

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME GEORGIA GULF CHEMICALS S
ADDRESS VINYL S LLC
P O BOX 91
ABERDEEN
FACILITY MONROE COUNTY
LOCATION ABERDEEN
ATTN: DAVID MAGEE

MS 39730
MS 39790

PERMIT NUMBER MS20091451		DISCHARGE NUMBER 001 A	
MONITORING PERIOD			
YEAR	MO	DAY	TO
03	01	01	31

MINOR
(SUBR NO)
F - FINAL
PROCESS WASTEWATER

NO DISCHARGE
NOTE: Read instructions before completing this form.

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE		
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS	
BOD, 5-DAY (20 DEG. C) 00010 1 0 0 EFFLUENT GROSS VALUE	289	594	(26)		24.1	49.8	(19)	2	Weekly	Comp 24	
	REPORT MO AVG	440	LBS/D		REPORT MO AVG	40.0	MG/L		4 WEEKLY	COMP 24	
PH 00000 1 0 0 EFFLUENT GROSS VALUE				7.0		7.5	(12)	0	Weekly	Grab	
									4 WEEKLY	GHAB	
SOLIDS, TOTAL SUSPENDED 00030 1 0 0 EFFLUENT GROSS VALUE			(26)				(15)	0	Weekly	Comp 24	
	REPORT MO AVG	991	LBS/D		REPORT MO AVG	90.0	MG/L		4 WEEKLY	COMP 24	
CYANIDE, TOTAL (AS CN) 00020 1 0 0 EFFLUENT GROSS VALUE			(26)				(19)	0	Twice/	Month	
	REPORT MO AVG	7.79	LBS/D		REPORT MO AVG	0.708	MG/L		4 WEEKLY	GHAB	
CADMIUM, TOTAL (AS CD) 01027 1 0 0 EFFLUENT GROSS VALUE			(26)				(19)	0	Twice/	Month	
	REPORT MO AVG	5.00	LBS/D		REPORT MO AVG	0.513	MG/L		4 WEEKLY	COMP 24	
LEAD, TOTAL (AS PB) 01031 1 0 0 EFFLUENT GROSS VALUE			(26)				(19)	0	Twice/	Month	
	REPORT MO AVG	0.065	LBS/D		REPORT MO AVG	0.005	MG/L		4 WEEKLY	COMP 24	
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE			(26)				(19)	0	Twice/	Month	
	REPORT MO AVG	1.90	LBS/D		REPORT MO AVG	0.173	MG/L		4 WEEKLY	COMP 24	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER										DATE	
	Brandon S. Nadler/ Plant Manager									03 01 03	
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				TELEPHONE			AREA CODE		NUMBER		
				260 911			360		12		
TYPED OR PRINTED				DATE			YEAR		MO DAY		
				03 01 03			03		01 12		

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Cyanide Test Method 335.2 MDL=0.010 Lead Test Method 200.7 MDL=0.005
Cadmium Test Method 200.7 MDL=0.001 Zinc Test Method 2007 MDL=0.010

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME GEORGIA GULF CHEMICALS CO
ADDRESS VINYLS LLC
P O BOX 91
ABERDEEN
FACILITY MORRIS COUNTY
LOCATION: ABERDEEN
ATTN: DAVID NAGGE

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER
589091851

DISCHARGE NUMBER
0012

MS 39730

MS 39190

MONITORING PERIOD
YEAR MO DAY TO YEAR MO DAY
03 01 01 03 01 31

MINOR
(SUBR NO)
F - FINAL
PROCESS WASTEWATER

NO DISCHARGE
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PARAMETER	QUANTITY OR LOADING				QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
PHENOLS 40000 1 0 0 EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	NOD1-B	(26)	REPORT NO-AVG	NOD1-B	(19)	Twice / Month	0	Twice / Month	Conti	
	PERMIT REQUIREMENT	REPORT NO-AVG	1.5	REPORT NO-AVG	REPORT NO-AVG	REPORT NO-AVG	REPORT NO-AVG	0	Twice / Month	Conti	
	SAMPLE MEASUREMENT	REPORT NO-AVG	2.5	REPORT NO-AVG	REPORT NO-AVG	REPORT NO-AVG	REPORT NO-AVG	0	Twice / Month	Conti	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	SAMPLE MEASUREMENT										
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 ensure that qualified personnel properly gather and evaluate 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 that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER											
Brandon S. Nadler/ Plant Manager											
TYPED OR PRINTED											
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											
TELEPHONE											
DATE											
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT											
667 359-8111											
AREA CODE NUMBER											
YEAR MO DAY											
03 02 12											

Phenols Test Method 420.1 NDL-0.005