

### ENVIRONMENTAL ASSISTANCE CENTER TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION SUITE E-645, PERIMETER PARK

2510 MT. MORIAH ROAD MEMPHIS, TENNESSEE 38115-1520 PHONE (901) 368-7939 STATEWIDE 1-888-891-8332 FAX (901) 368-7979

April 2, 2004

CERTIFIED MAIL 7003 0500 0000 0591 4563 RETURN RECEIPT REQUESTED

Mr. Greg Thomas A.S. Hospitality 3493 Lamar Avenue Memphis, TN 38118

Re: Notice of Non-Compliance
A.S. Hospitality
TMSP Permit # TNR050107

**Shelby County** 

Dear Mr. Thomas:

On March 24, 2004, Maylynne Pynkala conducted a Compliance Evaluation Inspection (CEI) at the A.S. Hospitality facility. The following deficiency was revealed during the inspection.

- 1. Documentation of the quarterly visual inspections for storm water was not on file as required by the Tennessee Multi-Sector Storm Water Permit (TMSP). The TMSP requires that the facility have a thorough inspection checklist for its storm water.
- 2. A Storm Water Pollution Prevention Plan (SWPPP) written in November 1993 was on file. However, the plan needs to be updated at least every three years or whenever any changes occur at the facility.

A.S. Hospitality is in violation for non-compliance with the applicable TMSP permit requirements, as summarized above.

Please submit a written response to the Memphis Environmental Assistance Center (MEAC) within 30 days of your receipt of this letter detailing what steps the company has taken and/or will take to ensure compliance with its TMSP requirements.

If you have any questions regarding this correspondence, please contact me at (901) 368-7959 or Maylynne Pynkala at (901) 368-7997.

Sincerely, Levy R. Sempleton

Terry R. Templeton, P.G.

Manager

Division of Water Pollution Control

c: Chris Moran, Enforcement and Compliance, DWPC-NCO

File - TDEC/DWPC/MEAC

U.S. Postal Service...
CERTIEIED MAIL

COMPLETE THIS SECTION ON DELIVERY	A Signature  X	Service Type Certified Mail	7003 0500 0000 0591 4563	Domestic Return Receipt 102595-02-M-1540
SENDER: COMPLETE THIS SECTION	Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:	SATS Dames gar	2. Article Number (Transfer from service label) 7 □□∃	PS Form 3811, August 2001 Domestic Re

APR 22 2004



TO: Mr. Terry Templeton

FROM: AS Hospitality (Greg Thomas)

**DATE: 4/19/04** 

SUBJECT: compliance requirements permit #TNR050107



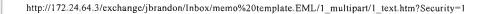
Since Maylynne's inspection of AS Hospitality on 3/24/04 we have updated our SWPPP to reflect personnel changes and have brought it up to date. We have also outlined a quarterly visual inspection report (see attached). This should resolve all issues of non-compliance and return AS Hospitality to good standings in all areas of the TENNESSEE DEPARTMENT OF ENVIROMENTAL AND CONSERVATION. In addition we have decided to pursue the recommendation of Maylynne to apply for

A NO EXPOSURE CERTIFACATION. I have downloaded the paperwork and have sent it to Nashville.

Thank you

For all your and Maylynne's help

Greg Thomas Maintenance Supervisor / Safety Director AS Hospitality 901-365-4742 901-362-7811 Fax



### Outfall Inspection Checklist

Facility Name and Address	
<u></u>	a sa kanaa aa s
	* 1
	Pro C C At At At A S S
Date of Inspection	_ Time of Inspection
Weather Conditions:	
· · · · · · · · · · · · · · · · · · ·	
1. Outfall Number	
	and the second of the second o
2. Type (concrete, pipe, grassed, rock,	etc.)
3. Location	B 1 2 80 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ingle A	
4. Visible Flow?	If yes, complete (a-k). If no, go to #5.
a) Color of Water	
b) Odor	
c) Murky?	
d) Floating Objects?	
e) Scum?	<del></del>
i) Suas:	578
g) Oily Sheen?h) Sludge Present?	
i) Steins on conveyone?	
<ul><li>i) Stains on conveyance?</li><li>j) Plant life present and health</li></ul>	v2
b) Estimate flow rate or quanti	ty of standing water:
	sy of standing waters
5. Standing water present?	If yes, complete (a-k). If no, go to #6.
× 2	
a) Color of Water	
b) Odor	
c) Murky?	
d) Floating Objects?	** \$1 kg
e) Scum?	19 N N N
f) Suds?	
g) Oily Sheen?	**************************************
h) Sludge Present?	- 188° - 1
i) Stains on conveyance?	
j) Plant life present and health	
k) Estimate flow rate or quanti	ty of standing water:



RECEIVED MAY 2 7 1993

May 25, 1993

Department of Environment and Conservation Division of Water Pollution Control 6th Floor L&C Annex 401 Church St Nashville, TN 37243-1534

Re: TNROD-0107

Director:

I would like to request for an extension for submitting our company's plan for Storm Water Pollution Prevention.

The reasons for requesting the extension is that I just became aware of the requirements after receiving your packet postmarked April 20, 1993. Our company is going through a major reorganization and restructuring. We are selling off \$3MM of our business and we have recently had to terminate the President and Controller.

Needless to say, day to day operations are very hectic. Honestly the survival of our business is at risk and which presents the need to focus all my time and energy on fixing our problems or we won't have a business in a few months.

