ACUSHNET COMPANY
RUBBER DIVISION

Manufacturers of Elastomeric Products

January 17,1991

Ms. Olga Vergara
Environmental Protection Agency
John F. Kennedy Federal Building
Boston
Ma. 02203-2211

This letter will serve to confirm our conversation of January 17,1991. regarding an extension for submission of our NPDES permit No. MA0003913.

It is agreed that we have been granted a 30 day extension. I will call you on February 22,1991 with a report on the progress made.

Thank you for your help and cooperation on this matter.

Sincerely:

Robert G. Morris
Environmental Compliance Specialist

cc: J. Bailey
J. Demello
M. Gardner

JAN 23 1991

744 Belleville Ave., P.O. Box E916, New Bedford, MA 02742-0916
Tel. (508) 997-2811 / FAX (508) 993-0512

ACUSHNET COMPANY
RUBBER DIVISION

Manufacturers of Elastomeric Products

February 25, 1991

Mr. James O'Connell
Project Review Coordinator
Coastal Zone Management Office
100 Cambridge Street-20th Floor
Boston, Ma. 02202

Dear Mr. O'Connell

The Acushnet Company in New Bedford, Massachusetts is working with the Permits Branch, Region 1 of the Environmental Protection Agency to renew our NPDES permit for discharge to the Acushnet River. Our facility, which is the source of the wastewater discharge, is engaged in the manufacturing of custom molded rubber products. The discharges into the Acushnet River will be from storm water runoff and non-contact cooling water.

Pursuant to the requirements of 301 CMR 21.00 regarding federal consistency review conducted by MCZM, we have reviewed the Regulations and Policies and have concluded that the proposed activity (proposed NPDES permitted discharge) complies with the policies of the Massachusetts approved Coastal Zone Management Program and will be conducted in a manner consistent with such policies. We have reviewed all of the MCZM Policies and find that policy 3 applies to our activity. In particular, our consistency with MCZM Policy 3 regarding effluent limitations and water quality standards will continue to be monitored by the DEP, EPA, and by my company personnel. All activities associated with this NPDES permit, once issued, will remain consistent with Federal and State effluent limitations and water quality standards.

If there is any further information that you require regarding this project, please contact me.

Sincerely,

RGMorris

Robert G. Morris
Environmental Specialist

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

The Commonwealth of Massachusetts

Department of Environmental Protection
Division of Water Pollution Control

Department of Environmental Protection certifies that

Acushnet Company - Plant B
744 Belleville Avenue
New Bedford, Massachusetts 02741

has been inspected in accordance with
Massachusetts Water Pollution Contol Regulation 314 CMR. 2.12

Director Brian Donahue

Fiscal year 1990

MA0003

PS Form 3800, June 1985

Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	$
Postmark or Date	

Mr. John J. Bailey
Manager of Safety and Security
Acushnet Company
Rubber Division - Plant B
P.O. Box E-916
New Bedford, MA 02742

P 405 812 521

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
FOR INTERNATIONAL MAIL

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☑ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to: MA0003913
Mr. John J. Bailey
MANAGER OF SAFETY and SECURITY
ACUSHNET COMPANY
RUBBER DIVISION - PLANT B
P.O. BOX E-916
NEW BEDFORD, MA 02742

4. Article Number
P 405 812 521

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
[redacted] 17 [redacted]

8. Addressee's Address *(ONLY if requested and fee paid)*
MA0003913

PS Form 3811, Apr. 1989 ★U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

EPA/COMPLIANCE BRANCH/OLGA VERGARA/DTO./07-16-90/REAPPLICATION

JUL 16 1990

CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Mr. John J. Bailey
Manager of Safety and Security
Acushnet Company
Rubber Division - Plant B
P.O.Box E-916
New Bedford, MA 02742

Re: Reapplication Requirements for EPA Issued NPDES Permits in Region I - MA0003913

Dear Mr. Bailey:

A review of our records indicates that your National Pollutant Discharge Elimination System (NPDES) permit is due to expire soon and you have not yet applied for permit renewal. To reapply you must complete and return the enclosed application forms (Form 1 and 2C) at least 180 days before your current permit expires.

EPA regulations provide that the conditions of an expired permit continue in force until the effective date of a new permit if the permittee has submitted a timely and complete application. 40 C.F.R. §122.6. If the enclosed application forms are completed and returned within (180) days of your receipt of this letter we will consider this a timely application under 40 C.F.R. §122.21, and will consider the old permit to remain fully in force under 40 C.F.R. §122.6.

You should be aware that, if you discharge in the coastal zone, under the provisions of the Coastal Zone Management Act, 16 U.S.C. §1451 et seq., and its implementing regulations, EPA cannot issue an NPDES permit for your facility until you submit a certification that your activities will be consistent with the Massachusetts Coastal Zone Management ("CZM") policies and the State CZM office concurs with your certification. See 15 C.F.R. §930 et seq. and 40 C.F.R. §122.12(d). If you discharge in the coastal zone, you should therefore provide EPA and the State CZM office with the following statement: "The proposed activity complies with the policies of the Massachusetts approved coastal management program and will be conducted in a manner consistent with such policies". The Massachusetts CZM office will also need a copy of your permit application in order to conduct a consistency review and issue a concurrence. Enclosed is an information packet which explains the consistency review process. For information about this process

CONCURRENCES

SYMBOL	IW/CB	PCS						
SURNAME	Vergara	Beswick						
DATE	7/16/90	7/16/90						

EPA Form 1320-1 (12-70)

OFFICIAL FILE COPY

★U.S.GPO:1988-0-206-471

JUL 16 1990

may be obtained from the Massachusetts Coastal Zone Management Office, 100 Cambridge Street, Boston, MA 02202, Telephone 727-9530.

If you discharge to the ocean, please provide the location of the outfall, i.e., distance from shore. Specific latitude and longitude determinations would be extremely helpful.

Any questions about our application requirements should be directed to Olga Vergara at 617/565-3529.

Sincerely,

Edward K. McSweeney, Chief
Wasetwater Management Branch

Enclosure

cc: State Water Pollution Control Agency

CONCURRENCES								
SYMBOL								
SURNAME								
DATE								

★U.S.GPO:1988-0-206-471

UNITED STATES ENVIRONMENTAL PROTECTION A

March 25, 1987

Mr. Jack Baily, Jr.
Manager of Safety and Security
Acushnet Company
Rubber Division
P.O. Box E916
New Bedford, MA 02742-0916

Dear Mr. Baily:

It has come to my attention that the permit issued to Acushnet Company on November 20, 1986, contained an error. The permit limitation for Oil & Grease should be 9.3 lbs/day as daily max. and 3.3 lbs/day as monthly average. We have changed the permit accordingly and herein enclose a copy of the corrected page for your record. Thank you.

Sincerely yours,

T.E. Landry, Acting Chief
Industrial Permit Section

cc: Glenn Gilmore, DEQE
George Harding, EPA-Compliance Branch

CONCURRENCES							
SYMBOL		Permit					
SURNAME		TL					
DATE		3/20/87					

EPA Form 1320-1 (12-70)

OFFICIAL FILE COPY

GPO : 1983 O - 403-201

Print or type in the unshaded areas only
(Print areas are spaced for elite type, i.e., 12 characters/inch).

Form Approved OMB No. 158-R0175

FORM 1 GENERAL

U.S. ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

G/T		F/A	C
F	MA 0003913		D

LABEL ITEMS

I. EPA I.D. NUMBER

II. FACILITY NAME

III. FACILITY MAILING ADDRESS

VI. FACILITY LOCATION

ACUSHNET COMPANY
Rubber Division - Plant B
P.O. Box E-916
New Bedford, MA 02742

744 Belleville Ave.
New Bedford, MA 02742

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of **bold-faced terms.**

SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED
A. Is this facility a **publicly owned treatment works** which results in a **discharge** to **waters of the U.S.**? (FORM 2A)	16	X 17	18
B. Does or will this facility *(either existing or proposed)* include a **concentrated animal feeding operation** or **aquatic animal production facility** which results in a **discharge** to **waters of the U.S.**? (FORM 2B)	19	X 20	21
C. Is this a facility which currently results in **discharges** to **waters of the U.S.** other than those described in A or B above? (FORM 2C)	X 22	23	24
D. Is this a proposed facility *(other than those described in A or B above)* which will result in a **discharge** to **waters of the U.S.**? (FORM 2D)	25	X 26	27
E. Does or will this facility treat, store, or dispose of **hazardous wastes**? (FORM 3)	X 28	29	30
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)	31	X 32	33
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)	34	X 35	36
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)	37	X 38	39
I. Is this facility a proposed **stationary source** which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an **attainment area**? (FORM 5)	40	X 41	42
J. Is this facility a proposed **stationary source** which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an **attainment area**? (FORM 5)	43	X 44	45

III. NAME OF FACILITY

C 1 SKIP ACUSHNET COMPANY - Rubber Division - Plant B

IV. FACILITY CONTACT

A. NAME & TITLE *(last, first, & title)*	B. PHONE *(area code & no.)*		
C 2 Bailey, John J. Jr.	617	997	2811

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX

C 3 P.O. Box E-916

B. CITY OR TOWN	C. STATE	D. ZIP CODE
C 4 New Bedford,	MA	02742

RECEIVED - EPA
JUL 30 1986
COMPLIANCE BRA

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER

744 Belleville Ave.

B. COUNTY NAME

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE *(if known)*
New Bedford	MA	02742	

CONTINUE ON REVERSE

VII. SIC CODES (4-digit, in order of priority)

A. FIRST		B. SECOND	
7 3069	(specify) Misc. Rubber Products Noc	7	(specify) N/A
C. THIRD		**D. FOURTH**	
7	(specify) N/A	7	(specify) N/A

VIII. OPERATOR INFORMATION

A. NAME

8 Dr. John J. Jepson

B. Is the name listed in Item VIII-A also the owner? ☐ YES ☒ NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)

F = FEDERAL M = PUBLIC (other than federal or state)
S = STATE O = OTHER (specify)
P = PRIVATE

P (specify) Private Corp.

D. PHONE (area code & no.)

A 617 997 2811

E. STREET OR P.O. BOX

P.O. Box E-916

F. CITY OR TOWN	G. STATE	H. ZIP CODE
B New Bedford	MA	02742

IX. INDIAN LAND

Is the facility located on Indian lands? ☐ YES ☒ NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)	D. PSD (Air Emissions from Proposed Sources)
9 N MA 0003913	9 P N/A
B. UIC (Underground Injection of Fluids)	**E. OTHER (specify)**
9 U N/A	9 N/A (specify)
C. RCRA (Hazardous Wastes)	**E. OTHER (specify)**
9 R MAD 001025154	9 N/A (specify)

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property bounderies. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

The Acushnet Co. manufactures custom molded rubber parts for original equipment manufacturers in the automotive, aircraft, safety appliance as well as for various industrial or consumer product industries. Raw materials including natural, synthetic rubbers, oils, fillers and additives are formulated and mixed in Banburies. The mixed rubber compounds are finished on rubber mills and fed into extruders. The continuous extrusions are cooled on conveyors and cut to size to be used as mold preparations. These preparations are placed into mold cavities and are compression molded in hydraulic presses. Some parts are cured in ovens and deflashed in tumblers or by hand trimming. The parts are inspected, packaged and shipped to customers.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
John J. Bailey Jr., C.S.P. Manager of Safety and Security	[signature]	7/28/86

COMMENTS FOR OFFICIAL USE ONLY

C

unshaded areas only
elite type, i.e., 12 characters/inch).

AMMENDED COPY

For Approved OMB No. 158-R0175

U.S. ENVIRONMENTAL PROTECTION AGENCY

PA GENERAL INFORMATION

Consolidated Permits Program
(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

F MA 0003913 D

I. E R
ME
III.
V. RESS

ACUSHNET COMPANY
Rubber Division - Plant B
P.O. Box E-916
New Bedford, MA 02742

744 Belleville Ave.
New Bedford, MA 02742

GENERAL INSTRUCTIONS

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CHARACTERISTICS

Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any ust submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column ntal form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity n permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold—faced terms.

SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED	SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED
acility a **publicly owned treatment works** sults in a **discharge to waters of the U.S.**? 2A)		X		B. Does or will this facility *(either existing or proposed)* include a **concentrated animal feeding operation** or **aquatic animal production facility** which results in a **discharge to waters of the U.S.**? (FORM 2B)		X	
a facility which currently results in **discharges ters of the U.S.** other than those described in 3 above? (FORM 2C)	X			D. Is this a proposed facility *(other than those described in A or B above)* which will result in a **discharge to waters of the U.S.**? (FORM 2D)		X	
or will this facility treat, store, or dispose of rdous wastes? (FORM 3)	X			F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
you or will you inject at this facility any produced ater or other fluids which are brought to the surface connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
Is this facility a proposed **stationary source** which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed **stationary source** which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an **attainment area**? (FORM 5)		X	

NAME OF FACILITY

SKIP ACUSHNET COMPANY - Rubber Division - Plant B

FACILITY CONTACT

A. NAME & TITLE *(last, first, & title)*	B. PHONE *(area code & no.)*		
Bailey, John J. Jr.	617	997	2 8 11

FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX

P.O. Box E-916

B. CITY OR TOWN	C. STATE	D. ZIP CODE
New Bedford,	M A	0 2742

RECEIVED - EPA
AUG 6 1986
BRANCH

FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER

744 Belleville Ave.

B. COUNTY NAME

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE *(if known)*
New Bedford	MA	02742	

CONTINUE ON REVERSE

HE FRONT

it, in order of priority)

A. FIRST	B. SECOND
sc. Rubber Products Noc	C 7 (specify) N/A
C. THIRD	**D. FOURTH**
N/A	C 7 (specify) N/A

ORMATION

A. NAME	B. Is the name listed in Item VIII-A also the owner?
COMPANY	☐ YES ☒ NO

OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)		D. PHONE (area code & no.)
M = PUBLIC (other than federal or state) O = OTHER (specify)	P (specify) Private Corp.	C A 617 997 2811

E. STREET OR P.O. BOX
x E-916

E. CITY OR TOWN	G. STATE	H. ZIP CODE	IX. INDIAN LAND
edford	MA	02742	Is the facility located on Indian lands? ☐ YES ☒ NO

NG ENVIRONMENTAL PERMITS

NPDES (Discharges to Surface Water)	D. PSD (Air Emissions from Proposed Sources)	
MA 0003913	C T I 9 P N/A	
. UIC (Underground Injection of Fluids)	E. OTHER (specify)	
N/A	C T I 9 N/A	(specify)
C. RCRA (Hazardous Wastes)	E. OTHER (specify)	
T I R MAD 001025154	C T I 9 N/A	(specify)

I. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property bounderies. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

II. NATURE OF BUSINESS (provide a brief description)

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RECEIVED - EPA

AUG 6 1986

COMPLIANCE BRANCH

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
Dr. John Jepson Executive Vice President	Dr. John W. Jepson	8/4/1986

OMMENTS FOR OFFICIAL USE ONLY

Please print or type in the unshaded areas only.

EPA I.D. NUMBER (copy from Item 1 of Form 1) MA 0003913

Form Approved. OMB No. 2000-0059 Approval expires 12-31-85

FORM 2C NPDES

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY
APPLICATION FOR PERMIT TO DISCHARGE WASTEWATER
EXISTING MANUFACTURING, COMMERCIAL, MINING AND SILVICULTURAL OPERATIONS
Consolidated Permits Program

I. OUTFALL LOCATION

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. OUTFALL NUMBER (list)	B. LATITUDE			C. LONGITUDE			D. RECEIVING WATER (name)
	1. DEG.	2. MIN.	3. SEC.	1. DEG.	2. MIN.	3. SEC.	
1	70°	55'	7"	41°	40'	9"	The Acushnet River
2	70°	55'	8"	41°	40'	9"	The Acushnet River
3	70°	55'	10"	41°	40'	8"	The Acushnet River

RECEIVED - EPA
JUL 30 1986
COMPLIANCE BRANCH

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfalls. If a water balance cannot be determined *(e.g., for certain mining activities)*, provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of: (1) All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) The average flow contributed by each operation; and (3) The treatment received by the wastewater. Continue on additional sheets if necessary.

1. OUTFALL NO (list)	2. OPERATION(S) CONTRIBUTING FLOW		3. TREATMENT		
	a. OPERATION (list)	b. AVERAGE FLOW (include units)	a. DESCRIPTION	b. LIST CODES FROM TABLE 2C-1	
1	Air conditions' water cooling	163,000 gal/day	NONE	4A	
	non contact single pass				
	200 tons of cooling - 5-6				
	months operation				
1	Non contact cooling water	291,000 gal/day	NONE	4A	
	for 7 rubber mills and 4				
	extruders - single pass 2°				
	av. water temp. change				
1	Partial contact cooling	65,000 gal/day	NONE	4A	
	water from 3 conveyors				
	Rubber extrusions are trans-				
	ferred to metal conveyors				
	which can be sprayed or				
	immersed. 20% of product				
	may partially contact water.				
2	6" roof drain from steel	2320 gal/yr.	NONE	4A	
	single story warehouse				
3	6" roof drain from steel	2320 gal/yr	NONE	4A	
	single story warehouse				

OFFICIAL USE ONLY *(effluent guidelines sub-categories)*

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

C. Except for storm runoff, leaks, or spills, are any of the discharges described in Items II-A or B intermittent or seasonal?

[X] YES *(complete the following table)* [ ] NO *(go to Section III)*

1. OUTFALL NUMBER *(list)*	2. OPERATION*(s)* CONTRIBUTING FLOW *(list)*	3. FREQUENCY a. DAYS PER WEEK *(specify average)*	3. FREQUENCY b. MONTHS PER YEAR *(specify average)*	4. FLOW a. FLOW RATE *(in mgd)* 1. LONG TERM AVERAGE	4. FLOW a. FLOW RATE *(in mgd)* 2. MAXIMUM DAILY	4. FLOW b. TOTAL VOLUME *(specify with units)* 1. LONG TERM AVERAGE	4. FLOW b. TOTAL VOLUME *(specify with units)* 2. MAXIMUM DAILY	4. FLOW c. DURATION *(in days)*
1	Airconditioner cooling water	5	6	.155	.432	.163	.227	21
1	Non contact cooling water for Mills and Extruders	5	12	.382	.7632	.291	.403	21
1	Partial contact cooling conveyors	5	12	.086	.1728	.065	.092	21
	Total:			.623	1.368	.519	.722mg	

EPA 1989 COMPLIANCE BRANCH

III. PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

[X] YES *(complete Item III-B)* [ ] NO *(to to Section IV)*

B. Are the limitations in the applicable effluent guideline expressed in terms of production *(or other measure of operation)*?

[X] YES *(complete Item III-C)* [ ] NO *(go to Section IV)*

C. If you answered "yes" to Item III-B, list the quantity which represents an actual measurement of your level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

1. AVERAGE DAILY PRODUCTION a. QUANTITY PER DAY	b. UNITS OF MEASURE	c. OPERATION, PRODUCT, MATERIAL, ETC. *(specify)*	2. AFFECTED OUTFALLS *(list outfall numbers)*
52,000	LBS/day	Rubber Milling and extruding	1
38,500	LBS/day	Water cooling conveyors	1

IV. IMPROVEMENTS

A. Are you now required by any Federal, State or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

[ ] YES *(complete the following table)* [X] NO *(go to Item IV-B)*

1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	2. AFFECTED OUTFALLS a. NO.	2. AFFECTED OUTFALLS b. SOURCE OF DISCHARGE	3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE a. REQUIRED	4. FINAL COMPLIANCE DATE b. PROJECTED

B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs *(or other environmental projects which may affect your discharges)* you now have underway or which you plan. Indicate whether each program is now underway or planned, and indicate your actual or planned schedules for construction. [ ] MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED

 CONTINUE ON PAGE 3

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V. INTAKE AND EFFLUENT CHARACTERISTICS

A, B, & C: See instructions before proceeding — Complete one set of tables for each outfall — Annotate the outfall number in the space provided.
NOTE: Tables V-A, V-B, and V-C are included on separate sheets numbered V-1 through V-9.

D. Use the space below to list any of the pollutants listed in Table 2c-3 of the instructions, which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in your possession.

1. POLLUTANT	2. SOURCE	1. POLLUTANT	2. SOURCE
Chromium	Chrome plating bath originally connected to outfall water system, prior to 1976. Test results over the past 10 years indicate that levels less than detectable levels for test method used. It appears that we may not need to test for this chemical in the future.		

VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

Is any pollutant listed in Item V-C a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

☐ YES *(list all such pollutants below)* ☒ NO *(go to Item VI-B)*

CONTINUED FROM THE FRONT

VII. BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☐ YES *(identify the test(s) and describe their purposes below)* ☒ NO *(go to Section VIII)*

VIII. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in Item V performed by a contract laboratory or consulting firm?

