I. National Database Information			
Inspection Date:	04/12/2021-04/14/2021	**NPDES ID Number:**	CO0037966
Entry/Exit Time:	9:00 am / 4:00 pm	**Inspection ID:**	202104_CO0037966

II. Facility Location Information	
Name:	Centennial Water and Sanitation District
Location:	8700 S Santa Fe Drive, Littleton, Colorado 80125
Mailing Address:	62 W Plaza Drive, Highlands Ranch, Colorado 80129

III. Contact Information		
	Name, Title	**Affiliation**
Facility Representatives:	Nick Marusin, Laboratory Supervisor	District
	Thomas Hecker, Superintendent of Field Operations	District
	Matt Tyler, Lead Meter Technician	District
	Mike Dice, Meter Tech Technician	District
	Nick Tino, Water Quality Analyst II	District
	Julie Tinetti, Regulatory Compliance Coordinator	District
Regulatory Inspectors:	Kristin Ratajczak, Physical Scientist (lead)	EPA
	Akash Johnson, Environmental Engineer	EPA

IV. Industrial User (IU) Characterization		
IUs currently identified by the Control Authority (CA)	**IU Type**	
0	**Significant Industrial Users (SIUs = CIUs + non-categorical)**	
	0	**Discharging Non-Categorical SIUs**
	0	**Categorical Industrial Users (CIUs)**
	0	**Middle Tier CIUs**
	0	**Zero-Discharging SIU with Categorical Process**
0	**Non-significant CIU (NSCIU)**	
1	**Other Regulated IUs (e.g. permitted IUs)** **Describe:** TruGreen-Chemlawn	
0	**Waste Haulers**	

V. IU Files Reviewed			
#	**IU Name**	**Permit Type**	**IU inspected during PCI?**
1	TruGreen-Chemlawn	Zero discharging non-categorical IU	No

VI. Inspection Summary
Due to the COVID-19 pandemic, this pretreatment compliance inspection (PCI) was conducted remotely, via the Microsoft Teams platform with the Centennial Water and Sanitation District (CWSD or District) uploading program records to OneDrive.

Upon beginning the opening conference, the U.S. Environmental Protection Agency (EPA) inspectors, Kristin Ratajczak and Akash Johnson (jointly referred to as inspectors), met with the District's representatives, Mr. Nick Marusin, Mr. Thomas Hecker, Mr. Mike Dice, and Mr. Nick Tino. Ms. Ratajczak explained the inspectors were fully credentialed and offered contact information to the District for confirmation. The inspectors discussed the purpose and format of the inspection and interviewed the District representatives about the District's approved pretreatment program. The District owns and operates one wastewater treatment facility (WWTF or POTW) that is subject to pretreatment regulations and operates pursuant to Colorado Discharge Permit System (CDPS) permit number CO0037966 (the Permit); the Marcy Gulch WWTF. Throughout the inspection, the inspectors evaluated the District's pretreatment program by referring to and completing bound or electronic checklists with questions reflecting the federal regulatory requirements at 40 C.F.R. §403.

The inspectors proceeded to review records from January 2019 to December 2020. During the file review, the inspectors also performed a review of the adequacy of the District's legal authority, procedures, and enforcement response plan (ERP) with respect to federal regulatory requirements. A summary of preliminary findings was discussed with District representatives at the conclusion of the inspection and is provided in Part VII, below. On April 29, 2021, the EPA sent an email to the District with the preliminary findings from the inspection.

Report Review and Signature		
Drafter Name	Address/Phone Number	Date
Kristin Ratajczak	**U.S. EPA Region 8** **1595 Wynkoop Street** **8ENF-W-NW** **Denver, Colorado 80202** **303-312-6310**	**9/16/2021**
Reviewer Name	Address/Phone Number	Date
Akash Johnson	**U.S. EPA Region 8** **1595 Wynkoop Street** **8ENF-W-NW** **Denver, Colorado 80202** **303-312-6067**	**9/23/2021**
Supervisor Signature/Name	Address/Phone Number	Date
X MICHAEL BOEGLIN Digitally signed by MICHAEL BOEGLIN Date: 2021.09.25 23:49:11 -06'00'	**U.S. EPA Region 8** **1595 Wynkoop Street** **8ENF-W-NW** **Denver, Colorado 80202**	**9/25/2021**
Michael Boeglin	**303-312-6250**	

VII. Findings Summary Table		
Finding Number – Title from Table VIII, Evaluation	**Corrective Action(s)**	**Recommendation(s)**
Program Modifications		
Finding 1 – The legal authority had not been updated to include the District's implementation of a one-time compliance report for dental dischargers.		X
IU Characterization		
Finding 2 – IWSs were not always signed by authorized representatives.	X	
Finding 3 – CWSD procedures did not adequately address characterization of IUs.	X	
Finding 4 – Nondomestic users in the service area were not adequately characterized.	X	
Finding 5 – The District did not have an adequate procedure in place to update and maintain information previously provided by existing IUs.	X	
Finding 6 – The District did not have a procedure in place to notify IUs of applicable requirements and their status.	X	
Control Mechanism Evaluation		
Finding 7 – The 2020 ZDP did not require the facility to notify the District of spills or slug discharges.	X	
Finding 8 – The most recent permit application submitted by TruGreen did not describe current conditions at the facility.		X
Compliance Monitoring		
Finding 9 – The District was using inspection templates prepopulated with previously gathered information.		X
Finding 10 – The District was reviewing reports submitted electronically to evaluate compliance but was not compliant with the CROMMER.	X	
Finding 11 – Three reporting violations occurred since 2019 at TruGreen.	X	
Finding 12 – Dental facilities in the service area were noncompliant with federal regulations and/or the District's dental amalgam program requirements.	X	
Enforcement		
Finding 13 – Enforcement responses were not issued to TruGreen for reporting violations that occurred since 2019.	X	
Finding 14 – Enforcement responses were not issued to noncompliant dental dischargers.	X	
Finding 15 – Enforcement responses issued to IUs subject to the FOG program may not align with the ERP	X	
Finding 16 – The ERP did not include SNC considerations for identified violations.	X	

VII. Findings Summary Table		
Finding Number – Title from Table VIII, Evaluation	**Corrective Action(s)**	**Recommendation(s)**
Additional Evaluations		
Finding 17 – The CWSD should evaluate its IGA with North Douglas County Water and Sanitation to ensure the IGA is implemented as written.	X	
Finding 18 – The CWSD should evaluate its IGA with Chatfield State Park to ensure its protective of the POTW.		X
Finding 19 – The District had not investigated recurring slug loads that exceeded the MAHL.	X	
Finding 20 – Data submitted in the annual report to the EPA was inaccurate.	X	
Finding 21 – The IPP SOP Manual should be updated.		X
Finding 22 – The FOG procedures should be updated.		X

VIII. Evaluation

A. Control Authority (CA) Pretreatment Program Modification

1. When was the last program modification? Did the CA notify the EPA of program modifications? (40 C.F.R. §403.18)

The District's pretreatment program was approved on March 27, 1985 and has subsequently incorporated substantial modifications as approved by the EPA. The EPA approved the last modifications to the District's pretreatment program on June 7, 2016, which included an update to the District's local limits. During the PCI, the District indicated that it may elect to revise its legal authority. 40 C.F.R. §403.18 requires the District to submit program modifications to the EPA if it wants to change its approved pretreatment program.

Finding 1 – The legal authority had not been updated to include the District's implementation of a one-time compliance report for dental dischargers.

The CWSD was proactive in regulating discharges from dental facilities in the service area and started its dental amalgam sector control program years prior to the promulgation of the federal regulation and conducts annual inspections of dental facilities. Though the original sector control program requirements did not align with the requirements in the federal regulation, the CWSD implemented a one-time compliance report (OTCR) form that, when filled out in its entirety, gathered all information required by 40 C.F.R. §441. Because the CWSD elected to include the dental amalgam sector control program in the Rules and Regulations, the EPA recommends the legal authority be updated to include the OTCR. Alternatively, the District could elect to remove references to the dental amalgam program from the legal authority if the CWSD does not intend to be more stringent in its requirements than the federal regulation; 40 C.F.R. §441 is self-implementing.

