



**DEPARTMENT OF ENVIRONMENT AND CONSERVATION**

**DIVISION OF WATER RESOURCES**

William R. Snodgrass - Tennessee Tower

312 Rosa L. Parks Avenue, 11th Floor

Nashville, Tennessee 37243-1102

(615) 532-0625



**ANNUAL STORMWATER MONITORING REPORT**  
 for Stormwater Discharges Associated with Industrial Activity under the  
**TENNESSEE MULTI-SECTOR GENERAL PERMIT (TMSP)**

Facility Name:	<b>Iskiwitz Metals</b>	TMSP Number:	<b>TNR054012</b>
Contact Person:	<b>Jamie Iskiwitz</b>	Phone Number:	<b>(901) 526-8944</b>
This report is submitted for the following calendar year (e.g. 2015):	<b>2018</b>	Outfall Number:	<b>SW-1</b>
List all TMSP sectors which apply to discharge from this outfall:	<b>N</b>	Sample Date:	<b>12/20/18</b>
Low Concentration Waiver (Note 3): list all parameters for which the facility is certifying that there has not been a significant change in industrial activity or the pollution prevention measures in the area of the facility that drains to the outfall for which sampling was waived:			

**DIRECTIONS:**

In the spaces below, provide the results of stormwater monitoring for the designated outfall. For each outfall, one Annual Stormwater Monitoring Report must be submitted. The parameters for which monitoring must be conducted depend on which industry sector(s) of the TMSP applies to the discharge. Look up your sector(s) in the TMSP and analyze for the parameters that apply. If parameter is not listed below, submit additional sheets. All samples should be grab.

Parameter	Cut-off Conc. (mg/L)	Annual Sample Result (mg/L)	Parameter (continued)	Cut-off Conc. (mg/L)	Annual Sample Result (mg/L)
Aluminum, Total	0.75	0.50	Magnesium, Total	0.0636	
Ammonia	4.0		Mercury, Total	0.0024	
Arsenic, Total	0.1685		Nickel, Total	0.875	
BOD, 5-Day	30		Nitrate + Nitrite Nitrogen	0.68	
Cadmium, Total	0.0159		Oil and Grease	15	
COD	120	15	pH	5.0-9.0	
Copper, Total	0.018	<0.005	Phosphorus, Total (as P)	2.0	
Cyanide, Total	0.064		Selenium, Total	0.2385	
Fluoride	1.8		Silver, Total	0.032	<0.001
Iron, Total	5.0	1.25	Total Suspended Solids	150	28
Lead, Total	0.15	0.103	Zinc, Total	0.395	0.106



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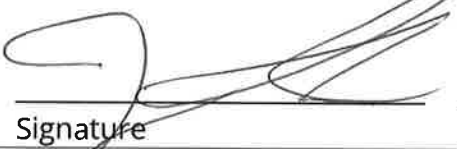
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**CERTIFICATION AND SIGNATURE**

(Make all entries in ink, not with a pencil. This report must be signed by a responsible corporate officer for a corporation, a general partner for a partnership, the proprietor for a sole proprietorship, or a principal executive officer or ranking elected official for a public agency.)

I certify under penalty of law that this document and all of its attachments were prepared under my direction or my supervision in accordance with a system designed to assure qualified personnel properly gathered and evaluated 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 there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. As specified in Tennessee Code Annotated Section 39-16-702(a)(4), this declaration is made under penalty of perjury.

<u>Jamie Iskiwitz</u>	<u>Owner</u>		<u>1/12/19</u>
Printed Name	Official Title	Signature	Date



L · A · B S · C · I · E · N · C · E · S

YOUR LAB OF CHOICE

2065 Lebanon Rd  
Mount Juliet, TN 37122  
Phone: 615-758-5858  
Phone: 800-767-5859  
Fax: 615-758-5859



Project: Iskiwitz Metals  
Report Number: 532-12-2223  
ECT, Inc. Account Number: 7264A