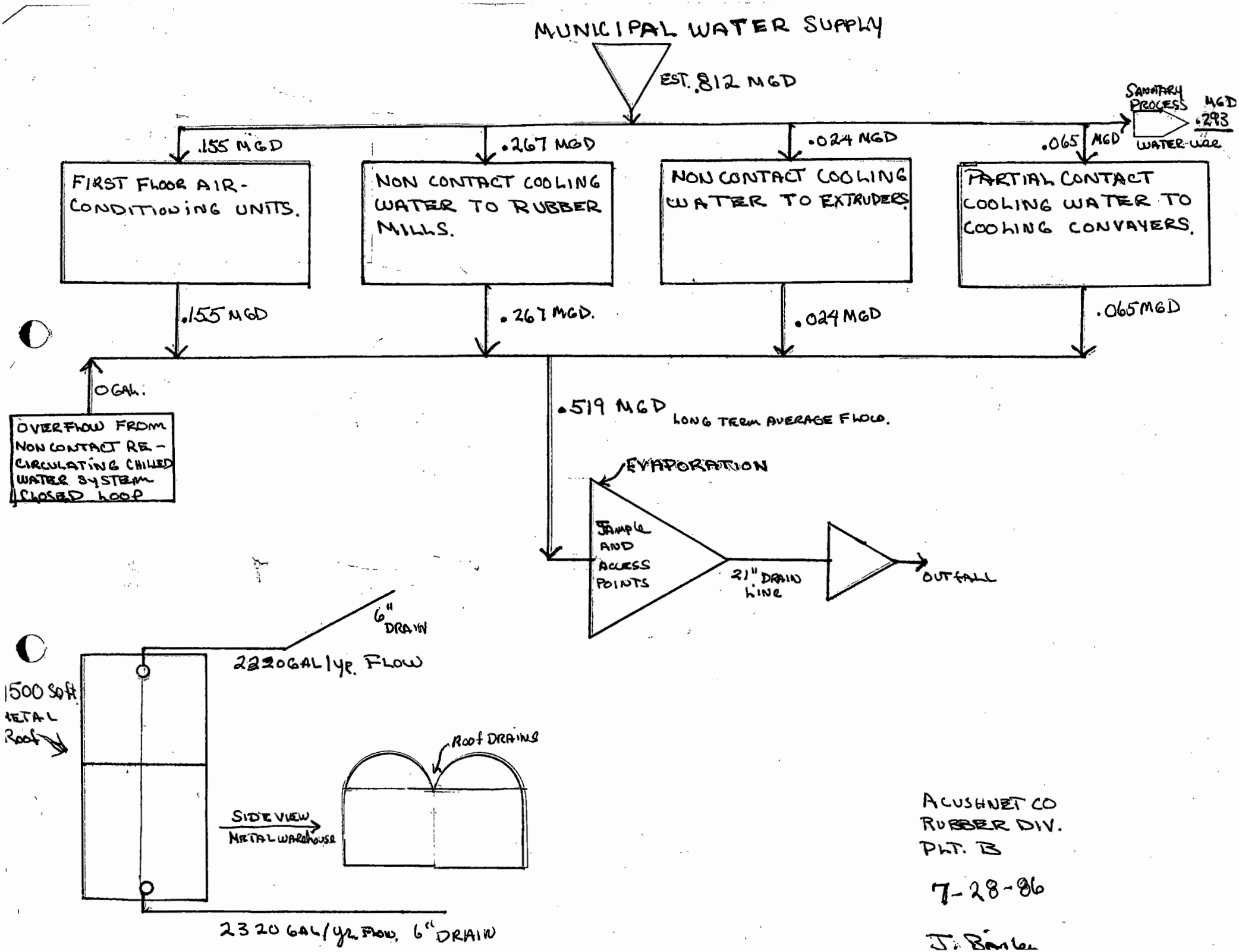
☒ YES *(list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below)* ☐ NO *(go to Section IX)*

A. NAME	B. ADDRESS	C. TELEPHONE *(area code & no.)*	D. POLLUTANTS ANALYZED *(list)*
Tibbetts Engineering Corp. Certified LAB # 20153 9/76 to 5/86.	210 Deane Street New Bedford, MA 02746	996-5633	PH, COD, TSS Total chromium, Infared oil and grease.
Acushnet Co. Titleist Golf Division R & D Lab	P.O. Box E-916 New Bedford, MA 02742	997-2811	PH, COD, TSS Total chromium Infared oil and grease, BOD and Ammonia.

IX. CERTIFICATION

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.

A. NAME & OFFICIAL TITLE *(type or print)*	B. PHONE NO. *(area code & no.)*
John J. Bailey Jr., C.S.P. Manager of Safety and Security	617-997-2811 Ext. 3710
C. SIGNATURE	D. DATE SIGNED
	7-28-86



ACUSHNET CO
RUBBER DIV.
PLT. B

7-28-86

J. Barber

473-869 O - 85 - 2

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets *(use the same format)* instead of completing these pages. SEE INSTRUCTIONS.

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V. INTAKE AND EFFLUENT CHARACTERISTICS *(continued from page 3 of Form 2-C)*

OUTFALL NO. 2

PART A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE *(if available)* (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE *(if available)* (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	3. UNITS *(specify if blank)* a. CONCENTRATION	b. MASS	4. INTAKE *(optional)* a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
a. Biochemical Oxygen Demand *(BOD)*	Waver requested											
b. Chemical Oxygen Demand *(COD)*	Waver requested											
Total Organic Carbon *(TOC)*	Waver requested											
d. Total Suspended Solids *(TSS)*	Waver requested											
e. Ammonia *(as N)*	Waver requested											
f. Flow	VALUE 160 gal/day		VALUE N/A		VALUE 2320 gal/yr		1	gal/day		VALUE		
g. Temperature *(winter)*	VALUE Ambient Air		VALUE		VALUE		–	°C		VALUE Ambient Air		
h. Temperature *(summer)*	VALUE Ambient Air		VALUE		VALUE		–	°C		VALUE		
i. pH	MINIMUM 6.5	MAXIMUM 6.5	MINIMUM N/A	MAXIMUM N/A			1	STANDARD UNITS				

PART B - Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2a for any pollutant which is limited either directly, or indirectly but expressly, in an effluent limitations guideline, you must provide the results of at least one analysis for that pollutant. For other pollutants for which you mark column 2a, you must provide quantitative data or an explanation of their presence in your discharge. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NO. *(if available)*	2. MARK 'X' a. BELIEVED PRESENT	b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE *(if available)* (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE *(if available)* (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE *(optional)* a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
a. Bromide (24959-67-9)		X												
b. Chlorine, Total Residual		X												
c. Color		X												
d. Fecal Coliform		X												
e. Fluoride (16984-48-8)		X												
f. Nitrate–Nitrite *(as N)*		X												

CONTINUE ON REVERSE

ITEM V-B CONTINUED FROM FRONT

1. POLLUTANT AND CAS NO. (if available)	2. MARK 'X'		3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. BELIEVED PRESENT	b. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
g. Nitrogen, Total Organic (as N)														
h. Oil and Grease		X	0.12	0.0002	N/A	N/A	N/A	N/A	1	mg/1	Lbs/day	UNK	–	–
i. Phosphorus (as P), Total (7723-14-0)														
j. Radioactivity														
(1) Alpha, Total		X												
(2) Beta, Total		X												
(3) Radium, Total		X												
(4) Radium 226, Total		X												
k. Sulfate (as SO_4) (14808-79-8)		X												
l. Sulfide (as S)		X												
m. Sulfite (as SO_3) (14265-45-3)		X												
n. Surfactants		X												
o. Aluminum, Total (7429-90-5)		X												
p. Barium, Total (7440-39-3)		X												
q. Boron, Total (7440-42-8)		X												
r. Cobalt, Total (7440-48-4)		X												
s. Iron, Total (7439-89-6)		X												
t. Magnesium, Total (7439-95-4)		X												
u. Molybdenum, Total (7439-98-7)		X												
v. Manganese, Total (7439-96-5)		X												
w. Tin, Total (7440-31-5)		X												
x. Titanium, Total (7440-32-6)		X												

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ONTINUED FROM PAGE 3 OF FORM 2-C

PART C - If you are a primary industry and this outfall contains process wastewater, refer to Table 2c-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-a for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark column 2-a *(secondary industries, nonprocess wastewater outfalls, and nonrequired GC/MS fractions)*, mark "X" in column 2-b for each pollutant you know or have reason to believe is present. Mark "X" in column 2-c for each pollutant you believe is absent. If you mark column 2a for any pollutant, you must provide the results of at least one analysis for that pollutant. If you mark column 2b for any pollutant, you must provide the results of at least one analysis for that pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2,4 dinitrophenol, or 2-methyl-4, 6 dinitrophenol, you must provide the results of at least one analysis for each of these pollutants which you know or have reason to believe that you discharge in concentrations of 100 ppb or greater. Otherwise, for pollutants for which you mark column 2b, you must either submit at least one analysis or briefly describe the reasons the pollutant is expected to be discharged. Note that there are 7 pages to this part; please review each carefully. Complete one table *(all 7 pages)* for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
IETALS, CYANIDE, AND TOTAL PHENOLS															
M. Antimony, 'otal (7440-36-0)			X												
M. [illegible]nic, Total 7440-38-2)			X												
IM. Beryllium, 'otal, 7440-41-7)			X												
4M. Cadmium, Total (7440-43-9)			X												
5M. Chromium, Total (7440-47-3)			X												
6M. Copper, Total 7440-50-8)			X												
7M. Lead, Total (7439-92-1)			X												
8M. Mercury, Total 7439-97-6)			X												
9M. Nickel, Total (7440-02-0)			X												
10M. [illegible]elenium, To[illegible] 782-49-2)			X												
11M. Silver, Total (7440-22-4)			X												
12M. Thallium, Total (7440-28-0)			X												
13M. Zinc, Total (7440-66-6)			X												
14M. Cyanide, Total (57-12-5)			X												
15M. Phenols, Total			X												
DIOXIN															
2,3,7,8-Tetrachlorodibenzo-P-Dioxin (1764-01-6)			X	DESCRIBE RESULTS											

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – VOLATILE COMPOUNDS															
1V. Acrolein (107-02-8)			X												
2V. Acrylonitrile (107-13-1)			X												
3V. Benzene (71-43-2)			X												
4V. Bis *(Chloromethyl)* Ether (542-88-1)			X												
5V. Bromoform (75-25-2)			X												
6V. Carbon Tetrachloride (56-23-5)			X												
7V. Chlorobenzene (108-90-7)			X												
8V. Chlorodibromomethane (124-48-1)			X												
9V. Chloroethane (75-00-3)			X												
10V. 2-Chloroethylvinyl Ether (110-75-8)			X												
11V. Chloroform (67-66-3)			X												
12V. Dichlorobromomethane (75-27-4)			X												
13V. Dichlorodifluoromethane (75-71-8)			X												
14V. 1,1-Dichloroethane (75-34-3)			X												
15V. 1,2-Dichloroethane (107-06-2)			X												
16V. 1,1-Dichloroethylene (75-35-4)			X												
17V. 1,2-Dichloropropane (78-87-5)			X												
18V. 1,3-Dichloropropylene (542-75-6)			X												
19V. Ethylbenzene (100-41-4)			X												
20V. Methyl Bromide (74-83-9)			X												
21V. Methyl Chloride (74-87-3)			X												

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EPA I.D. NUMBER (copy from Item I of Form 1): MA 0003913

OUTFALL NUMBER: 2

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1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANALYSES
GC/MS FRACTION – VOLATILE COMPOUNDS *(continued)*															
2V. Methylene Chloride (75-09-2)			X												
3V. 1,1,2,2-Tetrachloroethane (79-34-5)			X												
4V. Tetrachloroethylene (127-18-4)			X												
5V. Toluene (108-88-3)			X												
6V. 1,2-Trans-Dichloroethylene (156-60-5)			X												
7V. 1,1,1-Trichloroethane (71-55-6)			X												
8V. 1,1,2-Trichloroethane (79-00-5)			X												
9V. Trichloroethylene (79-01-6)			X												
10V. Trichlorofluoromethane (75-69-4)			X												
11V. Vinyl Chloride (75-01-4)			X												
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2-Chlorophenol (95-57-8)			X												
2A. 2,4-Dichlorophenol (120-83-2)			X												
3A. 2,4-Dimethylphenol (105-67-9)			X												
4A. 4,6-Dinitro-O-Cresol (534-52-1)			X												
5A. 2,4-Dinitrophenol (51-28-5)			X												
6A. 2-Nitrophenol (88-75-5)			X												
7A. 4-Nitrophenol (100-02-7)			X												
8A. P-Chloro-M-Cresol (59-50-7)			X												
9A. Pentachlorophenol (87-86-5)			X												
10A. Phenol (108-95-2)			X												
11A. 2,4,6-Trichlorophenol (88-06-2)			X												

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)			X												
2B. Acenaphtylene (208-96-8)			X												
3B. Anthracene (120-12-7)			X												
4B. Benzidine (92-87-5)			X												
5B. Benzo *(a)* Anthracene (56-55-3)			X												
6B. Benzo *(a)* Pyrene (50-32-8)			X												
7B. 3,4-Benzo-fluoranthene (205-99-2)			X												
8B. Benzo *(ghi)* Perylene (191-24-2)			X												
9B. Benzo *(k)* Fluoranthene (207-08-9)			X												
10B. Bis *(2-Chloro-ethoxy)* Methane (111-91-1)			X												
11B. Bis *(2-Chloro-ethyl)* Ether (111-44-4)			X												
12B. Bis *(2-Chloroiso-propyl)* Ether (102-60-1)			X												
13B. Bis *(2-Ethyl-hexyl)* Phthalate (117-81-7)			X												
14B. 4-Bromo-phenyl Phenyl Ether (101-55-3)			X												
15B. Butyl Benzyl Phthalate (85-68-7)			X												
16B. 2-Chloro-naphthalene (91-58-7)			X												
17B. 4-Chloro-phenyl Phenyl Ether (7005-72-3)			X												
18B. Chrysene (218-01-9)			X												
19B. Dibenzo *(a,h)* Anthracene (53-70-3)			X												
20B. 1,2-Dichloro-benzene (95-50-1)			X												
21B. 1,3-Dichloro-benzene (541-73-1)			X												

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EPA I.D. NUMBER (copy from Item 1 of Form 1)	OUTFALL NUMBER
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1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
GC/MS FRACTION — BASE/NEUTRAL COMPOUNDS (continued)															
22B. 1,4-Dichlorobenzene (106-46-7)			X												
23B. 3,3'-Dichlorobenzidine (91-94-1)			X												
24B. Diethyl Phthalate (84-66-2)			X												
25B. Dimethyl Phthalate (131-11-3)			X												
26B. Di-N-Butyl Phthalate (84-74-2)			X												
27B. 2,4-Dinitrotoluene (121-14-2)			X												
28B. 2,6-Dinitrotoluene (606-20-2)			X												
29B. Di-N-Octyl Phthalate (117-84-0)			X												
30B. 1,2-Diphenylhydrazine (as Azobenzene) (122-66-7)			X												
31B. Fluoranthene (206-44-0)			X												
32B. Fluorene (86-73-7)			X												
33B. Hexachlorobenzene (118-74-1)			X												
34B. Hexachlorobutadiene (87-68-3)			X												
35B. Hexachlorocyclopentadiene (77[illegible]-4)			X												
36B. Hexachloroethane (67-72-1)			X												
37B. Indeno (1,2,3-cd) Pyrene (193-39-5)			X												
38B. Isophorone (78-59-1)			X												
39B. Naphthalene (91-20-3)			X												
40B. Nitrobenzene (98-95-3)			X												
41B. N-Nitrosodimethylamine (62-75-9)			X												
42B. N-Nitrosodi-N-Propylamine (621-64-7)			X												

CONTINUE ON REVERSE

ONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (continued)															
3B. N-Nitro-odiphenylamine 36-30-6)			X												
4B. Phenanthrene 35-01-8)			X												
5B. Pyrene 129-00-0)			X												
6B. 1,2,4 - Trichlorobenzene 120-82-1)			X												
GC/MS FRACTION – PESTICIDES			X												
P. [illegible] 309[illegible]2)			X												
P. α-BHC 319-84-6)			X												
P. β-BHC 319-85-7)			X												
P. γ-BHC 58-89-9)			X												
P. δ-BHC 319-86-8)			X												
P. Chlordane 57-74-9)			X												
P. 4,4'-DDT 50-29-3)			X												
P. 4,4'-DDE 72-55-9)			X												
P. 4,4'-DDD 72[illegible])			X												
0P. Dieldrin 60-57-1)			X												
1P. α-Endosulfan 115-29-7)			X												
2P. β-Endosulfan 115-29-7)			X												
3P. Endosulfan ulfate 1031-07-8)			X												
4P. Endrin 72-20-8)			X												
5P. Endrin ldehyde 7421-93-4)			X												
6P. Heptachlor 76-44-8)			X												

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EPA I.D. NUMBER (copy from Item 1 of Form 1)	OUTFALL NUMBER
MA 003913	2

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1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – PESTICIDES (continued)															
17P. Heptachlor Epoxide (1024-57-3)			X												
18P. PCB-1242 (53469-21-9)			X												
19P. PCB-1254 (11097-69-1)			X												
20P. PCB-1221 (11104-28-2)			X												
21P. PCB-1232 (11141-16-5)			X												
22P. PCB-1248 (12672-29-6)			X												
23P. PCB-1260 (11096-82-5)			X												
24P. PCB-1016 (12674-11-2)			X												
25P. Toxaphene (8001-35-2)			X												

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets *(use the same format)* instead of completing these pages. SEE INSTRUCTIONS.

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V. INTAKE AND EFFLUENT CHARACTERISTICS *(continued from page 3 of Form 2-C)*

OUTFALL NO. 3

PART A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE *(if available)* (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE *(if available)* (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	3. UNITS *(specify if blank)* a. CONCENTRATION	b. MASS	4. INTAKE *(optional)* a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
a. Biochemical Oxygen Demand *(BOD)*	Waver											
b. Chemical Oxygen Demand *(COD)*	Waver											
c. Total Organic Carbon *(TOC)*	Waver											
d. Total Suspended Solids *(TSS)*	Waver											
e. Ammonia *(as N)*	Waver											
f. Flow	VALUE 160 gal/day		VALUE N/A		VALUE 2320 gal/yr.		1	gal/day	–	VALUE UNK		0
g. Temperature *(winter)*	VALUE Ambient Air		VALUE		VALUE –		–	°C		VALUE Ambient Air		
h. Temperature *(summer)*	VALUE Ambient Air		VALUE		VALUE –			°C		VALUE		
i. pH	MINIMUM 6.4	MAXIMUM 6.4	MINIMUM N/A	MAXIMUM N/A			1	STANDARD UNITS				

PART B - Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2a for any pollutant which is limited either directly, or indirectly but expressly, in an effluent limitations guideline, you must provide the results of at least one analysis for that pollutant. For other pollutants for which you mark column 2a, you must provide quantitative data or an explanation of their presence in your discharge. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NO. *(if available)*	2. MARK 'X' a. BELIEVED PRESENT	b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE *(if available)* (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE *(if available)* (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE *(optional)* a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
a. Bromide (24959-67-9)		X												
b. Chlorine, Total Residual		X												
c. Color		X												
d. Fecal Coliform		X												
e. Fluoride (16984-48-8)		X												
f. Nitrate-Nitrite *(as N)*		X												

CONTINUE ON REVERSE

ITEM V-B CONTINUED FROM FRONT

1. POLLUTANT AND CAS NO. (if available)	2. MARK 'X' a. BELIEVED PRESENT	2. MARK 'X' b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE (optional) b. NO. OF ANALYSES
g. Nitrogen, Total Organic (as N)		X												—
h. Oil and Grease		X	2.74	0.0036	N/A	N/A	N/A	N/A	1	mg/1	Lbs/day	UNK	—	0
i. Phosphorus (as P), Total (7723-14-0)		X												
j. Radioactivity														
(1) Alpha, Total		X												
(2) Beta, Total		X												
(3) Radium, Total		X												
(4) Radium 226, Total		X												
k. Sulfate (as SO_4) (14808-79-8)		X												
l. Sulfide (as S)		X												
m. Sulfite (as SO_3) (14265-45-3)		X												
n. Surfactants		X												
o. Aluminum, Total (7429-90-5)		X												
p. Barium, Total (7440-39-3)		X												
q. Boron, Total (7440-42-8)		X												
r. Cobalt, Total (7440-48-4)		X												
s. Iron, Total (7439-89-6)		X												
t. Magnesium, Total (7439-95-4)		X												
u. Molybdenum, Total (7439-98-7)		X												
v. Manganese, Total (7439-96-5)		X												
w. Tin, Total (7440-31-5)		X												
x. Titanium, Total (7440-32-6)		X												

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CONTINUED FROM PAGE 3 OF FORM 2-C

PART C - If you are a primary industry and this outfall contains process wastewater, refer to Table 2c-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-a for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark column 2-a *(secondary industries, nonprocess wastewater outfalls, and nonrequired GC/MS fractions)*, mark "X" in column 2-b for each pollutant you know or have reason to believe is present. Mark "X" in column 2-c for each pollutant you believe is absent. If you mark column 2a for any pollutant, you must provide the results of at least one analysis for that pollutant. If you mark column 2b for any pollutant, you must provide the results of at least one analysis for that pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2,4 dinitrophenol, or 2-methyl-4, 6 dinitrophenol, you must provide the results of at least one analysis for each of these pollutants which you know or have reason to believe that you discharge in concentrations of 100 ppb or greater. Otherwise, for pollutants for which you mark column 2b, you must either submit at least one analysis or briefly describe the reasons the pollutant is expected to be discharged. Note that there are 7 pages to this part; please review each carefully. Complete one table *(all 7 pages)* for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, CYANIDE, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-0)			X												
2M. Arsenic, Total (7440-38-2)			X												
3M. Beryllium, Total, 7440-41-7)			X												
4M. Cadmium, Total (7440-43-9)			X												
5M. Chromium, Total (7440-47-3)			X												
6M. Copper, Total (7440-50-8)			X												
7M. Lead, Total (7439-92-1)			X												
8M. Mercury, Total (7439-97-6)			X												
9M. Nickel, Total (7440-02-0)			X												
10M. Selenium, Total (7782-49-2)			X												
11M. Silver, Total (7440-22-4)			X												
12M. Thallium, Total (7440-28-0)			X												
13M. Zinc, Total (7440-66-6)			X												
14M. Cyanide, Total (57-12-5)			X												
15M. Phenols, Total			X												
DIOXIN															
2,3,7,8-Tetrachlorodibenzo-P-Dioxin (1764-01-6)			X	DESCRIBE RESULTS											