Pretreatment Requirements

40 C.F.R. 403.8(f)(1) states, "The POTW shall operate pursuant to legal authority enforceable in Federal, State or local courts, which authorizes or enables the POTW to apply and to enforce the requirements of sections 307 (b) and (c), and 402(b)(8) of the Act and any regulations implementing those sections. Such authority may be contained in a statute, ordinance, or series of contracts or joint powers agreements which the POTW is authorized to enact, enter into or implement, and which are authorized by State law."

Recommendation

The EPA recommends the legal authority be updated to include the OTCR being implemented by the District. Alternatively, the CWSD could elect to remove references to the dental amalgam program from the legal authority if the District does not intend to be more stringent in its requirements than the federal regulation; 40 C.F.R. §441 is self-implementing. No response is requested pursuant to this recommendation.

B. IU Characterization

1. Describe the procedure for identifying and locating IUs that might be subject to the pretreatment program. Has the CA identified and located all applicable IUs (non-categorical

SIUs, CIUs, NSCIUs, etc.)? (40 C.F.R. §403.8(f)(2)(i))

The District had procedures in place to identify new IUs in the service area. Prior to a building permit being approved for a business, the facility was required to complete an industrial waste survey (IWS) that was reviewed by the industrial pretreatment program (IPP). IPP staff evaluated the submitted IWS based on the business type, water usage, and other general details.

In addition to identifying IUs that may require permitting, the District had three sector control programs to control IU discharges: the fats, oils, and grease (FOG) program, which regulated the best management practices of grease interceptors and sand/oil separators; the dental amalgam program, which regulated the best management practices of dental amalgam separators; and the silver reclamation program, which regulated the best management practices of silver recovery systems. The IU identification procedures above were also used to identify IUs that may be subject to regulation under these sector control programs.

Finding 2 – IWSs were not always signed by authorized representatives.

The CWSD had procedures in place to ensure IWSs were received from all new nondomestic users in the service area; however, review of IWSs submitted since 2019 indicated that IWSs may not be fully evaluated upon the District's receipt. Section 6.14 of the CWSD Rules and Regulations requires that reports and other required submittals be signed by an authorized representative, as defined in Section 2.1; however, the IWSs East Cherry Creek Valley Water & Sanitation District and Vesper Salon were not signed by authorized representatives.

Pretreatment Requirements

40 C.F.R. §403.8(f)(2)(i-ii) requires the POTW to develop and implement procedures to identify and locate all possible IUs which might be subject to the Pretreatment Program and identify the character and volume of pollutants contributed to the POTW by IUs.

Section 6.14 of the CWSD Rules and Regulations states that required reports must be signed by an authorized representative.

Corrective Action

Ensure submitted IWSs are evaluated to confirm facilities of concern are submitting complete information that complies with the CWSD requirements and federal regulations, including signatures from authorized representatives. In response to the EPA, indicate how the District will correct this finding.

2. Has the CA identified the character and volume of pollutants contributed to the publicly owned treatment works (POTW) by IUs subject to the pretreatment program? (40 C.F.R. §403.8(f)(2)(ii))

The District developed a process for identifying new IUs, as described in B.1, above. In addition, the District indicated it completed annual inspections of existing nondomestic users for the backflow prevention program, during which a cursory comparison of current and past practices was performed; however, these procedures did not appear to result in adequate characterization of IUs in the service area.

Finding 3 – CWSD procedures did not adequately address characterization of IUs.
The IPP SOP Manual did not appear to adequately discuss the characterization process of industrial users in the service area.

Pretreatment Requirements
40 C.F.R. §403.8(f)(2)(i-ii) requires the POTW to develop and implement procedures to identify and locate all possible IUs which might be subject to the Pretreatment Program and identify the character and volume of pollutants contributed to the POTW by IUs.

Corrective Action
Develop and implement procedures to identify the character and volume of pollutants contributed to the POTW from IUs. In response to the EPA, indicate how the District will correct this finding.

Finding 4 – Nondomestic users in the service area were not adequately characterized.
While the CWSD had an annual presence in the service area to manage the backflow prevention program, complete characterization of facilities, from a pretreatment perspective, was not completed or preserved. During the PCI, District representatives indicated that a comparison of business names versus those previously reported was done annually; this assessment was not adequate to evaluate whether users have added or changed processes that pose a pretreatment concern. During the PCI, the EPA requested the IWSs for the facilities listed below that, based on internet research, may pose a pretreatment concern. The CWSD could not produce adequate characterization information for these facilities.

1. C3 Manufacturing, LLC, 3809 Norwood Dr, Unit 4
2. Hanksville Hotrods, 3852 Norwood Dr, Unit 1
3. Lockheed Martin, 6415 Business Center Dr; 6435 Business Center Dr; 6455 Business Center Dr; and 8034 Midway Dr
4. Iron Clad Metals, 12435 Mead Way
5. Piranha Stone-Biter, 3911 Norwood Dr, Unit A

Pretreatment Requirements
40 C.F.R. §403.8(f)(2)(i-ii) requires the POTW to develop and implement procedures to identify and locate all possible IUs which might be subject to the Pretreatment Program and identify the character and volume of pollutants contributed to the POTW by IUs.

40 C.F.R. §403.8(f)(6) requires the POTW to prepare and maintain a list of IUs, identify the criteria applicable to IUs, and indicate whether the POTW has made a determination that such IU should not be considered an SIU.

Part I.7.b.ii of the Permit states, "Industrial user information shall be updated at a minimum of once per year or at that frequency necessary to ensure that all Industrial Users are properly permitted and/or controlled. The records shall be maintained and updated as necessary;"

Corrective Action
Identify the character and volume of pollutants contributed to the POTW by IUs and identify criteria applicable to IUs. Complete facility inspections of the facilities listed above. In response to the EPA, indicate how the District will correct this finding.

3. Has the CA prepared and maintained a list of SIUs, defined in §403.3(v)(1), along with the applicable SIU criteria? Does the list indicate whether the CA has made a determination that an SIU is a Non-Significant Categorical Industrial User, as defined in §403.3(v)(2), rather than an SIU? Have modifications to the list been submitted with annual reports? (40 C.F.R. §403.8(f)(6))

As described in Finding 4 the District could not produce facility information for IUs of potential concern and had inadequate procedures to update and maintain information on existing IUs in the service area.

Finding 5 – The District did not have an adequate procedure in place to update and maintain information previously provided by existing IUs.

As described in Finding 4, the CWSD had an annual presence in the service area to manage the backflow prevention program; however, a complete characterization of facilities, from a pretreatment perspective, was not completed or preserved. When inspectors requested characterization information for the facilities listed previously, the CWSD produced documentation of characterization at one facility: Iron Clad Metals. However, the characterization information was not comprehensive, and the information was gathered in 2011.

Pretreatment Requirements

40 C.F.R. §403.8(f)(6) states, "The POTW shall prepare and maintain a list of its Industrial Users meeting the criteria in §403.3(v)(1). The list shall identify the criteria in §403.3(v)(1) applicable to each Industrial User and, where applicable, shall also indicate whether the POTW has made a determination pursuant to §403.3(v)(2) that such Industrial User should not be considered a Significant Industrial User. The initial list shall be submitted to the Approval Authority pursuant to §403.9 or as a non-substantial modification pursuant to §403.18(d)."

Part I.7.b.ii of the Permit states, "Industrial user information shall be updated at a minimum of once per year or at that frequency necessary to ensure that all Industrial Users are properly permitted and/or controlled. The records shall be maintained and updated as necessary;"

Corrective Action

Develop and implement a procedure to maintain the IU inventory and update information for existing IUs. In response to the EPA, indicate how the District will correct this finding.

Finding 6 – The District did not have a procedure in place to notify IUs of applicable requirements and their status.

The IPP SOP Manual did not appear to adequately discuss the notification process of IUs in the service area.

Pretreatment Requirements

40 C.F.R. §403.8(f)(2)(iii) requires POTWs to develop and implement procedures to "Notify Industrial Users identified under paragraph (f)(2)(i) of this section, of applicable Pretreatment Standards and any applicable requirements under sections 204(b) and 405 of the Act and subtitles C and D of the Resource Conservation and Recovery Act. Within 30 days of approval pursuant to 40 CFR 403.8(f)(6), of a list of significant industrial users, notify each significant industrial user of its status as such and of all requirements applicable to it as a result of such status."

Part I.7.b.xii of the Permit states, "The Permittee shall notify all Industrial Users of the users' obligations to comply with applicable requirements under Subtitles C and D of the Resource Conservation and Recovery Act (RCRA)."

