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OCT 31 2022

Division of Water Resources  
Jackson Field Office

10/28/22

Mr. Adam Bonomo

Pretreatment Section  
Tennessee Division of Water Resources  
Tennessee Department of Environment  
and Conservation  
11<sup>th</sup> Floor, Tennessee Tower  
312 Rosa L. Parks Avenue  
Nashville, Tennessee 37243-1534

Re: Semi-Annual Report

Dear Mr. Bonomo:

Enclosed please find a copy of our Semi-Annual Report for the City of Adamsville, TN for the reporting period Beginning April 1, 2022 through September 30, 2022.

If you should have any questions please Call Jim Cooper 731-414-1167.

Sincerely,

THE CITY OF ADAMSVILLE, TENNESSEE



Scott Klinck  
Utility Director

Cc: Jackson Field Office  
File



Tennessee Department of Environment and Conservation  
 Division of Water Resources  
 William R. Snodgrass – Tennessee Tower  
 312 Rosa L. Parks Avenue, 11<sup>th</sup> Floor  
 Nashville, TN 37243-1102  
 (615) 532-0625

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Division of Water Resources  
 Jackson Field Office

**CONTROL AUTHORITY PRETREATMENT SEMI-ANNUAL/ANNUAL REPORT**

<b>Control Authority Identification:</b>				
Control Authority Name :	City of Adamsville, Tennessee			
Report Date :	October 15, 2022			
Reporting Period Covered by this report	From	April 1, 2022	To	September 30, 2022
Reporting Period Covered by previous report	From	October 1, 2021	To	March 31, 2022

Name of Wastewater Treatment Plant(s)	NPDES Permit No.
1. Adamsville Lagoon	TN0064785
2.	
3.	
4.	
5.	

Person to contact concerning this report: Mr. Scott Klinck	Title or Position: Public Works Director		
Mailing Address: P. O. Box 301	City: Adamsville	State: TN	Zip: 38310
Phone number(s): (731) 632-4214	E-mail (optional):		
Fax number (optional):	Website (optional):		

<b>Report Certification:</b> (must be signed in accordance with the requirements of Tennessee Rule 1200-4-14-.12(13))	
"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(s) who manage the system or are directly responsible for gathering the information, the submitted information 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. A false statement is subject to the penalties of perjury."	
Name: (print or type) Scott Klinck	Title: (print or type) Public Works Director
Signature: <i>Scott Klinck</i>	Date: 10/28/22

### **Pretreatment – Narrative Summary**

1. Sampling of the influent and effluent occurred March 16, 2022. All parameters were in compliance.
2. Compliance Monitoring was conducted at Dan's Polishing Shop March 16, 2022 and conducted at Masco Bath Landfill March 16, 202 both industries were found in compliance with their permit.
3. Masco Bath Landfill is allowed up to 30,000 gpd automated discharge without prior notification to the City of Adamsville.
4. Industrial inspections were conducted July 27, 2021 at Dan's Polishing Shop and Masco Bath and found to be in compliance with their permits.

**Form 1a**

**Results of Sampling at Control Authority**

Sample Date(s): March 16, 2022 – influent 88% Palmer 12% Lagoon and Effluent

Column 1	Column 2	Column 3	Column 4	Column 5	Column 6
Parameter	Influent (mg/l)	Protection criteria (mg/l)	Effluent (mg/l)	Pass Through Limit (mg/l)	Removal Rate (%)
Copper (Cu)	0.0136	0.205	0.0027	0.08	80
Chromium III	0.003	--	<0.001	--	>66.6
Chromium VI	<0.010	--	<0.010	0.114	--
Chromium Total	0.003	0.353	0.001	--	>66.6
Nickel (Ni)	0.0024	0.265*	0.0290	0.18	--
Cadmium (Cd)	0.0001	0.02	<0.0001	0.005	--
Lead (Pb)	0.0009	0.063	<0.0005	0.045	>44.4
Mercury (Hg)	<0.00013	0.0001	<0.00013	0.000051	--
Silver (Ag)	0.00001	0.012	<0.0001	0.00248	--
Zinc (Zn)	0.050	0.588	<0.02	0.20	>60
Cyanide (Cn)	0.009	0.258	0.008	0.0052	>11
Phenols, Total	0.007	0.179	<0.002	0.05	>71
Toluene					
Benzene					
1,1,1-trichloroethane					
Ethylbenzene					
Carbon tetrachloride					
Chloroform					
Tetrachloroethylene					
Trichloroethylene					
1,2 trans dichloroethylene					
Methylene chloride					
Naphthalene					
Total phthalates					

Include any parameters sampled in the reporting period including the routine semiannual sampling as well as the effluent sampling specified in Section III of the National Pollution Discharge Elimination System (NPDES) permit, including applicable toxic organics (i.e., toluene, benzene, 1,1,1 – trichloroethane and chloroform).  
**You must sample for all parameters in your NPDES Permit at the required frequency (See Part 3 of your NPDES permit for required pretreatment monitoring).**

**Form 1b  
Biosolids**

What does the Control Authority do with the sludge/biosolids? N/A

If biosolids are land-applied, please fill out the following Table.

