Instructions for Completing FRSA Self Monitoring Report Form For Non-Categorical Industrial Users - Grab Samples

INTRODUCTION

The General Pretreatment Regulations and the Four Rivers Sanitation Authority Code of Ordinances requires that all categorical and non-categorical Significant Industrial Users (SIUs) submit, at a minimum, semi-annual self-monitoring reports. The **minimum** reporting requirements are listed in your Wastewater Discharge Permit

If your facility monitors any regulated pollutant more frequently than the minimum required in the SIU's Wastewater Discharge Permit, the results of this monitoring shall be reported on the appropriate report forms and submitted to the Authority on a monthly basis.

The results of industrial self-monitoring, upon approval by the Authority, shall be included with Authority sampling and analysis data to determine compliance with all applicable pretreatment discharge standards. Should the self-monitoring report indicate analyse of Authority provided split samples, these results, if approved, will be averaged with the District's analytical results for the same sample.

In order for the self-monitoring data to be accepted, the samples need to be:

- * collected at the discharge location shown in the SIU's Wastewater Discharge Permit;
- * taken following the proper sample procedures; and
- * analyzed following the approved methods listed in 40 CFR Part 136.

Specific detailed instructions on the completion of the self-monitoring report form and the collection of samples are provided in the accompanying sections of this document. Further information can be obtained by contacting the Authority at (815) 387-7634 or (815) 387-7636.

I. COVER PAGE INSTRUCTIONS

A. General

Identify the company name, address and phone number

Authority staff reviews industry's sampling data on a monthly basis to determine compliance with the pretreatment standards and to identify those companies that will be reported as being in Significant Non-Compliance (SNC) for the year. In order for the Authority to review "monthly" industrial self-monitoring data it should be submitted to the Authority as soon as the sample results are made available to the industrial user. "Semi-Annual" self-monitoring reports are due on or before the 20th of January or July for the preceding six months, unless otherwise specified in your Wastewater Discharge Permit. The Authority has the self-monitoring report forms available in both hard copy or the District's Web site at:

If you are required to monitor for TOP you may make certification to the Authority, as described in sub-paragraph "a" below. Certification may be made in lieu of providing analysis for the organic priority pollutants, as required in your self-monitoring requirements listed in your Wastewater Discharge Permit.

a. Certification Statement

"Based on my inquiry of the person or persons directly responsible for managing compliance with the pretreatment standards for Toxic Organic Pollutants (TOP), I certify that to the best of my knowledge and belief, no dumping of concentrated toxic organics into the wastewater has occurred since filing the last discharge monitoring report. I further certify that this facility is implementing the Toxic Organic Management Plan submitted to the Authority."

In order to "certify" you must also include a current Toxic Organic Management Plan or have one on file at the Authority office. A Toxic Organic Management Plan should specify the toxic organic compounds used; the method of disposal, such as reclamation, contract hauling, or incineration; and procedures for assuring that toxic organics do not routinely spill or leak into the wastewater.

B. Compliance Certification Statement

II.

- 1 Indicate whether your facility is or is not in consistent compliance. Consistent compliance is typically defined as NOT being in Significant Non-Compliance (SNC).
- 2 Attach a separate statement if your facility is NOT in consistent compliance indicating what steps will be taken to bring the facility back into consistent compliance.
- The Compliance Certification Statement must be reviewed by an Authorized Representative and Qualified Professional. The position of Authorized Representative and Qualified Professional is defined in 40 CFR Part 403.12 (I)(1-3). www.access.gpo.gov/nara/cfr/cfrhtml_00/Title_40/40cfr403_00 Space is provided on the self-monitoring report form for the appropriate signatures.

ANALYTICAL PORTION OF SELF-MONITORING REPORT FORM (BACK SIDE OF FORM)

- * FRSA Discharge Number This number is issued by the Authority and can be found in the upper right-hand corner on the cover page of your Wastewater Discharge Permit under "FRSA".
- * Sample Location The location where the sample was taken shall be indicated. All samples must be collected from th appropriate sample point, which can be found in your Wastewater Discharge Permit.
- * Month/Year Sampling Conducted The month/year for which the samples are collected shall also be identified. A separat form shall be submitted for each month/year.
- * <u>Sample Information:</u> Indicate the hold time between when the sample was collected and analyzed, the type of sample container and the preservative used.
- * Contract Lab If a contract lab was used for sampling/analyzing, provide the name, address, and phone number of the lab. A copy of the Chain-of-Custody form shall accompany the self-monitoring report form when a contract lab is used.
- * Analytical Results The sample results shall be entered in the row opposite the day of the sample. The numbers 1 through 3 represent the days of the month. Analytical results of each sample are recorded in the column and row appropriate to the sample date and pollutant type. Results shall be provided in units consistent with the units column (mg/L). Your facility's reporting requirements can be found in your Wastewater Discharge Permit along with the required reporting frequency and number of samples per report.
- * FRSA Split Sample If the sample is a Authority split sample, an "S" shall be entered into the "FRSA Split Sample" column in the row corresponding with the day of the sample.

III. SUMMARY OF APPROVED SAMPLE COLLECTION AND ANALYSES PROCEDURES

Sampling and analysis shall be performed in accordance with the techniques described in 40 CFR Part 136. Where 40 CFR Part 136 does not contain sampling or analytical techniques for the pollutant in question, or where the USEPA determines that 40 CFR Part 136 sampling and analytical techniques are inappropriate for the pollutant in question, sampling and analysis shall be performed using validated analytical methods or any other applicable sampling and analytical procedures, including the procedure suggested by the FRSA or other parties approved by the USEPA.