Corrective Action
Develop and implement a procedure to notify IUs of applicable requirements and their status. In response to the EPA, indicate how the District will correct this finding.

C. Control Mechanism Evaluation

1. Has the CA issued individual or general control mechanisms to all SIUs? (40 C.F.R. §403.8(f)(1)(iii))

Yes. At the time of the inspection, the District had one permittee in the service area, which was regulated through an individual permit.

2. Do the applications for general control mechanism contain all of the following? (40 C.F.R. §403.8(f)(1)(iii)(A)(2))

a. Contact info
b. Production processes
c. Types of wastes generated
d. Location for monitoring
e. Any request for waiver for pollutants not present per §403**.12(e)(2)**

At the time of the PCI, the District had not issued general control mechanisms.

3. Are general control mechanisms only issued for IUs where all of the following is true? (40 C.F.R. §403.8(f)(1)(iii)(A)(1))

a. Involve same/substantially similar types of operations
b. Discharge the same type of waste
c. Same effluent limitations
d. Same or similar monitoring
e. There are no CIU production-based standards, CIU mass limits, combined wastestream formula, or net/gross calculations

At the time of the PCI, the District had not issued general control mechanisms.

4. Do both individual and general control mechanisms include the following, where applicable? (40 C.F.R. §403.8(f)(1)(iii)(B))
a. Statement of duration (5 years max)
b. Statement of non-transferability
c. Applicable effluent limits (local limits, categorical standards, BMPs)
d. Self-monitoring requirements

- **Identification of pollutants to be monitored**
- **Sampling frequency**
- **Sampling locations/discharge points**
- **Appropriate sample types**
- **Reporting requirements**
- **Record-keeping requirements**

e. **Statement of applicable civil and criminal penalties**
f. **Compliance schedules**
g. **Notice of slug loading or potential problems at POTW**
h. **Notification of spills, bypasses, upsets, etc.**
i. **Notification of significant change in discharge**
j. **24-hour notification of effluent violation**
k. **Submit resampling results within 30-days**
l. **Slug discharge control plan requirement, if required by POTW**
m. **Certification statements**
n. **Sampling/analysis requirements (Part 136 or alternative)**
o. **Reporting of additional sampling**
p. **90-day compliance report**

Inspectors reviewed the permit files for TruGreen-Chemlawn (TruGreen or facility), a fertilizer company that mixes liquid fertilizer for bulk use. Findings related to required permit conditions are listed below.

Finding 7 – The 2020 ZDP did not require the facility to notify the District of spills or slug discharges.

TruGreen operated pursuant to industrial zero discharge permit (ZDP) number 10-02 (2020 ZDP); this permit renewal became effective on October 1, 2020 and was not altered from the previous permit iteration (the 2015 ZDP). The 2020 ZDP prohibited discharge from the facility and the District indicated that the facility had no potential for discharge; floor drains in the mixing area were reportedly plugged. However, the 2020 ZDP did not contain requirements to notify the CWSD of spills or slug discharges.

Pretreatment Requirements

40 C.F.R. §403.8(f)(1)(iii) requires the POTW to control through permit, order, or similar means, the contribution to the POTW by each Significant Industrial User to ensure compliance with applicable Pretreatment Standards and Requirements.

Corrective Action

Revise affected permit templates and the 2020 ZDP issued to TruGreen to specify required standard conditions. As an alternative to the 2020 ZDP update, provide documentation that no drains, including shop sinks, emergency showers, restrooms, etc. are located in the mixing area at TruGreen. In response to the EPA, indicate how the District will correct this finding.

Finding 8 – The most recent permit application submitted by TruGreen did not describe current conditions at the facility.

The 2020 industrial waste permit application submitted by TruGreen did not contain information on current conditions at the plant; rather, the facility was only required to verify that nothing had changed.

The EPA recommends the CWSD require facilities to provide information on current conditions on every iteration of the permit application.

Pretreatment Requirements
40 C.F.R. §403.8(f)(1)(iii) requires the POTW to control through permit, order, or similar means, the contribution to the POTW by each Significant Industrial User to ensure compliance with applicable Pretreatment Standards and Requirements.

Recommendation
Chapter 2 of the Industrial User Permitting Guidance Manual 833-R-12-001A September 2012 states, "The Control Authority should require the existing permittee to submit a complete application with updated information in a timely manner in order to continue its authorization to discharge." Additionally, guidance specific to recommended permit application contents can be found in Chapter 4. https://www.epa.gov/sites/production/files/2015-10/documents/industrial_user_permitting_manual_full.pdf. The EPA recommends the District require updated information with every permit application iteration. No response is requested pursuant to this recommendation.

D. Application of Pretreatment Standards and Requirements

1. Does the CA apply all applicable pretreatment standards? (40 C.F.R. §403.8(f)(1)(ii) and §403.8(5))

Yes. At the time of the PCI, the District was applying applicable pretreatment standards to known IUs of concern.

2. Has the CA evaluated the need for SIUs to develop slug discharge control plans? (40 C.F.R. §403.8(f)(2)(vi))

At the time of the PCI, the District had one permittee: TruGreen. The CWSD determined that a slug discharge control plan (SDCP) was unnecessary for the facility.

E. Compliance Monitoring and Enforcement

1. Has the CA inspected and independently sampled each SIU at least once a year? Middle tier CIUs at least once every two years? Sample once during term of CIU control mechanism if CIU sampling waived for pollutants not present? (40 C.F.R. §403.8(f)(2)(v), §403.12(e)(2))

Yes. The District produced records to indicate inspections were performed annually. Annual sampling was not necessary at TruGreen due to the facility's zero discharge status.

2. Has the CA used proper sampling and analysis procedures (40 C.F.R. §136) and inspection procedures? Were the procedures done with sufficient care to produce evidence admissible in enforcement proceedings or in judicial actions?

(40 C.F.R. §403.8(f)(2)(v) and (vii), 40 C.F.R. §403.12(g)(5))

With the exception of the finding below, the CWSD was completing inspections using proper procedures and with sufficient care to produce admissible evidence.

Finding 9 – The District was using inspection templates prepopulated with previously gathered information.
The CWSD indicated that prepopulated inspection forms are used and updated to reflect changes. The EPA recommends the CWSD collect information annually, independent of the previously gathered inspection data.

Pretreatment Requirements
40 C.F.R. §403.8(f)(2)(v) requires the POTW to "randomly sample and analyze the effluent from Industrial Users and conduct surveillance activities in order to identify, independent of information supplied by Industrial Users, occasional and continuing noncompliance with Pretreatment Standards. Inspect and sample the effluent from each Significant Industrial User at least once a year…"

40 C.F.R. §403.8(f)(2)(vii) states, "Investigate instances of noncompliance with Pretreatment Standards and Requirements, as indicated in the reports and notices required under §403.12, or indicated by analysis, inspection, and surveillance activities described in paragraph (f)(2)(v) of this section. Sample taking and analysis and the collection of other information shall be performed with sufficient care to produce evidence admissible in enforcement proceedings or in judicial actions.

Recommendation
Chapter 2.12 of the Industrial User Inspection and Sampling Manual for POTWs EPA-831B7001 January 2017 discusses recommendations for gathering inspection information. https://www.epa.gov/sites/production/files/2017-01/documents/iuinspect.pdf. The EPA recommends the District consult the guidance manual to further develop internal procedures. No response is requested pursuant to this recommendation.

3. Has the CA kept records for three years including the following?
   a. Periodic compliance reports and other reports/notices
   b. All monitoring records including: sample date, place, method, time, personnel; analysis date, personnel, method; results
   c. BMP compliance documentation
   d. Other monitoring records
   (40 C.F.R. §403.12(o))

Based on the files reviewed during the inspection, it appeared the records specified in 40 C.F.R. §403.12(o) were being kept for at least three years.

4. Has the CA evaluated, at least once per year, whether NSCIUs continue to meet the criteria of an NSCIU? (40 C.F.R. §403.8(f)(2)(v)(b), §403.3(v)(2))

At the time of the PCI, the District had not identified any NSCIUs in the service area.

5. Has the CA required, received, and analyzed reports and other notices from SIUs?
- **a. Self-monitoring reports**
- **b. Baseline Monitoring Reports (BMRs) and 90-day compliance reports**
- **c. Compliance schedules reports**
- **d. Notice of slug loading or potential problems at POTW**
- **e. Notification of spills, bypasses, upsets, etc.**
- **f. Notification of significant change in discharge**
- **g. 24-hour notification of effluent violation**
- **h. Resampling results within 30-days**
- **i. Other reports/notifications required by the CA**

(40 C.F.R. §403.8(f)(2)(iv))

The District did not identify the issues described in the findings below.