Therefore, to fully prepare and present our Pollution Prevention Plan (which is indeed a very important issue) I would respectfully request for an additional 6 months extension before my plan is due in your office.

Respectfully yours,

Joe W Warren

Vice President Manufacturing





## TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION STORM WATER MONITORING REPORT MONITORING YEAR $\frac{10}{2}$ TO $\frac{09}{30}$ 93

PAGE 1	OF 1

FACILITY NAME AS HOSPITALI ADDRESS 3493 LAMAR CITY MEMPHIS COL	NPDES PERMIT NUMBER TNROO 0107 CONTACT PERSON JOE WARREN PHONE NUMBER (901 ) 365-4742						
TOTAL NUMBER OF FACILITY OUTFALLS TO WATER DISCHARGES ASSOCIATED WITH I TOTAL NUMBER OF ABOVE OUTFALLS SAM TOTAL NUMBER OF STORM EVENTS SAMP	NDUSTRIAL ACT	IVITY":	-0- -0- -0-			structions ting this t	s on back form.
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PARAMETER		QUALITY OR CONCENTRAT		REPORT	UNITS	NO. OF	SAMPLE TYPE
BOD, 5-DAY (00310)				50	mg/l		COMP.
TOTAL S. SOLIDS (00530)				200	mg/l		COMP.
NITROGEN, AMMONIA (00610)				4	mg/l		COMP,
OIL AND GREASE (00550)				15	mg/l		GRAB
pH (00400)				4.0 - 9.0	stand.		GRAB
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JOE WARREN V/P MANU	FACTURIN	IG Soe	1157	Taire	w	10 20	93
YPED OR PRINTED		SIGNATURE OF PRINCIPAL	EXECUTIVE OFFICER	OR AUTHORIZED	AGENT	YEAR MON	ITH DAY



## TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION STORM WATER MONITORING REPORT MONITORING YEAR $11\cline{1}{2}$ 101/94 TO $11\cline{1}$ 701/95

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FACILITY NAME A S Hospitalit ADDRESS 3493 Lamar	У		NPDES PERMIT I		NR00		
ADDRESS 3493 Lamar			CONTACT PERSO				Martin
cmy Memphis co	UNTY She]by	У	PHONE NUMBER	(901		5-4742	
TOTAL NUMBER OF FACILITY OUTFALLS WATER DISCHARGES ASSOCIATED WITH	INDUSTRIAL ACT	TVITY":	3	_		struction: eting this f	
TOTAL NUMBER OF ABOVE OUTFALLS SA		THE MONITORING YEAR:	_3_		5		
TOTAL NUMBER OF STORM EVENTS SAM	PLED:					8	
PROVIDE THE FOLLOWING INFORMATION  ADRAINAGE AREA OF OUTFALL	FOR EACH OUT	FALL SAMPLED THIS YEAR				e e	
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OUTFALL NO. LS,0,1,	27,216	SQ FEET	ACRES				
в <u>100</u> % с <u>100</u> %	D	_% E <u>0</u> %	F 0.1	ICHES			
		QUALITY OR CONCENTRA	TION	REPORT		NO. OF	SAMPLE
PARAMETER	MINIMUM	AVERAGE	MAXIMUM	LEVEL	UNITS	SAMPLES	TYPE
BOD, 5-DAY (00310)	55		-: !!	50	mg/l		сомр.
TOTAL S. SOLIDS (00530)	33		¥	200	mg/l		сомр.
NITROGEN, AMMONIA (00610)	1.03			4	mg/l		сомр.
OIL AND GREASE (00550)	<b>&lt;</b> 5			15	mg/l		GRAB
pH (00400)	8.5		8	4.0 - 9.0	stand.		GRAB
		′					
	*						
	4.						
HAS A STORM WATER POLLUTION PF	REVENTION PLA	AN BEEN PREPARED FO	OR THIS FACILITY?		X	YES 🗆	NO
HAS THE PLAN BEEN SIGNED BY A PE	ERSON WHO M	EETS THE SIGNATORY	REQUIREMENTS C	F THE PERM	AIT?	YES 🗆	NO
HAS THE PLAN BEEN IMPLEMENTED?	☐ YES	□ NO				2	
HAVE YOUR STORM WATER OUTFALE	S BEEN TESTE	ED FOR UNPERMITTED,	NON-STORM WAT	ER DISCHAF	RGES?	YES [	□ №
ARE THERE ANY UNPERMITTED, NON F SO, ATTACH RESULTS OF YOUR IN			ENT? YES	ON K		ž.	
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			11 11.			DAT	ΓE
JOE WARREN V/P of MANUFACTURING	•	Sol 7	12-Tha	nent	- 1	95 -	7 17
YPED OR PRINTED		SIGNATURE OF PRINCIPAL	L EXECUTIVE OFFICER C	OR AUTHORIZED	AGENT	YEAR MON	NTH DAY



# TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION STORM WATER MONITORING REPORT MONITORING YEAR $\frac{11}{\sqrt{01}}$ TO $\frac{1}{\sqrt{11}}$ 701 /95