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – VOLATILE COMPOUNDS															
1V. Acrolein (107-02-8)			X												
2V. Acrylonitrile (107-13-1)			X												
3V. Benzene (71-43-2)			X												
4V. Bis *(Chloromethyl)* Ether (542-88-1)			X												
5V. Bromoform (75-25-2)			X												
6V. Carbon Tetrachloride (56-23-5)			X												
7V. Chlorobenzene (108-90-7)			X												
8V. Chlorodibromomethane (124-48-1)			X												
9V. Chloroethane (75-00-3)			X												
10V. 2-Chloroethylvinyl Ether (110-75-8)			X												
11V. Chloroform (67-66-3)			X												
12V. Dichlorobromomethane (75-27-4)			X												
13V. Dichlorodifluoromethane (75-71-8)			X												
14V. 1,1-Dichloroethane (75-34-3)			X												
15V. 1,2-Dichloroethane (107-06-2)			X												
16V. 1,1-Dichloroethylene (75-35-4)			X												
17V. 1,2-Dichloropropane (78-87-5)			X												
18V. 1,3-Dichloropropylene (542-75-6)			X												
19V. Ethylbenzene (100-41-4)			X												
20V. Methyl Bromide (74-83-9)			X												
21V. Methyl Chloride (74-87-3)			X												

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EPA I.D. NUMBER (copy from Item 1 of Form 1)	OUTFALL NUMBER
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1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANALYSES
GC/MS FRACTION – VOLATILE COMPOUNDS *(continued)*															
22V. Methylene Chloride (75-09-2)			X												
23V. 1,1,2,2-Tetrachloroethane (79-34-5)			X												
24V. Tetrachloroethylene (127-18-4)			X												
25V. Toluene (108-88-3)			X												
26V. 1,2-Trans-Dichloroethylene (15[illegible]60-5)			X												
27[illegible].1,1-Trichloroethane (71-55-6)			X												
28V. 1,1,2-Trichloroethane (79-00-5)			X												
29V. Trichloroethylene (79-01-6)			X												
30V. Trichlorofluoromethane (75-69-4)			X												
31V. Vinyl Chloride (75-01-4)			X												
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2-Chlorophenol (95-57-8)			X												
2A. 2,4-Dichlorophenol (120-83-2)			X												
3A. 2,4-Dimethylphenol (105-67-9)			X												
4A. 4,6-Dinitro-O-Cresol (534-52-1)			X												
5A. 2,4-Dinitrophenol (51-28-5)			X												
6A. 2-Nitrophenol (88-75-5)			X												
7A. 4-Nitrophenol (100-02-7)			X												
8A. P-Chloro-M-Cresol (59-50-7)			X												
9A. Pentachlorophenol (87-86-5)			X												
10A. Phenol (108-95-2)			X												
11A. 2,4,6-Trichlorophenol (88-06-2)			X												

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)			X												
2B. Acenaphtylene (208-96-8)			X												
3B. Anthracene (120-12-7)			X												
4B. Benzidine (92-87-5)			X												
5B. Benzo *(a)* Anthracene (56-55-3)			X												
6B. Benzo *(a)* Pyrene (50-32-8)			X												
7B. 3,4-Benzo-fluoranthene (205-99-2)			X												
8B. Benzo *(ghi)* Perylene (191-24-2)			X												
9B. Benzo *(k)* Fluoranthene (207-08-9)			X												
10B. Bis *(2-Chloro-ethoxy)* Methane (111-91-1)			X												
11B. Bis *(2-Chloro-ethyl)* Ether (111-44-4)			X												
12B. Bis *(2-Chloroiso-propyl)* Ether (102-60-1)			X												
13B. Bis *(2-Ethyl-hexyl)* Phthalate (117-81-7)			X												
14B. 4-Bromo-phenyl Phenyl Ether (101-55-3)			X												
15B. Butyl Benzyl Phthalate (85-68-7)			X												
16B. 2-Chloro-naphthalene (91-58-7)			X												
17B. 4-Chloro-phenyl Phenyl Ether (7005-72-3)			X												
18B. Chrysene (218-01-9)			X												
19B. Dibenzo *(a,h)* Anthracene (53-70-3)			X												
20B. 1,2-Dichloro-benzene (95-50-1)			X												
21B. 1,3-Dichloro-benzene (541-73-1)			X												

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EPA I.D. NUMBER (copy from Item 1 of Form 1)	OUTFALL NUMBER
MA 0003913	3

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1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANALYSES
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS *(continued)*															
22B. 1,4-Dichlorobenzene (106-46-7)			X												
23B. 3,3'-Dichlorobenzidine (91-94-1)			X												
24B. Diethyl Phthalate (84-66-2)			X												
25B. Dimethyl Phthalate (131-11-3)			X												
26B. Di-N-Butyl Phthalate (84-2)			X												
27B. 2,4-Dinitrotoluene (121-14-2)			X												
28B. 2,6-Dinitrotoluene (606-20-2)			X												
29B. Di-N-Octyl Phthalate (117-84-0)			X												
30B. 1,2-Diphenylhydrazine *(as Azobenzene)* (122-66-7)			X												
31B. Fluoranthene (206-44-0)			X												
32B. Fluorene (86-73-7)			X												
33B. Hexachlorobenzene (118-74-1)			X												
34B. Hexachlorobutadiene (87-68-3)			X												
35B. Hexachlorocyclopentadiene (77-47-4)			X												
36B. Hexachloroethane (67-72-1)			X												
37B. Indeno *(1,2,3-cd)* Pyrene (193-39-5)			X												
38B. Isophorone (78-59-1)			X												
39B. Naphthalene (91-20-3)			X												
40B. Nitrobenzene (98-95-3)			X												
41B. N-Nitrosodimethylamine (62-75-9)			X												
42B. N-Nitrosodi-N-Propylamine (621-64-7)			X												

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION — BASE/NEUTRAL COMPOUNDS *(continued)*															
43B. N-Nitrosodiphenylamine (86-30-6)			X												
44B. Phenanthrene (85-01-8)			X												
45B. Pyrene (129-00-0)			X												
46B. 1,2,4 - Trichlorobenzene (120-82-1)			X												
GC/MS FRACTION — PESTICIDES															
1P. Aldrin [illegible]-00-2)			X												
2P. α-BHC (319-84-6)			X												
3P. β-BHC (319-85-7)			X												
4P. γ-BHC (58-89-9)			X												
5P. δ-BHC (319-86-8)			X												
6P. Chlordane (57-74-9)			X												
7P. 4,4'-DDT (50-29-3)			X												
8P. 4,4'-DDE (72-55-9)			X												
9P. 4,4'-DDD (72[illegible]-8)			X												
10P. Dieldrin (60-57-1)			X												
11P. α-Endosulfan (115-29-7)			X												
12P. β-Endosulfan (115-29-7)			X												
13P. Endosulfan Sulfate (1031-07-8)			X												
14P. Endrin (72-20-8)			X												
15P. Endrin Aldehyde (7421-93-4)			X												
16P. Heptachlor (76-44-8)			X												

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1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – PESTICIDES *(continued)*															
17P. Heptachlor Epoxide (1024-57-3)			X												
18P. PCB-1242 (53469-21-9)			X												
19P. PCB-1254 (11097-69-1)			X												
20P. PCB-1221 (11104-28-2)			X												
21P. PCB-1232 (11141-16-5)			X												
22P. PCB-1248 (12672-29-6)			X												
23P. PCB-1260 (11096-82-5)			X												
24P. PCB-1016 (12674-11-2)			X												
25P. Toxaphene (8001-35-2)			X												

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets *(use the same format)* instead of completing these pages. SEE INSTRUCTIONS.

EPA I.D. NUMBER *(copy from Item 1 of Form 1)*: MA 000 3913

Form Approved. OMB No. 2000-0059 Approval expires 12-31-85

V. INTAKE AND EFFLUENT CHARACTERISTICS *(continued from page 3 of Form 2-C)*

OUTFALL NO. 1

PART A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	3. UNITS (specify if blank) a. CONCENTRATION	b. MASS	4. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
a. Biochemical Oxygen Demand *(BOD)*	2.3	13.7	N/A	N/A	N/A	N/A	1	mg/1	Lbs/day	UNK	–	0
b. Chemical Oxygen Demand *(COD)*	42.0	160.3	N/A	N/A	10.03	43.2	20	mg/1	Lbs/day	UNK	–	0
c. Total Organic Carbon *(TOC)*	Waver requested – no tests made				–	–	0	–	–	UNK	–	0
d. Total Suspended Solids *(TSS)*	10.4	45.7	N/A	N/A	2.33	10.04	20	mg/1	Lbs/day	UNK	–	0
e. Ammonia *(as N)*	2.3	13.7	N/A	N/A	N/A	N/A	1			UNK	–	0
f. Flow	VALUE .722MGD		VALUE N/A		VALUE .519 MGD		20	MGD	MGD	VALUE .732		4
g. Temperature *(winter)*	VALUE 3°C		VALUE N/A		VALUE 5°C		2	°C		VALUE 3°		200
h. Temperature *(summer)*	VALUE 24°C		VALUE N/A		VALUE 26°C		2	°C		VALUE 24°		200
i. pH	MINIMUM 5.3	MAXIMUM 8.1	MINIMUM N/A	MAXIMUM N/A			20	STANDARD UNITS				

PART B - Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2a for any pollutant which is limited either directly, or indirectly but expressly, in an effluent limitations guideline, you must provide the results of at least one analysis for that pollutant. For other pollutants for which you mark column 2a, you must provide quantitative data or an explanation of their presence in your discharge. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NO. *(if available)*	2. MARK 'X' a. BELIEVED PRESENT	b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
a. Bromide (24959-67-9)		X												
b. Chlorine, Total Residual		X												
c. Color		X												
d. Fecal Coliform		X												
e. Fluoride (16984-48-8)		X												
f. Nitrate–Nitrite *(as N)*		X												

ITEM V-B CONTINUED FROM FRONT

1. POLLUTANT AND CAS NO. (if available)	2. MARK 'X'		3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. BELIEVED PRESENT	b. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
g. Nitrogen, Total Organic (as N)		X												
h. Oil and Grease	X		1.71	7.8	N/A	N/A	.87	3.76	20	mg/1	Lbs/day	UNK	–	0
i. Phosphorus (as P), Total (7723-14-0)		X												
j. Radioactivity														
(1) Alpha, Total		X												
(2) Beta, Total		X												
(3) Radium, Total		X												
(4) Radium 226, Total		X												
k. Sulfate (as SO_4) (14808-79-8)		X												
l. Sulfide (as S)		X												
m. Sulfite (as SO_3) (14265-45-3)		X												
n. Surfactants		X												
o. Aluminum, Total (7429-90-5)		X												
p. Barium, Total (7440-39-3)		X												
q. Boron, Total (7440-42-8)		X												
r. Cobalt, Total (7440-48-4)		X												
s. Iron, Total (7439-89-6)		X												
t. Magnesium, Total (7439-95-4)		X												
u. Molybdenum, Total (7439-98-7)		X												
v. Manganese, Total (7439-96-5)		X												
w. Tin, Total (7440-31-5)		X												
x. Titanium, Total (7440-32-6)		X												

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CONTINUED FROM PAGE 3 OF FORM 2-C

PART C - If you are a primary industry and this outfall contains process wastewater, refer to Table 2c-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-a for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark column 2-a *(secondary industries, nonprocess wastewater outfalls, and nonrequired GC/MS fractions)*, mark "X" in column 2-b for each pollutant you know or have reason to believe is present. Mark "X" in column 2-c for each pollutant you believe is absent. If you mark column 2a for any pollutant, you must provide the results of at least one analysis for that pollutant. If you mark column 2b for any pollutant, you must provide the results of at least one analysis for that pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2,4 dinitrophenol, or 2-methyl-4, 6 dinitrophenol, you must provide the results of at least one analysis for each of these pollutants which you know or have reason to believe that you discharge in concentrations of 100 ppb or greater. Otherwise, for pollutants for which you mark column 2b, you must either submit at least one analysis or briefly describe the reasons the pollutant is expected to be discharged. Note that there are 7 pages to this part; please review each carefully. Complete one table *(all 7 pages)* for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, CYANIDE, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-0)			X												
2M. Arsenic, Total (7440-38-2)			X												
3M. Beryllium, Total, 7440-41-7)			X												
4M. Cadmium, Total (7440-43-9)			X												
5M. Chromium, Total (7440-47-3)	X		X	<0.25	<0.99	N/A	N/A	<.08	<0.3	20	mg/1	Lbs/day	UNK	-	0
6M. Copper, Total (7440-50-8)			X												
7M. Lead, Total (7439-92-1)			X												
8M. Mercury, Total (7439-97-6)			X												
9M. Nickel, Total (7440-02-0)			X												
10M. Selenium, Total (7782-49-2)			X												
11M. Silver, Total (7440-22-4)			X												
12M. Thallium, Total (7440-28-0)			X												
13M. Zinc, Total (7440-66-6)			X												
14M. Cyanide, Total (57-12-5)			X												
15M. Phenols, Total			X												
DIOXIN															
2,3,7,8-Tetrachlorodibenzo-P-Dioxin (1764-01-6)			X	DESCRIBE RESULTS											

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – VOLATILE COMPOUNDS															
1V. Acrolein (107-02-8)			X												
2V. Acrylonitrile (107-13-1)			X												
3V. Benzene (71-43-2)			X												
4V. Bis *(Chloromethyl)* Ether (542-88-1)			X												
5V. Bromoform (75-25-2)			X												
6V. Carbon Tetrachloride (56-23-5)			X												
7V. Chlorobenzene (108-90-7)			X												
8V. Chlorodibromomethane (124-48-1)			X												
9V. Chloroethane (75-00-3)			X												
10V. 2-Chloroethylvinyl Ether (110-75-8)			X												
11V. Chloroform (67-66-3)			X												
12V. Dichlorobromomethane (75-27-4)			X												
13V. Dichlorodifluoromethane (75-71-8)			X												
14V. 1,1-Dichloroethane (75-34-3)			X												
15V. 1,2-Dichloroethane (107-06-2)			X												
16V. 1,1-Dichloroethylene (75-35-4)			X												
17V. 1,2-Dichloropropane (78-87-5)			X												
18V. 1,3-Dichloropropylene (542-75-6)			X												
19V. Ethylbenzene (100-41-4)			X												
20V. Methyl Bromide (74-83-9)			X												
21V. Methyl Chloride (74-87-3)			X												

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1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
GC/MS FRACTION – VOLATILE COMPOUNDS *(continued)*															
22V. Methylene Chloride (75-09-2)			X												
23V. 1,1,2,2-Tetrachloroethane (79-34-5)			X												
24V. Tetrachloroethylene (127-18-4)			X												
25V. Toluene (108-88-3)			X												
26V. 1,2-Trans-Dichloroethylene (156-60-5)			X												
27V. 1,1,1-Trichloroethane (71-55-6)			X												
28V. 1,1,2-Trichloroethane (79-00-5)			X												
29V. Trichloroethylene (79-01-6)			X												
30V. Trichlorofluoromethane (75-69-4)			X												
31V. Vinyl Chloride (75-01-4)			X												
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2-Chlorophenol (95-57-8)			X												
2A. 2,4-Dichlorophenol (120-83-2)			X												
3A. 2,4-Dimethylphenol (105-67-9)			X												
4A. 4,6-Dinitro-O-Cresol (534-52-1)			X												
5A. 2,4-Dinitrophenol (51-28-5)			X												
6A. 2-Nitrophenol (88-75-5)			X												
7A. 4-Nitrophenol (100-02-7)			X												
8A. P-Chloro-M-Cresol (59-50-7)			X												
9A. Pentachlorophenol (87-86-5)			X												
10A. Phenol (108-95-2)			X												
11A. 2,4,6-Trichlorophenol (88-06-2)			X												

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)			X												
2B. Acenaphtylene (208-96-8)			X												
3B. Anthracene (120-12-7)			X												
4B. Benzidine (92-87-5)			X												
5B. Benzo *(a)* Anthracene (56-55-3)			X												
6B. Benzo *(a)* Pyrene (50-32-8)			X												
7B. 3,4-Benzo-fluoranthene (205-99-2)			X												
8B. Benzo *(ghi)* Perylene (191-24-2)			X												
9B. Benzo *(k)* Fluoranthene (207-08-9)			X												
10B. Bis *(2-Chloro-ethoxy)* Methane (111-91-1)			X												
11B. Bis *(2-Chloro-ethyl)* Ether (111-44-4)			X												
12B. Bis *(2-Chloroiso-propyl)* Ether (102-60-1)			X												
13B. Bis *(2-Ethyl-hexyl)* Phthalate (117-81-7)			X												
14B. 4-Bromo-phenyl Phenyl Ether (101-55-3)			X												
15B. Butyl Benzyl Phthalate (85-68-7)			X												
16B. 2-Chloro-naphthalene (91-58-7)			X												
17B. 4-Chloro-phenyl Phenyl Ether (7005-72-3)			X												
18B. Chrysene (218-01-9)			X												
19B. Dibenzo *(a,h)* Anthracene (53-70-3)			X												
20B. 1,2-Dichloro-benzene (95-50-1)			X												
21B. 1,3-Dichloro-benzene (541-73-1)			X												

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EPA I.D. NUMBER (copy from Item 1 of Form 1): MA 0003913

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1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION — BASE/NEUTRAL COMPOUNDS *(continued)*															
22B. 1,4-Dichlorobenzene (106-46-7)			X												
23B. 3,3'-Dichlorobenzidine (91-94-1)			X												
24B. Diethyl Phthalate (84-66-2)			X												
25B. Dimethyl Phthalate (131-11-3)			X												
26B. Di-N-Butyl Phthalate (84-74-2)			X												
27B. 2,4-Dinitrotoluene (121-14-2)			X												
28B. 2,6-Dinitrotoluene (606-20-2)			X												
29B. Di-N-Octyl Phthalate (117-84-0)			X												
30B. 1,2-Diphenylhydrazine *(as Azobenzene)* (122-66-7)			X												
31B. Fluoranthene (206-44-0)			X												
32B. Fluorene (86-73-7)			X												
33B. Hexachlorobenzene (118-74-1)			X												
34B. Hexachlorobutadiene (87-68-3)			X												
35B. Hexachlorocyclopentadiene (77-47-4)			X												
36B. Hexachloroethane (67-72-1)			X												
37B. Indeno *(1,2,3-cd)* Pyrene (193-39-5)			X												
38B. Isophorone (78-59-1)			X												
39B. Naphthalene (91-20-3)			X												
40B. Nitrobenzene (98-95-3)			X												
41B. N-Nitrosodimethylamine (62-75-9)			X												
42B. N-Nitrosodi-N-Propylamine (621-64-7)			X												

CONTINUE ON REVERS

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS *(continued)*															
43B. N-Nitrosodiphenylamine (86-30-6)			X												
44B. Phenanthrene (85-01-8)			X												
45B. Pyrene (129-00-0)			X												
46B. 1,2,4 - Trichlorobenzene (120-82-1)			X												
GC/MS FRACTION – PESTICIDES															
1P. Aldrin (309-00-2)			X												
2P. α-BHC (319-84-6)			X												
3P. β-BHC (319-85-7)			X												
4P. γ-BHC (58-89-9)			X												
5P. δ-BHC (319-86-8)			X												
6P. Chlordane (57-74-9)			X												
7P. 4,4'-DDT (50-29-3)			X												
8P. 4,4'-DDE (72-55-9)			X												
9P. 4,4'-DDD (72-54-8)			X												
10P. Dieldrin (60-57-1)			X												
11P. α-Endosulfan (115-29-7)			X												
12P. β-Endosulfan (115-29-7)			X												
13P. Endosulfan Sulfate (1031-07-8)			X												
14P. Endrin (72-20-8)			X												
15P. Endrin Aldehyde (7421-93-4)			X												
16P. Heptachlor (76-44-8)			X												

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EPA I.D. NUMBER (copy from Item 1 of Form 1)	OUTFALL NUMBER
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Form Approved.
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1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION — PESTICIDES *(continued)*															
17P. Heptachlor Epoxide (1024-57-3)			X												
18P. PCB-1242 (53469-21-9)			X												
19P. PCB-1254 (11097-69-1)			X												
20P. PCB-1221 (11104-28-2)			X												
21P. PCB-1232 (11141-16-5)			X												
22P. PCB-1248 (12672-29-6)			X												
23P. PCB-1260 (11096-82-5)			X												
24P. PCB-1016 (12674-11-2)			X												
25P. Toxaphene (8001-35-2)			X												

Analysis of Plant "B" Non-Contact Cooling Water from the Twenty-One Inch Outfall.