Finding 10 – The District was reviewing reports submitted electronically to evaluate compliance but was not compliant with the CROMMER.

Part 2.B of the 2020 ZDP issued to TruGreen required the facility to submit reports via mail; in practice, the facility had been submitting quarterly reports on compliance via email. Because the CWSD is not compliant with the Cross-Media Electronic Reporting Rule (CROMMER), reports need to be submitted in hard-copy form.

Pretreatment Requirements

40 C.F.R. §403.8(f)(2)(iv) requires POTWs to develop and implement procedures to, "Receive and analyze self-monitoring reports and other notices submitted by Industrial Users in accordance with the self-monitoring requirements in § 403.12."

40 C.F.R. §403.12 (r) states, "A POTW that chooses to receive electronic documents must satisfy the requirements of 40 CFR part 3 - (Electronic reporting)."

40 C.F.R. §3 is the CROMERR regulation that sets performance-based, technology-neutral standards for systems that states, tribes, and local governments use to receive electronic reports from facilities they regulate under EPA-authorized programs and requires program modifications or revisions to incorporate electronic reporting.

Corrective Action

Ensure hard-copy submittals are reviewed for purposes of evaluating compliance or obtain CROMMER compliance. In response to the EPA, indicate how the District will correct this finding.

Finding 11 – Three reporting violations occurred since 2019 at TruGreen.

The quarterly compliance reports submitted by TruGreen in 2019 and 2020 were evaluated. Reporting violations occurred on the following three occasions.

1. The 4th Quarter 2018 report was received one day late, on January 29, 2019.
2. The 1st Quarter 2019 report was received three days late, on May 1, 2019.
3. While the 3rd Quarter 2019 report was received on October 21, 2019 by the CWSD, the certification statement was signed by the facility prior to the end of the reporting period, on September 30, 2019.

The District did not identify theses violations. See Section VIII.F of this report for the associated ERP finding and corrective action.

Pretreatment Requirements
40 C.F.R. §403.8(f)(2)(iv) requires POTWs to develop and implement procedures to, "Receive and analyze self-monitoring reports and other notices submitted by Industrial Users in accordance with the self-monitoring requirements in § 403.12."

Part 2.A of the 2015 and 2020 ZDPs required the permittee to "submit Zero Discharge Compliance Report and Certification and all other records specifically required by the Permit once per quarter. This report is due no earlier than the 1st and no later than the 28th of the month following the monitoring period."

Corrective Action
Review reports submitted by permittees, to ensure the facility is compliant with the industrial discharge permit, including timely submittal of reports. In response to the EPA, indicate how the City will correct this finding.

Finding 12 – Dental facilities in the service area were noncompliant with federal regulations and/or the District's dental amalgam program requirements.
During the PCI, the CWSD had record of 31 dental dischargers in the service area. Upon review of available records, 26 of those facilities appeared noncompliant at the time of the District's 2020 inspection, with the CWSD's annual certification requirement, the OTCR requirement, or a combination thereof. The EPA's observations included the following: dental dischargers did not provide complete facility information such as numbers of chairs, year of separator installation, or model number; facilities did not certify to BMP implementation; OTCRs were not signed by an authorized representative; facilities reported that they did not have amalgam separators or were not subject to the regulation, but upon inspection, that appeared false; annual certifications were not submitted or were submitted late; annual certifications were not signed by authorized representatives; or annual inspections revealed that the facility was not in compliance with the BMPs and no enforcement action was taken.

See Section VIII.F of this report for details of the EPA's observations, associated ERP findings, and corrective action.

Pretreatment Requirements
40 C.F.R. §403.8(f)(2)(iv) requires POTWs to develop and implement procedures to, "Receive and analyze self-monitoring reports and other notices submitted by Industrial Users in accordance with the self-monitoring requirements in § 403.12."

Corrective Action
Ensure submitted reports are evaluated for compliance with the District's Rules and Regulations and federal regulations. In response to the EPA, indicate how the District will correct this finding.

6. Have SIUs monitored to demonstrate continued compliance and re-sampling after violation(s)?

(40 C.F.R. §403.12(g)(1) & (2))

At the time of the PCI, TruGreen was the only permitted IU. The facility did not discharge, and no effluent violations had occurred.

7. Has the CA ensured CIUs report on all regulated pollutants at least once every 6 months? (40 C.F.R. §403.12(e)(1) & (g)(1))

At the time of the PCI, TruGreen was the only permitted IU and submitted SMRs on a quarterly basis.

8. Has the CA ensured non-categorical SIUs self-monitor and report at least once every 6 months with a description of the nature, concentration, and flow of the pollutants required to be reported by the Control Authority? (40 C.F.R. §403.12(h) & (g)(1))

At the time of the PCI, TruGreen was the only permitted IU and submitted SMRs on a quarterly basis.

9. Has the CA required self-monitoring reports from CIUs to be signed and certified? (40 C.F.R. §403.12(b)(6), §403.12(l))

At the time of the PCI, TruGreen was the only permitted IU and reports were signed and certified.

10. Has the CA received notification of hazardous waste discharges? (40 C.F.R. §403.12(j) & (p))

No notifications were received according to the files reviewed, nor was there any indication that a notification should have been received.

F. Enforcement

1. Has the CA implemented its enforcement response plan (ERP)? (40 C.F.R. §403.8(f)(5))

Inspectors evaluated the District's ERP and the findings below are based on the guidance provided in the plan. Inspectors also evaluated the ERP for adequacy and associated findings are integrated in the following section as appropriate.

Finding 13 – Enforcement responses were not issued to TruGreen for reporting violations that occurred since 2019.

The District did not issue enforcement responses for the reporting violations detailed below.

1. The 4th Quarter 2018 report was received one day late, on January 29, 2019. The ERP specifies the enforcement response for failure to report, received less than 30 days late is informal or an NOV.
2. The 1st Quarter 2019 report was received three days late, on May 1, 2019. The ERP specifies the enforcement response for failure to report, received less than 30 days late is informal or an NOV. Because this was the second violation of the same nature, an NOV would likely be the

appropriate escalated enforcement response.

3. While the 3rd Quarter 2019 report was received on October 21, 2019 by the CWSD, the certification statement was signed by the facility prior to the end of the reporting period, on September 30, 2019. The ERP does not specifically discuss this type of violation; however, similar to the previously discussed enforcement response options, an appropriate response would likely be informal or an NOV. Additionally, the ERP should be amended to include such violations.

Pretreatment Requirements

40 C.F.R. §403.8(f)(5) requires the District to develop and implement its ERP and specifies the POTW's ERP shall, "at a minimum:
(i) Describe how the POTW will investigate instances of noncompliance;
(ii) Describe the types of escalating enforcement responses the POTW will take in response to all anticipated types of industrial user violations and the time periods within which responses will take place;
(iii) Identify (by title) the official(s) responsible for each type of response;
(iv) Adequately reflect the POTW's primary responsibility to enforce all applicable pretreatment requirements and standards, as detailed in 40 CFR §403.8 (f)(1) and (f)(2)."

Corrective Action 1

Take enforcement actions against TruGreen in accordance with the District's ERP for the instances of noncompliance listed above. In response to the EPA, indicate how the District will correct this finding.

Corrective Action 2

Amend the ERP to include a description of escalating enforcement responses the District will take in response to all anticipated types of industrial user violations. Submit the revised ERP to the EPA for approval pursuant to program modification requirements specified in 40 C.F.R. §403.18.

Finding 14 – Enforcement responses were not issued to noncompliant dental dischargers.

As described in Finding 12, 26 out of 31 dental dischargers were noncompliant with the CWSD's dental amalgam program, as detailed in the table below. Additional discussion of the CWSD's ERP in relation to these instances of noncompliance is included following the table.

Business Name	EPA Observations on Inspection Reports and OTCRs	EPA Observations on Annual Reports
303 Dental Group/Beilby	Records from the 2020 inspection noted the facility was using an oxidizing line cleaner. An email was sent to facility, but records did not indicate a return to compliance. Though the ERP does not clearly define this violation, it appears an NOV is the intended response.	

