

TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVAT

Division of Water Resources, William R. Snodgrass TN Tower, 312 Rosa L. Parks Ave. 11th Floor

Nashville, TN 37243, 1-888-891-TDEC

JAN 152016

Annual Monitoring Report for Stormwater Discharges Associated with Industrial Activities and Etheronmental Tennessee Multi-Sector General NPDES Permit (TMSP) Field Office

Facility Name:	Iskiwitz Metals		TMSP Number:	TNR054012
Contact Person:	Jamie Iskiwitz		Phone Number:	901 526-8944
This report is submi	itted for the following calendar year (e.g. 2002):	2015	Outfall Number:	SW-001
List all TMSP secto	rs which apply to discharge from this outfall:	N	Sample Date:	12/21/15

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:

In the spaces below, provide the results of storm water monitoring for the designated outfall. 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 permit and analyze for the

parameters which apply. If parameter is not listed below, submit additional sheets. All samples should be collected by grab technique.

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	0.473	Magnesium, Total	0.064	
Ammonia	4.0		Mercury, Total	0.0024	
Arsenic, Total	0.15		Nickel, Total	0.875	
BOD, 5-Day	30		Nitrate + Nitrite Nitrogen	0.68	
Cadmium, Total	0.0021		Oil and Grease	15	
Chromium, Total	1.8		рН	4.0-9.0	
COD	120	28	Phenols	0.016	
Copper, Total	0.018	0.008	Phosphorus, Total (as P)	2.0	
Cyanide, Total	0.022		Selenium, Total	0.005	
Fluoride	1.8		Silver, Total	0.0038	0.002
Iron, Total	5.0	2.733	Total Suspended Solids (TSS)	150	92
Lead, Total	0.156	0.091	Zinc, Total	0.395	2.444

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.

Jamie Iskiwitz Owner

Official Title Permittee Name (print)

Signature

1/11/16 Date

INSTRUCTIONS

1. The purpose of this form is to report storm water (SW) monitoring results under the TMSP. Only 1 sample per calendar year is required (except Sectors J &H, for more details see the TMSP at www.tdec.net/permits/tmsp.htm). Grab samples should be collected within the first 30 minutes (or as soon thereafter as practical, but not to exceed one hour) of when the runoff or snowmelt begins discharging. A separate form must be submitted for each outfall. If more than I sample is collected at any outfall, submit the average results of all monitoring data (for calculating average, use 1/2 of a detection level, if parameter was not detected). New facilities must conduct sampling in the year during which permit coverage was obtained and during each following year. The completed form must be submitted by March 31 of the following year.

2.If the results of annual SW runoff monitoring demonstrates that the facility has exceeded the cut-off concentration(s), the permittee must inform the Division's local Environmental Assistance Center (EAC) in writing within 30 days from the time SW monitoring results were received, describing the likely cause of the exceedance(s). Furthermore, within 60 days from the time SW monitoring results were received, the facility must review its storm water pollution prevention plan (SWPPP), make any modifications or additions to the plan which would assist in reducing runoff concentrations to less than the monitoring cut-off concentrations for that parameter, and submit to the local EAC a summary of the proposed SWPPP modifications including a timetable for implementation.

3.Low Concentration Waiver - When the average concentration for a pollutant calculated from monitoring data collected from the first 4 calendar years of monitoring is less than the cut-off concentration, a facility may waive monitoring requirements in the last annual monitoring period. This form should be used for certification of low concentration waiver provision.

Complete, sign and date this form before it is submitted. Keep a copy of the completed form for your records. Submit the original to: Compliance & Enforcement Unit, William R. Snodgrass Tower, 312 Rosa L. Parks Ave, 11th Floor, Nashville, TN 37243 or you may submit electronically to DWRWater.Compliance@tn.gov

CN-1115 (Rev. 1-14) RDA 2366

CORNERSTONE LABORATORIES, LLC

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January 6, 2016

SITE: Iskiwitz Metals

ACCOUNT#: 01-0386

REPORT NUMBER: 926-12-881

Certificate of Analysis

Laboratory Number: 97855

Sample ID: Iskiwitz SW-001

		Detection			
ANALYSIS	RESULT	Limit	METHOD	DATE TIME ANALYZED	ANALYST
Aluminum	0.473 mg/L	0.005 mg/L	200.7	01/06/16 9:25	M Blum
Copper	0.008 mg/L	$0.005~\mathrm{mg/L}$	200.7	01/06/16 9:27	M Blum
Iron	2.733 mg/L	0.005 mg/L	200.7	01/06/16 9:29	M Blum
Lead	0.091 mg/L	0.005 mg/L	200.7	01/06/16 9:31	M Blum
Silver	< 0.002 mg/L	0.002 mg/L	200.7	01/06/16 9:33	M Blum
Zinc	2.444 mg/L	0.005 mg/L	200.7	01/06/16 9:35	M Blum
COD	28 mg/L	1.00 mg/L	5220	01/06/16 12:15	M Blum
TSS	92 mg/L	1.00 mg/L	160.2	01/06/16 12:40	M Blum



CHAIN OF CUSTODY

1775 Moriah Woods Blvd., Ste. 12, Memphis, TN 38117

(901)398-4001 Fax (901)398-4223

www.cornerstonelab.com

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									For Laboratory Use	Use	
WOO S	PANY NAN	COMPANY NAME: Environmental Testing & Consulting of the	onsulting o	f the Americas	icas	Rano	4#.92	Bond #: 926/2881	Acct. #:	P.O. #:	
INDIV	IIDUAL NA	INDIVIDUAL NAME: DiAne Gordon				- Inchar)			
STRE	FT ADDR	STREET ADDRESS: 751 E Brookhaven Circle							Sample Check-In	k-In	
CITY	CITY: Memphis		STATE: TN		ZIP: 38117	8	Ice Present	Broken	Evidence Tape Present	Acid Preserved	Base Preserved
HO	PHONE: (901) 685-2077	85-2077	FAX: (901) 685-2261	35-2261		ES	ON	A YES (NO A	NO NIA YES (NO NIA YES NO (NIA) (YES	(YES)NO NIA	YES NO NIA
EMA	IL ADDRE	EMAIL ADDRESS: dgordon@etcamemphis.com	E)	Dorforming Che		414
SAM	SAMPLED BY: NAME	NAME DiAne Gordon		Initials:	ÐQ			ab rersonner	Lab Personnel Periorming Check-in (minus):		
	Lab ID	Sample Identification	SAMPLES TAKEN Date Time	PLES KEN Time	PRESE Type	PRESERVATION Type Temp. pH	முடகை	OOE	Analysis	Analysis Requested	
7	9785	Iskiwitz Metals SW-001	12/21/15	5:30 pm	SW			-	, COD, copper,	Aluminum, COD, copper, Iron, lead, silver, zinc, TSS	r, zinc, TSS
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Relir	nquished by	Relinquished by: DiAne Gordon	Date	Date: 12/22/15	Time: 10 am		Received by:	by:	Mere	Date: //	CATIMES IL
Re	Relinquished by:	5	Date:		Time:	~	eceived	Received in Lab by:		Date:	Time: