ACUSHNET COMPANY

March 31, 1987

Mr. George Harding
Permit Compliance Section
Compliance Branch
Water Management Division
Environmental Protection Agency
JFK Federal Building
Boston, MA 02203

RECEIVED
APR 2 1987
COMPLIANCE BRANCH

Gentlemen:

Enclosed please find copies of our discharge monitoring reports for our NPDES permit # MA 0003913 for the month of March.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me.

Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY

John J. Bailey Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

RUBBER DIVISION • P.O. BOX E916, NEW BEDFORD, MASS. 02742-0916 • TEL. (617) 997-2811
TWX 710-344-0653 PANAFAX (617) 992-9526

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

Facility or discharge location

Name ACUSHNET COMPANY, RUBBER DIVISION, PLANT B
Street 744 Belleville Ave.
City New Bedford
State/Zip code MA 02745

see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory
The 12 open container grab samples were collected over the sampling day, and examined, then combined into one composite sample for analysis

Telephone number (including area code)

(2-3) ST.	(4-16) PERMIT NUMBER	(17-19) DIS
MA	0003391	001

REPORTING PERIOD: FROM (20-21) YEAR 87, (22-23) MO 03, (24-25) DAY 01 TO (26-27) YEAR 87, (28-29) MO 03, (30-31) DAY 31

(32-37) PARAMETER		(3 card only) (38-45) QUANTITY MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(4 card only) (38-45) CONCENTRATION MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(64-68) FREQUENCY OF ANALYSIS	(69-70) SAMPLE TYPE
FLOW	REPORTED	.389	.488	.618	M.G.D.							30/30	24 Hr. Composite
	PERMIT CONDITION												
OIL AND GREASE	REPORTED		1.9		LBS/DAY							1/30	24 Hr. Composite
	PERMIT CONDITION		3.3	9.3									
T.S.S.	REPORTED		5.3		LBS/DAY							1/30	24 Hr. Composite
	PERMIT CONDITION		9.0	18.0									
C.O.D.	REPORTED							14.8		mg/1		1/30	24 Hr. Composite
	PERMIT CONDITION							MONITOR					
pH	REPORTED							7.7		Std. Units		12/30	24 Hr. Composite
	PERMIT CONDITION						6.5		8.0				
CR	REPORTED							>.05		mg/1		1/30	24 Hr. Composite
	PERMIT CONDITION							0.3					
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF THE OFFICER	DATE
JEPSON, John (LAST FIRST MI)	Exec.Vice President & General Manager (TITLE)	8 5 0 3 3 1 (YEAR MO DAY)

I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

ACUSHNET COMPANY

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MAY 12 1987
COMPLIANCE BRANCH

May 5, 1987

Mr. George Harding
Permit Compliance Section
Compliance Branch
Water Management Division
Environmental Protection Agency
JFK Federal Building
Boston, MA 02203

Gentlemen:

This notice will serve as a letter of explanation for the violation of high pH. Five samples had pH's of 8.2, 0.2 above the maximum. The incoming water from the municipal water system had a pH of 8.3 on the day of testing. This would account for our high readings.

Sincerely,

ACUSHNET COMPANY

Paul A. Mello

Paul A. Mello
Environmental Compliance Specialist

/rg

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MAY 1 3 1987
COMPLIANCE BRANCH

RUBBER DIVISION • P.O. BOX E916, NEW BEDFORD, MASS. 02742-0916 • TEL. (617) 997-2811
TELEX 929414 — TWX 710-344-0653

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

Facility or discharge location

Name ACUSHNET COMPANY, RUBBER DIVISION, PLANT B
Street 744 Belleville Ave.
City New Bedford,
State/Zip code MA 02745

see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory
* The 12 open container grab samples were collected over the sampling day, and examined, then combined into one composite sample for analysis

Telephone number (including area code) 617-997-2811

(2-3) ST	(4-16) PERMIT NUMBER	(17-19) DIS
MA	0003913	001

REPORTING PERIOD: FROM (20-21) YEAR 87 (22-23) MO 04 (24-25) DAY 01 TO (26-27) YEAR 87 (28-29) MO 04 (30-31) DAY 30

(32-37) PARAMETER		(3 card only) (38-45) QUANTITY MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(4 card only) (38-45) CONCENTRATION MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(64-68) FREQUENCY OF ANALYSIS	(69-70) SAMPLE TYPE
Flow	REPORTED	.408	.450	.591	M.G.D.							30/30	24 Hr.* Composite
	PERMIT CONDITION												
Oil and Grease	REPORTED		1.0		LBS/ Day	0						1/30	24 Jr/* Composite
	PERMIT CONDITION		3.3	9.3									
T.S.S.	REPORTED		2.0		LBS/ Day	0						1/30	24 Hr.* Composite
	PERMIT CONDITION		9.0	18.0									
C.O.D.	REPORTED							6.0		mg/l	0	1/30	24 Hr.* Composite
	PERMIT CONDITION							MONITOR					
pH	REPORTED						7.6	8.0	8.2	Std. Units	5	12/30	24 Hr.* Composite
	PERMIT CONDITION						6.5		8.0				
CR	REPORTED							<0.005		mg/l	0	1/30	24 Hr.* Composite
	PERMIT CONDITION							0.3					
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

RECEIVED - EPA
MAY 13 1987
COMPLIANCE BRANCH

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF THE OFFICER	DATE	
JEPSON, John (LAST FIRST MI)	Exec.Vice President & General Manager (TITLE)	87 05 04 (YEAR MO DAY)	*I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.* SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

INSTRUCTIONS FOR COMPLETING
DISCHARGE MONITORING REPORT

Read these instructions before completing form:

After reading and understanding instructions and forms, please return acknowledgement card.

Sampling and testing procedures should follow those published in 40 C.F.R. 136. These are basically Standard Methods or EPA procedures.

Forms should be completed in triplicate for each discharge with copy each for EPA, state and your records. If the state requires a more frequent submittal than EPA, collate EPA's copies and send as required.

Enter permittee name and facility address, PERMIT NUMBER, discharge number and reporting period. (A separate page is required for each discharge.)

For each parameter monitored during the reporting period, (either as a requirement of the permit or for own information) summarize the data as required in the permit and complete the form as follows:

1. Parameter column - list parameter name.

2. Enter minimum, average and maximum values for quantity and/or concentration under appropriate column headings.

   a. If frequency is once per month or less, enter the one value under average and leave minimum and maximum blank.

   b. lb/day (pounds per day) equals flow (in million gallons per day) times concentration (in mg/l) times 8.34.
   Example: 2.5 MGD x 30 mg/l BOD x 8.34 = 625.5 lb BOD/day

   c. MGD equals gallons per minute times 1440.

3. Enter units as appropriate.

   MGD - million gallons per day
   lb/day - pounds per day
   mg/l - milligrams per liter
   SU - standard units for pH
   °F - degrees fahrenheit
   kg/day - kilograms/day = $\frac{\text{lb/day}}{2.2}$
   (other units may be used as necessary)

4. Specify the number of samples that exceeded the maximum (and/or minimum, as appropriate) in the columns "NO. EX." If none, enter "0". If there are any violations, send a letter of explanation.

5. Specify frequency of analysis as number of analyses/number days (3/7 is three analyses per every 7 days, 1/7 is weekly, 1/30 is once a month, 30/30 is daily, 1/90 is quarterly & 1/180 is semiannually) If continuous, enter "CONT".

6. Specify sample type ("grab" or "__hr. composite") If frequency was continuous enter "NA."

Indicate person or laboratory performing analytical work under Remarks.

Print name and title of person responsible for monitoring and reporting and sign and date the form.

Mail state copy to appropriate state agency and EPA copy to

Environmental Protection Agency
Permits Branch
Box 8127
Boston, MA 02114

When supply of forms will be exhausted within 2 months, send reorder form or reproduce forms yourself.

COMPLIANCE BRANCH

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

Facility or discharge location

Name
Street 20 Custom House Street
City Boston, Massachusetts
State/Zip code 02109

RECEIVED - EPA
SEP 2 1987
COMPLIANCE BRANCH

see INSTRUCTIONS on back

Remarks Permittee
Name: Jaymont (USA), Inc.
Address: 260 Franklin Street
City: Boston
State/Zip: MA 02110
Telephone: (617) 482-0475
Analytical Lab: ENSECO

Telephone number (including area code)

(2-3) ST	(4-16) PERMIT NUMBER	(17-19) DIS
MA	0030970	01

REPORTING PERIOD: FROM (20-21) YEAR 87 (22-23) MO 06 (24-25) DAY 30 TO (26-27) YEAR 87 (28-29) MO 07 (30-31) DAY 30

(32-37) PARAMETER		(3 card only) QUANTITY (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(4 card only) CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(64-68) FREQUENCY OF ANALYSIS	(69-70) SAMPLE TYPE
Flow	REPORTED	.00005	0.005	0.0146	MGD								
	PERMIT CONDITION		0.035	0.060									
pH	REPORTED						9.02	10.4	11.7	SU		2/30	Grab
	PERMIT CONDITION						6.5		8.5			2/30	Grab
Total Volatile Organics	REPORTED						2.3	36.75	71.2	ug/L		3/30	Grab
	PERMIT CONDITION								500			2/30	Grab
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF THE OFFICER	DATE	
LAST FIRST MI	TITLE	YEAR MO DAY	*I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

HAZARDOUS SUBSTANCE LIST (HSL) VOLATILE ORGANICS

EPA Method 624/HSL List

Client Name: Haley & Aldrich, Inc. (Job No. 575101)
Client ID: GW-1
Laboratory ID: 87-009136
Matrix: Water Sampled: 06/30/87 Received: 06/30/87
Authorized: 06/30/87 Prepared: 07/13/87 Analyzed: 06/30/87

Parameter	Result	Units	Reporting Limit
Chloromethane	ND	µg/L	5
Bromomethane	ND	µg/L	5
Vinyl chloride	ND	µg/L	5
Chloroethane	ND	µg/L	5
Methylene chloride	ND	µg/L	20
Acetone	ND	µg/L	50
Carbon disulfide	ND	µg/L	2
1,1-Dichloroethene	ND	µg/L	2
1,1-Dichloroethane	ND	µg/L	2
trans-1,2-Dichloroethene	ND	µg/L	2
Chloroform	ND	µg/L	2
1,2-Dichloroethane	ND	µg/L	2
2-Butanone	ND	µg/L	10
1,1,1-Trichloroethane	ND	µg/L	2
Carbon tetrachloride	ND	µg/L	2
Vinyl acetate	ND	µg/L	10
Bromodichloromethane	ND	µg/L	2
1,2-Dichloropropane	ND	µg/L	2
trans-1,3-Dichloropropene	ND	µg/L	2
Trichloroethene	ND	µg/L	2
Dibromochloromethane	ND	µg/L	2
1,1,2-Trichloroethane	ND	µg/L	2
Benzene	ND	µg/L	2
cis-1,3-Dichloropropene	ND	µg/L	2
2-Chloroethyl vinyl ether	ND	µg/L	10
Bromoform	ND	µg/L	2
4-Methyl-2-pentanone	ND	µg/L	10
2-Hexanone	ND	µg/L	10
1,1,2,2-Tetrachloroethane	ND	µg/L	2
Tetrachloroethene	ND	µg/L	2
Toluene	ND	µg/L	2
Chlorobenzene	ND	µg/L	2
Ethyl benzene	ND	µg/L	2
Styrene	ND	µg/L	2
Total xylenes	5.7	µg/L	2

ND = Not detected.

Reported by _____ Approved by _____

ACROLEIN AND ACRYLONITRILE

EPA Method 603

Client Name: Haley & Aldrich, Inc. (Job No. 575101)
Client ID: GW-1
Laboratory ID: 87-009136
Matrix: Water Sampled: 06/30/87 Received: 06/30/87
Authorized: 06/30/87 Prepared: 07/07/87* Analyzed: 07/07/87

Parameter	Results	Units	Reporting Limit
Acrolein	ND	µg/L	5
Acrylonitrile	ND	µg/L	5

*Sample was preserved upon receipt.

ND = Not detected.

Reported by _____ Approved by _____

Enseco

HAZARDOUS SUBSTANCE LIST (HSL) VOLATILE ORGANICS

EPA Method 624/HSL List

Client Name: Haley & Aldrich, Inc. (Job No. 575101)

Client ID: EPA-2

Laboratory ID: 87-010164

Matrix: Water Sampled: 07/15/87 Received: 07/15/87

Authorized: 07/15/87 Prepared: 07/21/87 Analyzed: 07/21/87

Parameter	Result	Units	Reporting Limit
Chloromethane	ND	µg/L	5
Bromomethane	ND	µg/L	5
Vinyl chloride	ND	µg/L	5
Chloroethane	ND	µg/L	5
Methylene chloride	ND	µg/L	20
Acetone	ND	µg/L	50
Carbon disulfide	ND	µg/L	2
1,1-Dichloroethene	ND	µg/L	2
1,1-Dichloroethane	ND	µg/L	2
trans-1,2-Dichloroethene	ND	µg/L	2
Chloroform ----------	2.3	µg/L	2
1,2-Dichloroethane	ND	µg/L	2
2-Butanone	ND	µg/L	10
1,1,1-Trichloroethane	ND	µg/L	2
Carbon tetrachloride	ND	µg/L	2
Vinyl acetate	ND	µg/L	10
Bromodichloromethane	ND	µg/L	2
1,2-Dichloropropane	ND	µg/L	2
trans-1,3-Dichloropropene	ND	µg/L	2
Trichloroethene	ND	µg/L	2
Dibromochloromethane	ND	µg/L	2
1,1,2-Trichloroethane	ND	µg/L	2
Benzene	ND	µg/L	2
cis-1,3-Dichloropropene	ND	µg/L	2
2-Chloroethyl vinyl ether	ND	µg/L	10
Bromoform	ND	µg/L	2
4-Methyl-2-pentanone	ND	µg/L	10
2-Hexanone	ND	µg/L	10
1,1,2,2-Tetrachloroethane	ND	µg/L	2
Tetrachloroethene	ND	µg/L	2
Toluene	ND	µg/L	2
Chlorobenzene	ND	µg/L	2
Ethyl benzene	ND	µg/L	2
Styrene	ND	µg/L	2
Total xylenes	ND	µg/L	2

ND = Not detected.

Reported by _____ Approved by _____

ACROLEIN AND ACRYLONITRILE

EPA Method 603

Client Name: Haley & Aldrich, Inc. (Job No. 255751)
Client ID: EPA-2
Laboratory ID: 87-010164
Matrix: Water Sampled: 07/15/87 Received: 07/15/87
Authorized: 07/15/87 Prepared: 07/16/87 Analyzed: 07/16/87

Parameter	Results	Units	Reporting Limit
Acrolein	ND	µg/L	5
Acrylonitrile	ND	µg/L	5

ND = Not detected.

Reported by JL Approved by MOR

Enseco

CLIENT: Haley & Aldrich, Inc. (Job No. 575101)

SAMPLE RECEIVED: 07/15/87

ANALYSIS COMPLETED: 07/15/87

RESULTS IN: As indicated

REPORTED BY: DB

CHECKED BY: ED

INORGANIC ANALYSIS

AQUEOUS

- Data Report -

Erco ID	Client ID	pH
87-010164	EPA-2	9.02

Method Used: 150.1

If customer has any questions regarding analysis, refer to sample in question by its ERCO ID#.

HAZARDOUS SUBSTANCE LIST (HSL) VOLATILE ORGANICS

EPA Method 624/HSL List

Client Name: Haley & Aldrich, Inc. (Job No. 575101)
Client ID: EPA-3
Laboratory ID: 4876-01
Matrix: Water Sampled: 07/29/87 Received: 07/29/87
Authorized: 07/29/87 Prepared: 07/31/87 Analyzed: 07/31/87

Parameter	Result	Units	Reporting Limit
Chloromethane	ND	µg/L	5
Bromomethane	ND	µg/L	5
Vinyl chloride	ND	µg/L	5
Chloroethane	ND	µg/L	5
Methylene chloride	ND	µg/L	20
Acetone	ND	µg/L	50
Carbon disulfide	ND	µg/L	2
1,1-Dichloroethene	ND	µg/L	2
1,1-Dichloroethane	ND	µg/L	2
trans-1,2-Dichloroethene	ND	µg/L	2
Chloroform	7.2	µg/L	2
1,2-Dichloroethane	ND	µg/L	2
2-Butanone	64	µg/L	10
1,1,1-Trichloroethane	ND	µg/L	2
Carbon tetrachloride	ND	µg/L	2
Vinyl acetate	ND	µg/L	10
Bromodichloromethane	ND	µg/L	2
1,2-Dichloropropane	ND	µg/L	2
trans-1,3-Dichloropropene	ND	µg/L	2
Trichloroethene	ND	µg/L	2
Dibromochloromethane	ND	µg/L	2
1,1,2-Trichloroethane	ND	µg/L	2
Benzene	ND	µg/L	2
cis-1,3-Dichloropropene	ND	µg/L	2
2-Chloroethyl vinyl ether	ND	µg/L	10
Bromoform	ND	µg/L	2
4-Methyl-2-pentanone	ND	µg/L	10
2-Hexanone	ND	µg/L	10
1,1,2,2-Tetrachloroethane	ND	µg/L	2
Tetrachloroethene	ND	µg/L	2
Toluene	ND	µg/L	2
Chlorobenzene	ND	µg/L	2
Ethyl benzene	ND	µg/L	2
Styrene	ND	µg/L	2
Total xylenes	ND	µg/L	2

ND = Not detected.

Reported by CB Approved by

ACROLEIN AND ACRYLONITRILE

EPA Method 603

Client Name: Haley & Aldrich, Inc. (Job No. 575101)
Client ID: EPA-3
Laboratory ID: 4876-01
Matrix: Water Sampled: 07/29/87 Received: 07/29/87
Authorized: 07/29/87 Prepared: 07/31/87 Analyzed: 07/31/87

Parameter	Results	Units	Reporting Limit
Acrolein	ND	µg/L	5
Acrylonitrile	ND	µg/L	5

ND = Not detected.

Reported by _____ Approved by _____

CLIENT: Haley & Aldrich (Job No. 575101)

INORGANIC ANALYSIS

SAMPLE RECEIVED: 07/29/87

ANALYSIS COMPLETED: 07/30/87

RESULTS IN: As indicated

REPORTED BY: YLK

CHECKED BY: EO

- Data Report -

Erco ID	Client ID	pH
4876-1	EPA-3	11.7

Method Used: 150.1

If customer has any questions regarding analysis, refer to sample in question by its Erco ID#.

CUSTOM
HOUSE
STREET

September 1, 1987

RECEIVED - EPA
SEP 2 1987
COMPLIANCE BRANCH

Permit Compliance Section
Compliance Branch
Water Management Division
Environmental Protection Agency
JFK Federal Building
Boston, MA 02203

Gentlemen:

Enclosed with this letter is the Discharge Monitoring Report for the month of July for permit MA0030970. As noted on the form, the pH exceeded the permit limits due to the fact that cement ground with lime was being used on the site during tieback installation and affected the pH of the water which was being pumped and discharged. Discharge of groundwater from the construction site commenced on 30 June.

The chemical analysis data sheets indicate that the permit limits for total volatile organics of 500 ug/L was met and the flow rate was far below the average 35,000 gallons per day, which the permit allows.

