Ohio EPA - Daily Discharge Monitoring Report - Form 4500

SUBMISSION ID:	674273	**STATUS:**	Revision
FACILITY:	Dovetail Energy LLC - Anaerobic Digestion Facility	**PERMIT NUMBER:**	***1IN00305*AD***
LOCATION:	1146 Herr Rd Fairborn, OH 45324	**STATION CODE:**	581
		MONITORING PERIOD :	**2016-09-01 To: 2016-09-30**
COUNTY:	Greene	**REPORTING LAB:**	MASI Environmental Services
DISTRICT:	SWDO	**ANALYST:**	N/A
		NO DISCHARGE INDICATOR:	

PARAMETER	Biochemical Oxygen Demand, 5 Day	pH	Oil and Grease, Hexane Extr Method	Ammonia (NH3) In Sludge	Nitrogen Kjeldahl, Total In Sludge	Phosphorus, Total In Sludge	Potassium In Sludge
PARAMETER CODE	00310	00400	00552	00611	00627	00668	00938
UNITS	mg/l	S.U.	mg/l	mg/kg	mg/kg	mg/kg	mg/kg
FREQUENCY	1/Month	1/Month	1/Month	1/Month	1/Month	1/Month	1/Month
SAMPLING TYPE	Composite	Composite	Composite	Composite	Composite	Composite	Composite
2016-09-01							
2016-09-02							
2016-09-03							
2016-09-04							
2016-09-05							
2016-09-06							
2016-09-07							
2016-09-08							
2016-09-09							
2016-09-10							
2016-09-11							
2016-09-12							
2016-09-13							
2016-09-14	8900	8.12	8420	5890	91300	36600	12200
2016-09-15							
2016-09-16							
2016-09-17							
2016-09-18							
2016-09-19							
2016-09-20							
2016-09-21							
2016-09-22	8900	8.12	6616	5890	91300	36600	12200
2016-09-23							
2016-09-24							
2016-09-25							
2016-09-26							
2016-09-27							
2016-09-28							
2016-09-29							
2016-09-30							
Minimum	8900.0	8.12	6616.0	5890.0	91300.0	36600.0	12200.0
Maximum	8900.0	8.12	8420.0	5890.0	91300.0	36600.0	12200.0
Average	8900		7518	5890	91300	36600	12200
Count	2	2	2	2	2	2	2

Name of Responsible Official or Authorized Representative	I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted 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.	Signature of Responsible Official or Authorized Representative	Submission Date/Time
Taylor Faecher			Certification Version Date 2017-06-14 10:06

Ohio EPA - Daily Discharge Monitoring Report - Form 4500

SUBMISSION ID:	674273	**STATUS:**	Revision
FACILITY:	Dovetail Energy LLC - Anaerobic Digestion Facility	**PERMIT NUMBER:**	***1IN00305*AD***
LOCATION:	1146 Herr Rd Fairborn, OH 45324	**STATION CODE:**	581
		MONITORING PERIOD :	**2016-09-01 To: 2016-09-30**
COUNTY:	Greene	**REPORTING LAB:**	MASI Environmental Services
DISTRICT:	SWDO	**ANALYST:**	N/A
		NO DISCHARGE INDICATOR:	