A. Sample Collection

- 1 Samples must be collected from the correct location, i.e. discharge location identified in your Wastewater Discharge Permit.
- 2 When specific pollutant parameters are immediately affected by biological, chemical or physical interactions, or have short holding times, such as pH, hexavalent chromium, cyanide, or volatile organics, individual grab samples must be taken.
- 3 Proper preservatives, sample containers and hold times must be observed prior to analysis.

<u>Parameter</u>	Container ¹	<u>Preservative</u>	Hold Time
Cyanide	Plastic or Glass	Cool, <6°C or NaOH to pH >12 0.69 ascorbic acid	6 days
FOG	Glass	Cool, \leq 6°C, HCl or H ₂ SO ₄ to pH <2	28 days
VOC	40 mL vials Glass, Teflon lined septum	Cool, ≤6°	14 days
Metals Polyetheylene or Glass		HNO to pH <2, or at least 24 hours prior to analysis	6 months

B. <u>Sample Analysis</u>

- 1 Samples must be analyzed in accordance with the approved methods listed in 40 CFR Part 136. The methods in 40 CFR Part 136 are derived from five different sources.
 - a. Methods for the Chemical Analyses of Water and Wastes;
 - b. Standard Methods for the Examination of Water and Wastewater;
 - c. ASTM
 - d. Methods for Analyses of Inorganic Substances in Water and Fluvial Sediments; and
 - e. additional sources
- 2 Cyanide samples must undergo manual distillation followed by titration or spectrophotometric analysis.

IV. GENERAL INFORMATION

All laboratory results of properly collected and analyzed samples are required to be submitted to the Authority regardless of whether the samples are in compliance. Discharge sample results that exceed a pretreatment limit are required to be reported to the Distri within twenty-four (24) hours of the time the industry becomes aware of the violation. The discharge must be resampled and analyzed within thirty (30) days of the violation.

Four Rivers Sanitation Authority Self Monitoring Report Form for Grab Samples (Non-Categorical Significant Industrial Users)

A. GENERAL

COMPANY:	Address:	Phone:

This report shall contain the result of all sampling and analysis of your facility's discharge, including flow and the concentration of those pollutants which are limited by Title 2 of the District's Code of Ordinances, and are listed in your Wastewater Discharge Permit.

If your facility monitors any pollutant more frequently than required by its permit, using test procedures prescribed in 40 CFR Part 136 or other Four Rivers Sanitation Authority approved methods, as specified in the permit, the results shall be reported in this Self Monitoring Report and submitted to the Four Rivers Sanitation Authority on a monthly basis. Such monitoring shall be included in all calculations used by the Authority to determine the compliance status of the facility.

The monitoring results obtained shall be summarized and reported on this form. Use a separate form for each month reported. The <u>semi-annual</u> self monitoring reports are due on or before the 20th of January and July for the preceding six months, unless otherwise specified in your permit. The report shall indicate the nature and concentration of all regulated pollutants in the effluent for which sampling and analyses were performed.

If your permit lists TOP among the pollutants required to be analyzed and you elect to "Certify", attach a coyp of your "Certification Statement" with this report. This certification must be provided for each reporting period that you are certifying for. In order to "Certify", you must also attach a current Toxic Organic Management Plan or have on on file at the Authority offices.

Please indicate below: (NOTE: This section only applies if "Certification" is being provided in lieu of TOP monitori	ng)
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 A Toxic Organic Management Plan for this facility is on file at the Authority.
 A Toxic Organic Management Plan is attached.

B. COMPLIANCE CERTIFICATION STATEMENT (PLEASE ANSWER QUESTION 1 BELOW)

- 2. If the facility is <u>not</u> in consistent compliance with the applicable pretreatment standards, a separate statement is to be attached to this form detailing what additional operation and maintenance and/or pretreatment is necessary to bring the facility in compliance with those standards. This statement shall satisfy the requirements of the General Pretreatment Regulations (40 CFR Part 403.12(b)(7)) concerning the compliance schedules and be completed by the individuals signing this form.
- 3. I certify under penalty of law that this document and all attachments wer 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(s) 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.

AUTHORIZED REPRESENTATIVE	QUALIFIED PROFESSIONAL
NAME:	NAME:
TITLE:	TITLE:
TELEPHONE NUMBER:	TELEPHONE NUMBER:
SIGNATURE:	SIGNATURE:
DATE:	DATE:

Four Rivers Sanitation Authority

Self Monitoring Report Form for Grab Samples - Noncategorical Significant Industrial Users

SAMPLE LOCATION 2 :

THIS REPORT IS FOR SAMPLES COLLECTED DURING THE MONTH/YEAR OF:							
SAMPLE HO	SAMPLE HOLD TIME: CONTAINER TYPE: PRESERVATIVE USED:						
(If a contract lab was used for sampling/analyzing please provide the information below):							
LAB NAME:			ADDRESS:			PHONE #:	
			Total	Non-Polar			Other
	llutant	CN-T	FOG	FOG	TOP	рН	()
Local L	imits, mg/l ³	1.7	N/A	150	(5)	5.0 - 11.0	
DAY	FRSA	CN T	Total	VID EGG	TOD		
OF	$\begin{array}{c} { m SPLIT} \\ { m SAMPLE}^4 \end{array}$	CN-T	FOG	NP-FOG	TOP	ТТ	Other
SAMPLE	SAMPLE	(mg/L)	(mg/L)	(mg/L)	(mg/L)	pН	Other
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FRSA DISCHARGE NUMBER¹:

As found in Section II.B of your Wastewater Discharge Permit.

 $^{^{\}rm 2}$ At discharge point where the sample is collected.

 $^{^{3}}$ Local limits as found in Authority Code of Ordinance, Title 2.

⁴ Please indicate with an (S) if the sample taken was a Authority split sample.

⁵ The compounds that make up the Total Organic Pollutants (TOP) can be found in your Wastewater Discharge Permit as Attachment A.