FACILITY NAME A S Hospitali	t <u>y</u>		NPDES PERMIT	NUMBER T	NR00 0	107	
ADDRESS 3493 Lamar cory Memphis co			CONTACT PERS	on Joe 1	larren/	Gary-Mai	t-in
CITY Memphis co	UNTY Shelby		PHONE NUMBER	(_90	1_365	-4742	
TOTAL NUMBER OF FACILITY OUTFALLS				Note:	Read in	structions	s on back
WATER DISCHARGES ASSOCIATED WITH			<u>-3-</u> 3-	before	e comple	ting this t	orm.
TOTAL NUMBER OF ABOVE OUTFALLS SA		THE MONITORING YEAR :	-3-		×		
TOTAL NUMBER OF STORM EVENTS SAM	PLED:						
PROVIDE THE FOLLOWING INFORMATION	FOR EACH OUT	FALL SAMPLED THIS YEAR	<b>3</b> :			51	
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BPERCENTAGE OF DRAINAGE AF							1
CPERCENTAGE OF DRAINAGE AF						IT, ROOF, PO	NDS)
DPERCENTAGE OF DRAINAGE AF EPERCENTAGE OF DRAINAGE AF				I, LAWN, FIELL	رر.		
FRAINFALL AMOUNT OF THE STO				D, REPORT TH	E HIGHER (	OR HIGHEST	AMOUNT.
OUTFALL NO. LS.O. 21 A	46,728	\( \) SQ FEET	ACRES				
в 0 % с 100 %	D	_% E <u>()</u> %	F <u>0.1</u> IN	ICHES			
		QUALITY OR CONCENTRA	ATION			I	044015
PARAMETER	MINIMUM	AVERAGE	MAXIMUM	REPORT	UNITS	NO. OF SAMPLES	SAMPLE TYPE
			-	-			
BOD, 5-DAY (00310)	12			50	mg/l		COMP.
TOTAL S& SOLIDS (00530)	<b>&lt;</b> 2		(6)	200	mg/l		COMP.
NITROGEN, AMMONIA (00610)	0.9			4	mg/l		COMP.
OIL AND GREASE (00550)	<b>&lt;</b> 5			15	mg/l		GRAB
pH (00400)	7.4			4.0 - 9.0	stand.		GRAB
×					*		
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			<u> </u>			-	
HAS A STORM WATER POLLUTION PR	REVENTION PLA	N BEEN PREPARED F	OR THIS FACILITY?	2	<b>(</b> )	YES 🗆	NO
HAS THE PLAN BEEN SIGNED BY A PE	ERSON WHO MI	EETS THE SIGNATORY	REQUIREMENTS C	F THE PERM	AIT?	YES 🗆	NO
HAS THE PLAN BEEN IMPLEMENTED?	YES	□ no					
						л г	7
HAVE YOUR STORM WATER OUTFALE	LS BEEN TESTE	D FOR UNPERMITTED	, NON-STORM WAT	ER DISCHAF	RGES? Ľ	YES L	] ио
ARE THERE ANY UNPERMITTED, NON IF SO, ATTACH RESULTS OF YOUR IN			ENT? YES	NO K			
I CERTIFY UNDER PENALTY OF LAW THAT I HAVE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR C	PERSONALLY EXAM DBTAINING THE INFO	MINED AND AM FAMILIAR WITH PRMATION, I BELIEVE THE SUE	BMITTED INFORMATION IS	TRUE, ACCURA	; AND BASED	ON MY INQUIRY	OF THOSE
THERE ARE SIGNIFICANT PENALTIES FOR SUBMI	TTING FALSE INFOR	IMATION, INCLUDING THE POS	SSIBILITY OF FINE AND IM	PRISONMENT	>	ta .	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			11 41	_/		DAT	TE.
Joe Warren	81	( Ja : 1	2-1/2	non		95 1	7 17
V/P of Manufacturing		- Mariana	I EXECUTIVE OFFICER O		105:3	75	/ / /



# TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION STORM WATER MONITORING REPORT MONITORING YEAR $\underbrace{11\ /\ 01/94}_{4}$ TO $\underbrace{11\ /\ 01/95}_{4}$