Aesthetic & Restorative Dentistry	The facility did not certify that amalgam was not discharged or that BMPs were implemented on the OTCR. Additionally, no signature was provided. There was no record of follow-up or enforcement action. For "Failure to Provide Complete Reports (other than failure to monitor), including reports on BMPs," the ERP specifies an NOV.	No annual report was provided. There was no record of an enforcement response. For "Failure to report (self-monitoring report), including compliance with Best Management Practices (BMPs), >30 days late," the ERP specifies an ACO, show cause hearing, APO, judicial action, revocation of permit.
Aloha Family & Cosmetic Dentistry	The OTCR was not signed by an authorized representative. The facility did not provide information on the disposal of spent cartridges. There was no record of follow-up or enforcement action. For "Failure to Provide Complete Reports (other than failure to monitor), including reports on BMPs," the ERP specifies an NOV.	
Aspen Park Dental	The OTCR was not signed by an authorized representative. Additionally, the year the amalgam separator was installed was not provided. There was no record of follow-up or enforcement action. For "Failure to Provide Complete Reports (other than failure to monitor), including reports on BMPs," the ERP specifies an NOV.	
Blue Sky Pediatric Dentistry	The facility did not provide information on the disposal of spent cartridges. There was no record of follow-up or enforcement action. For "Failure to Provide Complete Reports (other than failure to monitor), including reports on BMPs," the ERP specifies an NOV.	
Colorado Kids Pediatric Dentistry, PC	The facility reported there was no amalgam separator onsite; however, the CWSD inspection reports indicate the facility does have separators installed. Because the facility was ignorant of the installed equipment, improper O&M and recordkeeping may be indicated.	The facility incorrectly certified that no amalgam separators were installed.
Colorado Smile Design	The facility did not provide information on the disposal of spent cartridges. Additionally, the amalgam separator model number was not provided. There was no record of follow-up or enforcement action. For "Failure to Provide Complete Reports (other than failure to monitor), including reports on BMPs," the ERP specifies an NOV.	
Cottonwood Dental Group PC	The OTCR was not signed by an authorized representative. The 2020 inspection noted the facility was using an oxidizing line cleaner. An email sent to facility, but the records did not indicate a return to compliance. Though the ERP does not clearly define this violation, it appears an NOV is the intended response.	
Dr. Brent Bailey DDS PC (Colorado Precision Dentistry)	The facility did not provide information on the disposal of spent cartridges. There was no record of follow-up or enforcement action. For "Failure to Provide Complete Reports (other than failure to monitor), including reports on BMPs," the ERP specifies an NOV.	
Dr. Eric Chatterley, DDS	The facility did not provide information on the disposal of spent cartridges. There was no record of follow-up or enforcement action. For "Failure to Provide Complete Reports (other than failure to monitor), including reports on BMPs," the ERP specifies an NOV.	

Dr. Eric T. Rysner, DDS, PC	The facility did not provide information on the disposal of spent cartridges. Additionally, the amalgam separator model number was not provided. There was no record of follow-up or enforcement action. For "Failure to Provide Complete Reports (other than failure to monitor), including reports on BMPs," the ERP specifies an NOV.	
Dr. Frank Scavuzzo DDS PC		No annual report was provided. For "Failure to report (self-monitoring report), including compliance with Best Management Practices (BMPs), <30 days late," the ERP specifies an informal enforcement response or an NOV.
Dr. Sarira Martin DDS PC		No annual report provided. There was no record of an enforcement response. For "Failure to report (self-monitoring report), including compliance with Best Management Practices (BMPs), >30 days late," the ERP specifies an ACO, show cause hearing, APO, judicial action, revocation of permit.
Elizabeth Dunkleberger D.D.S	The OTCR was not signed by an authorized representative.	
Falcon Park Dental Group	The facility did not certify to BMP implementation on the OTCR and did not provide all required facility information. There was no record of follow-up or enforcement action. For "Failure to Provide Complete Reports (other than failure to monitor), including reports on BMPs," the ERP specifies an NOV.	
General Cosmetic & Restorative Dentistry		The Annual Report was submitted three days late. There was no record of an enforcement response. For "Failure to report (self-monitoring report), including compliance with Best Management Practices (BMPs), <30 days late," the ERP specifies an informal enforcement response or an NOV.

Highlands Ranch Dental Care	The OTCR was not signed by an authorized representative.	The Annual Report was submitted 21 days late. There was no record of an enforcement response. For "Failure to report (self-monitoring report), including compliance with Best Management Practices (BMPs), <30 days late," the ERP specifies an informal enforcement response or an NOV.
Meyer Dental	No information was provided on the make or model of separators. There was no record of follow-up or enforcement action. For "Failure to Provide Complete Reports (other than failure to monitor), including reports on BMPs," the ERP specifies an NOV.	
Pettyjohn Family Dentistry	The OTCR was not signed by an authorized representative. The facility did not provide information on the disposal of spent cartridges. There was no record of follow-up or enforcement action. For "Failure to Provide Complete Reports (other than failure to monitor), including reports on BMPs," the ERP specifies an NOV.	No annual report provided. There was no record of an enforcement response. For "Failure to report (self-monitoring report), including compliance with Best Management Practices (BMPs), >30 days late," the ERP specifies an ACO, show cause hearing, APO, judicial action, revocation of permit.
Redfearn Dental - Fit to Smile	The OTCR was not signed by an authorized representative. The facility did not provide information on the disposal of spent cartridges. The facility did not indicate the number of chairs equipped with an amalgam separator and did not certify to BMP implementation. There was no record of follow-up or enforcement action. For "Failure to Provide Complete Reports (other than failure to monitor), including reports on BMPs," the ERP specifies an NOV.	
Redstone Dental Group	The OTCR was not signed by an authorized representative.	
Rock Canyon Dental	The OTCR was not signed by an authorized representative. The facility did not provide the number of chairs where amalgam may be present. There was no record of follow-up or enforcement action. For "Failure to Provide Complete Reports (other than failure to monitor), including reports on BMPs," the ERP specifies an NOV.	No annual report provided
Twiss Dental		The Annual Report was submitted 22 days late. There was no record of an enforcement response. For "Failure to report (self-monitoring report), including compliance with Best Management Practices (BMPs), <30 days late," the ERP specifies an informal enforcement response or an NOV.

Varley Family Dentistry		The Annual Report was submitted 28 days late. There was no record of an enforcement response. For "Failure to report (self-monitoring report), including compliance with Best Management Practices (BMPs), <30 days late," the ERP specifies an informal enforcement response or an NOV.
Your Highlands Ranch Laser Dentist	The facility did not provide number of chairs equipped with amalgam separator. There was no record of follow-up or enforcement action. For "Failure to Provide Complete Reports (other than failure to monitor), including reports on BMPs," the ERP specifies an NOV.	The Annual Report was submitted 7 days late. There was no record of an enforcement response. For "Failure to report (self-monitoring report), including compliance with Best Management Practices (BMPs), <30 days late," the ERP specifies an informal enforcement response or an NOV.

Enforcement considerations specific to dental dischargers should be added to the ERP. Currently the two types of violations and corresponding enforcement actions that may apply to dental dischargers include the following.

1. "Exceeds a local limit (Pretreatment Standard) that is not included as a permit limit in the existing IU permit. This includes violation of a BMP." The enforcement response for this violation is an NOV. The CWSD may face implementation challenges with this violation type because the violation description implies that the facility is permitted.
2. "Failure to properly operate or maintain a treatment system." The enforcement responses for this violation include the following: ACO, show cause hearing, APO, judicial action, injunction, cease and desist, or termination of discharge. The enforcement responses specified for this type of violation may be more severe than the District would prefer for noncompliance from dental discharger.

Comparatively, the ERP specifies the enforcement response below for noncompliant facilities subject to the FOG program.

1. "Failure to maintain a grease interceptor or sand/oil separator as required." The enforcement response for this violation is an NOV.

Pretreatment Requirements

40 C.F.R. §403.8(f)(5) requires the District to develop and implement its ERP and specifies the POTW's ERP shall, "at a minimum:

(i) Describe how the POTW will investigate instances of noncompliance;

(ii) Describe the types of escalating enforcement responses the POTW will take in response to all anticipated types of industrial user violations and the time periods within which responses will take place;

(iii) Identify (by title) the official(s) responsible for each type of response;

(iv) Adequately reflect the POTW's primary responsibility to enforce all applicable pretreatment requirements and standards, as detailed in 40 CFR §403.8 (f)(1) and (f)(2)."