Report Date: 01/06/2019  
Received: 12/22/2018

Lab No: 00874

Sample ID: SW-1

Sampled: 12/20/2018

Matrix: Aqueous

TEST	RESULTS	UNITS	SQL	DF	DATE/TIME ANALYZED	BY	METHOD
Total Aluminum	0.50	mg/L	0.001	1	01/06/19 11:45	BKN	200.7
Total Copper	<0.005	mg/L	0.001	1	01/06/19 11:45	BKN	200.7
Total Iron	1.25	mg/L	0.001	1	01/06/19 11:45	BKN	200.7
Total Lead	0.103	mg/L	0.001	1	01/06/19 11:45	BKN	200.7
Total Silver	<0.001	mg/L	0.001	1	01/06/19 11:45	BKN	200.7
Total Zinc	0.106	mg/L	0.001	1	01/06/19 11:45	BKN	200.7
COD	15	mg/L	1.00	1	01/06/19 10:15	MLT	410.4
TSS	28	mg/L	1.00	1	01/06/19 10:15	MLT	160.2

**ECT - Memphis, TN**  
**751 E. Brookhaven Circle**  
**Memphis, TN 38117**

Report to: **DiAne Gordon**

Project Description: **Iskiwitz Metals**

Phone: **901 237-5798**

Collected by (print): **J.I.**

Collected by (signature):

Immediately Packed on Ice N  Y

Rush? (Lab MUST Be Notified)  
 \_\_\_ Same Day \_\_\_ Five Day  
 \_\_\_ Next Day \_\_\_ 5 Day (Rad Only)  
 \_\_\_ Two Day \_\_\_ 10 Day (Rad Only)  
 \_\_\_ Three Day

Billing Information:

**Accounts Payable**  
**751 E. Brookhaven Circle**  
**Memphis, TN 38117**

Email To: **diane@ectmemphis.com**

City/State Collected: **Memphis, TN**

Lab Project # **532-12-2223**

P.O. #

Quote #

Date Results Needed

No. of Cntrs

Comp/Grab Matrix \* Depth Date Time

Sample ID **SW-1** **Grab** **SW** **12/20/18** **4:15 pm** **3**

Remarks: **ph was taken w/in 15 min of sampling**

\* Matrix: **SS - Soil AIR - Air F - Filter**  
**GW - Groundwater B - Bioassay**  
**WW - Waste Water**  
**DW - Drinking Water**  
**OT - Other**

Samples returned via:  UPS  FedEx  Courier

Relinquished by: (Signature) **DiAne Gordon**

Date: **12-24-18** Time: **9am**

Relinquished by: (Signature)

Date: Time:

Received by: (Signature)

Date: **12-24-18** Time: **9am**

Received by: (Signature)

Date: **12/27/18** Time: **11:00am**

Received for lab by: (Signature)

Date: **12/27/18** Time: **11:00am**

Trip Blank Received: Yes  No

HCL / MeOH TBR

Temp: **24** °C

Bottles Received: **3**

Date: **12/27/18** Time: **11:00am**

Analysis / Container / Preservative

Pres Chk

TSS  
 COD  
 zinc  
 silver  
 Lead  
 Iron  
 Copper  
 Aluminum

X

Chain of Custody Page \_\_\_ of \_\_\_



L · A · B S C I E N C E S

YOUR LAB OF CHOICE



12065 Lebanon Rd  
 Mount Juliet, TN 37122  
 Phone: 615-758-5858  
 Phone: 800-767-5859  
 Fax: 615-758-5859

L #

Table #

Acctnum: **ECTMTN**

Template:

Prelogin:

TSR: **Chris McCord**

PB:

Shipped Via:

Remarks

Sample # (fab only) **20874**

Sample Receipt Checklist  
 COC Seal Present/Intact: **Y** N  
 COC Signed/Accurate: **Y** N  
 Bottles arrive intact: **Y** N  
 Correct bottles used: **Y** N  
 Sufficient volume sent: **Y** N  
 If Applicable  
 VOA Zero Headspace: **Y** N  
 Preservation Correct/Checked: **Y** N

If preservation required by Login: Date/Time

Hold: Condition: **OK**