			3(6)	-			
FACILITY NAME _A_S_Hospitali	ty		NPDES PERMIT	NUMBERT	NRQQC	107	
ADDRESS 3493 Lamar CITY Memphis CO	INTY Shall	У	CONTACT PERS	SON <u>Joe</u>	<u>Marren</u>	<u>/Gary_M</u> 5-4742	artin
ort Hemphia	SKIT SHELD	У	THOME NOMBER	G1-50	T 7 50	1254746	
TOTAL NUMBER OF FACILITY OUTFALLS T WATER DISCHARGES ASSOCIATED WITH			_3_				s on back
TOTAL NUMBER OF ABOVE OUTFALLS SA			<u>-3-</u> <u>-3-</u>	before	comple	ting this f	orm.
TOTAL NUMBER OF STORM EVENTS SAM	PLED:		-1-			T.	
PROVIDE THE FOLLOWING INFORMATION  ADRAINAGE AREA OF OUTFALL  BPERCENTAGE OF DRAINAGE AR  CPERCENTAGE OF DRAINAGE AR  EPERCENTAGE OF DRAINAGE AR  FPERCENTAGE OF DRAINAGE AR  FPERCENTAGE OF THE STORE	EA DEFINED AS IN EA ON YOUR PRO EA ON YOUR PRO EA CONSISTING O	DUSTRIAL ACTIVITY PERTY CONSISTING OF I PERTY CONSISTING OF I F GRAVEL OR OTHER SL	IMPERVIOUS SURFAC VEGETATION (FORES URFACES	ST, LAWN, FIELD	))		
OUTFALL NO. (\$10,3) A	28,080	SQ FEET	ACRES			Α.	
в 100 % с 100 %	<b>D</b> 0	% E <u>0</u> %	F 0.1 #	NCHES		250	
		QUALITY OR CONCENTRA				1 1	0411015
PARAMETER	MINIMUM	AVERAGE	MAXIMUM	REPORT LEVEL	UNITS	NO. OF SAMPLES	SAMPLE TYPE
BOD, 5-DAY (00310)	18			50	mg/l		сомр,
TOTAL S. SOLIDS (00530)	<b>&lt;</b> 2		¥:	200	mg/l		сомр.
NITROGEN, AMMONIA (00610)	0.564			4	mg/l		сомр.
OIL AND GREASE (00550)	<b>&lt;</b> 5			15	mg/l		GRAB
pH (00400)	7.3			4.0 - 9.0	stand.	4.6	GRAB
		<del></del>					
			-				
				1			
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HAS A STORM WATER POLLUTION PR	EVENTION PLA	N BEEN PREPARED FO	OR THIS FACILITY	?		res 🗆	NO
HAS THE PLAN BEEN SIGNED BY A PE	ERSON WHO ME	ETS THE SIGNATORY	REQUIREMENTS	OF THE PERM	IIT?	YES 🗆	NO
		□ NO					
HAS THE PLAN BEEN IMPLEMENTED?	LAJ YEŞ L	_1 NO			_		_
HAVE YOUR STORM WATER OUTFALL	S BEEN TESTE	FOR UNPERMITTED	, NON-STORM WAT	TER DISCHAR	GES?	YES L	Ои
ARE THERE ANY UNPERMITTED, NON IF SO, ATTACH RESULTS OF YOUR IN		DISCHARGES PRESI	ENT? YES	NO NO			
I CERTIFY UNDER PENALTY OF LAW THAT I HAVE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR O THERE ARE SIGNIFICANT PENALTIES FOR SUBMI	BTAINING THE INFOR	RMATION, I BELIEVE THE SUB	MITTED INFORMATION I	IS TRUE, ACCURA	AND BASED ( TE AND COMP	ON MY INQUIRY PLETE. I AM AV	OF THOSE
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		The state of the s	1 . The Market	, II. COMMENT,	> T	DAT	ΤE
JOE WARREN V/P of MANUFACTURING		Sol 1	Th Att	anen	-	95	7 17
TYPED OR PRINTED		SIGNATURE OF PRINCIPA	L EXECUTIVE OFFICER	OR AUTHORIZED	AGENT	YEAR MON	NTH DAY

## ENVIRO) ... (E. . FAL TESTING & CONSULTING, INC. 2924 Walnut Grove Road - Memphis, TN 38111 - (901)327-2750 INORGANIC ANALYSIS DATA SHEET

Client Name AS Hospitality

Project #

3493 Lamar Avenue Memphis, TN 38118

Site ID

Stormwater

Date Arrived 05/15/95 ETC Order Number 9505403

ETC Lab ID 9505403-01

Sample ID: #1 Grab/Front Dock

Matrix : AQUEOUS

Sample Date : 05/15/95

TEST	RESULT	UNITS	DETECTION LIMIT	TIME ANALYZED	DATE ANALYZED BY	METHOD
Oil and Grease	<5 8.5	mg/L SU	5	0830 1515	05/24/95 AE 05/15/95 SH	

ETC Lab ID 9505403-02

Sample ID: #1 Composite/Front Dock

Matrix : AQUEOUS

Sample Date :05/15/95

TEST	RESULT	UNITS	DETECTION LIMIT	TIME ANALYZED	DATE ANALYZED BY	METHOD
Biochemical Oxygen Demand	55	mg/L	* 5	1340	05/15/95 GD	405.1
Ammonia - Nitrogen	1.03	mg/L	0.100	1330	05/23/95 GD	350.3
рН	7.4	SU		1515	05/15/95 SH	150.1
Total Suspended Solids	33	mg/L	2	1400	05/19/95 AE	160.2

ETC Lab ID 9505403-03

Sample ID: #2 Grab/Employee Parking

Matrix : AQUEOUS

Sample Date : 05/15/95

TEST	RESULT	UNITS	DETECTION LIMIT	TIME ANALYZED	DATE ANALYZED BY	METHOD
Oil and Grease	<5 7.4	mg/L SU	5	0830 1515	05/24/95 AE 05/15/95 SH	

LABORATORY MANAGER

# ENVIRONMENTAL TESTING & CONSULTING, INC. 2924 Walnut Grove Road - Memphis, TN 38111 - (901)327-2750 INORGANIC ANALYSIS DATA SHEET

Client Name AS Hospitality

Project #

3493 Lamar Avenue Memphis, TN 38118

Site ID

Stormwater

Date Arrived 05/15/95 ETC Order Number 9505403

ETC Lab ID 9505403-04

Sample ID: #2 Composite/Empl. Parking

Matrix : AQUEOUS

Sample Date : 05/15/95

TEST	RESULT	UNITS	DETECTION LIMIT	TIME ANALYZED	DATE ANALYZED BY	METHOD
Biochemical Oxygen Demand	12	mg/L	5	1340	05/15/95 GD	405.1
Ammonia - Nitrogen	0.900	mg/L	0.100	1330	05/23/95 GD	350.3
рН	7.3	ຮບ		1515	05/15/95 SH	150.1
Total Suspended Solids	<2	mg/L	2	1400	05/19/95 AE	160.2