<b>Parameter</b>	<b>Biosolids Concentration (mg/kg)</b>	<b>503 Table 1 limits Ceiling Concentration (mg/kg)</b>	<b>503 Table 3 limits Monthly Ave. (mg/kg)</b>
Arsenic		75	41
Cadmium		85	39
Copper		4300	1500
Lead		840	300
Mercury		57	17
Molybdenum		75	N/A
Nickel		420	420
Selenium		100	100
Zinc		7500	2800

Were there any samples of biosolids that exceeded the ceiling concentrations from 40 CFR Part 503 (Table 1)?

What date(s)?

**Form 2**  
**Report of Upsets, Protection Criteria Violations, Biosolids Violations and Pass-Through Limit Violations**

Type of Incident	Date	Explanation of Incidents	Corrective Action Taken
None			

\* Give a detailed explanation of the causes of the incident and the corrective action taken to date. The corrective action should also include any plans the Control Authority has to identify or correct the problem. If there is not enough room on this form, include the information in the Narrative Summary.

## Form 3 Industrial User Summary

Industrial User Name and Mailing Address	Contact (indicate Mr./Ms.) Phone #/Fax# and email address (optional)	Type of Industry **	Actual Flow (GPD)
Dan's Polishing Shop 145 Duren Industrial Dr. Adamsville, TN 38310	Mr. Danny Kilburn (731)632-0103 Fax: (731)632-1143	Metal Finishing- Chrome Plating	55
Masco Bath Landfill 320 Industrial Park Rd. Adamsville, TN 38310	Ms. Kim Eakes (615)895-8221 Fax: (615)895-0632	Post Closure Industrial User Landfill,	4,607

**\*\*If a Significant Industrial User (SIU) is Categorical, list the applicable category (i.e., metal finisher, electroplater, leather tanner, etc.). Non-categorical SIUs should be listed as SN (Significant Non-Categorical), with a description of the process (i.e., SN-landfill or SN-hospital). All Non-significant Categorical Industrial Users (NSCIU) should be listed on the form and identified as an NSCIU. Information on NSCIUs is required on Form 3, but not required on any other form in this report. Industries that are not significant and not categorical are not required to be listed in this report. However, if you wish to list them on this form, please identify them as "Other."**

<b>Form 4</b>				
<b>Industrial User Monitoring Report</b>				
Column 1	Column 2	Column 3	Column 4	Column 5
Industrial User Name and Mailing Address	Control Authority Inspection Date(s)	Control Authority Sampling Frequency	Control Authority Sampling Date(s)	SIU Self-Monitoring Dates(s)
Dan's Polishing Shop 145 Duren Industrial Dr., Adamsville, TN 38310	7/27/2022	1/year	3/16/2022	9/26/2022 6/14/2022
Masco Bath Landfill 320 Industrial Park Rd., Adamsville, TN 38310	7/27/2022	1/year	3/16/2022	Monthly – conventional Quarterly all



## Form 5a Industrial User Compliance Report

Semi-annual reporters only must complete this form  
(For semi-annual reporting period April 1, 2022 – September 30, 2022)

Column 1	Column 2 January – March		Column 3 April – June		Column 4 July – September		Column 5 January – June		Column 6 April – September	
Industrial User	Parameters Violated (conc/limit)	Total Number of Samples	Parameters Total Violated (conc/limit)	Total Number of Samples	Parameters Total Violated (conc/limit)	Total Number of Samples	Chronic Viol. (Yes or No)	TRC Viol. (Yes or No)	Chronic Viol. (Yes or No)	TRC Viol. (Yes or No)

Use one line for each parameter for each SIU with violations, showing whether a Technical Review Criteria (TRC) or Chronic Violation resulted: Yes for violations resulting in TRC or Chronic – both are Significant Non-Compliance (SNC) or No for violations not resulting in TRC/Chronic Violations. Please note that monthly average and daily maximum for a specific parameter are considered to be separate limitations. Therefore, SNC would be calculated separately for each limitation. "Conc" stands for concentration.

**Form 5b**

**Industrial User Compliance Report**

Semi-annual reporters only must complete this form  
(For semi-annual reporting period October 1, - March 31, )

Column 1	Column 2		Column 3		Column 4		Column 5		Column 6	
	July - September		October - December		Jan - March		July - December		October - March	
Industrial User	Parameters Violated (conc/limit)	Total Number of Samples	Parameters Total Violated (conc/limit)	Total Number of Samples	Parameters Total Violated (conc/limit)	Total Number of Samples	Chronic Viol. (Yes or No)	TRC Viol. (Yes or No)	Chronic Viol. (Yes or No)	TRC Viol. (Yes or No)

Use one line for each parameter for each SIU with violations, showing whether a Technical Review Criteria (TRC) or Chronic Violation resulted: Yes for violations resulting in TRC or Chronic - both are Significant Non-Compliance (SNC) or No for violations not resulting in TRC/Chronic Violations. Please note that monthly average and daily maximum for a specific parameter are considered to be separate limitations. Therefore, SNC would be calculated separately for each limitation. "Conc" stands for concentration.

