent/rare discharges from severe storm runoff events only.*

1. General

Type of primary flow measurement device: manual calculations w/ bucket + stopwatch

Yes No N/A 1. Primary flow measuring device is properly installed and maintained.

Where? At each outfall upon any discharges

Yes No N/A 2. Flow measured at each outfall. Number of outfalls: 3 (005, 006 + 009)

IF needed
3. Frequency of routine inspection of primary flow device by operator:
_____ /day. n/a

4. Frequency of routine cleaning of primary flow device by operator:
_____ /week. n/a

Yes No N/A 5. Influent flow is measured before all return lines.

Yes No N/A 6. Effluent flow is measured after all return lines.

Yes No N/A 7. Proper flow tables are used by facility personnel.

8. Design flow: _____ mgd. 3 separate sed. ponds

Yes No N/A 9. Flow measurement equipment adequate to handle expected ranges of flow rate.

2. Open Channel Primary Flow Measuring Devices

Flumes

Type and size: n/a EFF

Yes No N/A 1. Flume is located in a straight section of the open channel, without bends immediately upstream or downstream.

Yes No N/A 2. Flow entering flume appears reasonably well distributed across the channel and free of turbulence, boils, or other distortions.

Yes No N/A 3. Flume is clean and free of obstructions, debris or deposits.

Yes No N/A 4. All dimensions of flume accurate and level.

- Yes No N/A 5. Sides of flume throat are vertical and parallel.
- Yes No N/A 6. Side walls of flume are vertical and smooth.
- Yes No N/A 7. Flume head is being measured at proper location. (Location dependent on flume type - see NPDES Compliance Inspection Manual or ISCO book.)
- Yes No N/A 8. Flume is under free flow conditions at all times. (Flume is not submerged.)

Weirs

Type: n/a EFF

- Yes No N/A 1. Weir is level.
- Yes No N/A 2. Weir plate is plumb and its top edges are sharp and clean.
- Yes No N/A 3. Downstream edge of weir is chamfered at 45°.
- Yes No N/A 4. There is free access for air below the nappe of the weir.
- Yes No N/A 5. Upstream channel of weir is straight for at least four times the depth of water level, and free from disturbing influences.
- Yes No N/A 6. Distance from sides of weir to side of channel at least 2H.
- Yes No N/A 7. Area of approach channel at least 8 x nappe area for upstream distance of 15H. (If not, is velocity of approach too high?)
- Yes No N/A 8. Weir is under free-flow conditions at all times. (Weir is not submerged.)
- Yes No N/A 9. The stilling basin of the weir is of sufficient size and clear of debris.
- Yes No N/A 10. Head measurements are properly made by facility personnel.
- Yes No N/A 11. Weir is free from leakage.

3. Closed Channel Primary Measuring Devices

Electromagnetic Meters

Type and model: n/a EFF

- Yes No N/A 1. There is a straight length of pipe or channel before and after the flowmeter of at least 5 to 20 diameters.
- Yes No N/A 2. There are no sources of electric noise in the near vicinity.
- Yes No N/A 3. Magnetic flowmeter is properly grounded.
- Yes No N/A 4. Full pipe requirement is met.

Venturi Meters

Type and model: n/a EFF

Yes No N/A 1. Venturi meter is installed downstream from a straight and uniform section of pipe?

B. Secondary Flow Measurement

No secondary flow measurements

1. General

1. What are the most common problems that the operator has had with the secondary flow measurement device? _____

Yes No N/A

2. Flow records properly kept.

Yes No N/A

a. All charts maintained in a file.

Yes No N/A

b. All calibration data kept.

Yes No N/A

3. Secondary device calibration records are kept.

a. Frequency of secondary device calibration: _____ / year.

4. Frequency of flow totalizer calibration: _____ / year.

Yes No N/A

5. Secondary instruments (totalizers, recorders, etc.) are properly operated, calibrated, and maintained.

Floats

Type and model: N/A EFF

Bubblers

Type and model: N/A EFF

Ultrasonic

Type and model: N/A EFF

Electrical

Type and model: N/A EFF

Comments:

2. Flow Verification

Accuracy of Flow Measurement (Secondary against Primary)	
	Type and size of primary device N/A
	EFF:
Reading from primary standard, feet and inches	
Equivalent to actual flow, mgd	
Facility-recorded flow from secondary device, mgd	
Percent Error	
Correction Factor	

Fill in above only if the primary device has been correctly installed, or if correction factor is known.

Comments: Primary only

VII. LABORATORY QUALITY ASSURANCE

YES NO Laboratory procedures meet the requirements and intent of the permit.

Yes No N/A 1. Commercial laboratory is used.

Parameters	TSS, TDS, O ₂ G, IRON
Name	SGS Labs
Address	Huntington, UT
Contact	on file
Phone	11

Yes No N/A 2. According to the permittee, commercial laboratory is State certified (ND & UT only).

Yes No N/A 3. Written laboratory quality assurance manual is available, if the facility does its own lab work.

Yes No N/A 4. Quality control procedures are used. Specify: SGS Labs

Yes No N/A 5. Calibration and maintenance of laboratory instruments and equipment is satisfactory.

Yes No N/A 6. Samples are analyzed in accordance with 40 CFR 136. PH Quarterly before sampling events

Yes No N/A 7. Results of last DMR/QA test available. Date: _____

Yes No N/A 8. Facility lab does analyses for other permittees. If yes, list the facilities and their permit numbers.

VIII. COMPLIANCE SCHEDULE STATUS REVIEW *N/A*

YES NO

The permittee is meeting the compliance schedule

N/A

1. Is the facility subject to a compliance schedule either in its permit or in an order? If facility is subject to an order, note docket number: _____

2. What milestones remain in the schedule? _____

 (Attach additional sheets as necessary.)

Yes No *N/A*

3. Facility is in compliance with unachieved milestones.

Yes No *N/A*

4. Facility has missed milestone dates, but will still meet the final compliance date.

IX. PERMITTEE SAMPLING EVALUATION

YES NO

Sampling meets the requirements and intent of the permit.

Yes No *N/A*

1. Samples are taken at sampling location specified by permit.

Yes No *N/A*

2. Locations are adequate for representative samples.

Yes No *N/A*

3. Flow proportioned samples are obtained.

Yes No *N/A*

4. Permittee is using method of sample collection required by permit.

Required method: *Grab*

If not, method being used is:

- () Grab
- () Manual
- () Automatic composite

Yes No *N/A*

5. Sample collection procedures adequate and include:

- a. Sample refrigeration during compositing.
- b. Proper preservation techniques. *N/A*
- c. Containers in conformance with 40 CFR 136.3.

Specify any problems: *Lab supplied*

Comments:

SWPPP at offices revised & signed April 2007

- Sampling plan upon severe storm runoff events appears to be adequate. No problems identified.