ETC Lab ID 9505403-05

Sample ID: #3 Grab/Back Dock

Matrix : AQUEOUS

Sample Date :05/15/95

TEST	RESULT	UNITS	DETECTION LIMIT	TIME ANALYZED	DATE ANALYZED BY	METHOD
Oil and Grease	<5 7.3	mg/L SU	5	1600 1515	05/24/95 AE 05/15/95 SH	

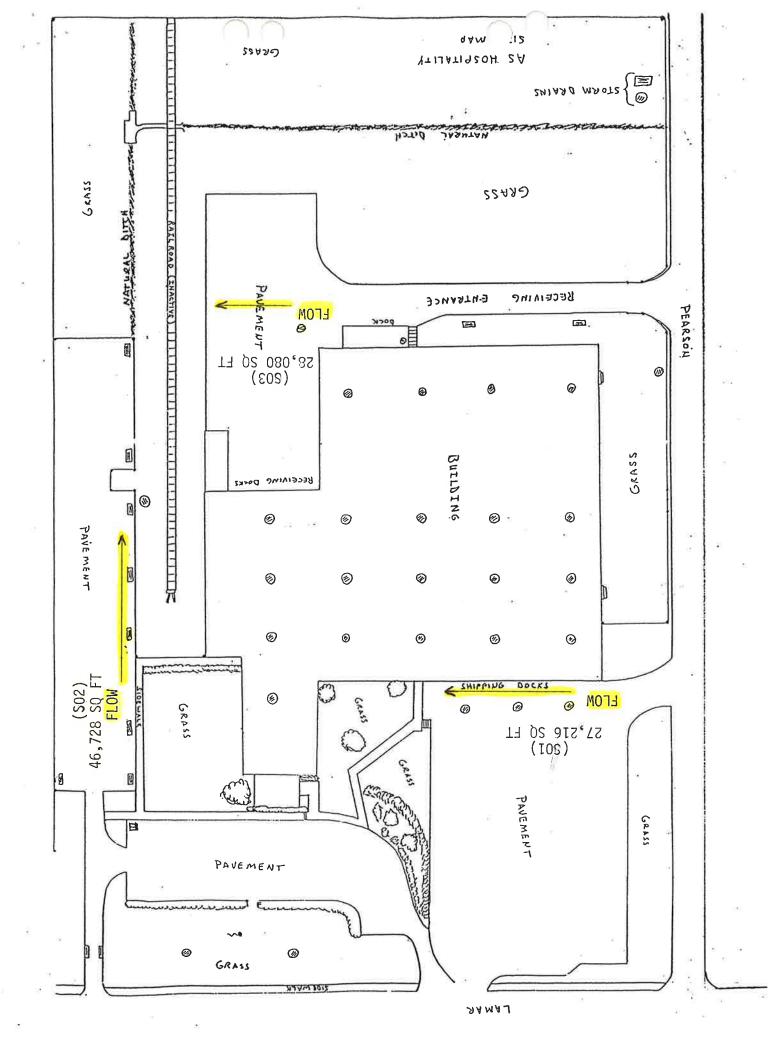
ETC Lab ID 9505403-06

Sample ID: #3 Composite/Back Dock

Matrix : AQUEOUS

Sample Date :05/15/95

TEST	RESULT	UNITS	DETECTION LIMIT	TIME ANALYZED	DATE ANALYZED BY	METHOD
Biochemical Oxygen Demand	18	mg/L	5	1340	05/15/95 GD	405.1
Ammonia - Nitrogen	0.564	mg/L	0.100	1330	05/23/95 GD	350.3
рН	7.3	SU		1515	05/15/95 SH	150.1
Total Suspended Solids	<2	mg/L	2	1400	05/19/95 AE	160.2







STATE of TENESSEE
DEPARTMENT OF ENVIORNMENT AND CONSERVATION
MEMPHIS ENVIORNMENTAL FIELD OFFICE
SUITE E-645, PERIMETER PARK
2510 MT. MORIAH
MEMPHIS, TN 38115-1520
EDDY K. BOUZEID

#### Mr. Bouzeid:

Enclosed please find one (1) each of the '94/'95 Storm Water Monitoring Reports for each of the three (3) outfalls required to be tested. Also include are the test results for the three (3) samples taken.

Outfall SO1 shows slight above-level for Biochemical Oxygen Demand (BOD). The source of this above-level is not known, for inspection of the area disclosed nothing out of the ordinary. If the above-levels persist, then A S Hospitality will contact your office for assistance in locating and eliminating same.

During the 05 July '95 visit, you indicated that something in writing from A S Hospitlaity was needed for your file, concerning the waiver of the '93 Storm Water Monitoring Report. Mr. Warren has indicated that this waiver came from Mr. John Leonard of your office. It is hoped that this will suffice for this requirement.

I can be contacted at (901) 365-4742, M-F from 0800 -1700 CST.

Sincerely

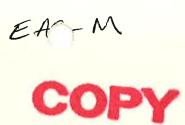
Gary Martin

Assistant Purchasing Manager

A S Hospitality







#### STATE OF TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION **401 CHURCH STREET L & C ANNEX 6TH FLOOR NASHVILLE TN 37243-1534**

April 23, 2004

Mr. Alan Hare A.S. Hospitality 3493 Lamar Ave Memphis, TN 38118

AY 1 U 2004

Subject: Tennessee Multi-Sector General NPDES Storm Water Permit (TMSP)

**Tracking Number TNR050107** 

Conditional No Exposure Exclusion for Industrial Activity A.S. Hospitality, Memphis, Shelby County, Tennessee

Dear Mr. Hare:

The Division of Water Pollution Control acknowledges receipt of a No Exposure Certification Form on . This form was submitted by you according to Section 122.26(g) of the EPA Storm Water Phase II Rule, which requires industrial operators claiming no exposure to submit written certification that a condition of no exposure exists at their facility/site. A condition of no exposure means that material handling equipment or activities, raw materials, intermediate or final products, waste materials, by-products or industrial machinery are not exposed to storm water.