J. Bailey submitted twelve glass jar samples collected over a 24 hour time period on 6/19/86 from the 21 Inch Outfall.

See request form: Log No. 32-86

EXPERIMENTS AND RESULTS:

Each sample was inspected and the pH measured individually before compositing. The determination of total suspended solids (TSS), chemical oxygen demand (COD), Chromium (Cr), Ammonia (NH_3) and oil and grease concentrations were performed on the composite.

A. Determination of Total Suspended Solids (TSS)

This determination was carried out graviemetrically by filtering one liter of the effluent through a glass fiber filter disk. The TSS was determined to be 1.7 mg/1.

B. Determination of Chemical Oxygen Demand (COD)

The amount of oxidizable organic matter, proportional to the potassium dichromate consumption, was measured titrimetrically with ferrous ammonium sulfate. The COD is calculated to be 9.0 mg/1.

C. Determination of Chromium (Cr) Concentration

AA analysis gives a chromium concentration of 0.0 mg/1.

D. Determination of Oil and Grease Concentration

The oil and grease was determined by following the infrared procedure in the Lab Manual #IV-C. The oil and grease concentration is calculated at 1.9 mg/1.

E. Determination of pH

The pH value of this effluent measured on the Fisher Electrometer is:

1AM	3AM	5AM	7AM	9AM	11AM	1PM	3PM	5PM	7PM	9PM	11PM.
7.0	7.6	7.7	7.6	7.4	7.3	7.6	7.6	7.7	7.6	7.6	7.6.

F. Determination of Ammonia (NH_3) Concentration

The ammonia concentration was determined colorimetrically by direct Nesslerization. The reading for the sample is 2.3 mg/1.

Analysis	Analyst
TSS	- C. Messier
COD	- C. Lapointe
Cr	- C. Lapointe
O & Gr.	- C. Lapointe
pH	- C. Messier
NH_3	- C. Messier

Total Analysis Time - 12 hrs.

Total Analysis Cost - $300.00

SUMMARY:

The analytical results obtained for this effluent are listed below:

Analysis	Results in mg/l.	* Results in lbs/day	Max. Limit
TSS	1.7	10.2	9.0-18.0 lbs./day
COD	9.0	—	3.3-16.3 mgs./~~day~~ l
Cr	0.0	—	0.03 mg/l.
Oil & Grease	1.9	11.3	3.3-9.3 lbs./day
pH (Ave.)	7.5		6.5-8.0
NH_3	2.3	13.7	

* The results listed in this column are computed by the amount of effluent outflow for the day the samples were taken.

Signed Claire A. Messier

Claire A. Messier

CM:maw

LOG NO. 32-86

[X] CMP

[ ] E'CAST

[ ] O'RING

DATE: June 19, 1986

TO: F. Llort

REQUESTED BY: J. Bailey

DEPT.: Safety Security # 239

REQUEST: Please have 12 samples analyzed per attached. Will require 12 individual PH, then combine samples for 1 test each for:

a. C.O.D.

b. T.S.S.

c. Total chromium and infrared oil and grease

d. BOD

e. Ammonia

f. Total organic carbon

REASON: EPA COMPLIANCE

SPECIFICS (if any): Samples will be brought to R & D Lab on Thursday, June 19, 1986. Samples must be analyzed as soon as possible per APHA standard methods, 16th Edition.

EST. COMPLETION DATE: 6/19/86

ACTUAL COMPLETION DATE:

EST. TOTAL COST: $

ACTUAL TOTAL COST: $ 200.00 - 250.00

Material $

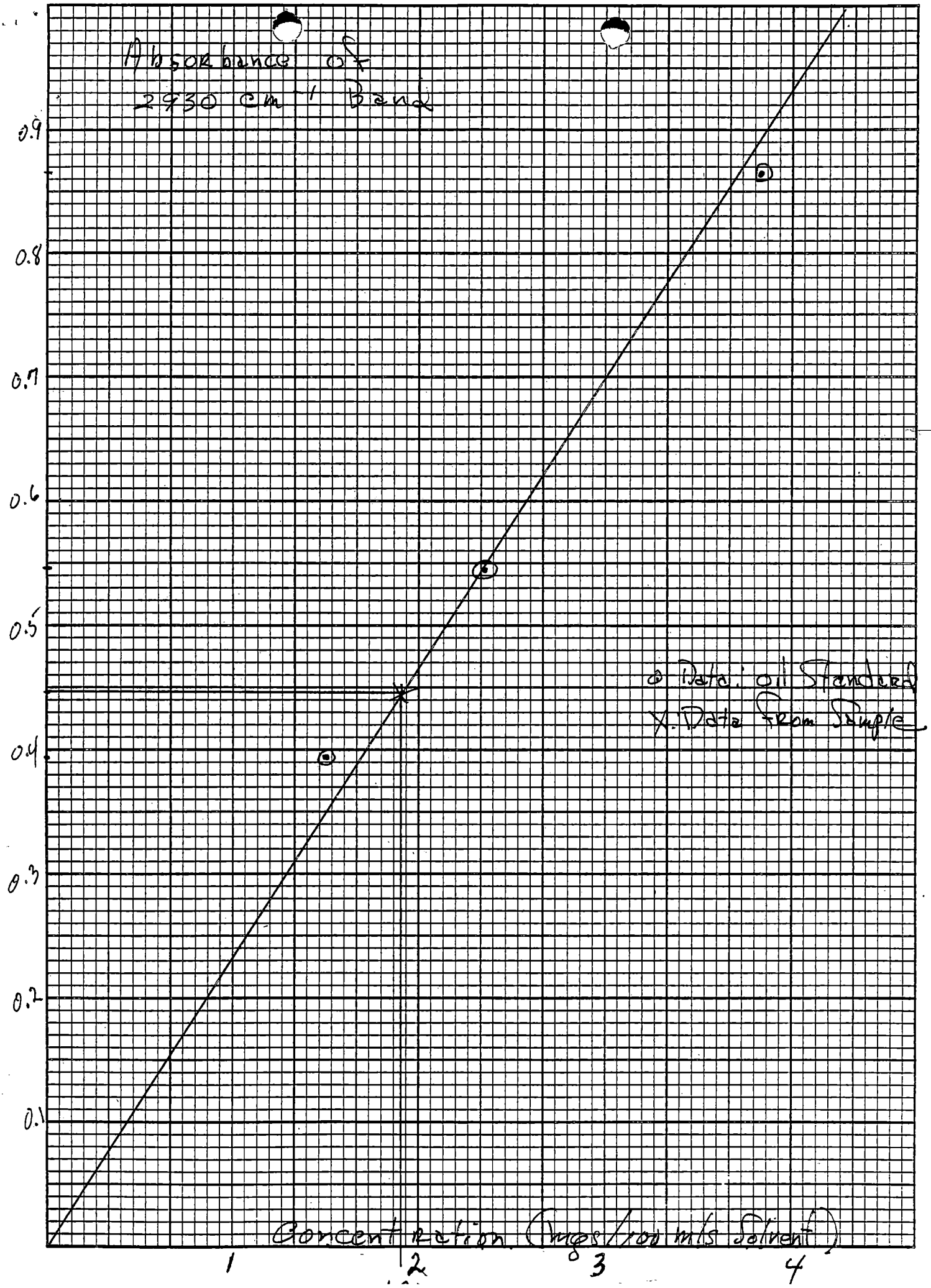
Labor $

Other $

REMARKS: Thank you.

APPROVED BY: [signature]

DATE: June 19, 1986


Absorbance of
2930 cm⁻¹ Band
0.9
0.8
0.7
0.6
0.5
0.4
0.3
0.2
0.1
⊙ Data on Standard
X Data from Sample
Concentration (mgs/100 mls Solvent)
1
2
3
4

ACUSHNET COMPANY
Rubber Division
Plant B
744 Belleville Ave.
New Bedford, MA 02742

July 28, 1986

ROOF DRAIN FLOW CALCULATION

Roof area est. - warehouse 9500 sqft.

Average rainfall in New Bedford 1985

43.85" RE: Ch.6 - weather Dept.

Max. rainfall per storm per day - est. 2 - 3 inches

Vol. of rain collected on metal roof annually

$$\frac{43.85 \text{ in.}}{12 \text{ in./ft.}} \times 9500 \text{ sqft.} = 34{,}715 \text{ cu.ft.}$$

$$\frac{34{,}751 \text{ cu.ft.}}{7.481 \text{ cu.ft./gal}} = 4640 \text{ gal/yr.}$$

2 - 6" drains and roof leaders - 2320 gal/yr for each.

Max. flow volume for any one day.

$$\frac{3 \text{ in.}}{12 \text{ in/ft}} \times 9500 \text{ sqft} = \frac{2375 \text{ cu.ft.}}{7.481 \text{ cu.ft./gal}} = 317 \text{ gal} \quad \frac{320}{2} = 160 \text{ gal.}$$

for each

tibbetts engineering corp., ANALYTICAL LABORATORY DIVISION

Page
Job No. 5540
Date Jan. 28, 1985

Commonwealth of Massachusetts Certified Laboratory Number: 20153

ADDITIONAL ANALYSIS (Mg. PER Liter)

Client The Acushnet Co., Rubber Division, Plant B
Project N.P.D.E.S. Permit Monitoring

Source A- 21" drainpipe empting into the Acushnet River - 001 outfall
Source B
Source C- units expressed
Source D- N.P.D.E.S. Permit Limits July 7, 1976 - May 1, 1980 - Daily Average
Column E- " " " " " - Daily Maximum
Column F

	A	B	C	D	E	F
Sample No.	55023A			AVG.	MAX.	
Date of Collection	1/22 to 23/85					
Type of Sample	compos.					
Time of Collection	9:AM to 9 AM					
Collector	CLIENT					
Date Received	1/23/85					
Temperature °C						
pH (median)	7.9		Std. Units	6.5 - 8.0	6.5 - 8.0	
C.O.D.	15.8		mg/l			
T.S.S.	2.1		lbs/day	9.0	18	
Tot. Chromium	<0.05		mg/l	0.3		
Infrared Oil & Grease	1.86		lbs/day	3.3	9.3	
Flow	0.496		M.G.D.			

Fred E. Tibbetts, II
Laboratory Supervisor

tibbetts engineering corp., ANALYTICAL LABORATORY DIVISION

Page
Job No. 5540
Date 2/25/85

Commonwealth of Massachusetts Certified Laboratory Number: 20153

ADDITIONAL ANALYSIS (Mg. PER Liter)

Client The Acushnet Co., Rubber Division, Plant B
Project N.P.D.E.S. Permit Monitoring

Source A- 21" drainpipe empting into the Acushnet River - 001 outfall
Source B
Source C- units expressed
Source D- N.P.D.E.S. Permit Limits July 7, 1976 - May 1, 1980 - Daily Average
Column E- " " " " " - Daily Maximum
Column F

	A	B	C	D	E	F
Sample No.	S5039A			AVG.	MAX.	
Date of Collection	2/7-8/85					
Type of Sample	COMPOS.					
Time of Collection	9AM To 9AM					
Collector	Client					
Date Received	2/8/85					
Temperature °C						
pH (median)	7.6		Std. Units	6.5 - 8.0	6.5 - 8.0	
C.O.D.	80		mg/l			
T.S.S.	7.7		lbs/day	9.0	18	
Tot. Chromium	< 0.05		mg/l	0.3		
Infrared Oil & Grease	1.1		lbs/day	3.3	9.3	
Flow	0.421		M.G.D.			

Fred E. Tibbetts, III
Laboratory Supervisor
Fred E. Tibbetts, III, Ph D

tibbetts engineering corp., ANALYTICAL LABORATORY DIVISION

Page
Job No. 5540
Date 3/13/85

Commonwealth of Massachusetts Certified Laboratory Number: 20153

ADDITIONAL ANALYSIS (Mg. PER Liter)

Client The Acushnet Co., Rubber Division, Plant B
Project N.P.D.E.S. Permit Monitoring

Source A- 21" drainpipe empting into the Acushnet River - 001 outfall
Source B
Source C- units expressed
Source D- N.P.D.E.S. Permit Limits July 7, 1976 - May 1, 1980 - Daily Average
Column E- " " " " " - Daily Maximum
Column F

	A	B	C	D	E	F
Sample No.	S50650			AVG.	MAX.	
Date of Collection	3/5-6/85					
Type of Sample	COMPOS.					
Time of Collection	9:AM-9:AM					
Collector	CLIENT					
Date Received	3/6/85					
Temperature °C						
pH (median)	7.2		Std. Units	6.5 - 8.0	6.5 - 8.0	
C.O.D.	20		mg/l			
T.S.S.	2.0		lbs/day	9.0	18	
Tot. Chromium	<0.05		mg/l	0.3		
Infrared Oil & Grease	0.85		lbs/day	3.3	9.3	
Flow	0.407		M.G.D.			

Fred E. Tibbetts, III
Laboratory Supervisor
Fred E. Tibbetts, III, Ph D

tibbetts engineering corp., ANALYTICAL LABORATORY DIVISION

Page
Job No. 5540
Date 4/26/85

Commonwealth of Massachusetts Certified Laboratory Number: 20153

ADDITIONAL ANALYSIS (Mg. PER Liter)

Client The Acushnet Co., Rubber Division, Plant B
Project N.P.D.E.S. Permit Monitoring

Source A- 21" drainpipe empting into the Acushnet River - 001 outfall
Source B
Source C- units expressed
Source D- N.P.D.E.S. Permit Limits July 7, 1976 - May 1, 1980 - Daily Average
Column E- " " " " " - Daily Maximum
Column F

	A	B	C	D	E	F
Sample No.	S5107A			AVG.	MAX.	
Date of Collection	4/16-17/85					
Type of Sample	Compos.					
Time of Collection	24 hr.					
Collector	Client					
Date Received	4/17/85					
Temperature °C						
pH (median)	7.6		Std. Units	6.5 - 8.0	6.5 - 8.0	
C.O.D.	20		mg/l			
T.S.S.	6.2		lbs/day	9.0	18	
Tot. Chromium	<0.1		mg/l	0.3		
Infrared Oil & Grease	1.86		lbs/day	3.3	9.3	
Flow*	0.371		M.G.D.			

Flow volume measurement was made over period of 24 hrs. on 4/24-25/85.

Fred E. Tibbetts III
Laboratory Supervisor
Fred E. Tibbetts, III, Ph D

tibbetts engineering corp., ANALYTICAL LABORATORY DIVISION

Page 2
Job No. 5540
Date 5/20/85

Commonwealth of Massachusetts Certified Laboratory Number: 20153

ADDITIONAL ANALYSIS (Mg. PER Liter)

Client The Acushnet Co., Rubber Division, Plant B
Project N.P.D.E.S. Permit Monitoring

Source A- 21" drainpipe empting into the Acushnet River - 001 outfall
Source B
Source C- units expressed
Source D- N.P.D.E.S. Permit Limits July 7, 1976 - May 1, 1980 - Daily Average
Column E- " " " " " - Daily Maximum
Column F

	A	B	C	D	E	F
Sample No.	55135A			AVG.	MAX.	
Date of Collection	5/14-15/85					
Type of Sample	24 hr. COMP.					
Time of Collection	9:AM-9:AM					
Collector	CLIENT					
Date Received	5/15/85					
Temperature °C						
pH. (median)	8.4		Std. Units	6.5 - 8.0	6.5 - 8.0	
C.O.D.	12.7		mg/l			
T.S.S.	6.57		lbs/day	9.0	18	
Tot. Chromium	<0.05		mg/l	0.3		
Infrared Oil & Grease	1.53		lbs/day	3.3	9.3	
Flow	0.525		M.G.D.			

Fred E. Tibbetts, III
Laboratory Supervisor
Fred E. Tibbetts, III, Ph D

tibbetts engineering corp., ANALYTICAL LABORATORY DIVISION

Page 2
Job No. 5540
Date 6/12/85

Commonwealth of Massachusetts Certified Laboratory Number: 20153

ADDITIONAL ANALYSIS (Mg. PER Liter)

Client The Acushnet Co., Rubber Division, Plant B
Project N.P.D.E.S. Permit Monitoring

Source A- 21" drainpipe empting into the Acushnet River - 001 outfall
Source B
Source C- units expressed
Source D- N.P.D.E.S. Permit Limits July 7, 1976 - May 1, 1980 - Daily Average
Column E- " " " " " - Daily Maximum
Column F

	A	B	C	D	E	F
Sample No.	S5157A			AVG.	MAX.	
Date of Collection	6/5-6/85					
Type of Sample	Compos.					
Time of Collection	9:Am to 9:AM					
Collector	CLIENT					
Date Received	6/6/85					
Temperature °C						
pH (median)	8.8		Std. Units	6.5 - 8.0	6.5 - 8.0	
C.O.D.	8.93		mg/l			
T.S.S.	6.33		lbs/day	9.0	18	
Tot. Chromium	<0.05		mg/l	0.3		
Infrared Oil & Grease	2.11		lbs/day	3.3	9.3	
Flow	0.690		M.G.D.			

Fred E. Tibbetts III
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Fred E. Tibbetts, III, Ph D

tibbetts engineering corp., ANALYTICAL LABORATORY DIVISION

Page
Job No. 5540
Date July 9 - July 10 '85

Commonwealth of Massachusetts Certified Laboratory Number: 20153

ADDITIONAL ANALYSIS (Mg. PER Liter)

Client The Acushnet Co., Rubber Division, Plant B
Project N.P.D.E.S. Permit Monitoring

Source A- 21" drainpipe empting into the Acushnet River - 001 outfall
Source B
Source C- units expressed
Source D- N.P.D.E.S. Permit Limits July 7, 1976 - May 1, 1980 - Daily Average
Column E- " " " " " - Daily Maximum
Column F

	A	B	C	D	E	F
Sample No.	55191A			AVG.	MAX.	
Date of Collection	7/9-10/85,					
Type of Sample	Compos.					
Time of Collection	9:30AM-9AM					
Collector	TEC + CLIENT					
Date Received	7/10/85					
Temperature °C						
pH (median)	8.8		Std. Units	6.5 - 8.0	6.5 - 8.0	
C.O.D.	12.1		mg/l			
T.S.S.	0.6mg/L		lbs/day	9.0	18	
Tot. Chromium	<0.05 ppm		mg/l	0.3		
Infrared Oil & Grease	2.274		lbs/day	3.3	9.3	
Flow	0.606		M.G.D.			

Fred E. Tibbetts, III

Laboratory Supervisor
Fred E. Tibbetts, III, Ph D

tibbetts engineering corp., ANALYTICAL LABORATORY DIVISION

Page
Job No. 5540
Date 9/13/85
(AUG)

Commonwealth of Massachusetts Certified Laboratory Number: 20153

ADDITIONAL ANALYSIS (Mg. PER Liter)

Client The Acushnet Co., Rubber Division, Plant B
Project N.P.D.E.S. Permit Monitoring

Source A- 21" drainpipe empting into the Acushnet River - 001 outfall
Source B
Source C- units expressed
Source D- N.P.D.E.S. Permit Limits July 7, 1976 - May 1, 1980 - Daily Average
Column E- " " " " " - Daily Maximum
Column F

	A	B	C	D	E	F
Sample No.	S5241B			AVG.	MAX.	
Date of Collection	8/28-29/85					
Type of Sample	Compos (24hr)					
Time of Collection	9:AM - 7:AM					
Collector	Client					
Date Received	8/29/85					
Temperature °C						
pH (median)	8.3		Std. Units	6.5 - 8.0	6.5 - 8.0	
C.O.D.	3.3		mg/l			
T.S.S.	3.31		lbs/day	9.0	18	
Tot. Chromium	<0.05		mg/l	0.3		
Infrared Oil & Grease	6.583		lbs/day	3.3	9.3	
Flow	0.497		M.G.D.			

Fred E. Tibbetts III
Laboratory Supervisor
Fred E. Tibbetts, III, Ph D

Tibbetts engineering corp., ANALYTICAL LABORATORY DIVISION

Page
Job No. 5540
Date Sept. 18, 1985

Commonwealth of Massachusetts Certified Laboratory Number: 20153

ADDITIONAL ANALYSIS (Mg. PER Liter)

Client The Acushnet Co., Rubber Division, Plant B
Project N.P.D.E.S. Permit Monitoring

Source A- 21" drainpipe empting into the Acushnet River - 001 outfall
Source B
Source C- units expressed
Source D- N.P.D.E.S. Permit Limits July 7, 1976 - May 1, 1980 - Daily Average
Column E- " " " " " - Daily Maximum
Column F

	A	B	C	D	E	F
Sample No.	S5256B			AVG.	MAX.	
Date of Collection	9/12-9/13/85					
Type of Sample	Compos(24 hr)					
Time of Collection	9:00 A.M./8:00 A.M.					
Collector	Client					
Date Received	9/13/85					
Temperature °C						
pH (median)	8.3		Std. Units	6.5 - 8.0	6.5 - 8.0	
C.O.D.	10.0		mg/l			
T.S.S.	7.0		lbs/day	9.0	18	
Tot. Chromium	<0.1		mg/l	0.3		
Infrared Oil & Grease	9.3		lbs/day	3.3	9.3	
Flow	0.579		M.G.D.			