Sincerely yours,

JAYMONT (U.S.A.) INCORPORATED

Dudley G. Malone
Project Manager

DGM/jmc

JJB87/239

ACUSHNET COMPANY
RUBBER DIVISION

Manufacturers of Elastomeric Products

August 31, 1987

Mr. George Harding
Permit Compliance Section
Compliance Branch
Water Management Division
Environmental Protection Agency
JFK Federal Building
Boston, MA 02203

Dear Mr. Harding:

Enclosed, please find copies of our discharge monitoring report for our NPDES permit # MA 003913001 for the month of June 1987.

Due to a filing error the report was not mailed to you in its normal sequence.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY

John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

RECEIVED - EPA
SEP 1 0 1987
COMPLIANCE BRANCH

744 Belleville Ave., P.O. Box E916, New Bedford, MA 02742-0916
Tel. (617) 997-2811 / TWX 710-344-0653 / PANAFAX (617) 993-0512

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

Facility or discharge location

Name ACUSHNET COMPANY, Rubber Division, Plant B
Street 744 Belleville Ave.
City New Bedford, MA 02745
State/Zip code

see INSTRUCTIONS on back

Remarks TITLEIST GOLF DIVISION Laboratory
*The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

Telephone number (including area code)

(2-3) ST	(4-16) PERMIT NUMBER	(17-19) DIS
MA	0003913	001

REPORTING PERIOD: FROM (20-21) YEAR 87 (22-23) MO 06 (24-25) DAY 01 TO (26-27) YEAR 87 (28-29) MO 06 (30-31) DAY 30

RECEIVED - EPA
SEP 10 1987
COMPLIANCE BRANCH

(32-37) PARAMETER		(3 card only) QUANTITY (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(4 card only) CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(64-68) FREQUENCY OF ANALYSIS	(69-70) SAMPLE TYPE
FLOW	REPORTED	.306166	.476417	.746000	MG.D						0	30/30	24 Hr CONTINUOUS
	PERMIT CONDITION												
OIL & GREASE	REPORTED		2.8		LBS/DAY	0							
	PERMIT CONDITION		3.3	9.3									
T.S.S.	REPORTED		3.1			0							
	PERMIT CONDITION		9.0	18.0	LBS/DAY								
C.O.D.	REPORTED							6.7		Mg/L	0	1/30	24 Hr COMPOSITE
	PERMIT CONDITION							MONITOR					
PH	REPORTED						7.3	7.7	8.2	STD UNITS	1	12/30	24 Hr. COMPOSITE
	PERMIT CONDITION						6.5		8.0				
C.R.	REPORTED							.05			0	1/90	24 Hr COMPOSITE
	PERMIT CONDITION							0.3					
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF THE OFFICER	DATE
JEPSON, JOHN (LAST FIRST MI)	Exec.Vice President& General Manager (TITLE)	87 07 09 (YEAR MO DAY)

I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

INSTRUCTIONS FOR COMPLETING
DISCHARGE MONITORING REPORT

Read these instructions before completing form:

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Enter permittee name and facility address, PERMIT NUMBER, discharge number and reporting period. (A separate page is required for each discharge.)

For each parameter monitored during the reporting period, (either as a requirement of the permit or for own information) summarize the data as required in the permit and complete the form as follows:

1. Parameter column - list parameter name.

2. Enter minimum, average and maximum values for quantity and/or concentration under appropriate column headings.

   a. If frequency is once per month or less, enter the one value under average and leave minimum and maximum blank.

   b. lb/day (pounds per day) equals flow (in million gallons per day) times concentration (in mg/l) times 8.34.
   Example: 2.5 MGD x 30 mg/l BOD x 8.34 = 625.5 lb BOD/day

   c. MGD equals gallons per minute times 1440.

3. Enter units as appropriate.

   MGD - million gallons per day
   lb/day - pounds per day
   mg/l - milligrams per liter
   SU - standard units for pH
   °F - degrees fahrenheit
   kg/day - kilograms/day = $\frac{\text{lb/day}}{2.2}$
   (other units may be used as necessary)

4. Specify the number of samples that exceeded the maximum (and/or minimum, as appropriate) in the columns "NO. EX." If none, enter "0". If there are any violations, send a letter of explanation.

5. Specify frequency of analysis as number of analyses/number days (3/7 is three analyses per every 7 days, 1/7 is weekly, 1/30 is once a month, 30/30 is daily, 1/90 is quarterly & 1/180 is semiannually) If continuous, enter "CONT"

6. Specify sample type ("grab" or "__hr. composite") If frequency was continuous enter "NA."

Indicate person or laboratory performing analytical work under Remarks.

Print name and title of person responsible for monitoring and reporting and sign and date the form.

Mail state copy to appropriate state agency and EPA copy to

Environmental Protection Agency
Permits Branch
Box 8127
Boston, MA 02114

When supply of forms will be exhausted within 2 months, send reorder form or reproduce forms yourself.

ACUSHNET COMPANY
RUBBER DIVISION

Manufacturers of Elastomeric Products

August 18, 1987

RECEIVED
AUG 8 1987
COMPLIANCE BRANCH

Mr. George Harding
Permit Compliance Section
Compliance Branch
Water Management Division
Environmental Protection Agency
JFK Federal Building
Boston, MA 02203

Gentlemen:

This notice will serve as a letter of explanation for exceeding PH limits as specified on our NPDES permit # MA 0003913001. 12 samples taken over a 24 hour period had PH readings above the maximum of 8.0 which was due to our incoming water from the municipal water system having a PH of 8.2 on the day of testing. This would account for our high reading.

Please contact me if you require further information.