Our review of this facility's permit file, compliance records and the above referenced form indicates that an exclusion from NPDES storm water permitting under the TMSP is acceptable. Please note that you must resubmit a no exposure certification at least once every 5 years. We would like to point out that by submitting the No Exposure Certification Form, you certified under penalty of law that there are no discharges of storm water contaminated by exposure to industrial activities or materials from the industrial facility or site identified in this document (except as allowed under 40 CFR 122.26(g)(2)). If the condition of no exposure ceases, then you must immediately obtain coverage under a storm water NPDES permit by submitting a completed NOI form. Please note that the NPDES permitting authority (or MS4 operator where the discharge is into the local MS4) must be allowed to perform inspections to confirm the condition of no exposure and to make such inspection reports publicly available upon request.

If you have questions, please contact the Division of Water Pollution Control at your local Environmental Assistance Center at 1-888-891-TDEC; or, at this office, please contact Mr. Jim McAdoo at (615) 532-0684 or by E-mail at Jim.McAdoo@state.tn.us.

Sincerely.

Saya Ann Qualls, P.E.

Saya Ann Quallo

Manager, Permit Section

Division of Water Pollution Control

No Exposure Certification Form Letter TNR050107.DOC Division of Water Pollution Control, Environmental Assistance Center - Memphis

Division of Fiscal Services, Fee Collection Section, Ronald Reddou



### ENVIRONMENTAL ASSISTANCE CENTER TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION

SUITE E-645, PERIMETER PARK
2510 MT. MORIAH ROAD
MEMPHIS, TENNESSEE 38115-1520
PHONE (901) 368-7939 STATEWIDE 1-888-891-8332 FAX (901) 368-7979

April 2, 2004

Mr. Greg Thomas A.S. Hospitality 3493 Lamar Avenue Memphis, TN 38118

Re: Compliance Evaluation Inspection
A.S. Hospitality
TMSP Permit No. TNR050107
Shelby County

Dear Mr. Thomas:

On Wednesday, March 24, 2004, I conducted a Compliance Evaluation Inspection (CEI) at the A.S. Hospitality facility located in Memphis, Tennessee. Upon arrival at the facility, I met with you and stated that the purpose of my inspection was to evaluate the company's compliance with its Tennessee Multi-Sector Storm Water Permit (TMSP). This was accomplished by reviewing your self-monitoring records and reports and conducting a walk-through inspection of the plant site.

Attached you will find a copy of the EPA Water Compliance Inspection Report, which summarizes the findings of my inspection. The overall score is 2.0, which is unsatisfactory.

There are some areas that appeared to be in need of immediate correction and/or continuing attention:

(1) Documentation of the quarterly visual inspections for storm water was not on file as required by the TMSP. As noted in Part XII of this report, a copy of an inspection checklist generated by the Division was given to you.

(2) A Storm Water Pollution Prevention Plan (SWPPP) written in November 2003 was on file. However, the plan needs to be updated to reflect the changes that have occurred at the facility (see part XIV of this report).

Although the facility's standard industrial classification (SIC) code falls under sector X of the TMSP, the site inspection revealed that there are no industrial activities or materials stored outside and exposed to storm water runoff. Therefore, A.S. Hospitality may request a No Exposure Certification. Once approved, TMSP coverage will be terminated, and a new tracking number will be issued for coverage under the No Exposure Certification. Information about the No Exposure Certification form is available on our website: <a href="https://www.state.tn.us/environment/permits/strmh2o.htm">www.state.tn.us/environment/permits/strmh2o.htm</a>.

I certainly appreciate your cooperation during the inspection. In the meantime, if you have any questions or comments, please call me at 368-7997.

Sincerely,

Maylynne Pynkala
Maylynne Pynkala

**Environmental Protection Specialist** 

Division of Water Pollution Control

C: Terry Templeton, Manager, DWPC\MEAC
Chris Moran, Enforcement & Compliance, Nashville
File