Fred E. Tibbetts, III
Laboratory Supervisor
Fred E. Tibbetts, III, Ph D

Tibbetts engineering corp., ANALYTICAL LABORATORY DIVISION

Page 2
Job No. 5540
Date 10/23/85

Commonwealth of Massachusetts Certified Laboratory Number: 20153

ADDITIONAL ANALYSIS (Mg. PER Liter)

Client The Acushnet Co., Rubber Division, Plant B
Project N.P.D.E.S. Permit Monitoring

Source A- 21" drainpipe empting into the Acushnet River - 001 outfall
Source B
Source C- units expressed
Source D- N.P.D.E.S. Permit Limits July 7, 1976 - May 1, 1980 - Daily Average
Column E- " " " " " - Daily Maximum
Column F

	A	B	C	D	E	F
Sample No.	55290C			AVG.	MAX.	
Date of Collection	10/16-17/85					
Type of Sample	COMPOS.					
Time of Collection	9:AM-7:AM					
Collector	CLIENT					
Date Received	10/17/85					
Temperature °C						
pH (median)	8.1		Std. Units	6.5 - 8.0	6.5 - 8.0	
C.O.D.	16.26		mg/l			
T.S.S.	4.49		lbs/day	9.0	18	
Tot. Chromium	<0.1		mg/l	0.3		
Infrared Oil & Grease	0.85		lbs/day	3.3	9.3	
Flow	0.3076		M.G.D.			

Fred E. Tibbetts III
Laboratory Supervisor
Fred E. Tibbetts, III, Ph D

Tibbetts engineering corp., ANALYTICAL LABORATORY DIVISION

Page
Job No. 5540
Date 12/5/85
(NOV)

Commonwealth of Massachusetts Certified Laboratory Number: 20153

ADDITIONAL ANALYSIS (Mg. PER Liter)

Client The Acushnet Co., Rubber Division, Plant B
Project N.P.D.E.S. Permit Monitoring

Source A- 21" drainpipe empting into the Acushnet River - 001 outfall
Source B
Source C- units expressed
Source D- N.P.D.E.S. Permit Limits July 7, 1976 - May 1, 1980 - Daily Average
Column E- " " " " " - Daily Maximum
Column F

	A	B	C	D	E	F
Sample No.	S5319A			AVG.	MAX.	
Date of Collection	11/14-15/85					
Type of Sample	COMPOS.					
Time of Collection	24 HR.					
Collector	CLIENT					
Date Received	11/15/85					
Temperature °C						
pH (median)	7.8		Std. Units	6.5 - 8.0	6.5 - 8.0	
C.O.D.	4.6		mg/l			
T.S.S.	3.2		lbs/day	9.0	18	
Tot. Chromium	<0.25		mg/l	0.3		
Infrared Oil & Grease	1.24		lbs/day	3.3	9.3	
Flow	0.478*		M.G.D.			

* Measured on 12/4-5/85 due to mechanical breakdown of TEC equipment on 11/14-15/85.

Fred E. Tibbetts, III
Laboratory Supervisor
Fred E. Tibbetts, III, Ph D

Tibbetts engineering corp., ANALYTICAL LABORATORY DIVISION

Page 2
Job No. 5540
Date 12/18/85

Commonwealth of Massachusetts Certified Laboratory Number: 20153

ADDITIONAL ANALYSIS (Mg. PER Liter)

Client The Acushnet Co., Rubber Division, Plant B
Project N.P.D.E.S. Permit Monitoring

Source A- 21" drainpipe empting into the Acushnet River - 001 outfall
Source B
Source C- units expressed
Source D- N.P.D.E.S. Permit Limits July 7, 1976 - May 1, 1980 - Daily Average
Column E- " " " " " - Daily Maximum
Column F

	A	B	C	D	E	F
Sample No.	S5344A			AVG.	MAX.	
Date of Collection	12/9-10/85					
Type of Sample	COMPOS.					
Time of Collection	24 HR.					
Collector	CLIENT					
Date Received	12/10/85					
Temperature °C						
pH (median)	7.1		Std. Units	6.5 - 8.0	6.5 - 8.0	
C.O.D.	13.2		mg/l			
T.S.S.	5.3		lbs/day	9.0	18	
Tot. Chromium	<0.1		mg/l	0.3		
Infrared Oil & Grease	1.77		lbs/day	3.3	9.3	
Flow	0.455		M.G.D.			

Fred E. Tibbetts, III
Laboratory Supervisor
Fred E. Tibbetts, III, Ph D

RAG85-14

copies: (2)

ACUSHNET COMPANY

December 5, 1985

Environmental Protection Agency
Permits Branch
Box 8127
Boston, Ma. 02114

Gentlemen:

Attached are weekly readings of the incoming city water pH taken by our laboratory. In most instances the pH of the incoming city water exceeds the maximum allowable value on our NPDES permit. We submit this data in explanation of the high average and maximum pH values shown on our six-month report.

Yours very truly,

Robert A. Gell

Robert A. Gell
Facilities Engineering Manager

RAG/r
att.

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

Date	pH City Water	1983
2 Jan	9.0	
6 Jan	8.6	
9 Jan	8.7	
12 Jan	8.8	
16 Jan	8.4	
24 Jan	9.1	
30 Jan	8.5	
6 Feb	9.4	
13 Feb	9.0	
21 Feb	9.4	
1 Mar	9.4	
7 Mar	8.7	
13 Mar	9.2	
20 Mar	9.1	
29 Mar	8.9	
3 Apr	9.1	
11 Apr	8.2	
17 Apr	9.1	
24 Apr	9.1	
1 May	9.2	
8 May	9.0	
15 May	9.3	
22 May	9.3	
29 May	9.0	
5 Jun	8.4	
12 Jun	8.3	
19 Jun	8.2	
26 Jun	8.8	
10 Jul	8.9	
17 Jul	8.5	
24 Jul	8.6	
1 Aug	9.0	
21 Aug	9.2	
28 Aug	8.4	
4 Sep	8.6	
11 Sep	8.6	
18 Sep	7.8	
25 Sep	8.4	
3 Oct	8.4	
10 Oct	8.8	
16 Oct	8.6	
24 Oct	8.2	
30 Oct	8.5	
6 Nov	8.5	
13 Nov	9.0	
20 Nov	8.6	
27 Nov	8.7	
4 Dec	8.9	

Tibbetts engineering corp., ANALYTICAL LABORATORY DIVISION

Page
Job No. 5540
Date 1/20/86

Commonwealth of Massachusetts Certified Laboratory Number: 20153

ADDITIONAL ANALYSIS (Mg. PER Liter)

Client The Acushnet Co., Rubber Division, Plant B
Project N.P.D.E.S. Permit Monitoring

Source A- 21" drainpipe empting into the Acushnet River - 001 outfall
Source B
Source C- units expressed
Source D- N.P.D.E.S. Permit Limits July 7, 1976 - May 1, 1980 - Daily Average
Column E- " " " " " - Daily Maximum
Column F

	A	B	C	D	E	F
Sample No.	S6009A			AVG.	MAX.	
Date of Collection	1/8-9/86					
Type of Sample	Compos.					
Time of Collection	9:AM-7:AM					
Collector	CLIENT					
Date Received	1/9/86					
Temperature °C						
pH (median)	7.1		Std. Units	6.5 - 8.0	6.5 - 8.0	
C.O.D.	42		mg/l			
T.S.S.	3.46		lbs/day	9.0	18	
Tot. Chromium	<0.1		mg/l	0.3		
Infrared Oil & Grease	1.22		lbs/day	3.3	9.3	
Flow	0.460		M.G.D.			

Fred E. Tibbetts III
Laboratory Supervisor
Fred E. Tibbetts, III, Ph D

tibbetts engineering corp., ANALYTICAL LABORATORY DIVISION

Page
Job No. 5540
Date 2/28/86

Commonwealth of Massachusetts Certified Laboratory Number: 20153

ADDITIONAL ANALYSIS (Mg. PER Liter)

Client The Acushnet Co., Rubber Division, Plant B
Project N.P.D.E.S. Permit Monitoring

Source A - 21" drainpipe empting into the Acushnet River - 001 outfall
Source B
Source C - units expressed
Source D - N.P.D.E.S. Permit Limits July 7, 1976 - May 1, 1980 - Daily Average
Column E " " " " " - Daily Maximum
Column F

	A	B	C	D	E	F
Sample No.	S6045C			AVG.	MAX.	
Date of Collection	2/13-14/86					
Type of Sample	COMPOS					
Time of Collection	10AM-10PM					
Collector	CLIENT					
Date Received	2/14/86					
Temperature °C						
pH (median)	7.3		STD. UNITS	6.5-8.0	6.5-8.0	
C.O.D.	8.4		mg/l			
T.S.S.	25.53		lbs/day	9.0	18	
Tot. Chromium	0.1		mg/l	0.3		
Infrared Oil & Grease	5.92		lbs/day	3.3	9.3	
Flow	0.696		M.G.D.			

Fred E. Tibbetts, III

Laboratory Supervisor
Fred E. Tibbetts, III, PhD., CPC

tibbetts engineering corp., ANALYTICAL LABORATORY DIVISION

Job No. 5540
Date 4/9/86

Commonwealth of Massachusetts Certified Laboratory Number: 20153

ADDITIONAL ANALYSIS (Mg. PER Liter)

Client The Acushnet Co., Rubber Division, Plant B
Project N.P.D.E.S. Permit Monitoring - Month of March, 1986

Source A- 21" drainpipe empting into the Acushnet River - 001 outfall
Source B
Source C- units expressed
Source D- N.P.D.E.S. Permit Limits July 7, 1976 - May 1, 1980 - Daily Average
Column E- " " " " " - Daily Maximum
Column F

	A	B	C	D	E	F
Sample No.	S6091A			AVG.	MAX.	
Date of Collection	3/31-4/1/86					
Type of Sample	Compos					
Time of Collection	10 AM-8 AM					
Collector	Client					
Date Received	4/1/86					
Temperature °C						
pH (median)	7.3		Std. Units	6.5 - 8.0	6.5 - 8.0	
C.O.D.	18.9		mg/l			
T.S.S.	10.8		lbs/day	9.0	18	
Tot. Chromium	<0.09		mg/l	0.3		
Infrared Oil & Grease	1.75		lbs/day	3.3	9.3	
Flow	0.679		M.G.D.			

Fred E. Tibbetts, III
Laboratory Supervisor
Fred E. Tibbetts, III, PhD., CPC

tibbetts engineering corp., ANALYTICAL LABORATORY DIVISION

Page 2
Job No. 5540
Date 5/23/86

Commonwealth of Massachusetts Certified Laboratory Number: 20153

ADDITIONAL ANALYSIS (Mg. PER Liter)

Client The Acushnet Co., Rubber Division, Plant B
Project N.P.D.E.S. Permit Monitoring, APRIL, 1986

Source A- 21" drainpipe empting into the Acushnet River - 001 outfall
Source B
Source C- units expressed
Source D- N.P.D.E.S. Permit Limits July 7, 1976 - May 1, 1980 - Daily Average
Column E- " " " " " - Daily Maximum
Column F

	A	B	C	D	E	F
Sample No.	S6112C			AVG.	MAX.	
Date of Collection	4/21-22/86					
Type of Sample	COMPOS.					
Time of Collection	9:AM-7:AM					
Collector	CLIENT					
Date Received	4/22/86					
Temperature °C						
pH (median)	6.6		Std. Units	6.5 - 8.0	6.5 - 8.0	
C.O.D.	9.3		mg/l			
T.S.S.	45.7		lbs/day	9.0	18	
Tot. Chromium	<0.1		mg/l	0.3		
Infrared Oil & Grease	7.8		lbs/day	3.3	9.3	
Flow	0.548		M.G.D.			

Fred E. Tibbetts III
Laboratory Supervisor

RECEIVED
MAY 27 1986
RC

TIBBETTS ENGINEERING CO.
☒ 210 Deane Street
New Bedford, Mass. 02746
Tel: (617) 996-5633
☐ 303 Rodman Street
Fall River, Mass. 02721
Tel: (617) 676-1710

JUN 9 1986 H. R.

LETTER OF TRANSMITTAL

DATE June 6, 1986	JOB NO. 7808
ATTENTION Mr. Bailey	
RE: Discharge flow measurement thru 001 outfall – May 29-30, 1986.	

TO Mr. John J. Bailey, Jr., C.S.P.
Manager - Safety & Security
The Acushnet Co., Rubber Div.
P.O. Box E 916
New Bedford, Ma. 02742

WE ARE SENDING YOU ☒ Attached ☐ Under separate cover via _____ the following items:

☐ Shop drawings ☐ Prints ☐ Plans ☐ Samples ☐ Specifications
☐ Copy of letter ☐ Change order ☐ _____

COPIES	DATE	NO.	DESCRIPTION
1	5/29-30/86		Flow recorder chart with calculated volume figure.

THESE ARE TRANSMITTED as checked below:

☐ For approval ☐ Approved as submitted ☐ Resubmit _____ copies for approval
☒ For your use ☐ Approved as noted ☐ Submit _____ copies for distribution
☐ As requested ☐ Returned for corrections ☐ Return _____ corrected prints
☐ For review and comment ☐ _____
☐ FOR BIDS DUE _____ 19 _____ ☐ PRINTS RETURNED AFTER LOAN TO US

REMARKS Mr. Bailey, Enclosed is the above referenced report. Per our telephone talk of earlier this week, we are tentatively scheduling June 25-26 for the June, 1986 flow measurement. We will hear from you about confirming that date later this month. Also, I understand that you are exploring ways to measure this discharge volume by the end of this summer useing your own equipment and personnel.
Sent with best regards.

COPY TO _____

SIGNED: Fred E. Tibbetts III

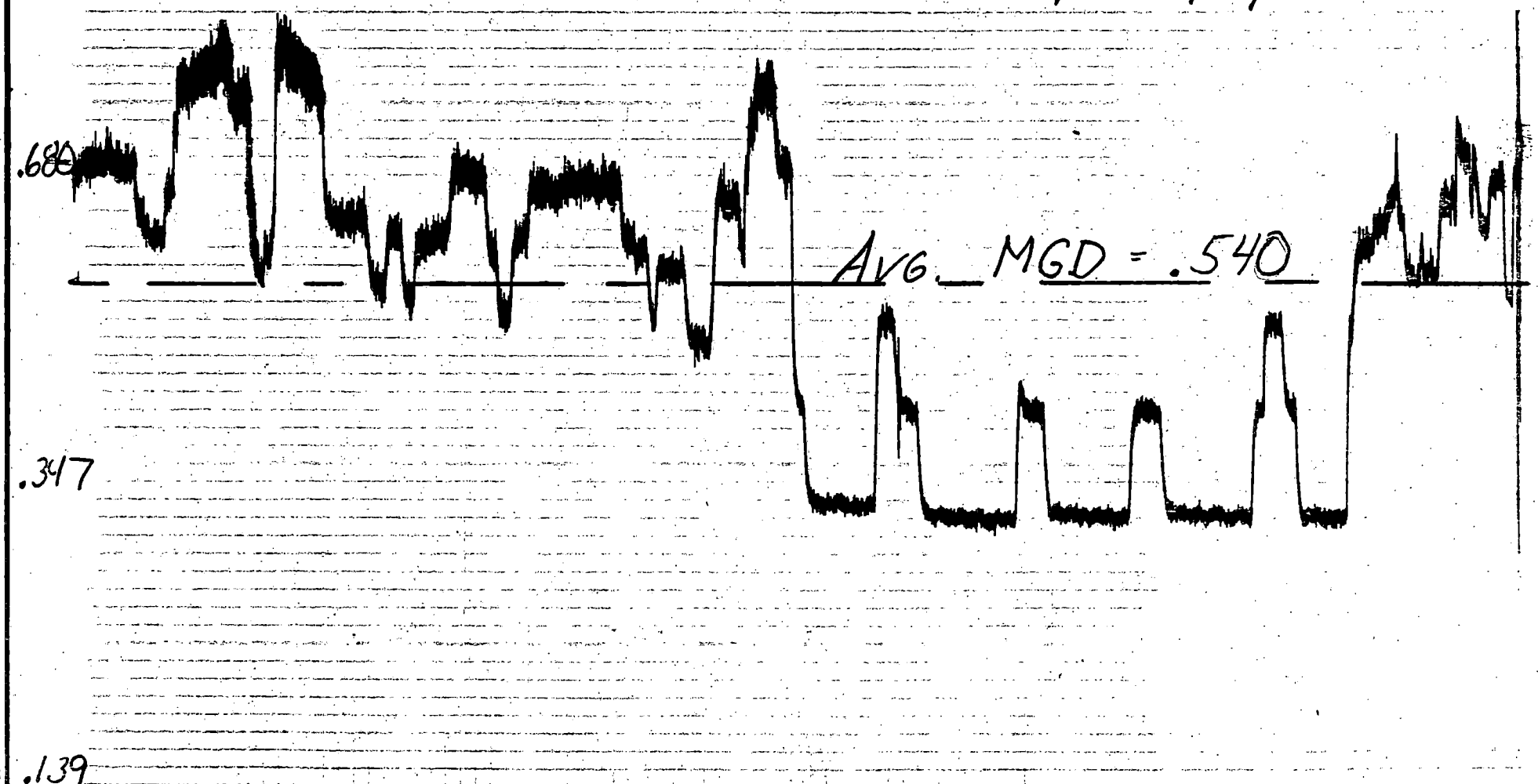
If enclosures are not as noted, kindly notify us at once.

PRODUCT 240-2 NEBS Inc., Groton, Mass. 01471.

DR. FRED E. TIBBETTS LAB DIRECTOR
TIBBETTS ENGINEERING CORP.
210 DEANE STREET
NEW BEDFORD, MASS. 02746

Tibbetts Engineering Corp.
210 Deane Street
New Bedford, MA

Acushnet Co. Flow
Job No. 7808
5/29 - 5/30/86



Date	pH City Water 1983
2 Jan	9.0
6 Jan	8.6
9 Jan	8.7
12 Jan	8.8
16 Jan	8.4
24 Jan	9.1
30 Jan	8.5
6 Feb	9.4
13 Feb	9.0
21 Feb	9.4
1 Mar	9.4
7 Mar	8.7
13 Mar	9.2
20 Mar	9.1
29 Mar	8.9
3 Apr	9.1
11 Apr	8.2
17 Apr	9.1
24 Apr	9.1
1 May	9.2
8 May	9.0
15 May	9.3
22 May	9.3
29 May	9.0
5 Jun	8.4
12 Jun	8.3
19 Jun	8.2
26 Jun	8.8
10 Jul	8.9
17 Jul	8.5
24 Jul	8.6
1 Aug	9.0
21 Aug	9.2
28 Aug	8.4
4 Sep	8.6
11 Sep	8.6
18 Sep	7.8
25 Sep	8.4
3 Oct	8.4
10 Oct	8.8
16 Oct	8.6
24 Oct	8.2
30 Oct	8.5
6 Nov	8.5
13 Nov	9.0
20 Nov	8.6
27 Nov	8.7
4 Dec	8.9

TIBBETTS ENGINEERING CORP.
210 Deane Street
New Bedford, Mass. 02746
Tel: (617) 996-5633
303 Rodman Street
Fall River, Mass. 02721
Tel: (617) 676-1710

LETTER OF TRANSMITTAL

DATE	JOB NO.
July 1, 1986	7808

ATTENTION: Mr. Bailey

RE: Discharge flow measurement thru 001 outfall - June 19-20, 1986

TO Mr. John J. Bailey, Jr., C.S.P.
Manager - Safety & Security
The Acushnet Co., Rubber Division
P.O. Box E916
New Bedford, Massachusetts 02742

WE ARE SENDING YOU ☒ Attached ☐ Under separate cover via _____ the following items:

☐ Shop drawings ☐ Prints ☐ Plans ☐ Samples ☐ Specifications
☐ Copy of letter ☐ Change order ☐ _____

COPIES	DATE	NO.	DESCRIPTION
1	6/19-20/86		Flow recorder chart with calculated volume figure.

THESE ARE TRANSMITTED as checked below:

☐ For approval ☐ Approved as submitted ☐ Resubmit _____ copies for approval
☒ For your use ☐ Approved as noted ☐ Submit _____ copies for distribution
☐ As requested ☐ Returned for corrections ☐ Return _____ corrected prints
☐ For review and comment ☐ _____
☐ FOR BIDS DUE _____ 19 _____ ☐ PRINTS RETURNED AFTER LOAN TO US

REMARKS Mr. Bailey,

Enclosed is the above referenced report. Per our telephone talk of earlier this month, we are tentatively expecting you to do the July, 1986 flow measurement yourselves.

If you need our services for the July measurement, please contact me as soon as possible.

Good Luck and Best Regards.