Sincerely,

ACUSHNET COMPANY

John J. Bailey Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

744 Belleville Ave., P.O. Box E916, New Bedford, MA 02742-0916
Tel. (617) 997-2811 / TWX 710-3[illegible]0653 / PANAFAX (617) 993-0512

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

Facility or discharge location

Name ACUSHNET COMPANY, RUBBER DIVISION, PLANT B
Street 744 Belleville Ave.
City New Bedford, MA 02745
State/Zip code

see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory
* The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

RECEIVED - EPA
AUG 23 1981
COMPLIANCE BRANCH

Telephone number (including area code) 617-997-2811

(2-3) ST	(4-16) PERMIT NUMBER	(17-19) DIS
MA	0003913	001

REPORTING PERIOD: FROM (20-21) YEAR 81 (22-23) MO 07 (24-25) DAY 01 to (26-27) YEAR 81 (28-29) MO 07 (30-31) DAY 31

(32-37) PARAMETER		(3 card only) QUANTITY (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(4 card only) CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(64-68) FREQUENCY OF ANALYSIS	(69-70) SAMPLE TYPE
FLOW	REPORTED	.496	.655	.814	MG.D							30/30	24 Hr continuous
	PERMIT CONDITION												
OIL & GREASE	REPORTED		4.8		LBS/DAY	0							
	PERMIT CONDITION		3.3	9.3									
T.S.S.	REPORTED		8.85		LBS/DAY	0							
	PERMIT CONDITION		9.0	18.0									
C.O.D.	REPORTED							4.8		Mg/L	0	1/30	24 Hr. composite
	PERMIT CONDITION							MONITOR					
PH	REPORTED						8.2	8.3	8.6	STD UNITS	12	12/30	24 Hr. composite
	PERMIT CONDITION						6.5		8.0				
C.R.	REPORTED							0.05		Mg/L	0	1/90	24 Hr. composite
	PERMIT CONDITION							0.3					
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF THE OFFICER	DATE	
JEPSON, JOHN	Exec.Vice President & General Manager	YEAR 81 MO 08 DAY 24	*I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.*
LAST FIRST MI	TITLE		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

INSTRUCTIONS FOR COMPLETING
DISCHARGE MONITORING REPORT

Read these instructions before completing form:

After reading and understanding instructions and forms, please return acknowledgement card.

Sampling and testing procedures should follow those published in 40 C.F.R. 136. These are basically Standard Methods or EPA procedures.

Forms should be completed in triplicate for each discharge with copy each for EPA, state and your records. If the state requires a more frequent submittal than EPA, collate EPA's copies and send as required.

Enter permittee name and facility address, PERMIT NUMBER, discharge number and reporting period. (A separate page is required for each discharge.)

For each parameter monitored during the reporting period, (either as a requirement of the permit or for own information) summarize the data as required in the permit and complete the form as follows:

1. Parameter column - list parameter name.

2. Enter minimum, average and maximum values for quantity and/or concentration under appropriate column headings.

   a. If frequency is once per month or less, enter the one value under average and leave minimum and maximum blank.

   b. lb/day (pounds per day) equals flow (in million gallons per day) times concentration (in mg/l) times 8.34.
   Example: 2.5 MGD x 30 mg/l BOD x 8.34 = 625.5 lb BOD/day

   c. MGD equals gallons per minute times 1440.

3. Enter units as appropriate.

   MGD - million gallons per day
   lb/day - pounds per day
   mg/l - milligrams per liter
   SU - standard units for pH
   °F - degrees fahrenheit
   kg/day - kilograms/day = $\frac{\text{lb/day}}{2.2}$
   (other units may be used as necessary)

4. Specify the number of samples that exceeded the maximum (and/or minimum, as appropriate) in the columns "NO. EX." If none, enter "0". If there are any violations, send a letter of explanation.

5. Specify frequency of analysis as number of analyses/number days (3/7 is three analyses per every 7 days, 1/7 is weekly, 1/30 is once a month, 30/30 is daily, 1/90 is quarterly & 1/180 is semiannually) If continuous, enter "CONT".

6. Specify sample type ("grab" or "__hr. composite") If frequency was continuous enter "NA."

Indicate person or laboratory performing analytical work under Remarks.

Print name and title of person responsible for monitoring and reporting and sign and date the form.

Mail state copy to appropriate state agency and EPA copy to

Environmental Protection Agency
Permits Branch
Box 8127
Boston, MA 02114

When supply of forms will be exhausted within 2 months, send reorder form or reproduce forms yourself.

JJB87/238

ACUSHNET COMPANY
RUBBER DIVISION

Manufacturers of Elastomeric Products

August 31, 1987

Mr. George Harding
Permit Compliance Section
Compliance Branch
Water Management Division
JFK Federal Building
Boston, MA 02203

Dear Mr. Harding:

This notice will serve as a letter of explanation for exceeding PH limits as specified on our NPDES Permit # MA 003913001. 12 samples taken over a 24 hour period had PH readings above the maximum of 8.0 which was due to our incoming water from the municipal water system having a PH range of 8.2 to 8.4 on the day of testing. This would account for our high readings.

Please contact me if you require further information.

Sincerely,

ACUSHNET COMPANY

John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

RECEIVED - EPA
SEP 10 1987
COMPLIANCE BRANCH

744 Belleville Ave., P.O. Box E916, New Bedford, MA 02742-0916
Tel. (617) 997-2811 / TWX 710-3[illegible]0653 / PANAFAX (617) 993-0512

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM

DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

Facility or discharge location

Name ACUSHNET COMPANY, Rubber Division, Plant B
Street 744 Belleville Ave.
City New Bedford, MA 02745
State/Zip code

see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory
*The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

Telephone number (including area code) 617-997-2811

(2-3) ST	(4-16) PERMIT NUMBER	(17-19) DIS
MA	0003913	001

REPORTING PERIOD: FROM (20-21) YEAR 87 (22-23) MO 08 (24-25) DAY 01 TO (26-27) YEAR 87 (28-29) MO 08 (30-31) DAY 31

(32-37) PARAMETER		(3 card only) (38-45) QUANTITY MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(4 card only) (38-45) CONCENTRATION MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(64-68) FREQUENCY OF ANALYSIS	(69-70) SAMPLE TYPE
FLOW	REPORTED	.402750	.562583	.802300	MG.D						0	30/30	24 Hr CONTINUOUS
	PERMIT CONDITION												
OIL & GREASE	REPORTED		2.03		LBS/DAY	0							
	PERMIT CONDITION		3.3	9.3									
T.S.S.	REPORTED		7.6		LBS/DAY	0							
	PERMIT CONDITION		9.0	18.0									
C.O.D.	REPORTED							17.3		Mg/L	0	1/30	24 Hr. COMPOSITE
	PERMIT CONDITION							MONITOR					
PH	REPORTED						8.0	8.4	8.7	STD UNITS	11	12/30	24 Hr. COMPOSITE
	PERMIT CONDITION						6.5		8.0				
C.R.	REPORTED							>.05		Mg/L	0	1/90	24 Hr. COMPOSITE
	PERMIT CONDITION							0.3					
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

RECEIVED
SEP 1 0 1987
EPA
COMPLIANCE BRANCH

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF THE OFFICER	DATE
JEPSON, JOHN (LAST FIRST MI)	Exec.Vice President & General Manager (TITLE)	87 09 04 (YEAR MO DAY)

I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

INSTRUCTIONS FOR COMPLETING
DISCHARGE MONITORING REPORT

Read these instructions before completing form:

After reading and understanding instructions and forms, please return acknowledgement card.