Corrective Action 1
Take enforcement action against noncompliant dental dischargers in accordance with the District's ERP for the instance of noncompliance listed above. In response to the EPA, indicate how the District will correct this finding.

Corrective Action 2
Amend the ERP to include a description of escalating enforcement responses the District will take in response to all anticipated types of industrial user violations. Submit the revised ERP to the EPA for approval pursuant to program modification requirements specified in 40 C.F.R. §403.18.

Finding 15 – Enforcement responses issued to IUs subject to the FOG program may not align with the ERP.
The CWSD has a system in place to ensure that all grease interceptors and S/O separators are inspected quarterly and pump out orders are satisfied. As discussed in Finding 14, the ERP specifies that the enforcement response to facilities that don't pump or maintain their interceptors is an NOV. The CWSD should evaluate whether pump out orders are a type of NOV and ensure the ERP is implemented. If the CWSD determines the pump our orders are a type of NOV, report the enforcement responses sent in relation to the FOG program on annual reports.

Pretreatment Requirements
40 C.F.R. §403.8(f)(5) requires the District to develop and implement its ERP and specifies the POTW's ERP shall, "at a minimum:
(i) Describe how the POTW will investigate instances of noncompliance;
(ii) Describe the types of escalating enforcement responses the POTW will take in response to all anticipated types of industrial user violations and the time periods within which responses will take place;
(iii) Identify (by title) the official(s) responsible for each type of response;
(iv) Adequately reflect the POTW's primary responsibility to enforce all applicable pretreatment requirements and standards, as detailed in 40 CFR §403.8 (f)(1) and (f)(2)."

40 C.F.R. §403.12(i) requires POTWs to report data on the pretreatment program annually.

Corrective Action
Evaluate whether pump out orders are a type of NOV, clarify this in the ERP, and ensure the ERP is implemented. If the CWSD determines the pump out orders are a type of NOV, report the enforcement responses sent in relation to the FOG program on annual reports. In response to the EPA, indicate how the District will correct this finding.

Finding 16 – The ERP did not include SNC considerations for identified violations.
SNC considerations should be included in the ERP for violations such as: exceedances of a pretreatment standard; discharges that present or may present imminent or substantial endangerment to health, the environment, personnel, or the POTW; discharge of wastes specifically prohibited; failure to report; falsification of data; and failure to provide required notifications. Further, procedures for evaluating SNC, such as timeframes considered, should be considered for inclusion in the ERP.

Pretreatment Requirements
40 C.F.R. §403.8(f)(5) requires the District to develop and implement its ERP and specifies the POTW's ERP shall, "at a minimum:
(i) Describe how the POTW will investigate instances of noncompliance;
(ii) Describe the types of escalating enforcement responses the POTW will take in response to all anticipated types of industrial user violations and the time periods within which responses will take place;
(iii) Identify (by title) the official(s) responsible for each type of response;
(iv) Adequately reflect the POTW's primary responsibility to enforce all applicable pretreatment requirements and standards, as detailed in 40 CFR §403.8 (f)(1) and (f)(2)."

Corrective Action
Amend the ERP to include a SNC considerations for identified violations. Submit the revised ERP to the EPA for approval pursuant to program modification requirements specified in 40 C.F.R. §403.18.

2. Does the CA evaluate both numeric and narrative criteria for significant non-compliance (SNC) annually and publish a list of IUs in SNC? (40 C.F.R. §403.8(f)(2)(viii))

At the time of the PCI, the District appeared to regularly evaluate SNC criteria.

3. Has the CA developed IU compliance schedules? (40 C.F.R. §403.8(f)(1)(iv)(A))

No compliance schedules were developed or in effect in the IU files reviewed.

4. Has the CA ensured CIU compliance within 3 years of standards effective date (or less than 3 years where required by standard)? (40 C.F.R. §403.6(b))

At the time of the PCI, TruGreen was the only permitted IU and was not a CIU.

5. Has the CA ensured CIUs submit complete baseline monitoring reports and 90-day compliance reports within the required time frames? (40 C.F.R. §403.12(b) & (d))

At the time of the PCI, TruGreen was the only permitted IU and was not a CIU.

G. Additional Evaluations

Finding 17 – The CWSD should evaluate its IGA with North Douglas County Water and Sanitation to ensure the IGA is implemented as written.
The intergovernmental agreement (IGA) between the CWSD and North Douglas County Water and Sanitation appears to appropriately delegate inspection authority to the District; however, during the PCI, the CWSD indicated inspections were being completed by North Douglas County Water and Sanitation and the CWSD was not aware of the specific nondomestic users present in the contributing jurisdiction.

Pretreatment Requirements
40 C.F.R. §403.8(f)(1) states, "The POTW shall operate pursuant to legal authority enforceable in Federal, State or local courts, which authorizes or enables the POTW to apply and to enforce the requirements of sections 307 (b) and (c), and 402(b)(8) of the Act and any regulations implementing those sections. Such authority may be contained in a statute, ordinance, or series of contracts or joint powers agreements which the POTW is authorized to enact, enter into or implement, and which are authorized by State law…"

Corrective Action
Ensure the IGA is implemented as written and nondomestic users in contributing jurisdictions are appropriately controlled. In response to the EPA, indicate how the District will correct this finding.

Finding 18 – The CWSD should evaluate its IGA with Chatfield State Park to ensure its protective of the POTW.
The IGA between the CWSD and Chatfield State Park appears to adequately delegate authority to implement the pretreatment program to the District; however, RV dump stations could pose a risk to the POTW.

Pretreatment Requirements
40 C.F.R. §403.8(f)(1) states, "The POTW shall operate pursuant to legal authority enforceable in Federal, State or local courts, which authorizes or enables the POTW to apply and to enforce the requirements of sections 307 (b) and (c), and 402(b)(8) of the Act and any regulations implementing those sections. Such authority may be contained in a statute, ordinance, or series of contracts or joint powers agreements which the POTW is authorized to enact, enter into or implement, and which are authorized by State law…"

Recommendation
The EPA recommends the CWSD require basic information from individuals utilizing the RV dump stations and keep the dump station locked when not in use.

Finding 19 – The District had not investigated recurring slug loads that exceeded the MAHL.
In 2019, the CWSD experienced copper loading that exceeded the maximum allowable headworks load (MAHL). In the 2019 annual report, the CWSD indicated its intention to reevaluate the copper local limit and revise it if needed; however, this evaluation was not completed. During the PCI, CWSD hypothesized that the elevated copper load was due to residential tap water usage, though no data was provided to support this conclusion. If the copper MAHL is exceeded in the future, the EPA recommends the CWSD investigate the elevated copper load to evaluate whether the source is an uncontrolled industrial user or the result of illegal dumping.

Pretreatment Requirements
40 C.F.R. 403.8(f)(2)(i-ii) requires POTWs to develop and implement procedures to, "Identify and locate all possible Industrial Users which might be subject to the POTW Pretreatment Program. Any compilation, index or inventory of Industrial Users made under this paragraph shall be made available to the Regional Administrator or Director upon request;" and, "Identify the character and volume of pollutants contributed to the POTW by the Industrial Users identified under paragraph (f)(2)(i) of this

section. This information shall be made available to the Regional Administrator or Director upon request;"

40 C.F.R. §403.8(f)(2)(vii) requires POTWs to develop and implement procedures to, "Investigate instances of noncompliance with Pretreatment Standards and Requirements, as indicated in the reports and notices required under § 403.12, or indicated by analysis, inspection, and surveillance activities described in paragraph (f)(2)(v) of this section. Sample taking and analysis and the collection of other information shall be performed with sufficient care to produce evidence admissible in enforcement proceedings or in judicial actions."

Corrective Action

If the District experiences additional copper MAHL exceedances in the future, investigate the elevated copper load to evaluate whether the source is an uncontrolled industrial user or the result of illegal dumping. In response to the EPA, indicate how the District will correct this finding.

Finding 20 – Data submitted in the annual report to the EPA was inaccurate.

In preparation for the PCI, inspectors reviewed data submitted by the District to the EPA. The local limits in the CWSD's Rules and Regulations for benzene, BTEX, and oil and grease didn't align with those reported in the 2019 and 2020 annual reports, as detailed below.