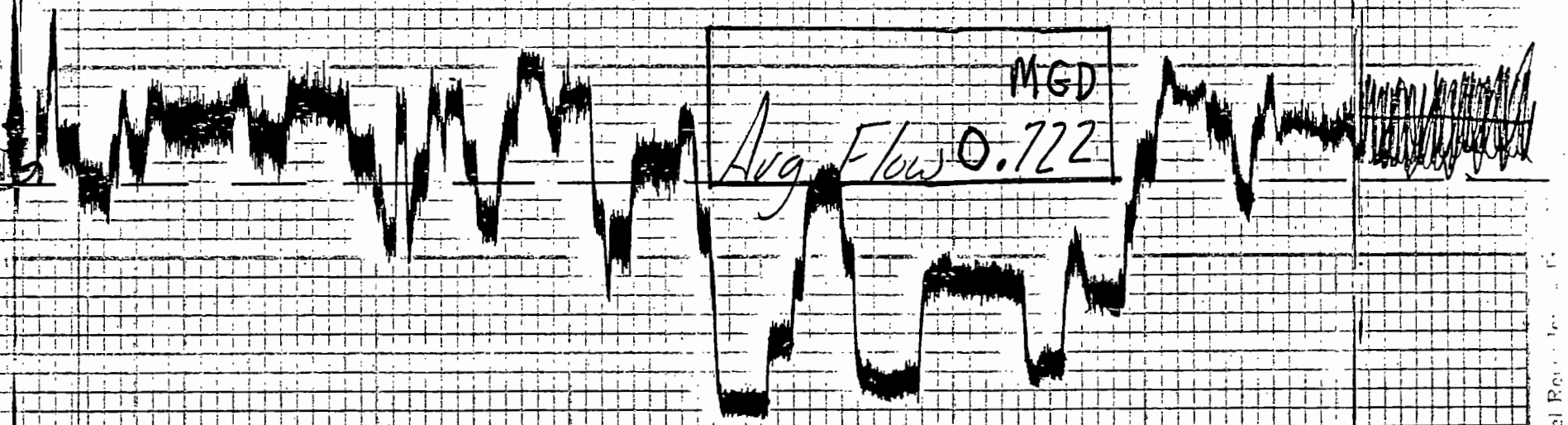
COPY TO _____

SIGNED: Fred E. Tibbetts

If enclosures are not as noted, kindly notify us at once.

PRODUCT 240-2 NEBS Inc. Groton, Mass. 01471

Acushnet Co.
Plant "B"
Job # 7808
June 19th - 20th.



Leopold & Stevens, Inc. Portland, Oregon

TITLEIST GOLF DIVISION
June 9, 1986

Report #CA-86-50R
ALP NO. CR-EV-1
CMP LOG#28-86

TO: Frank Llort

FROM: Claire A. Messier

SUBJECT: Analysis of Plant "B" Non-Contact Cooling Water from the Twenty-one Inch Outfall.

/maw

c: J. Bailey
R. Berard
J. Jepson
Central File
File (1)

TO: Frank Llort

FROM: Claire A. Messier

Analysis of Plant "B" Non - Contact Cooling Water from the Twenty-one Inch Outfall.

J. Bailey submitted twelve glass jar samples collected over a 24 hr. time period on 5/30/86 from the 21 inch outfall.

See request form 28-86.

EXPERIMENTS AND RESULTS

Each sample was inspected and the PH measured individually before compositing. The determination of total suspended solids (TSS), chemical oxygen demand (COD), Chromium (Cr) and oil and grease concentrations were performed on the composite.

A. Determination of Total Suspended Solids (TSS)

This determination was carried out gravimetrically by filtering one liter of the effluent through a glass fiber filter disk. The TSS was determined to be 1.7 mg/1.

B. Determination of Chemical Oxygen Demand (COD)

The amount of oxidizable organic matter, proportional to the potassium dichromate consumption, was measured titrimetrically with ferrous ammonium sulfate. The COD is calculated to be 14.7 mg/1.

C. Determination of Chromium (Cr) Concentration

AA analysis gives a chromium concentration of 0.00 mg/1.

D. Determination of Oil and Grease Concentration

The oil and grease was determined by following the infrared procedure in the Lab Manual #IV-C. The oil and grease concentration is calculated at 1.46 mg/1.

E. Determination of pH

The pH value of this effluent measured on the Fisher Electrometer is

5 AM	7 AM	9 AM	11 AM	1 PM	3 PM	5 PM	7 PM	9 PM	11 PM	1 AM	3 AM
6.6	6.4	7.4	6.7	6.6	6.5	7.9	6.8	6.7	6.5	7.0	6.7

Analysis	Analyst
TSS	- C. Messier
COD	- C. Messier
Cr	- C. Lapointe
O&Gr.	- C. Lapointe
pH.	- C. Lapointe

Total Analysis Time - 8 hrs.

Total Analysis Cost - $200.00

cont'd.

Analysis of Plant "B" Non - Contact Cooling Water from the Twenty-one Inch Outfall.

Summary

The analytical results obtained for this effluent are listed below:

Analysis	Results in mg/l.	*Results in lbs/day	Max. Limit
TSS	1.7	7.6	9.0-18.0 lbs./day
COD	14.7	—	3.3-16.3 mgs./day
Cr	0.00	0	0.03 mg/l.
Oil & Grease	1.46	6.5	3.3- 9.3 lbs./day
pH Ave.	6.8	—	6.5- 8.0

*The results listed in this column are computed by the amount of effluent outflow for the day the samples were taken. * The amount of daily water flow was not received.

0.540 Mgd/day

Claire A. Messier

Claire A. Messier

CM:maw

TITLEIST GOLF DIVISION
July 11, 1986

Report #CA-86-60R
ALP NO. CR-EV-4
CMP LOG NO. 34-86

TO: Frank Llort

FROM: Claire A. Messier

SUBJECT: Analysis of Rain Water and Two -Roof Drains at Plant B.

/maw

c: J. Bailey ✓
R. Berard
J. Jepson
Central File
File (1)

Analysis of Rain Water and Two-Roof Drains at Plant B.

J. Bailey submitted three samples (1-rain water, 2-roof drain #1, and 3-roof drain #2) for analysis (see request form dated 7-2-86).

EXPERIMENTS AND RESULTS:

A. Determination of PH

The PH value of these samples were measured on the Fisher Electrometer. Results are below:

Sample #	PH
1	7.1
2	6.5
3	6.4

B. Determination of Oil and Grease

The oil and grease values were analyzed following the procedures in Storet No. 00560 and in the Manual No. AM II-E-7. Results are below:

Sample #	Oil and Grease (mgs./l)
1	0.12
2	0.12
3	2.74

Analysis	Analyst
PH	- C. Messier
Oil & Grease	- C. Messier
Total Analysis Time	- 4 hours
Total Analysis Cost	- $100.00

Summary:

The rain water sample #1 was neutral (7.1) but samples #2 and #3 from the roof drains are slightly acidic at 6.5 and 6.4

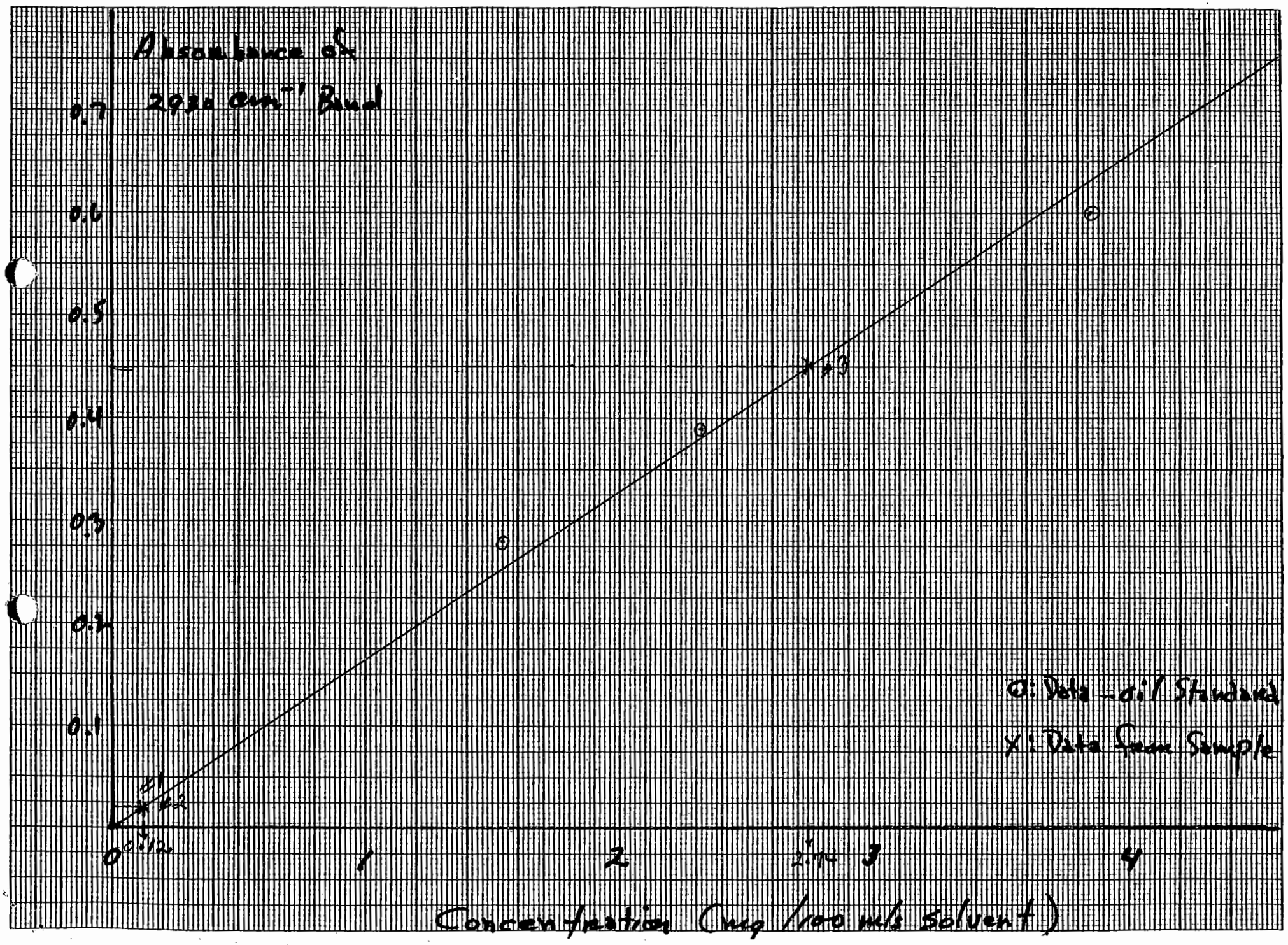
The oil and grease value of sample #1 and #2 are negligible at 0.12 mgs./l. Sample #3 has a value of 2.71 mgs./l. There appears to be contaminates flowing from this drain.

Signed Claire A. Messier
Claire A. Messier

CM:maw

TELEDYNE
NATIONAL TRACING PAPER
INDIANAPOLIS, INDIANA

NO. 2301TGM MILLIMETER
LITHO IN U.S.A.



CC: J. Walder

LOG NO. 34/86

[X] CMP

[ ] E'CAST

[ ] O'RING

DATE: 7-2-86

TO: Frank Llort

REQUESTED BY: Jack Bailey

DEPT.: Research Lab

REQUEST: Please analyze 3 samples for PH and inferred oil and grease.
Sample 1 - rain water
Sample 2 - roof drain # 1
Sample 3 - roof drain # 2

REASON: Information required for permit application - EPA River Discharge

SPECIFICS (if any):

EST. COMPLETION DATE:

ACTUAL COMPLETION DATE:

EST. TOTAL COST: $

ACTUAL TOTAL COST: $

Material $

Labor $

Other $

REMARKS: Thank you

APPROVED BY: Jack Bailey

DATE: 7-2-86

TITLEIST GOLF DIVISION
July 28, 1986

Report #CA-86-68R
ALP NO. CR-EV-2

TO: Frank Llort

FROM: Claire A. Messier

SUBJECT: Supplemental Report to Analysis of Non-Contact Cooling Water from the Twenty-One Inch Outfall (Report CA-86-67R)

/mw

cc: J. Bailey
R. Berard
J. Jepson
Central File
File (1)

EXPERIMENTS AND RESULTS:

The determination was carried out by following the Azide Modification of Winkler Method. Listed below are the results obtained for the five dilutions and their average value.

Dilutions	BOD (mgs/l)
1	5.2
2	1.0
3	3.0
4	1.4
5	1.0
Average 2.3	13.7 LBS/DAY

Total Analysis Time 8 Hours

Total Analysis Cost $200.00

SUMMARY

The analytical results for the BOD were 2.3 mgs/l.

Claire A. Messier

Claire A. Messier

/mw

TITLEIST GOLF DIVISION
July 18, 1986

Report #CA-86-67R
ALP #CR-EV-2
CMP LOG NO. 32-86

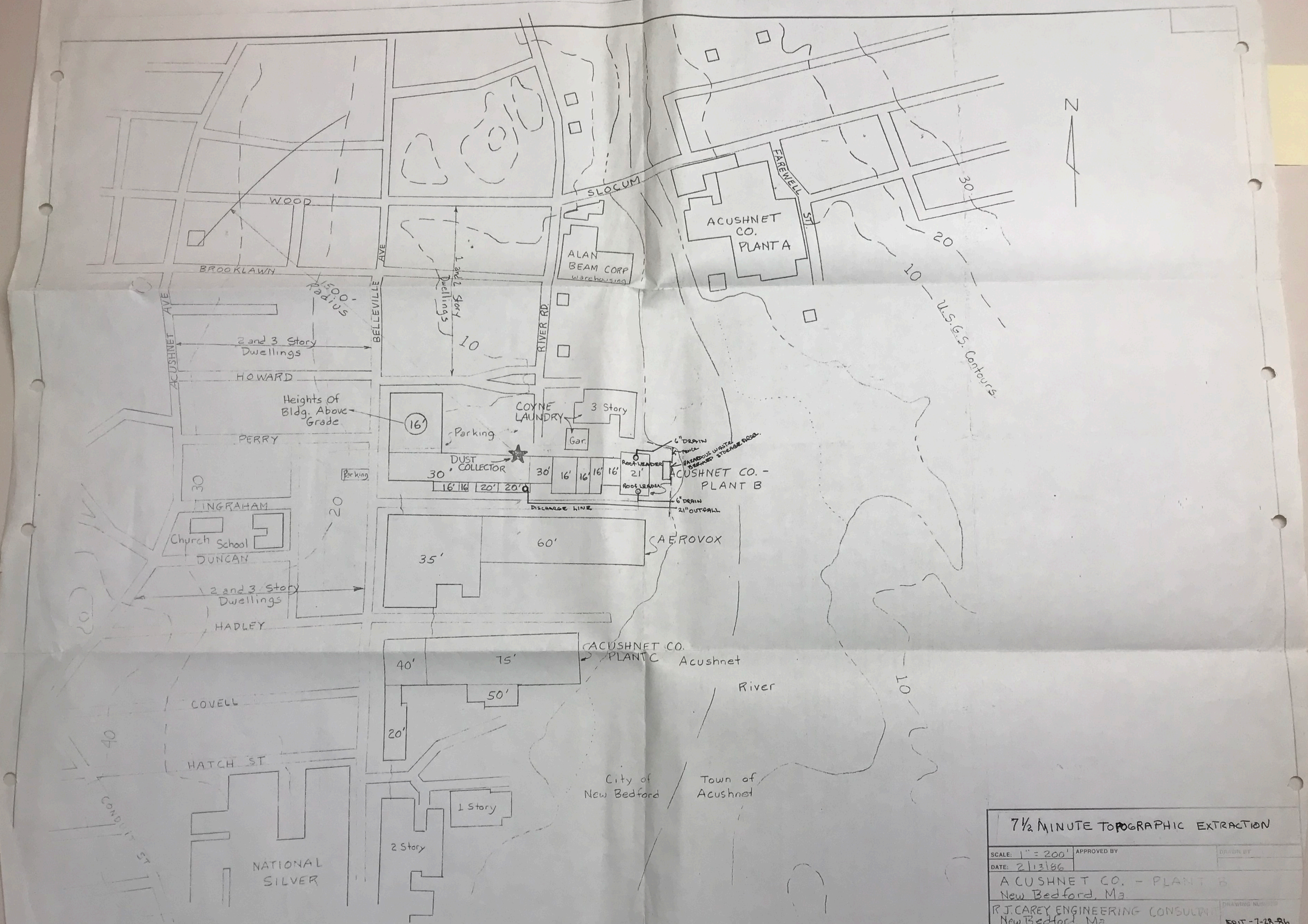
TO: Frank Llort

FROM: Claire A. Messier

SUBJECT: Analysis of Plant "B" Non-Contact Water From the Twenty-one Inch Outfall.

/maw

c: J. Bailey
R. Berard
J. Jepson
Central File
File (1)



7½ MINUTE TOPOGRAPHIC EXTRACTION

SCALE: 1" = 200'	APPROVED BY	DRAWN BY
DATE: 2/13/86		

ACUSHNET CO. - PLANT B
New Bedford, Ma

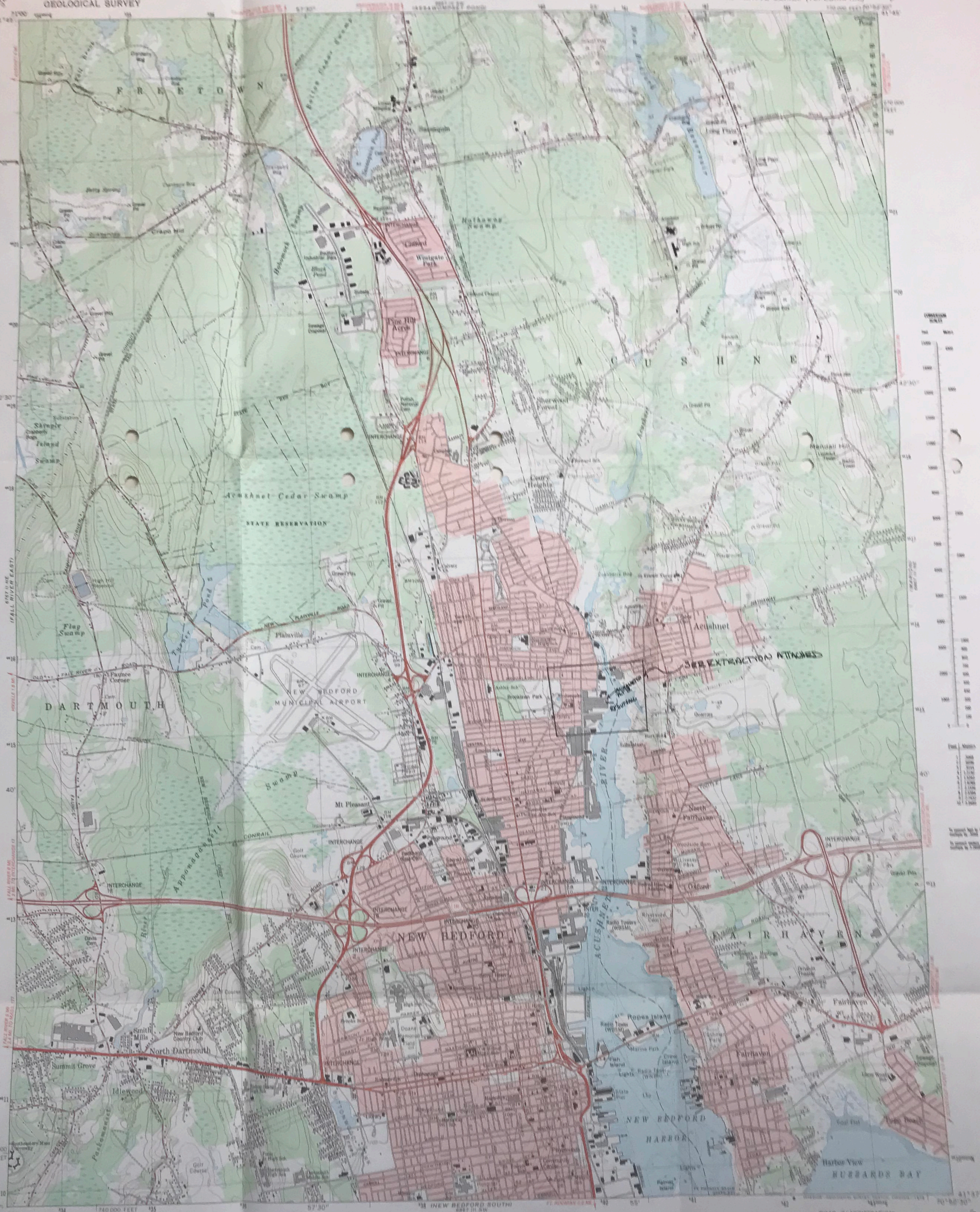
R J. CAREY ENGINEERING CONSULTANTS
New Bedford, Ma

DRAWING NUMBER
EOIT - 7-28-86

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC WORKS

NEW BEDFORD NORTH QUADRANGLE
MASSACHUSETTS
7.5 MINUTE SERIES (TOPOGRAPHIC)



Mapped, edited, and published by the Geological Survey

Control by USGS, NOS/NOAA, and Massachusetts Geodetic Survey

Topography by planetable surveys 1936 Revised 1964
Revised 1975 from aerial photographs taken 1974
Field checked 1975 Map edited 1979

Selected hydrographic data compiled from NOS 353 (1973)
This information is not intended for navigational purposes

Polyconic projection. 1927 North American Datum
To place on the predicted North American Datum 1983
move the projection lines 6 meters south and
42 meters west as shown by dashed corner ticks
10,000-foot grid based on Massachusetts coordinate system, mainland zone
1000-meter Universal Transverse Mercator grid, zone 19

Red tint indicates areas in which only landmark buildings are shown

Boundaries in tidewater areas from information furnished by Massachusetts Department of Public Works

There may be private inholdings within the boundaries of the National or State reservations shown on this map

UTM GRID AND 1979 MAGNETIC NORTH DECLINATION AT CENTER OF SHEET

SCALE 1:25 000

CONTOUR INTERVAL 10 FEET

DEPTH CURVES AND SOUNDINGS IN FEET— DATUM IS MEAN LOW WATER
SHORELINE SHOWN REPRESENTS THE APPROXIMATE LINE OF MEAN HIGH WATER
THE MEAN RANGE OF TIDE IS APPROXIMATELY 3.2 FEET

THIS MAP COMPLIES WITH NATIONAL MAP ACCURACY STANDARDS
FOR SALE BY U. S. GEOLOGICAL SURVEY, RESTON, VIRGINIA 22092
A FOLDER DESCRIBING TOPOGRAPHIC MAPS AND SYMBOLS IS AVAILABLE ON REQUEST

QUADRANGLE LOCATION

ROAD CLASSIFICATION

Primary highway, hard surface — Light-duty road, hard or improved surface
Secondary highway, hard surface — Unimproved road
Interstate Route — U. S. Route — State Route

NEW BEDFORD NORTH, MASS.
N4132.5—W7052.5/7.5
1979
DMA 6867 III NW—SERIES V814

THE ACUSHNET CO PLANT B
21" OUTFALL TO THE ACUSHNET RIVER

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

8/11/86

Mr. John J. Bailey Jr.
Acushnet Company
Rubber Division - Plant B
P.O. Box E-916
New Bedford, MA 02742

Re: NPDES Reapplication No. MA0003913

Dear Mr. Bailey:

Your reapplication for a National Pollutant Discharge Elimination System (NPDES) permit has been reviewed and appears to be complete. You may be contacted for additional information as the permit is developed, should it be necessary to clarify, modify or supplement any previously submitted information. By copy of this letter, your State Water Pollution Control Agency is being furnished a copy of your complete application for certification pursuant to Section 401(a)(1) of the Clean Water Act, as amended, 33 U.S.C §1341(a)(1).

