

PERMITTEE NAME/ADDRESS (Include Facility Name/Location (V/D/Permit))
NAME GEORGIA GULF CHEMICALS &
ADDRESS VINYL5 LLC
PO BOX 91

MAJOR
(SUB NO)
E - FINAL

MS 29730

FACILITY: MONROE COUNTY
LOCATION: MERIDEN
ATTN: DAVID HAGER

MONITORING PERIOD						
YEAR		MO		DAY		TO
02	04	01				

*** NO DISCHARGE ***
NOTE: Read Instructions before use

NAME: DAVID HACHEL

PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
BCD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	107	106130	(26)	*****	8.9	10.6	(19)	Weekly	Comp24
	PERMIT REQUIREMENT	REPORT NO AVG	120	LBS/DY	*****	*****	40.0	DAILY MG/L	*****	*****
SOLIDS, TOTAL	SAMPLE MEASUREMENT	*****	*****	*****	7.2	*****	7.6	(12)	Weekly	Grab
	PERMIT REQUIREMENT	*****	*****	*****	5.0	*****	9.0	DAILY SU	*****	*****
SUSPENDED	SAMPLE MEASUREMENT	92107	120145	(26)	*****	9	12	(19)	Weekly	Comp24
	PERMIT REQUIREMENT	REPORT NO AVG	120	LBS/DY	*****	*****	90.0	DAILY MG/L	*****	*****
CYANIDE, TOTAL (AS CN)	SAMPLE MEASUREMENT	NODI=B	NODI=B	(26)	*****	NODI=B	NODI=B	(19)	Weekly	Grab
	PERMIT REQUIREMENT	3.11	7.19	LBS/DY	*****	*****	0.700	DAILY MG/L	*****	*****
CADMIUM, TOTAL (AS CD)	SAMPLE MEASUREMENT	NODI=B	NODI=B	(26)	*****	NODI=B	NODI=B	(19)	Twice/Month	Comp24
	PERMIT REQUIREMENT	5.00	5.09	LBS/DY	*****	*****	0.455	DAILY MG/L	*****	*****
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	0.086	0.096	(26)	*****	0.006	0.008	(19)	Twice/Month	Comp24
	PERMIT REQUIREMENT	1.90	3.08	LBS/DY	*****	*****	0.172	DAILY MG/L	*****	*****
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	0.067	0.135	(26)	*****	0.006	0.011	(19)	Twice/Month	Comp24
	PERMIT REQUIREMENT	1.70	4.28	LBS/DY	*****	*****	0.154	DAILY MG/L	*****	*****
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person 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.			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			DATE		
Typed or Printed		Burlen Helle			442 369-3111			07 05 08		

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

Candidate Test Method 335.4 MDL=0.010

Cadmium Test Method 700.7 MDL=0.001

Zinc Test Method 200.7 HDL=U.010

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

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

OMB No. 2040-0004

WSP091451
PERMIT NUMBER

001A
DISCHARGE NUMBER

MINOR
(SUBR NO)
F - FINAL
PROCESS WASTEWATER

35 39730

45 39790

MONITORING PERIOD
YEAR MO DAY YEAR MO DAY
02 04 01 02 04 30

*** 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			
PHEVOLS	SAMPLE MEASUREMENT	0.06	0.13	(25)	0.006	0.012	(19)	Twice/ Month	Comp24
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY EX	REPORT DAILY EX	REPORT NO AVG	REPORT DAILY EX	REPORT DAILY EX	Twice/ Month	Comp24
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.4	1.5	(03)	0.0000	0.0000	0	Daily	Contin
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY EX	REPORT DAILY EX	REPORT NO AVG	REPORT DAILY EX	REPORT DAILY EX	Daily	Contin
FLOW, IN CONDUIT-OR TREATMENT PLANT	SAMPLE MEASUREMENT								
	PERMIT REQUIREMENT								
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT								
	PERMIT REQUIREMENT								
	SAMPLE MEASUREMENT								
	PERMIT REQUIREMENT								
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	PERMIT REQUIREMENT								
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE			DATE				
Doug E. Knittel/Plant Manager		369-8111			02 05 05				
TYPED OR PRINTED		AREA CODE			NUMBER				
		062			369-8111				
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			YEAR		MO DAY		
		Bryan Lee Knittel			02		05 05		

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

Phenols Test Method 420.1 MDL=0.005