Parameter	Limit: Annual Report	Limit: Rules and Regulations
Benzene	100 mg/l	0.050 mg/l
BTEX	0.05 mg/l	0.750 mg/l
Oil and Grease	0.75 mg/l	No numeric limit incorporated

Pretreatment Requirements

40 C.F.R. §403.12(i) requires POTWs to report data on the pretreatment program annually.

Corrective Action

Ensure accurate data is reported on annual reports submitted to the EPA and correct previously submitted reports. In response to the EPA, indicate how the District will correct this finding.

Finding 21 – The IPP SOP Manual should be updated.

The IPP SOP Manual appeared outdated and the CWSD should make revisions to reflect current conditions in the District. Examples of outdated information are listed below:

1. References to two zero discharge permittees. At the time of the PCI, the CWSD had one zero discharge permittee.
2. References to section 6 for the ERP. The ERP was a separate document.

Pretreatment Requirements

40 C.F.R. §403.8(f)(2) states, "The POTW shall develop and implement procedures to ensure compliance with the requirements of a Pretreatment Program."

Recommendation

The EPA recommends the District update its internal procedures to reflect the current conditions of the pretreatment program. No response is requested pursuant to this recommendation.

Finding 22 – The FOG procedures should be updated.

The procedures outlined in the "Standard Operating Procedure, Quarterly Interceptor Inspections, Updated 3/1/2017" (SOP) appear to differ from the interceptor inspection and follow-up procedures as described by WSD personnel and the ERP.

1. Section II.H of the SOP states, "If the interceptor has not been pumped within the last 365 days, the first written notice (Exhibit El) shall be mailed to the owner." During the inspection, the CWSD personnel indicated the District may require grease trap maintenance as frequently as necessary, potentially more than once a year. The EPA recommends the SOP be updated to reflect the CWSD's authority to require grease trap maintenance as needed.
2. Sections II.I and II.J of the SOP state businesses have 15 days to provide receipt of service after the first written notice following a CWSD inspection, after which a second and third notice will be sent, 15 days apart, before water service is terminated. During the PCI, District personnel explained two notices were provided before consulting the ERP. Per a preliminary finding relating the ERP above, the ERP specifies that an NOV is the appropriate enforcement response for failure to maintain a grease interceptor or S/O separator.

Pretreatment Requirements

40 C.F.R. §403.8(f)(2) states, "The POTW shall develop and implement procedures to ensure compliance with the requirements of a Pretreatment Program."

Recommendation

The EPA recommends the current CWSD procedures, SOP, and ERP be updated as needed to ensure all documents and procedures align. No response is requested pursuant to this recommendation.

version 9.27.2022

HFC Import Inspection Worksheet

U.S. EPA Inspection Report for inspection of Imported Hydrofluorocarbons (HFCs) subject to 40 CFR Part 84

Insp. No: 20240808-0918 | Inspector(s): Katelyn Bergl, Christine Tokarz

Insp. Date: 8/8/2024 | Start Time/Stop Time: 9:18 AM - 1:47 PM

Location of Inspection

Facility Name: U.S. Customs and Border Protection (CBP) - Port Huron Port of Entry - 3802 | Facility Type: CBP Cargo Inspection Facility

Address: 1410 Elmwood Street, Port Huron, MI 48060-5471 | CBP POC Contact Information: Daniel.P.Winkelman@cbp.dhs.gov

☐ Indicate here if entry was not filed at time of inspection

Importer Information (from Entry Documents)

☑ Indicate here if consignee is the same as importer

Importer Name: The Chemours Company FC, LLC | Consignee Name: The Chemours Canada Company

Importer Address: 1007 Market Street P.O. Box 2047, Wilmington, DE 19899 | Consignee Address: C/O Loisville Packaging, 7745 National Turnpike, Loisville, Kentucky, 40214

Importer No : 46-562651800 | POC Contact Information: Laura.Murphy@chemours.com

Visual Inspection #1

Product Description: UN3159 - Baby blue containers (See below for full description) | Shipment/ Entry No: 91652183632

Chemical name/formula: Freon 134/R-134a | Shipping Container No: A53581

Container Type: ☐ Service Can ☐ Ton Tank ☐ ISO Tank | Arrival Date: 7/31/2024

☑ Refillable Cylinder ☐ Disposable Cylinder | Listed Qty: 280 | Listed Mass: 22 | Actual Mass: 22 ☐ lb ☑ kg ☐ ton

Visual Inspection Notes:
Full Description: UN3159, 1,1,1,2-Tetrafluoroethane, Class 2.2, (Freon 134/R-134a)

280 total containers of R-134a were in the shipment. 80 containers (2 pallets of 40 containers each) were filled with product and listed a net weight of product on the pallets of 22 kg. The net weights of product were divided into 17 kg on one pallet and 5 kg on the second. 200 containers (5 pallets of 40 containers each) were listed as "DEAD" with no associated net weight of product provided.

Visual Inspection #2

Product Description: UN1078 - Gray containers (See below for full description) | Shipment/ Entry No: 91652183632

Chemical name/formula: Opteon XP40/R-449a | Shipping Container No: A53581

Container Type: ☐ Service Can ☐ Ton Tank ☐ ISO Tank | Arrival Date: 7/31/2024

☑ Refillable Cylinder ☐ Disposable Cylinder | Listed Qty: 280 | Listed Mass: 60 | Actual Mass: 73 ☐ lb ☑ kg ☐ ton

Visual Inspection Notes:
Full Description: UN1078, Refrigerant Gas N.O.S. (1,1,1,2-Tetrafluoroethane, 2,2,2,3-Tetrafluoropropene, Pentafluoroethane, Difluoromethane) Class 2.2 (Opteon XP40/R-449a)

280 total containers of R-449a were in the shipment. 240 containers (6 pallets of 40 containers each) were filled with product and listed a net weight of product on the pallets of 73 kg. The net weights of product were divided amongst the 6 pallets in the following quantities per pallet: 20 kg, 15 kg, 13 kg, 10 kg ,9 kg, and 6 kg. 40 containers (1 pallet of 40 containers) were listed as "DEAD" with no associated net weight of product provided. **The Bill of Lading included with import documents indicates 60 kg total of R-449a were imported, while documentation on pallets indicates 73 kg total product weight.**

Visual Inspection #3

Product Description: UN1078 - Dark blue containers (See below for full description) | Shipment/ Entry No: 91652183632

Chemical name/formula: MO-99/R-438a | Shipping Container No: A53581

Container Type: ☐ Service Can ☐ Ton Tank ☐ ISO Tank | Arrival Date: 7/31/2024

☑ Refillable Cylinder ☐ Disposable Cylinder | Listed Qty: 80 | Listed Mass: 21 | Actual Mass: 21 ☐ lb ☑ kg ☐ ton

Visual Inspection Notes:
Full Description: UN1078, Refrigerant Gas N.O.S. (Pentafluorethane, 1,1,1,2-Tetrafluoroethane, Difluoromethane, Butane, Isopentane) Class 2.2 (MO-99/R-438a)

80 total containers of R-438a were in the shipment. 80 containers (2 pallets of 40 containers each) were filled with product and listed a net weight of product on the pallets of 21 kg. The net weights of product were divided into 9 kg on one pallet and 12 kg on the second. There were no "DEAD" R-438a containers in the shipment.