A draft permit and statement of basis or fact sheet will be prepared by this office and forwarded to you for comment prior to the opening of the public comment period. The draft permit will then be publicly noticed and forwarded for state certification if certification has not previously been received on the application. If it is deemed necessary, a public hearing will be held, in which case, the comment period will be extended until the close of the hearing. After the close of the public comment period, your final permit will be issued providing no new substantial questions are raised. If new questions develop during the comment period, it may be necessary to draft a new permit, revise the statement of basis or fact sheet and/or reopen the public comment period.

The conditions of your present permit will continue in force until your new permit is issued and becomes effective since you have filed a timely and complete application. 40 C.F.R. §122.6, 48 Fed. Reg. 14158 (April 1, 1983).

The waiver of testing requirements requested in your application of July 28, 1986 has been granted for the following outfalls and parameters: Outfall 001 - TOC, Outfalls 002 and 003 - BOD, COD, TOC, TSS and Ammonia.

CONCURRENCES

SYMBOL	JW/CB	JW/CB						
SURNAME	S. Pulco	Harrington						
DATE	8/8/86	8/11/86						

EPA Form 1320-1 (12-70) OFFICIAL FILE COPY

Should you have any questions concerning the permit issuance process, don't hesitate to contact Nanci Siciliano of my staff. She may be reached at 617/565-3529.

Sincerely yours,

Edward K. McSweeney, Chief
Compliance Branch

cc: State Water Pollution Control Agency w/encl.

EPA:1W:WCI:N.Siciliano/ag/8-8-86/disk Ltr III #14

CONCURRENCES

SYMBOL								
SURNAME								
DATE								

norandum

te: 7/31/86

om: Nancy

To: Ken

Major	[ ]	Minor	[ ]
Primary	[ ]	Secondary	[ ]
Existing Reapp	[X]	Existing w/o Permit	[ ]
New Source	[ ]	New Discharge	[ ]
Recommencing	[ ]		
RCRA Applicant		YES [ ] NO [ ]	

bj: Review of Reapplication/Application Forms for NPDES No. MA0003913

The attached application form(s) has been reviewed and the following deficiencies noted:

~~Operator information~~ Complete # ~~13~~ 14

The waiver of testing requirements requested in your application of July 28, 1986 has been granted for the following outfalls and parameters: outfall 001 - TOC, outfalls 002 and 003 - BOD, COD, TOC, TSS and Ammonia

This should go out before the public notice is sent. The file is being routed around for 30 day letter, state cert. & public notice.

Priority -
Give this information to Ann so she can hold until the file gets to her.

Additional comments:

Please evaluate the above listed discrepancies and comments and return this file to me by so that a letter of deficiend can be forwarded to the applicant. If your review surfaces any additional deficiencies, please indicate in the space provided below. All comments should be signed since this memorandum will eventually become a part of the permit file.

The applicant has/has not requested additional time for the submittal of toxics data. The notice of deficiency will grant an extension until for submittal of this data.

I concur with the deficiencies listed above and the timeframe for submittal of toxics data. The following deficiencies should also be included in the notice of deficiency: (Use additional sheet if more space is needed.)

Signed _____ Date _____

Appropriate changes have been made to the information system.

Signed _____ Date _____

REPORT OF A PHONE CALL
or VISIT

In _____ Out _____ File MA003913

Date 7/31/86 Time _____ Routing _____

Person Contacted Jack Bailey

Phone No. 997-2811

Location _____

Subject Acushnet Company

Summary Jack said the V.P. would not be in until Monday and he would have him sign the Form 1 and send it to me. Also - he will correct the operator information.

Action Required _____

Signature Nancy Sullivan

EPA Graphics 5/27/80

ACUSHNET COMPANY

RUBBER DIVISION • P.O. BOX E916, NEW BEDFORD, MASS. 02742 • TEL. (617) 997-2811

M 19421

SOLD TO

Nanci Siciliano
Compliance Supervisor
U.S. Environmental Protection Agency
Region I
J.F. Kennedy Federal Bldg.
Boston, MA 02203

SHIP TO

INVOICE NUMBER

	NO.	WEIGHT	DATE SHIPPED	CRED. DEPT. O. K.
BOXES			7/29/86	
PKGS.	1	2		

P.P.	EXP.	FGHT.	CHARGES $

INVOICE DATE

SHIPPED VIA

DATE SHIPPED

DATE ENTERED	CUSTOMER'S ORDER NUMBER	CUST. REQ. NO.	F.O.B. dest	TERMS:	SALESMAN

QUANTITY BACK ORDERED	QUANTITY ORDERED	QUANTITY SHIPPED	MATERIAL DESCRIPTION
		1	Envelop

ASSEMBLED BY	CHECKED BY	PACKED BY	SHIPPED BY

Examine Packing Carefully

THESE GOODS HAVE BEEN CHECKED THREE TIMES AND BY DIFFERENT MEN. ALL CLAIMS FOR ERRORS MUST BE ACCOMPANIED BY THIS SHEET.

Positively No Claim

WILL BE INVESTIGATED OR ALLOWED UNLESS THIS SHEET IS RETURNED WITH CLAIM WITHIN TEN DAYS FROM RECEIPT OF GOODS.

PACKING LIST

FORM NO. 11-44-29 REV. 2/76

ACUSHNET COMPANY, NEW BEDFORD, MASS. 02742

ACUSHNET COMPANY

July 29, 1986

Ms. Nanci Siciliano
Compliance Supervisor
U.S. Environmental Protectio
Region I
J.F. Kennedy Federal Bldg.
Boston, MA 02203

MA0003913
updated
APP.

Dear Nanci:

Please find our completed forms 1 and 2C enclosed. We hope that the information contained and supplementary test data will be sufficient to comply with title 40 permit regulations.

Please contact me directly if you have questions or require additional information.

Thank you for your help and advise in completing the discharge permit requirements.

Sincerely,

ACUSHNET COMPANY

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

JJB/rg

RECEIVED - EPA
JUL 30 1986
COMPLIANCE BRANCH

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

VISIT

In _____ Out _____

File MA0003913

Date 8/11/86 Time _____

Routing Acushnet Rubber

Person Contacted Jack Bailey

Phone No. 617-997-2811

Location _____

Subject What is meant by partial contact cooling

Summary Mr. Bailey stated that the metal belt does contact the rubber via the metal belt which contacts the water. The bottom half of the conveyor is in water, the rubber is on the top. So there is some contact with the rubber to the water. Water is sprayed onto the belt from the sides. The metal belt circulates through the water. Oil that may be present is lubricating oil due to leakage from the gear system.

Action Required _____

EPA Graphics 5/27/80

Signature Shelley Parker

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

June 26, 1986

Mr. Jack Baily
Acushnet Company
744 Belleville Avenue
New Bedford, MA 02745

RE: NPDES Application No. MA0003013

Dear Mr. Baily:

Within the next few months we expect to draft a permit for your facility. However, before this can be done you must provide us with current information relative to your facility's discharge. The Environmental Permit Regulations under Title 40, Code of Federal Regulations Part 122 dated April 1, 1983 require existing dischargers to apply for a permit using Forms 1 and 2C. These forms are enclosed for your use and should be properly filled in and returned to this office within 30 days from receipt of this letter so that the permit issuance process can begin.

Should you have any questions concerning these application requirements do not hesitate to contact Nanci Siciliano of my staff. She may be reached at 617/223-3940.

Sincerely,

Edward K. McSweeney, Chief
Compliance Branch

Enclosure

cc: State Water Pollution Control Agency

EPA:1W:N.Siciliano personal disk CB/06-25-86/

CONCURRENCES

SYMBOL	1W/CB	1W/CB						
SURNAME	Siciliano	Harrington						
DATE	6/26/86	6/26/86						

EPA Form 1320-1 (12-70) OFFICIAL FILE COPY

*U.S. GPO : 1984-436-836

REPORT OF A PHONE CALL
or VISIT

In _____ Out _____ File MA0003013

Date 6/24/86 Time _____ Routing _____

Person Contacted Jack Baily

Phone No. _____

Location Acushnet Company

Subject Type of Wastewater

Summary He stated that the Rubber extruder - extrude onto a conveyor belt which is like a tread mill - the lower half is emersed in water and constantly being replenished - forms as a thin layer of water on the metal belt - which goes into the drain the water does not come in contact with the products It is not a contact water.

Action Required

EPA Graphics 5/27/80

Signature Nanci Sicilano

Accusher Rubber, New Bedford

contact person

Jack Baily. — 2 extraction belt like, rubber will place on the belt & the rubber is not in contact with the H_2O. The belt, however, does.

— Mostly oily lish.

— Need to send forms — will be issuing permit.

Ken does not want to mention the fact that we will reissue in case he doesn't make it for this year.

RECEIVED
AUG
... CORP.
BY

OMB NO. 49-R 0400

DEPARTMENT OF THE ARMY, CORPS OF ENGINEERS

APPLICATION FOR PERMIT TO DISCHARGE OR WORK IN NAVIGABLE WATERS AND THEIR TRIBUTARIES

SECTION I. GENERAL INFORMATION

1. State	Application Number (to be assigned by Corps of Engineers)			
MA	071	000	3	000253
	Div.	Dist.	Type	Sequence No.

2. Name of applicant and title of signing official
T. C. Weaver, Vice President

3. Mailing address of applicant
Acushnet Company - Rubber Division
744 Belleville Avenue
New Bedford, Mass.

4. Name, address, telephone number and title of applicant's authorized agent for permit application coordination and correspondence.
Richard L. Silviera, Project Engineer
Tibbetts Engineering Corp.
620 Belleville Ave.
New Bedford, Mass. 02745
996-5633

NOTE TO APPLICANT: Refer to the pamphlet entitled "Permits for Work and Structures in and for Discharges or Deposits into Navigable Waters" before attempting to complete this form.

Required Information

a. All information contained in this application will, upon request, be made available to the public for inspection and copying. A separate sheet entitled "Confidential Answers" must be used to set out information which is considered by the applicant to constitute trade secrets or commercial or financial information of a confidential nature. The information must clearly indicate the item number to which it applies. Confidential treatment can be considered only for that information for which a specific written request of confidentiality has been made on the attached sheet. Moreover, in no event will identification of the contents and frequency of a discharge be recognized as confidential or privileged information.

b. The applicant shall furnish such supplementary information as is required by the District Engineer in order to evaluate fully an application.

c. If additional space is needed for a complete response to any item on this form, attach a sheet entitled "Additional Information." Indicate on that sheet the item numbers to which answers apply.

d. Drawings required by items 20 and 21 should be attached to this application. Other papers which must be attached to this application include, if applicable, copies of a water quality certification or a written communication which describes water quality impact (see Item 22 and Item 10 of Section II below), the additional information sheet(s) in "c" above, and the confidential information sheet described in "a" above.

Fees

If any discharge or deposit is involved, an application fee of $100 must be submitted with this application. An additional $50 is required for each additional point of discharge or deposit.

Signature

a. If a discharge is involved, an application submitted by a corporation must be signed by the principal executive officer of that corporation or by an official of the rank of corporate vice president or above who reports directly to such principal executive officer and who has been designated by the principal executive officer to make such applications on behalf of the corporation. In the case of a partnership or a sole proprietorship, the application must be signed by a general partner or the proprietor. Other signature requirements are discussed in the pamphlet.

b. If no discharge is involved, an application may be signed by the applicant or his authorized agent.

Application is hereby made for a permit or permits to authorize the activities described herein. I certify that I am familiar with the information contained in this application, and that to the best of my knowledge and belief such information is true, complete, and accurate.

Signature of Applicant

18 U.S.C. Section 1001 provides that:

Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and wilfully falsifies, conceals or covers up by any trick, scheme, or device a material fact, or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than $10,000 or imprisoned not more than five years, or both.

FOR CORPS OF ENGINEERS USE ONLY

Acronym name of applicant

Are discharge structures
Major? ☐ Minor? ☐ N/A? ☐

Date received, form not complete — — — — — —
Date received, form complete but without certificate — — — — — —
Date received, form complete — — — — — —
Date of Cert./Ltr. — — — — — — (day mo yr)

Date sent to EPA, form not complete — — — — — —
Date sent to EPA, NOAA, D/I, AEC, FPC in complete form — — — — — — (day mo yr)

5. Date July 9 71
mo day

(Office use) 0258

6. Check type of application: a. Original [X] b. Revision [ ]

7. Number of original application

8. Name of facility where discharge or construction will occur.

Acushnet Company - Rubber Division

9. Full mailing address of facility named in item 8 above.

744 Belleville Avenue
New Bedford, Mass. 02745

10. Names and mailing addresses of all adjoining property owners whose property also adjoins the waterway.

Aerovox Corporation
742 Belleville Ave.
New Bedford, Mass. 02745

11. Check to indicate the nature of the proposed activity:
a. Dredging [ ] b. Construction [ ] c. Construction with Discharge [X] b. Discharge only [ ]

12. If activity is temporary in nature, estimate its duration in months.

N/A

If application is for a discharge:

13. List intake sources

Source	Estimated Volume in Million Gallons Per day or Fraction Thereof
Municipal or private water supply system	1.2 2
Surface water body	0.0 0
Ground water	0.0 0
Other	0.0 0

14. Describe water usage within the plant

Type	Estimated Volume in Million Gallons Per day or Fraction Thereof	
Cooling water	0.6 0	0.60 **
Boiler Feed water	0.0 1	0.01 **
Process water	0.4 0	0.40 **
Sanitary system*	0.0 5	0.05 **
Other	0.1 6	0.16 **

15. List volume of discharges or losses other than into navigable waters.

Type	Estimated Volume in Million Gallons Per day or Fraction Thereof	
Municipal waste treatment system	0.5 4	0.57 **
Surface containment	0.0 0	
Underground disposal	0.0 0	
Waste Acceptance firms	0.0 0	
Evaporation	0.0 0	
Consumption	0.0 0	

* Indicate number employees served per day 977

** Corrected 8/16/71

If structures exist, or dredging, filling or ot onstruction will occur, the precise location of the activity must be desc d.

(Office use on' 2258

a. Name the corporate boundaries within which the structures exist or the activity will occur.

State	County	City or Town
16. Massachusetts	17. Bristol	18. New Bedford

b. Name of waterway at the location of the activity

19. Acushnet River - Map Series V 814

20. Maps and sketches which show the location and character of each structure or activity, including any and all outfall devices, dispersive devices, and non-structural points of discharge, must be attached to this application.

21. For construction or work in navigable waters for which a separate permit is sought under 33 U.S.C. 403, the character of each structure must be fully shown on detailed plans to be submitted with this application. Note on the drawings those structures for which separate discharge information (Section II of this form) has been submitted.

22. List all approvals or denials granted by Federal, interstate, State or local agencies for any structures, construction, discharges or deposits described in this application.

Type of document	Id. No.	Date	Issuing Agency

23. Check if facility existed or was lawfully under construction prior to April 3, 1970. [X]

24. If dredging or filling will occur:

State the type of materials involved, their volume in cubic yards, and the proposed method of measurement.

N/A

25. Describe the proposed method of instrumentation which will be used to measure the volume of any solids which may be deposited and to determine its effect upon the waterway.

The volume of solids deposited is very minimal, as shown in Section II - Part A.

26. State rates and periods of deposition described in Item 25.

Normal periods of deposition occur approximately twice per year for batch discharges.

SECTION II. PLANT PROCESS AND DISCHARGE DESCRIPTION

1. Discharge described below is
a. Present [X] b. Proposed new or changed [ ]

2. Implementation schedule [ ]

(Office use only) 00258

Name of corporate boundaries within which the point of discharge is located.

3. State: Massachusetts
4. County: Bristol
5. City or Town: New Bedford

6. Discharge Serial No. 001

State the precise location of the point of discharge.

7. Latitude 41 Degrees; 40 Min; 30 Sec.
8. Longitude 70 Degrees; 55 Min; 00 Sec.

9. Name of waterway at the point of discharge.
Acushnet River

10. Has application for water quality certification or description of impact been made? If so, give date: No

Date: Jul 12 71 (mo day yr)
Check if certificate is attached to form [ ]
Name Issuing Agency:

11. Narrative description of activity (include terms of general 4-digit Standard Industrial Classification, and specific manufacturing process).

Manufacture of molded rubber products including the process of Banberry Mixing, Mill Mixing, Extrusion, Compression and Injection Molding and various product finishing methods.

12. Standard industrial classification number.
3069

13. Principal product.
Molded Rubber Products

14. Amount of principal product produced per day.
33,000#/Day

15. Principal raw material.
Rubber

16. Amount of principal raw material consumed per day.
36,000#/Day
(Rubber)

17. Number of batch discharges per day.
1/6 Mos.

18. Average gallons per batch discharge.
1100±

19. Date discharge began.
mo day 1950± yr

20. Date discharge will begin.
mo day yr

21. Describe waste abatement practices.

All batch discharges are neutralized prior to discharging Ecount

22. **PHYSICAL DESCRIPTION OF INTAKE WATER AND DISCHARGE**

Intake	Discharge	(Office use only) 007258

Discharge Serial No. 001

Parameter and (Code)	UNTREATED INTAKE WATER (1)	TREATED INTAKE WATER (2)	AVERAGE (DAILY) (3)	MINIMUM (OPERATING YEAR) (4)	MAXIMUM (OPERATING YEAR) (5)	SAMPLE FREQUENCY (6)	CONTINUOUS MONITORING (7)
Flow (Gallons per day) 00056		1,215,000	650,000	650,000	650,000	OTHR.	ABS
pH 00400		7.6	6.9	6.9	6.9	"	"
Temperature (Winter) (°F) 74028		39	80°	75°	85°	"	"
Temperature (Summer) (°F) 74027		67	85°	80°	90°	"	"

23. **DISCHARGE CONTENTS**

PARAMETER	PRESENT	ABSENT	PARAMETER	PRESENT	ABSENT	PARAMETER	PRESENT	ABSENT
Color 00080		X	Aluminum 01105		X	Nickel 01067		X
Turbidity 00070		X	Antimony 01097		X	Selenium 01147		X
Radioactivity 74050		X	Arsenic 01002		X	Silver 01077		X
Hardness 00900		X	Beryllium 01012		X	Potassium 00937		X
Solids 00500		X	Barium 01007		X	Sodium 00929	X	
Ammonia 00610		X	Boron 01022		X	Titanium 01152		X
Organic Nitrogen 00605		X	Cadmium 01027		X	Tin 01102	X	
Nitrate 00620		X	Calcium 00916		X	Zinc 01092		X
Nitrite 00615		X	Cobalt 01037		X	Algicides 74051		X
Phosphorus 00665	X		Chromium 01034	X		Oil and Grease 00550	X	
Sulfate 00945	X		Copper 01042	X		Phenols 32730		X
Sulfide 00745		X	Iron 01045	X		Surfactants 38260		X
Sulfite 00740	X		Lead 01051		X	Chlorinated Hydrocarbons 74052		X
Bromide 71870		X	Magnesium 00927		X	Pesticides 74053		X
Chloride 00940	X		Manganese 01055		X	Fecal Streptococci Bacteria 74054		X
Cyanide 00720		X	Mercury 71900		X	Coliform Bacteria 74056		X
Fluoride 00951		X	Molybdenum 01062		X			

24. Have all known hazardous or potentially hazardous substances in your plant been inventoried?

[X] Yes [ ] No

24b. If yes, have steps been taken to insure that there exists no possibility of any such known hazardous or potentially hazardous substance entering this discharge?

[X] Yes [ ] No

25. Remarks.

The information above completes the basic reporting requirements which are required of all applicants. Those applicants whose discharge results from an activity included within any of the Standard Industrial Classification Code (SIC Code) categories listed below must complete Part A of this form as well.