EPA United S	United States Environmental Protection Agency Washington, D. C. 20460			Form Approved OMB No. 2040-0057	
Water 0	Compliance Inspection Rep	ort			
Se	ction A: National Data Coding (i.e., PC				
Transaction Code NPDES#	yr/mo/dy	Inspectio	n Type	Inspector Facility Type	
N 5 TNR05	0   1   0   7   0   4   0   3   2   4	R		S 2	
	Remarks				
Inspection Work Days Facility Self - Moni	toring Rating BI QA N N N		-Reserved-		
	Section B: Facility Data				
Name and Location of Facility Inspected (For industrial name and NPDES permit number)	al users discharging to POTW, also include POTW	Entry Time		Permit Effective Date	
A.S. Hospitality		2:00pm	ı	March 1,	
				2002	
3493 Lamar Avenue		Exit Time		Permit Expiration Date	
Memphis, TN 38118	.3	3:00pm	1	December	
				31, 2006	
Name(s) of Onsite Representative(s) / Title(s) / Phone	and Fax Number(s)	Other Facil	ity Data		
Mr. Greg Thomas					
Maintenance Supervisor					
(901) 365-4742  Name, Address of Responsible Official / Title / Phone	and Fay Number				
Same As Above	and rax vuriber				
Same As Above	Contacted				
	Yes No				
	ated During Inspection (Check only to assurement Operation & Mainter			ted)  O / SSO (Sewer Overflow)	
	nitoring Program Sludge Handling	lance		ution Prevention	
	nce Schedule Pretreatment Progra	m		imedia	
☐ Effluent / Receiving Waters ☐ Laborate	I Visit		Othe	er: <u>Sign</u>	
Section	on D: Summary of Findings / Comme	nts			
(See attached sheets for narrative)					
Name (s) and Signature(s) of Inspector(s)	Agency / Office / Phone and Fax Nun			Date	
Maylynne Pynkala	TDEC / DWPC / MEA	100			
Maylynne tynkala	901-368-7997 / (FAX) 901-36	58-7979		4/2/04	
Name (s) and Signature(s) of Reviewer(s)	Agency / Office / Phone and Fax Num			Date	
Eddy Bouzeid	TDEC / DWPC / MEA	-			
Easist 1 Souman	901-368-7964 / (FAX) 901-36	68-7979	=	4/2/04	
Signature of Management Q A Reviewer				Date	
Terry R. Templeton	TDEC / DWPC / MEA	2			
1. ml 1 Notes	901-368-7959 / (FAX) 901-36			$\Lambda/2I\Omega\Lambda$	



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

Form Approved. OMB No. 2040-0057

### Water Compliance Inspection Report (Continued)

Section D: Summary of Findings / Comments

On March 24, 2004, Maylynne Pynkala conducted a Compliance Evaluation Inspection (CEI) at the A.S. Hospitality facility located in Memphis, Tennessee. I met with Mr. Greg Thomas (maintenance supervisor), and reviewed their monitoring records and discussed their self-monitoring program. Afterwards, Mr. Thomas and I toured the facility. The following is a summary of my findings and observations.

#### I. Permit (Satisfactory)

A.S. Hospitality is covered under the Tennessee Multi-Sector Storm Water Permit (TMSP) tracking number TNR050107. The TMSP authorizes the facility to discharge storm water associated with industrial activity.

The facility falls under sector X (printing and plate making facilities, Standard Industrial Classification (SIC) code 2732), of the TMSP. According to this sector, no sampling is required.

#### II. Records / Reports (Unsatisfactory)

A copy of the TMSP was on file for review.

Documentation of the quarterly visual inspection reports for storm water was not on file as required by the TMSP.

#### III. Facility Site Review (Satisfactory)

Printing operations at the A.S. Hospitality facility are conducted indoors, and the facility does not have any materials stored outside exposed to storm water runoff.

### IV. Effluent / Receiving Waters (Not Applicable)

### V. Flow Measurement (Not Applicable)

#### VI. Self Monitoring Program (Unsatisfactory)

As mentioned in Part II of this report, quarterly visual inspections have not been conducted.

#### VII. Compliance Schedule (Not Applicable)

#### VIII. Laboratory (Satisfactory)

As mentioned in Part I of this report, no sampling is required.

- IX. Operation & Maintenance (Not Applicable)
- X. Sludge Handling (Not Applicable)
- XI. Pretreatment Program (Not Applicable)

#### XII. Storm Water (Unsatisfactory)

As mentioned in Part II of this report, the permittee has not conducted the quarterly storm water observations as required by the TMSP. The Division of Water Pollution Control requires that the facility have a thorough outfall inspection checklist for its storm water outfall as mandated by the permit. During the site visit, the following were given to Mr. Thomas for his records: (1) a copy of an outfall inspection checklist form generated by the Division, (2) permit requirements covered under Sector X of the TMSP, and (3) a copy of a guidance summary for developing a storm water pollution prevention plan.

#### XIII. CSO / SSO (Sewer Overflow) (Not Applicable)

#### XIV. Pollution Prevention (Unsatisfactory)

A Storm Water Pollution Prevention Plan (SWPPP) written in 1993 was on file. However, the plan needs to be updated at least every three years or whenever any changes occur at the facility. Mr. Thomas stated that the plan would be updated, and he would follow the guidelines from the guidance summary for developing a storm water pollution prevention plan.

XV. Multi-Media (Not Applicable)

XVI. Other: Sign (Not Applicable)

# STATE OF TENNESSEE



Tracking Number: TNR050107

#### **General NPDES Permit for** STORM WATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY (TMSP)

Effective March 1, 2002, through December 31, 2006

Tennessee Department of Environment and Conservation **Division of Water Pollution Control** 401 Church Street 6th Floor, L and C Annex Nashville, Tennessee 37243-1534

Under authority of the Tennessee Water Quality Control Act of 1977 (T.C.A. 69-3-101 et seq.) and the delegation of authority from the United State Environmental Protection Agency under the Federal Water Pollution Control Act, as amended by the Clean Water Act of 1977 (33 U.S.C. 1251, et seq.):

Discharger(s):

A.S. Hospitality

Is authorized to discharge:

storm water associated with industrial activities

from a facility located at:

3493 Lamar Ave

in the city of:

Memphis

in the county:

Shelby

to receiving waters named: Nonconnah Creek

in accordance with effluent limitations, monitoring requirements and other conditions set forth herein

Coverage under this general permit shall become effective on:

March 01, 2002

and shall expire on:

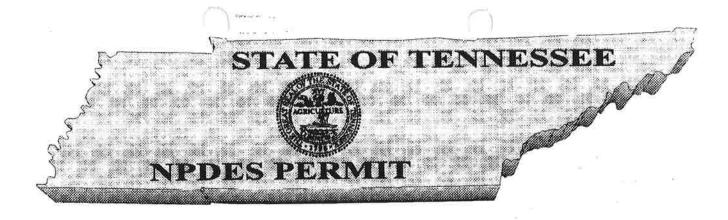
**December 31, 2006** 

Issuance date:

February 12, 2002

Sector(s): X

Paul E. Davis, Director Division of Water Pollution Control



#### No. TNR05 0107

# General NPDES Permit for STORM WATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY

Effective March 1, 1997, through December 31, 2001

Tennessee Department of Environment and Conservation
Division of Water Pollution Control
401 Church Street
6th Floor, L&C Annex
Nashville, Tennessee 37243-1534

Under authority of the Tennessee Water Quality Control Act of 1977 (T.C.A. 69-3-101 et seq.) and the delegation of authority from the United States Environmental Protection Agency under the Federal Water Pollution Control Act, as amended by the Clean Water Act of 1977 (33 U.S.C. 1251, et seq.):

Discharger: A.S. HOSPITA	LITY
is authorized to discharge:	storm water associated with industrial activity
from a facility located:	AT 3493 LAMAR AVE IN SHELBY COUNTY
to receiving waters named:	NONCONNAH CREEK
in accordance with effluent limit	tations, monitoring requirements and other conditions set forth herein.
Coverage under this general pe December 31, 2001.	rmit shall become effective on July 02, 1997 and shall expire on
Notice of Coverage Issuance da	Paul E. Davis, Director Division of Water Pollution Control

RDAs 2352 and 2366

Enclosed Industry Sectors: x



### STATE OF TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION MEMPHIS ENVIRONMENTAL FIELD OFFICE

SUITE E-645, PERIMETER PARK 2510 MT. MORIAH MEMPHIS, TENNESSEE 38115-1520

July 05, 1995

Gary Martin A.S. Hospitality 3493 Lamar Ave Memphis, TN 38118

RE:

Compliance Evaluation Inspection Permit Numbers TNR00107

**Shelby County** 

Dear Mr. Martin

On July 05, 1995, I conducted a Compliance Evaluation Inspection (CEI) of the stormwater discharges, the records and the Stormwater Pollution Prevention Plan (SWPPP) for the above referenced facilities in Shelby County. For your compliance the following observations and recommendations are made based on the findings of the inspection:

- 1. Stormwater sampling have not been conducted for 1994. A SWPPP for the above facility has been generated and the plan was onsite. Please submit a copy of the facility's detailed map to the Memphis Basin Office (MBO).
- 2. Stormwater sampling for 1995 has been conducted. Please submit a copy of the 1995 stormwater monitoring data when available.
- 3. As requested, enclosed you will find the stormwater regulations for your file.

Gary Martin July 05, 1995 Page 2

If you have any questions concerning this matter, please contact me at (901)368-7989.

Sincerely

Eddy Bouzeid

EDAT BOULEUR

Division of Water Pollution

cc: John Leonard, Manager Memphis Field Office Marguarite Smith, Enforcement And Compliance, Nashville



#### State of Tennessee Department of Environment & Conservation Division of Water Pollution Control

#### RECEIVED OCT 1 9 1992 **NOTICE OF INTENT**

for
Baseline General Permit to Discharge
Storm Water Associated with Industrial Activity

I. OWNER/OPERATOR						
Name: A. S. Hospitality		A. Owner/Operator Type: (Check one) 01. Federal 02. State 03. City 04. County				
Mailing Address: 3493 Lamar Ave		05. Mar	nagement Group	06. Private 99. Other		
City: Memphis		State:	Zp: 38118	Phone: (901)365-4740		
Contact Person: De Wa	B. 1. Owner 2. Properator 3. Owner/Operator					
II. FACILITY IDENTIFICATION						
Facility Name: A.S. Hos	pitality	County:	She	16/		
Street Address: 3493 Lay	mar Ave	Contact Pe	erson: Joe W	Warren		
City: Memphis	State: TN	38/18	Phone: (901) 365-47-42			
III. SITE DETAILS						
Enter facility location: Latitude: 35 deg. 03 min. 33 sec.  Longitude: 90 deg. 56 min. 24 sec.  Check box to indicate required map (8.5*x11") with facility		Area of facility property: 9.85 acres  Area of undeveloped land: 5.5 acres  Area of Impervious surfaces: 125,000 acres				
and receiving streams highlighted an	Area of pavement:					
IV. INDUSTRIAL INFORMATION						
A. SIC Code(s): List primary SIC code first, etc. These are 4-digit numbers.  1. 2700 2		01. Man 03. Vehi 05. Vehi	icie Storage icie Maintenance	02. ✓ Storage/Distribution 04. ☐ Trucking Terminal 06. ☐ Hazardous Waste TSD		
		07. Outside Waste Disposal 08. Recycling 09. Wastewater Treatment 10. Land Application 11. Landfill 12. Solid Waste Mgt. Unit 99. Other				
STATE USE ONLY			9	*		
Date NOi Received: 10/19/93	Reid Office	MI	ndividu.	ad Permit Rationale		
Date of Coverage:	NPDES General Permit I	No. 010	Reviewer.			