## Form 5c Industrial User Compliance Report

Annual reporters only must complete this form

(For semi-annual reporting period January 1, – December 31, )

<b>Column 1</b>	<b>Column 2</b>		<b>Column 3</b>		<b>Column 4</b>		<b>Column 5</b>		<b>Column 6</b>	
	October – December	January – March		April – June		July – September		October – December		
Industrial User	Parameters Violated (conc/limit)	Total Number of Samples	Parameters Total Violated (conc/limit)	Total Number of Samples	Parameters Total Violated (conc/limit)	Total Number of Samples	Parameters Total Violated (conc/limit)	Total Number of Samples	Parameters Total Violated (conc/limit)	Total Number of Samples

Use one line for each parameter for each SIU with violations, showing whether a Technical Review Criteria (TRC) or Chronic Violation resulted: Yes for violations resulting in TRC or Chronic – both are Significant Non-Compliance (SNC) or No for violations not resulting in TRC/Chronic Violations. Please note that monthly average and daily maximum for a specific parameter are considered to be separate limitations. Therefore, SNC would be calculated separately for each limitation. “Conc” stands for concentration.

# Form 5d Industrial User Compliance Report

Annual reporters only must complete this form

(For semi-annual reporting period January 1, \_\_\_\_\_ – December 31, \_\_\_\_\_ )

<b>Column 1</b>	<b>Column 2</b> October – March		<b>Column 3</b> January – June		<b>Column 4</b> April – September		<b>Column 5</b> July – December	
Industrial User	Chronic Viol. (Yes or No)	TRC Viol. (Yes or No)	Chronic Viol. (Yes or No)	TRC Viol. (Yes or No)	Chronic Viol. (Yes or No)	TRC Viol. (Yes or No)	Chronic Viol. (Yes or No)	TRC Viol. (Yes or No)

Use one line for each parameter for each SIU with violations, showing whether a Technical Review Criteria (TRC) or Chronic Violation resulted: Yes for violations resulting in TRC or Chronic – both are Significant Non-Compliance (SNC) or No for violations not resulting in TRC/Chronic Violations. Please note that monthly average and daily maximum for a specific parameter are considered to be separate limitations. Therefore, SNC would be calculated separately for each limitation. "Conc" stands for concentration.

## Form 6 Enforcement and Compliance

Industrial User	Verbal Warnings (1) (Enter Number)	Notice of Violation (Enter Number)	Compliance Schedule Conformity (2)	Administrative Orders (Enter Number)	Number of Violations Resolved
NONE					

**1 Verbal warnings include phone calls and site visit discussions.**

**2 Use the following code:**

- In compliance with schedule = Yes
- Out of compliance with schedule = No
- Facility not on a schedule = NA

**Note: Describe compliance schedule in a footnote or in the Narrative Summary, giving the date issued, the violation and due dates for major milestones.**

## Form 7

### Pretreatment Performance Summary

<b>I. General Information</b>		
Control Authority Name: City of Adamsville, Tennessee		
Address: P. O. Box 301	City: Adamsville, Tennessee 38310	
Contact Person: Mr. Scott Klinek	Contact Phone Number: (731) 632-4214	
Reporting Period: April 1, 2022 to September 30, 2022	NPDES Number: TN0064785	
Number of Categorical SIUs:	Number of Non-Categorical SIUs:	Total Number of SIUs:
1	1	2

<b>II. Significant Industrial Compliance</b>	SIUs	
	Categorical	Non- Categorical
1) No. of SIUs in Significant Non-compliance (SNC)	0	0
2) Reasons for Significant Non-compliance (SNC)	0	0
a) In SNC for Violations of pretreatment standards	0	0
b) In SNC for Reporting Violations	0	0
c) In SNC for Compliance Schedule Violations	0	0
d) In SNC for Other (explain in Narrative Summary)	0	0

<b>III. Monitoring</b>	SIUs	
	Categorical	Non- Categorical
1) Facilities Monitored by CA (samples analyzed for all SIU permit parameters):		
a) No. of SIUs Sampled by the Control Authority (CA)	1	1
b) No. of SIUs Inspected by the CA	1	1
2) Total Monitoring Events:	2	2
a) No. of Samples by the CA	1	1
b) No. of Inspections by the CA	1	1
3) How many SIUs do not have a current control mechanism (permit)	0	0

<b>IV. Enforcement</b>	SIUs	
	Categorical	Non- Categorical
1) SIUs Subject to Any Enforcement Actions (include verbal warnings	0	0
2) SIUs Listed in the Newspaper for SNC in this period	0	0
3) Notices of Violations Issued *	0	0
4) Administrative Orders Issued *	0	0
5) No. of SIUs on Compliance Schedules (anytime in period)	0	0
6) Suits Filed:		
a) Civil Suits *	0	0
b) Criminal Suits *	0	0
7) Other Actions Taken (sewer bans, etc. but not verbals) *	0	0
8) Penalties Collected: (not surcharges)		
a) No. of SIUs from whom penalties were collected	0	0
b) Total Dollars (\$) collected in the period	0	0

\* Enter the number of ACTIONS, not the number of SIUs