CRITICAL INDUSTRIAL GROUPS

SIC	098	FISH HATCHERIES, FARMS, AND PRESERVES
SIC	10–14	DIVISION B – MINING
SIC	201	MEAT PRODUCTS
SIC	202	DAIRY PRODUCTS
SIC	203	CANNED PRESERVED FRUITS, VEGETABLES (EXCEPT SEAFOODS, SIC 2031 AND 2036)
SIC	2031, 2036	CANNED AND CURED FISH AND SEAFOODS; FRESH OR FROZEN PACKAGED FISH AND SEAFOODS
SIC	204	GRAIN MILL PRODUCTS
SIC	206	SUGAR
SIC	207	CONFECTIONARY AND RELATED PRODUCTS
SIC	208	BEVERAGES
SIC	209	MISCELLANEOUS FOOD PREPARATIONS AND KINDRED PRODUCTS
SIC	22	TEXTILE MILL PRODUCTS
SIC	23	APPAREL AND OTHER FINISHED PRODUCTS MADE FROM FABRICS AND SIMILAR MATERIALS
SIC	242	SAWMILLS AND PLANING MILLS
SIC	2432	VENEER AND PLYWOOD
SIC	2491	WOOD PRESERVING
SIC	26	PAPER AND ALLIED PRODUCTS
SIC	281	INDUSTRIAL INORGANIC AND ORGANIC CHEMICALS (EXCEPT SIC 2818)
SIC	2818	INDUSTRIAL ORGANIC CHEMICALS
SIC	282	PLASTICS MATERIALS AND SYNTHETIC RESINS, SYNTHETIC RUBBER, SYNTHETIC AND OTHER MAN-MADE FIBERS, EXCEPT GLASS
SIC	283	DRUGS
SIC	284	SOAP, DETERGENTS, AND CLEANING PREPARATIONS, PERFUMES, COSMETICS, AND OTHER TOILET PREPARATIONS
SIC	285	PAINTS, VARNISHES, LACQUERS, ENAMELS, AND ALLIED PRODUCTS
SIC	2871	FERTILIZERS
SIC	2879	AGRICULTURAL PESTICIDES, AND OTHER AGRICULTURAL CHEMICALS, NOT ELSEWHERE CLASSIFIED
SIC	2891	ADHESIVES AND GELATIN
SIC	2892	EXPLOSIVES
SIC	29	PETROLEUM REFINING AND RELATED INDUSTRIES
SIC	3011, 3069	TIRES AND INNER TUBES; FABRICATED RUBBER PRODUCTS, NOT ELSEWHERE CLASSIFIED
SIC	3079	MISCELLANEOUS PLASTICS PRODUCTS
SIC	311	LEATHER TANNING AND FINISHING
SIC	32	STONE, CLAY, GLASS, AND CONCRETE PRODUCTS
SIC	331	BLAST FURNACES, STEEL WORKS, AND ROLLING AND FINISHING MILLS
SIC	332	IRON AND STEEL FOUNDRIES
SIC	333, 334	PRIMARY SMELTING AND REFINING OF NONFERROUS METALS; SECONDARY SMELTING AND REFINING OF NONFERROUS METALS
SIC	336	NONFERROUS FOUNDRIES
SIC	347	COATING, ENGRAVING, AND ALLIED SERVICES
SIC	35	MACHINERY, EXCEPT ELECTRICAL
SIC	36	ELECTRICAL MACHINERY, EQUIPMENT, AND SUPPLIES
SIC	37	TRANSPORTATION EQUIPMENT (EXCEPT SHIP BUILDING AND REPAIRING, SIC 3731)
SIC	3731	SHIP BUILDING AND REPAIRING
SIC	491	ELECTRIC COMPANIES AND SYSTEMS
SIC	493	COMBINATION COMPANIES AND SYSTEMS

PART A

(Note: Submission of Part A is required of all applicants whose processes are listed on page 3 above.)

(Office use only) 00258

Discharge Serial No. 001

INFORMATION REQUIRED OF SPECIFIED INDUSTRIES

Intake	Discharge										
PARAMETER AND CODE	(DAILY AVG. CONCENTRATION) (1) UNTREATED INTAKE WATER	(DAILY AVG. CONCENTRATION) (2) TREATED INTAKE WATER	MAXIMUM CONCENTRATION PER PROCESS UNIT (3)	MAXIMUM POUNDS PER DAY (4)	DAILY AVG. CONCENTRATION (5)	AVERAGE POUNDS PER DAY (6)	SAMPLE TYPE (7)	SAMPLE FREQUENCY (8)	METHOD OF ANALYSIS (9)	CONTINUOUS MONITORING (10)	(11)
ALKALINITY (as Ca CO_3) 00410	21.	N/A	31.	N/A	N/A	31.	N/A	Aver.	OTHR	Stan. Methods	ABS.
B.O.D. 5-DAY 00310	0.6	"	19.	"	"	19.	"	"	"	"	"
CHEMICAL OXYGEN DEMAND (C.O.D.) 00340	5	"	5	"	"	5	"	"	"	"	"
TOTAL SOLIDS 00500	71.	"	102.	"	"	102.	"	"	"	"	"
TOTAL DISSOLVED SOLIDS 70300	69.	"	94.	"	"	94.	"	"	"	"	"
TOTAL SUSPENDED SOLIDS 00530	2.	"	8.	"	"	8.	"	"	"	"	"
TOTAL VOLATILE SOLIDS 00505	11.	"	27.	"	"	27.	"	"	"	"	"
AMMONIA (as N) 00610	0.06	"	0.05	"	"	0.05	"	"	"	"	"
KJELDAHL NITROGEN 00625	0.14	"	0.60	"	"	0.60	"	"	"	"	"
NITRATE (as N) 00620	0.06	"	0.07	"	"	0.07	"	"	"	"	"
PHOSPHORUS TOTAL (as P) 00665	0.03	"	0.10	"	"	0.10	"	"	"	"	"

PART B DISCHARGE DESCRIPTION

(Note: Submission of Part B is required of all applicants who are also required to submit Part A. Only those parameters specifically indicated in the instructions are to be reported by a particular industry)

(Office use only)

Discharge Serial No. 001

B-1. PHYSICAL AND BIOLOGICAL PARAMETERS OF INTAKE WATER AND DISCHARGE (See Table B-1)

Intake	Discharge						
PARAMETER AND CODE	(1) UNTREATED INTAKE WATER	(2) TREATED INTAKE WATER	(3) AVERAGE (DAILY)	(4) MINIMUM (OPERATING YEAR)	(5) MAXIMUM (OPERATING YEAR)	(6) SAMPLE FREQUENCY	(7) CONTINUOUS MONITORING
COLOR 00080	2	N /A	15	X	N/A	0	A
SPECIFIC CONDUCTANCE 00095							
TURBIDITY 00070				X			
FECAL STREPTOCOCCI BACTERIA 74054				X			
FECAL COLIFORM BACTERIA 74055				X			
TOTAL COLIFORM BACTERIA 74056				X			

PART B

(Office use only)

Discharge Serial No. 001

B-2. CHEMICAL PARAMETERS OF INTAKE WATER AND DISCHARGE (See Table B-2)

Intake	Discharge										
PARAMETER AND CODE	UNTREATED INTAKE WATER (1)	TREATED INTAKE WATER (2)	MAXIMUM CONCENTRATION (3)	MAXIMUM POUNDS PER DAY PER PROCESS UNIT (4)	MAXIMUM POUNDS PER DAY (5)	DAILY AVG. CONCENTRATION (6)	AVERAGE POUNDS PER DAY (7)	SAMPLE TYPE (8)	SAMPLE FREQUENCY (9)	METHOD OF ANALYSIS (10)	CONTINUOUS MONITORING (11)	
ACIDITY (as $CaCO_3$) 00435												
TOTAL ORGANIC CARBON (T.O.C.) 00680												
TOTAL HARDNESS 00900												
NITRITE (as N) 00615												
ORGANIC NITROGEN 00605												
PHOSPHORUS-ORTHO (as P) 70507	0.1					0.2		A	O	S	A	*
SULFATE 00945	3.0					5.0		A	O	S	A	*
SULFIDE 00745												
SULFITE 00740	> 2	N/A				> 2		A	O	S	A	
BROMIDE 71870												

ENG FORM 4345-1 JUN 71

* - Added 10/12/71

PART B

(Office use only)

Discharge Serial No. 001

B-2. (cont.) CHEMICAL PARAMETERS OF INTAKE WATER AND DISCHARGE (See Table B-2)

Intake	Discharge										
PARAMETER AND CODE	UNTREATED INTAKE WATER (1)	TREATED INTAKE WATER (2)	MAXIMUM CONCENTRATION (3)	MAXIMUM POUNDS PER DAY PER PROCESS UNIT (4)	MAXIMUM POUNDS PER DAY (5)	DAILY AVG. CONCENTRATION (6)	AVERAGE POUNDS PER DAY (7)	SAMPLE TYPE (8)	SAMPLE FREQUENCY (9)	METHOD OF ANALYSIS (10)	CONTINUOUS MONITORING (11)
CHLORIDE 00940	19					21		A	O	S	A
CYANIDE 00720											
FLUORIDE 00951											
ALUMINUM-TOTAL 01105											
ANTIMONY-TOTAL 01097											
ARSENIC-TOTAL 01002											
BARIUM-TOTAL 01007											
BERYLLIUM-TOTAL 01012									C		
BORON-TOTAL 01022											
CADMIUM-TOTAL 01027											

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(Office use only)

Discharge Serial No. 001

B-2. (cont.) CHEMICAL PARAMETERS OF INTAKE WATER AND DISCHARGE (See Table B-2)

Intake	Discharge										
PARAMETER AND CODE	UNTREATED INTAKE WATER (1)	TREATED INTAKE WATER (2)	MAXIMUM CONCENTRATION (3)	MAXIMUM POUNDS PER DAY PER PROCESS UNIT (4)	MAXIMUM POUNDS PER DAY (5)	DAILY AVG. CONCENTRATION (6)	AVERAGE POUNDS PER DAY (7)	SAMPLE TYPE (8)	SAMPLE FREQUENCY (9)	METHOD OF ANALYSIS (10)	CONTINUOUS MONITORING (11)
CALCIUM-TOTAL 00916											
CHROMIUM-TOTAL 01034	0					0		A	O	S	A
COBALT-TOTAL 01037											
COPPER-TOTAL 01042	0					0		A	O	S	A *
IRON-TOTAL 01045	0					0		A	O	S	A *
LEAD-TOTAL 01051											
MAGNESIUM-TOTAL 00927											
MANGANESE-TOTAL 01055											
MERCURY-TOTAL 71900											
MOLYBDENUM-TOTAL 01062											

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* - Added 10/12/71

PART B

(Office use only)

Discharge Serial No. 001

B-2. (cont.) CHEMICAL PARAMETERS OF INTAKE WATER AND DISCHARGE (See Table B-2)

Intake	Discharge										
PARAMETER AND CODE	UNTREATED INTAKE WATER (1)	TREATED INTAKE WATER (2)	MAXIMUM CONCENTRATION (3)	MAXIMUM POUNDS PER DAY PER PROCESS UNIT (4)	MAXIMUM POUNDS PER DAY (5)	DAILY AVG. CONCENTRATION (6)	AVERAGE POUNDS PER DAY (7)	SAMPLE TYPE (8)	SAMPLE FREQUENCY (9)	METHOD OF ANALYSIS (10)	CONTINUOUS MONITORING (11)
NICKEL-TOTAL 01067											
POTASSIUM-TOTAL 00937											
SELENIUM-TOTAL 01147											
SILVER-TOTAL 01077											
SODIUM-TOTAL 00929	15					40		A	O	S	A *
THALLIUM-TOTAL 01059											
TIN-TOTAL 01102	A					A[a]					*
TITANIUM-TOTAL 01152											
ZINC-TOTAL 01092											
OIL AND GREASE 00550	1.1					22.0		A	O	S	A

ENG FORM JUN 71 4345-1

* – Added 10/12/71

(Office use only)

Discharge Serial No. 001

B-2. (cont.) CHEMICAL PARAMETERS OF INTAKE WATER AND DISCHARGE (See Table B-2)

PARAMETER AND CODE	Intake: UNTREATED INTAKE WATER (1)	Intake: TREATED INTAKE WATER (2)	Discharge: MAXIMUM CONCENTRATION (3)	Discharge: MAXIMUM POUNDS PER DAY PER PROCESS UNIT (4)	Discharge: MAXIMUM POUNDS PER DAY (5)	Discharge: DAILY AVG. CONCENTRATION (6)	Discharge: AVERAGE POUNDS PER DAY (7)	Discharge: SAMPLE TYPE (8)	Discharge: SAMPLE FREQUENCY (9)	Discharge: METHOD OF ANALYSIS (10)	Discharge: CONTINUOUS MONITORING (11)
PHENOLS 32730	0					0		A	O	S	A
SURFACTANTS 38260											
ALGICIDES* 74051											
CHLORINATED HYDROCARBONS* (EXCEPT PESTICIDES) 74052											
PESTICIDES* 74053											

*Name specific compound(s) and fill in the required data for each. Use extra blanks at the end of the form and the "Remarks" space as necessary.

(Office use only)

Discharge Serial No. 001

B-3. RADIOACTIVE PARAMETERS OF INTAKE WATER AND DISCHARGE (See Table B-3)

Intake	Discharge						
PARAMETER AND CODE	UNTREATED INTAKE WATER (1)	TREATED INTAKE WATER (2)	AVERAGE (DAILY) (3)	MINIMUM (OPERATING YEAR) (4)	MAXIMUM (OPERATING YEAR) (5)	SAMPLE FREQUENCY (6)	CONTINUOUS MONITORING (7)
ALPHA-TOTAL 01501				X			
ALPHA COUNTING ERROR 01502				X			
BETA-TOTAL 03501				X			
BETA COUNTING ERROR 03502				X			
GAMMA-TOTAL 05501				X			
GAMMA COUNTING ERROR 05502				X			
TRITIUM-TOTAL 07000				X			
TRITIUM COUNTING ERROR 07001				X			

B-4. REMARKS

0 - Sampling frequency was as found on September 30, 1971

a - By spectrographic analysis - appears to be trace quantity only.

ENG FORM JUN 71 4345-1

PART B. DISCHARGE DESCRIPTION

(Note: Submission of Part B is required of all applicants who are also required to submit Part A. Only those parameters specifically indicated in the instructions are to be reported by a particular industry)

(Office use only)

Discharge Serial No. 001

B-1. PHYSICAL AND BIOLOGICAL PARAMETERS OF INTAKE WATER AND DISCHARGE (See Table B-1)

Intake	Discharge						
PARAMETER AND CODE	UNTREATED INTAKE WATER (1)	TREATED INTAKE WATER (2)	AVERAGE (DAILY) (3)	MINIMUM (OPERATING YEAR) (4)	MAXIMUM (OPERATING YEAR) (5)	SAMPLE FREQUENCY (6)	CONTINUOUS MONITORING (7)
COLOR 00080	2	N /A	15	X	N/A	0	A
SPECIFIC CONDUCTANCE 00095							
TURBIDITY 00070				X			
FECAL STREPTOCOCCI BACTERIA 74054				X			
FECAL COLIFORM BACTERIA 74055				X			
TOTAL COLIFORM BACTERIA 74056				X			

PART B

(Office use only)

Discharge Serial No. 001

B-2. CHEMICAL PARAMETERS OF INTAKE WATER AND DISCHARGE (See Table B-2)

Intake	Discharge										
PARAMETER AND CODE	UNTREATED INTAKE WATER (1)	TREATED INTAKE WATER (2)	MAXIMUM CONCENTRATION (3)	MAXIMUM POUNDS PER DAY PER PROCESS UNIT (4)	MAXIMUM POUNDS PER DAY (5)	DAILY AVG. CONCENTRATION (6)	AVERAGE POUNDS PER DAY (7)	SAMPLE TYPE (8)	SAMPLE FREQUENCY (9)	METHOD OF ANALYSIS (10)	CONTINUOUS MONITORING (11)
ACIDITY (as $CaCO_3$) 00435											
TOTAL ORGANIC CARBON (T.O.C.) 00680											
TOTAL HARDNESS 00900											
NITRITE (as N) 00615											
ORGANIC NITROGEN 00505											
PHOSPHORUS-ORTHO (as P) 70507											
SULFATE 00945											
SULFIDE 00745											
SULFITE 00740	> 2	N/A				> 2		A	O	S	A
BROMIDE 71870											

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B-2. (cont.) CHEMICAL PARAMETERS OF INTAKE WATER AND DISCHARGE (See Table B-2)

Intake	Discharge										
PARAMETER AND CODE	UNTREATED INTAKE WATER (1)	TREATED INTAKE WATER (2)	MAXIMUM CONCENTRATION (3)	MAXIMUM POUNDS PER DAY PER PROCESS UNIT (4)	MAXIMUM POUNDS PER DAY (5)	DAILY AVG. CONCENTRATION (6)	AVERAGE POUNDS PER DAY (7)	SAMPLE TYPE (8)	SAMPLE FREQUENCY (9)	METHOD OF ANALYSIS (10)	CONTINUOUS MONITORING (11)
CHLORIDE 00940	19					21		A	O	S	A
CYANIDE 00720											
FLUORIDE 00951											
ALUMINUM-TOTAL 01105											
ANTIMONY-TOTAL 01097											
ARSENIC-TOTAL 01002											
BARIUM-TOTAL 01007											
BERYLLIUM-TOTAL 01012											
BORON-TOTAL 01022											
CADMIUM-TOTAL 01027											

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B-2. (cont.) CHEMICAL PARAMETERS OF INTAKE WATER AND DISCHARGE (See Table B-2)

Intake		Discharge										
PARAMETER AND CODE	UNTREATED INTAKE WATER (1)	TREATED INTAKE WATER (2)	MAXIMUM CONCENTRATION (3)	MAXIMUM POUNDS PER DAY PER PROCESS UNIT (4)	MAXIMUM POUNDS PER DAY (5)	DAILY AVG. CONCENTRATION (6)	AVERAGE POUNDS PER DAY (7)	SAMPLE TYPE (8)	SAMPLE FREQUENCY (9)	METHOD OF ANALYSIS (10)	CONTINUOUS MONITORING (11)
CALCIUM-TOTAL 00916											
CHROMIUM-TOTAL 01034	0					0		A	O	S	A
COBALT-TOTAL 01037											
COPPER-TOTAL 01042											
IRON-TOTAL 01045											
LEAD-TOTAL 01051											
MAGNESIUM-TOTAL 00927											
MANGANESE-TOTAL 01055											
MERCURY-TOTAL 71900											
MOLYBDENUM-TOTAL 01062											

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B-2. (cont.) CHEMICAL PARAMETERS OF INTAKE WATER AND DISCHARGE (See Table B-2)

Intake	Discharge										
PARAMETER AND CODE	UNTREATED INTAKE WATER (1)	TREATED INTAKE WATER (2)	MAXIMUM CONCENTRATION (3)	MAXIMUM POUNDS PER DAY PER PROCESS UNIT (4)	MAXIMUM POUNDS PER DAY (5)	DAILY AVG. CONCENTRATION (6)	AVERAGE POUNDS PER DAY (7)	SAMPLE TYPE (8)	SAMPLE FREQUENCY (9)	METHOD OF ANALYSIS (10)	CONTINUOUS MONITORING (11)
NICKEL-TOTAL 01067											
POTASSIUM-TOTAL 00937											
SELENIUM-TOTAL 01147											
SILVER-TOTAL 01077											
SODIUM-TOTAL 00929											
THALLIUM-TOTAL 01059											
TIN-TOTAL 01102											
TITANIUM-TOTAL 01152											
ZINC-TOTAL 01092											
OIL AND GREASE 00550	1.1					22.0		A	O	S	A

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B-2. (cont.) CHEMICAL PARAMETERS OF INTAKE WATER AND DISCHARGE (See Table B-2)

Intake	Discharge										
PARAMETER AND CODE	UNTREATED INTAKE WATER (1)	TREATED INTAKE WATER (2)	MAXIMUM CONCENTRATION (3)	MAXIMUM POUNDS PER DAY PER PROCESS UNIT (4)	MAXIMUM POUNDS PER DAY (5)	DAILY AVG. CONCENTRATION (6)	AVERAGE POUNDS PER DAY (7)	SAMPLE TYPE (8)	SAMPLE FREQUENCY (9)	METHOD OF ANALYSIS (10)	CONTINUOUS MONITORING (11)
PHENOLS 32730	0					0		A	0	S	A
SURFACTANTS 38260											
ALGICIDES* 74051											
CHLORINATED HYDRO-CARBONS* (EXCEPT PESTICIDES) 74052											
PESTICIDES* 74053											

*Name specific compound(s) and fill in the required data for each. Use extra blanks at the end of the form and the "Remarks" space as necessary.

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B-3. RADIOACTIVE PARAMETERS OF INTAKE WATER AND DISCHARGE (See Table B-3)

Intake	Discharge						
PARAMETER AND CODE	UNTREATED INTAKE WATER (1)	TREATED INTAKE WATER (2)	AVERAGE (DAILY) (3)	MINIMUM (OPERATING YEAR) (4)	MAXIMUM (OPERATING YEAR) (5)	SAMPLE FREQUENCY (6)	CONTINUOUS MONITORING (7)
ALPHA-TOTAL 01501				X			
ALPHA COUNTING ERROR 01502				X			
BETA-TOTAL 03501				X			
BETA COUNTING ERROR 03502				X			
GAMMA-TOTAL 05501				X			
GAMMA COUNTING ERROR 05502				X			
TRITIUM-TOTAL 07000				X			
TRITIUM COUNTING ERROR 07001				X			

B-4. REMARKS

0 - Sampling frequency was as found on September 30, 1971