Sampling and testing procedures should follow those published in 40 C.F.R. 136. These are basically Standard Methods or EPA procedures.

Forms should be completed in triplicate for each discharge with copy each for EPA, state and your records. If the state requires a more frequent submittal than EPA, collate EPA's copies and send as required.

Enter permittee name and facility address, PERMIT NUMBER, discharge number and reporting period. (A separate page is required for each discharge.)

For each parameter monitored during the reporting period, (either as a requirement of the permit or for own information) summarize the data as required in the permit and complete the form as follows:

1. Parameter column - list parameter name.

2. Enter minimum, average and maximum values for quantity and/or concentration under appropriate column headings.

   a. If frequency is once per month or less, enter the one value under average and leave minimum and maximum blank.

   b. lb/day (pounds per day) equals flow (in million gallons per day) times concentration (in mg/l) times 8.34.
   Example: 2.5 MGD x 30 mg/l BOD x 8.34 = 625.5 lb BOD/day

   c. MGD equals gallons per minute times 1440.

3. Enter units as appropriate.

   MGD - million gallons per day
   lb/day - pounds per day
   mg/l - milligrams per liter
   SU - standard units for pH
   °F - degrees fahrenheit
   kg/day - kilograms/day = $\frac{\text{lb/day}}{2.2}$
   (other units may be used as necessary)

4. Specify the number of samples that exceeded the maximum (and/or minimum, as appropriate) in the columns "NO. EX." If none, enter "0". If there are any violations, send a letter of explanation.

5. Specify frequency of analysis as number of analyses/number days (3/7 is three analyses per every 7 days, 1/7 is weekly, 1/30 is once a month, 30/30 is daily, 1/90 is quarterly & 1/180 is semiannually) If continuous, enter "CONT".

6. Specify sample type ("grab" or "__hr. composite") If frequency was continuous enter "NA."

Indicate person or laboratory performing analytical work under Remarks.

Print name and title of person responsible for monitoring and reporting and sign and date the form.

Mail state copy to appropriate state agency and EPA copy to

Environmental Protection Agency
Permits Branch
Box 8127
Boston, MA 02114

When supply of forms will be exhausted within 2 months, send reorder form or reproduce forms yourself.

ACUSHNET COMPANY
RUBBER DIVISION

Manufacturers of Elastomeric Products

October 7, 1987

Mr. George Harding
Permit Compliance Section
Compliance Branch
Water Management Division
Environmental Protection Agency
JFK Federal Building
Boston, MA 02203

Gentlemen:

Enclosed, please find copies of our discharge monitoring report for our NPDES Permit # MA 003913001 for the month of September 1987.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY

John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

RECEIVED - EPA
OCT 09 1987
COMPLIANCE BRANCH

744 Belleville Ave., P.O. Box E916, New Bedford, MA 02742-0916
Tel. (617) 997-2811 / TWX 710-3[illegible]0653 / PANAFAX (617) 993-0512

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

see INSTRUCTIONS on back

Facility or discharge location

Name Acushnet Company, Rubber Division, Plant B
Street 744 Belleville Ave.
City New Bedford
State/Zip code MA 02745

Telephone number (including area code) 617-997-2811

RECEIVED - EPA
OCT 09 1987
COMPLIANCE BRANCH

Remarks Titleist Golf Division Laboratory
The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

(2-3) ST	(4-16) PERMIT NUMBER	(17-19) DIS
MA	0003913	001

REPORTING PERIOD: FROM (20-21) YEAR 87 (22-23) MO 09 (24-25) DAY 01 to (26-27) YEAR 87 (28-29) MO 09 (30-31) DAY 30

(32-37) PARAMETER		(3 card only) QUANTITY (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(4 card only) CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(64-68) FREQUENCY OF ANALYSIS	(69-70) SAMPLE TYPE
FLOW	REPORTED	.3754	.536825	.7021	MG.D						0	30/30	24 hours continuous
	PERMIT CONDITION												
OIL AND GREASE	REPORTED		2.9		LBS/DAY	0							
	PERMIT CONDITION		3.3	9.3									
T.S.S.	REPORTED		4.3		LBS/DAY	0							
	PERMIT CONDITION		9.0	18.0									
C.O.D.	REPORTED							8.04		mg/1	0	1/30	24 hour composite
	PERMIT CONDITION							MONITOR					
PH	REPORTED						7.65	8.0	8.6	Std. Units	5	12/30	24 hour composite
	PERMIT CONDITION						6.5		8.0				
C.R.	REPORTED							>.05		mg/1	0	1/90	24 hour composite
	PERMIT CONDITION							.03					
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF THE OFFICER	DATE
JEPSON, JOHN (LAST FIRST MI)	Exec.Vice President & General Manager (TITLE)	87 10 01 (YEAR MO DAY)

I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

INSTRUCTIONS FOR COMPLETING
DISCHARGE MONITORING REPORT

Read these instructions before completing form:

After reading and understanding instructions and forms, please return acknowledgement card.

Sampling and testing procedures should follow those published in 40 C.F.R. 136. These are basically Standard Methods or EPA procedures.

Forms should be completed in triplicate for each discharge with copy each for EPA, state and your records. If the state requires a more frequent submittal than EPA, collate EPA's copies and send as required.

Enter permittee name and facility address, PERMIT NUMBER, discharge number and reporting period. (A separate page is required for each discharge.)

For each parameter monitored during the reporting period, (either as a requirement of the permit or for own information) summarize the data as required in the permit and complete the form as follows:

1. Parameter column - list parameter name.

2. Enter minimum, average and maximum values for quantity and/or concentration under appropriate column headings.

   a. If frequency is once per month or less, enter the one value under average and leave minimum and maximum blank.

   b. lb/day (pounds per day) equals flow (in million gallons per day) times concentration (in mg/l) times 8.34.
      Example: 2.5 MGD x 30 mg/l BOD x 8.34 = 625.5 lb BOD/day

   c. MGD equals gallons per minute times 1440.

3. Enter units as appropriate.

   MGD - million gallons per day
   lb/day - pounds per day
   mg/l - milligrams per liter
   SU - standard units for pH
   °F - degrees fahrenheit
   kg/day - kilograms/day = $\frac{\text{lb/day}}{2.2}$
   (other units may be used as necessary)

4. Specify the number of samples that exceeded the maximum (and/or minimum, as appropriate) in the columns "NO. EX." If none, enter "0". If there are any violations, send a letter of explanation.