Visual Inspection #4

Product Description: UN3337 - Orange containers (See below for full description) | Shipment/ Entry No: 91652183632

Chemical name/formula: R-404A | Shipping Container No: A53581

Container Type: ☐ Service Can ☐ Ton Tank ☐ ISO Tank | Arrival Date: 7/31/2024

☑ Refillable Cylinder ☐ Disposable Cylinder | Listed Qty: 160 | Listed Mass: 35 | Actual Mass: 35 ☐ lb ☑ kg ☐ ton

Visual Inspection Notes:
Full Description: UN3337, Refrigerant Gas, R-404A, Class 2.2, (Pentafluorethane, 1,1,1-Trifluorethane & 1,1,1,2, Tetrafluoroethane)

160 total containers of R-404a were in the shipment. 120 containers (3 pallets of 40 containers each) were filled with product and listed a net weight of product on the pallets of 35 kg. The net weights of product were divided into 19 kg, 11 kg, and 5 kg on the three pallets. 40 containers (1 pallet of 40 containers) were listed as "DEAD" with no associated net weight of product provided.

version 9.27.2022

HFC Import Inspection Worksheet

Visual Inspection #5

Product Description: UN3163 - Aqua containers (See below for full description)
Shipment/ Entry No: 91652183632
Chemical name/formula: Freon 507/R-507A
Shipping Container No: A53581
Container Type: ☐ Service Can ☐ Ton Tank ☐ ISO Tank
Arrival Date: 7/31/2024
☑ Refillable Cylinder ☐ Disposable Cylinder
Listed Qty: 120 Listed Mass: 15.5 Actual Mass: 15.5 ☐ lb ☑ kg ☐ ton

Visual Inspection Notes:
Full Description: UN3163, Liquefied Gas, N.O.S., (Pentafluoroethane & 1,1,1-Trifluroethane) Class 2.2 (Freon 507/R-507A)

120 total containers of R-507A were in the shipment. 80 containers (2 pallets of 40 containers each) were filled with product and listed a net weight of product on the pallets of 15.5 kg. The net weights of product were divided into 10 kg on one pallet and 5.5 kg on the second. 40 containers (1 pallet of 40 containers) were listed as "DEAD" with no associated net weight of product provided. EPA Inspectors weighed each of the 40 containers on the pallet listed as having 10 total kg of product. **EPA noted that the actual net weight of product in the containers was approximately 20 kg, which is 10 kg above the weight indicated on the pallet.** EPA could not determine the tare weight of two of the containers so the weight of the product in those containers was estimated as the average of the product in the other 38 containers. EPA also subtracted the approximate weight of the white protective netting on the containers (2.4 kg) when estimating of the total net product weight.

Visual Inspection #6

Product Description: UN1078 - Gray containers (See below for full description)
Shipment/ Entry No: 91652183632
Chemical name/formula: R-448a
Shipping Container No: A53581
Container Type: ☐ Service Can ☐ Ton Tank ☐ ISO Tank
Arrival Date: 7/31/2024
☑ Refillable Cylinder ☐ Disposable Cylinder
Listed Qty: 120 Listed Mass: 11 Actual Mass: 11 ☐ lb ☑ kg ☐ ton

Visual Inspection Notes:
Full Description: UN1078, Refrigerant Gas N.O.S., (Pentafluoroethane, Difluorome) Class 2.2 (R-448a) [EPA Note: there may be more chemicals in the descr., but they may be cut off]

120 total containers of R-448a were in the shipment. 40 containers (1 pallet of 40 containers) were filled with product and listed a net weight of product on the pallet of 11 kg. 80 containers (2 pallets of 40 containers each) were listed as "DEAD" with no associated net weight of product provided. EPA Inspectors weighed each of the 40 containers on the pallet listed as having 11 total kg of product. **EPA noted that the weight of product in the containers was approximately 21 kg, which is 10 kg above the weight indicated on the pallet.** EPA subtracted the approximate weight of the white protective netting (2.4 kg) on the containers, resulting in an estimation of the total net product weight. EPA Inspectors also weighed all 40 containers on one of the pallets listed as "DEAD". The difference between the listed tare weight of the containers and the total weight of the containers as measured by EPA, with 2.4 kg subtracted out to account for the protective netting, was approximately 2.5 kg. **This suggests that there was 2.5 kg of product in the containers above the reported weight of zero kg**. EPA could not determine the tare weight of 3 containers on the pallet so the weight of the product in those containers was estimated as the average of the product in the other 37 containers.

Visual Inspection #7

Product Description: UN3163 - Pink containers (See below for full description)
Shipment/ Entry No: 91652183632
Chemical name/formula: Freon 9100/R-410A
Shipping Container No: A53581
Container Type: ☐ Service Can ☐ Ton Tank ☐ ISO Tank
Arrival Date: 7/31/2024
☑ Refillable Cylinder ☐ Disposable Cylinder
Listed Qty: 480 Listed Mass: 295.5 Actual Mass: 295.5 ☐ lb ☑ kg ☐ ton

Visual Inspection Notes:
Full Description: UN3163, Liquefied Gas, N.O.S., (Difluoromethane & Pentafluorethane) Class 2.2 (Freon 9100/R-410A)

480 total containers of R-410a were in the shipment. 400 containers (10 pallets of 40 containers each) were filled with product and listed a net weight of product on the pallets of 295.5 kg. The net weights of product were divided amongst the 10 pallets in the following quantities per pallet: 34.5 kg , 31.5 kg, 26 kg, 23.5 kg, 41 kg, 30 kg, 25 kg, 29 kg, 25 kg, and 30 kg. 80 containers (2 pallets of 40 containers each) were listed as "DEAD" with no associated net weight of product provided.

Visual Inspection #8

Product Description: UN3340 - Brown containers (See below for full description)
Shipment/ Entry No: 91652183632
Chemical name/formula: R-407C
Shipping Container No: A53581
Container Type: ☐ Service Can ☐ Ton Tank ☐ ISO Tank
Arrival Date: 7/31/2024
☑ Refillable Cylinder ☐ Disposable Cylinder
Listed Qty: 280 Listed Mass: 84 Actual Mass: 84 ☐ lb ☑ kg ☐ ton

Visual Inspection Notes:
Full Description: UN3340, Refrigerant Gas, R-407C, Class 2.2, (1,1,1,2-Tetrafluoroethane, Difluoromethane & Petrafluoroethane),

280 total containers of R-407c were in the shipment. 180 containers (4 pallets of 40 containers each and 1 pallet of 20 containers) were filled with product and listed a net weight of product on the pallets of 84 kg. The net weights of product were divided amongst the 5 pallets in the following quantities per pallet: 26 kg , 19 kg, 15 kg, 15 kg, and 9 kg. 100 containers (2 pallets of 40 containers each and 1 pallet of 20 containers) were listed as "DEAD" with no associated net weight of product provided.

version 9.27.2022

HFC Import Inspection Worksheet

Visual Inspection #9

Product Description: UN1078 - Gray containers (See below for full description)
Shipment/ Entry No: 91652183632
Chemical name/formula: OPTEON XP44/R-452a
Shipping Container No: A53581
Container Type: ☐ Service Can ☐ Ton Tank ☐ ISO Tank
Arrival Date: 7/31/2024
☑ Refillable Cylinder ☐ Disposable Cylinder
Listed Qty: 40 Listed Mass: 9 Actual Mass: 9 ☐ lb ☑ kg ☐ ton

Visual Inspection Notes:
Full Description: UN1078, Refrigerant Gas N.O.S., (Pentafluoroethane, 2,3,3,3-Tetrafluoropropene, Difluoromethane) CLASS 2.2 OPTEON XP44/R-452a

40 total containers of R-452a were in the shipment. 20 containers (1 pallet of 20 containers) were filled with product and listed a net weight of product on the pallet of 9 kg. 20 containers (1 pallet of 20 containers) were listed as "DEAD" with no associated net weight of product provided.

Inspection Summary

Evidence/Samples taken and Description:
EPA Inspectors weighed the containers of 3 pallets and recorded the tare weight of each of the containers to determine a net weight of product on each of the 3 pallets. The EPA-weighed value of product was higher than the reported weight of product on each of the 3 pallets. EPA also compared entry documentation to information contained on the pallets and container labels to verify accuracy.

Potential Follow-Up/Areas of Concern (e.g. potential deficiencies, actions taken by facility (if applicable)):

1. EPA Inspectors measured an additional 10 kg of R-507A, 10 kg of R-448a, and 2.5 kg of R-448a, above reported net product weights on three pallets chosen randomly for weight verification. EPA adjusted for the weight of protective netting and conservatively estimated tare weights of containers for which tare weight could not be located to calculate total weight of product.

2. EPA could not determine the tare weight of 5 containers from the three pallets that were chosen for weight verification.

3. EPA observed a discrepancy in the reported net weight of R-449a imported with the shipment. The Bill of Lading provided with the entry documentation indicated that 60 kg of R-449a were being imported. However, the paperwork included on the pallets for R-449a indicated that the pallets contained 73 kg of R-449a.

Inspection photo numbers: IMG-0014.MOV - IMG-0090.MOV
Camera Information: EPA-Issued iphone 13 Other: Photographer: Christine Tokarz
Lead Inspector Signature: KATELYN BERGL Digitally signed by KATELYN BERGL Date: 2024.08.28 20:42:41 -06'00'
Supervisor Signature: SCOTT PATEFIELD Digitally signed by SCOTT PATEFIELD Date: 2024.09.03 15:25:29 -06'00'