5. Specify frequency of analysis as number of analyses/number days (3/7 is three analyses per every 7 days, 1/7 is weekly, 1/30 is once a month, 30/30 is daily, 1/90 is quarterly & 1/180 is semiannually) If continuous, enter "CONT"

6. Specify sample type ("grab" or "__hr. composite")
   If frequency was continuous enter "NA."

Indicate person or laboratory performing analytical work under Remarks.

Print name and title of person responsible for monitoring and reporting and sign and date the form.

Mail state copy to appropriate state agency and EPA copy to

Environmental Protection Agency
Permits Branch
Box 8127
Boston, MA 02114

When supply of forms will be exhausted within 2 months, send reorder form or reproduce forms yourself.

ACUSHNET COMPANY
RUBBER DIVISION

Manufacturers of Elastomeric Products

November 16, 1987

Mr. George Harding
Permit Compliance Section
Compliance Branch
Water Management Division
Environmental Protection Agency
JFK Federal Building
Boston, MA 02203

RECEIVED - EPA
DEC 1 1987
COMPLIANCE BRANCH

Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY

John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

744 Belleville Ave., P.O. Box E916, New Bedford, MA 02742-0916
Tel. (617) 997-2811 / TWX 710-344-0653 / PANAFAX (617) 993-0512

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

see INSTRUCTIONS on back

Facility or discharge location

Name ACUSHNET COMPANY-RUBBER DIVISION-PLANT B
Street 744 Belleville Ave.
City New Bedford, MA 02745
State/Zip code

Telephone number (including area code) 617-997-2811

RECEIVED - EPA
DEC 1 1987
COMPLIANCE BRANCH

Remarks Titleist Golf Division Laboratory
*The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

(2-3) ST	(4-16) PERMIT NUMBER	(17-19) DIS
MA	0003913	001

REPORTING PERIOD: FROM (20-21) YEAR 87 (22-23) MO 10 (24-25) DAY 01 TO (26-27) YEAR 87 (28-29) MO 10 (30-31) DAY 31

(32-37) PARAMETER		(3 card only) (38-45) QUANTITY MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(4 card only) (38-45) CONCENTRATION MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(64-68) FREQUENCY OF ANALYSIS	(69-70) SAMPLE TYPE
FLOW	REPORTED	.364	.491	.646	MG.D							30/30	24 Hr. continuous
	PERMIT CONDITION												
OIL & GREASE	REPORTED		1.3		LBS/Day	0							
	PERMIT CONDITION		3.3	9.3									
T.S.S.	REPORTED		1.01		LBS/Day	0							
	PERMIT CONDITION		9.0	18.0									
C.O.D.	REPORTED							10.16		Mg/L	0	1/30	24 Hr. composite
	PERMIT CONDITION							MONITOR					
PH	REPORTED						7.6	8.0	8.2	STD UNITS	4	12/30	24 Hr. composite
	PERMIT CONDITION						6.5		8.0				
CR	REPORTED							.05		Mg/L	0	1/90	24 Hr. composite
	PERMIT CONDITION							0.3					
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF THE OFFICER	DATE	
JEPSON, John (LAST FIRST MI)	Exec.Vice President & General Manager (TITLE)	87 11 01 (YEAR MO DAY)	*I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.* SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

INSTRUCTIONS FOR COMPLETING
DISCHARGE MONITORING REPORT

Read these instructions before completing form:

After reading and understanding instructions and forms, please return acknowledgement card.

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Forms should be completed in triplicate for each discharge with copy each for EPA, state and your records. If the state requires a more frequent submittal than EPA, collate EPA's copies and send as required.

Enter permittee name and facility address, PERMIT NUMBER, discharge number and reporting period. (A separate page is required for each discharge.)

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1. Parameter column - list parameter name.

2. Enter minimum, average and maximum values for quantity and/or concentration under appropriate column headings.

   a. If frequency is once per month or less, enter the one value under average and leave minimum and maximum blank.

   b. lb/day (pounds per day) equals flow (in million gallons per day) times concentration (in mg/l) times 8.34.
      Example: 2.5 MGD x 30 mg/l BOD x 8.34 = 625.5 lb BOD/day

   c. MGD equals gallons per minute times 1440.

3. Enter units as appropriate.

   MGD - million gallons per day
   lb/day - pounds per day
   mg/l - milligrams per liter
   SU - standard units for pH
   °F - degrees fahrenheit
   kg/day - kilograms/day = $\frac{\text{lb/day}}{2.2}$
   (other units may be used as necessary)

4. Specify the number of samples that exceeded the maximum (and/or minimum, as appropriate) in the columns "NO. EX." If none, enter "0". If there are any violations, send a letter of explanation.

5. Specify frequency of analysis as number of analyses/number days (3/7 is three analyses per every 7 days, 1/7 is weekly, 1/30 is once a month, 30/30 is daily, 1/90 is quarterly & 1/180 is semiannually) If continuous, enter "CONT"

6. Specify sample type ("grab" or "__hr. composite") If frequency was continuous enter "NA."

Indicate person or laboratory performing analytical work under Remarks.

Print name and title of person responsible for monitoring and reporting and sign and date the form.

Mail state copy to appropriate state agency and EPA copy to

Environmental Protection Agency
Permits Branch
Box 8127
Boston, MA 02114

When supply of forms will be exhausted within 2 months, send reorder form or reproduce forms yourself.

ACUSHNET COMPANY
RUBBER DIVISION

Manufacturers of Elastomeric Products

December 16, 1987

Mr. George Harding
Permit Compliance Section
Compliance Branch
Water Management Division
Environmental Protection Agency
JFK Federal Building
Boston, MA 02203

Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of November 1987.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY

John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

RECEIVED - EPA

DEC 23 1987

COMPLIANCE BRANCH

744 Belleville Ave., P.O. Box E916, New Bedford, MA 02742-0916
Tel. (617) 997-2811 / TWX 710-3[illegible]653 / PANAFAX (617) 993-0512

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

Facility or discharge location

see INSTRUCTIONS on back

Name ACUSHNET COMPANY, RUBBER DIVISION, PLANT B
Street 744 Belleville Ave.
City New Bedford, MA 02745
State/Zip code

Remarks Titleist Golf Division Laboratory
*The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

RECEIVED - EPA
DEC 23 1987
COMPLIANCE BRANCH

Telephone number (including area code)

(2-3) ST	(4-16) PERMIT NUMBER	(17-19) DIS
MA	0003913	001

REPORTING PERIOD: FROM (20-21) YEAR 87 (22-23) MO 11 (24-25) DAY 01 TO (26-27) YEAR 87 (28-29) MO 11 (30-31) DAY 30

(32-37) PARAMETER		(3 card only) (38-45) QUANTITY MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(4 card only) (38-45) CONCENTRATION MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	FREQUENCY OF ANALYSIS	(69-70) SAMPLE TYPE
FLOW	REPORTED	.234	.430	.658	MG.D							30/30	24 Hrs continuous
	PERMIT CONDITION												
OIL & GREASE	REPORTED		.202		LBS/DAY	0							
	PERMIT CONDITION		3.3	9.3									
T.S.S.	REPORTED		0.46		LBS/DAY	0							
	PERMIT CONDITION		9.0	18.0									
C.O.D.	REPORTED							49.94		Mg/L	0	1/30	24 Hrs. composite
	PERMIT CONDITION							MONITOR					
PH	REPORTED						7.6	7.8	7.9	STD UNITS	0	12/30	24 Hrs. composite
	PERMIT CONDITION						6.5		8.0				
C.R.	REPORTED							.05		Mg/L	0	1/90	24 Hrs. composite
	PERMIT CONDITION							0.3					
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER (LAST FIRST MI)	TITLE OF THE OFFICER (TITLE)	DATE (YEAR MO DAY)	
JEPSON, JOHN	Exec. Vice President & General Manager	87 12 16	*I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.* SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

INSTRUCTIONS FOR COMPLETING
DISCHARGE MONITORING REPORT

Read these instructions before completing form:

After reading and understanding instructions and forms, please return acknowledgement card.

Sampling and testing procedures should follow those published in 40 C.F.R. 136. These are basically Standard Methods or EPA procedures.

Forms should be completed in triplicate for each discharge with copy each for EPA, state and your records. If the state requires a more frequent submittal than EPA, collate EPA's copies and send as required.

Enter permittee name and facility address, PERMIT NUMBER, discharge number and reporting period. (A separate page is required for each discharge.)

For each parameter monitored during the reporting period, (either as a requirement of the permit or for own information) summarize the data as required in the permit and complete the form as follows:

1. Parameter column - list parameter name.

2. Enter minimum, average and maximum values for quantity and/or concentration under appropriate column headings.

   a. If frequency is once per month or less, enter the one value under average and leave minimum and maximum blank.

   b. lb/day (pounds per day) equals flow (in million gallons per day) times concentration (in mg/l) times 8.34.
      Example: 2.5 MGD x 30 mg/l BOD x 8.34 = 625.5 lb BOD/day

   c. MGD equals gallons per minute times 1440.

3. Enter units as appropriate.

   MGD - million gallons per day
   lb/day - pounds per day
   mg/l - milligrams per liter
   SU - standard units for pH
   °F - degrees fahrenheit
   kg/day - kilograms/day = $\frac{\text{lb/day}}{2.2}$
   (other units may be used as necessary)

4. Specify the number of samples that exceeded the maximum (and/or minimum, as appropriate) in the columns "NO. EX." If none, enter "0". If there are any violations, send a letter of explanation.

5. Specify frequency of analysis as number of analyses/number days (3/7 is three analyses per every 7 days, 1/7 is weekly, 1/30 is once a month, 30/30 is daily, 1/90 is quarterly & 1/180 is semiannually) If continuous, enter "CONT".

6. Specify sample type ("grab" or "__hr. composite") If frequency was continuous enter "NA."

Indicate person or laboratory performing analytical work under Remarks.

Print name and title of person responsible for monitoring and reporting and sign and date the form.

Mail state copy to appropriate state agency and EPA copy to

Environmental Protection Agency
Permits Branch
Box 8127
Boston, MA 02114

When supply of forms will be exhausted within 2 months, send reorder form or reproduce forms yourself.

ACUSHNET COMPANY
RUBBER DIVISION

Manufacturers of Elastomeric Products

February 4, 1988

RECEIVED - EPA
FEB 10 1988
COMPLIANCE BRANCH

Mr. George Harding
Permit Compliance Section
Compliance Branch
Water Management Division
Environmental Protection Agency
JFK Federal Building
Boston, MA 02203

Gentlemen:

Enclosed please find copies of our discharge monitoring report for our NPDES Permit # MA 0003913001 for the month of December 1987.

Should you have any questions regarding these discharge monitoring reports, please do not hesitate to contact me. Thank you for your assistance.

Sincerely,

ACUSHNET COMPANY

John J. Bailey, Jr., C.S.P.
Manager of Safety and Security

/rg

Enc.

744 Belleville Ave., P.O. Box E916, New Bedford, MA 02742-0916
Tel. (617) 997-2811 / TWX 710-3[illegible]653 / PANAFAX (617) 993-0512

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

Facility or discharge location

Name ACUSHNET COMPANY-RUBBER DIVISION-PLANT B
Street 744 Belleville Ave.
City New Bedford, MA 02745
State/Zip code

see INSTRUCTIONS on back

Remarks Titleist Golf Division Laboratory
* The 12 open container grab samples were collected over the sampling day and examined, then combined into one composite sample for analysis

Telephone number (including area code) 617-997-2811

RECEIVED - EPA
FEB 10 1988
COMPLIANCE BRANCH

(2-3) ST	(4-16) PERMIT NUMBER	(17-19) DIS
MA	0003913	001

REPORTING PERIOD: FROM (20-21) YEAR 87 (22-23) MO 12 (24-25) DAY 01 TO (26-27) YEAR 87 (28-29) MO 12 (30-31) DAY 31

(32-37) PARAMETER		(3 card only) QUANTITY (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(4 card only) CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	(64-68) FREQUENCY OF ANALYSIS	(69-70) SAMPLE TYPE
FLOW	REPORTED	.291	.382	.545	MG.D							30/30	24 hr continuous
	PERMIT CONDITION												
OIL & GREASE	REPORTED		1.17		LBS/DAY	0							
	PERMIT CONDITION		3.3	9.3									
T.S.S.	REPORTED		0.99			0							
	PERMIT CONDITION		9.0	18.0	LBS/DAY								
C.O.D.	REPORTED							24.39		Mg/L	0	1/30	24 hr composite
	PERMIT CONDITION							MONITOR					
PH	REPORTED						7.4	7.7	7.8	Std. Units	0	12/30	24 hr composite
	PERMIT CONDITION						6.5		8.0				
C.R.	REPORTED							<0.05		Mg/L	0	1/90	24 hr composite
	PERMIT CONDITION							0.3					
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF THE OFFICER	DATE
JEPSON, JOHN (LAST FIRST MI)	Exec.V.P. and General Manager (TITLE)	88 02 04 (YEAR MO DAY)

I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

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