PARAMETER	Arsenic, Total In Sludge	Cadmium, Total In Sludge	Copper, Total In Sludge	Lead, Total In Sludge	Nickel, Total In Sludge	Zinc, Total In Sludge	Selenium, Total In Sludge
PARAMETER CODE	01003	01028	01043	01052	01068	01093	01148
UNITS	mg/kg	mg/kg	mg/kg	mg/kg	mg/kg	mg/kg	mg/kg
FREQUENCY	1/Month	1/Month	1/Month	1/Month	1/Month	1/Month	1/Month
SAMPLING TYPE	Composite	Composite	Composite	Composite	Composite	Composite	Composite
2016-09-01							
2016-09-02							
2016-09-03							
2016-09-04							
2016-09-05							
2016-09-06							
2016-09-07							
2016-09-08							
2016-09-09							
2016-09-10							
2016-09-11							
2016-09-12							
2016-09-13							
2016-09-14	16	1	471	7	16	665	5
2016-09-15							
2016-09-16							
2016-09-17							
2016-09-18							
2016-09-19							
2016-09-20							
2016-09-21							
2016-09-22	16	1	471	7	16	665	5
2016-09-23							
2016-09-24							
2016-09-25							
2016-09-26							
2016-09-27							
2016-09-28							
2016-09-29							
2016-09-30							
Minimum	16.0	1.0	471.0	7.0	16.0	665.0	5.0
Maximum	16.0	1.0	471.0	7.0	16.0	665.0	5.0
Average	16	1	471	7	16	665	5
Count	2	2	2	2	2	2	2

Name of Responsible Official or Authorized Representative	I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted 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.	Signature of Responsible Official or Authorized Representative	Submission Date/Time
Taylor Faecher			Certification Version Date 2017-06-14 10:06

Ohio EPA - Daily Discharge Monitoring Report - Form 4500

SUBMISSION ID:	674273	**STATUS:**	Revision
FACILITY:	Dovetail Energy LLC - Anaerobic Digestion Facility	**PERMIT NUMBER:**	***1IN00305*AD***
LOCATION:	1146 Herr Rd Fairborn, OH 45324	**STATION CODE:**	581
		MONITORING PERIOD :	**2016-09-01 To: 2016-09-30**
COUNTY:	Greene	**REPORTING LAB:**	MASI Environmental Services
DISTRICT:	SWDO	**ANALYST:**	N/A
		NO DISCHARGE INDICATOR:	

PARAMETER	Fecal Coliform in Sludge	Sludge Fee Weight	Sludge Weight	Sludge Solids, Percent Total	Mercury, Total In Sludge	Molybdenum In Sludge	
PARAMETER CODE	31641	51129	70316	70318	71921	78465	
UNITS	MPN/G	dry tons	Dry Tons	%	mg/kg	mg/kg	
FREQUENCY	1/Month	1/Month	1/Month	1/Month	1/Month	1/Month	
SAMPLING TYPE	Composite	Total	Total	Composite	Composite	Composite	
2016-09-01							
2016-09-02							
2016-09-03							
2016-09-04							
2016-09-05							
2016-09-06							
2016-09-07							
2016-09-08							
2016-09-09							
2016-09-10							
2016-09-11							
2016-09-12							
2016-09-13							
2016-09-14	45285.71	0	0	6.65	.07	10	
2016-09-15							
2016-09-16							
2016-09-17							
2016-09-18							
2016-09-19							
2016-09-20							
2016-09-21							
2016-09-22	38000						
2016-09-23							
2016-09-24							
2016-09-25							
2016-09-26							
2016-09-27							
2016-09-28							
2016-09-29							
2016-09-30							
Minimum	38000.0	0.0	0.0	6.65	0.07	10.0	
Maximum	45285.71	0.0	0.0	6.65	0.07	10.0	
Average	41642.855	0	0	6.65	0.07	10	
Count	2	1	1	1	1	1	

Name of Responsible Official or Authorized Representative		Signature of Responsible Official or Authorized Representative	Submission Date/Time
Taylor Faecher	I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted 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.		**Certification Version Date** **2017-06-14 10:06**

Ohio EPA - Daily Discharge Monitoring Report - Form 4500

SUBMISSION ID:	674273	**STATUS:**	Revision
FACILITY:	Dovetail Energy LLC - Anaerobic Digestion Facility	**PERMIT NUMBER:**	***1IN00305*AD***
LOCATION:	1146 Herr Rd Fairborn, OH 45324	**STATION CODE:**	584
		MONITORING PERIOD :	**2016-09-01 To: 2016-09-30**
COUNTY:	Greene	**REPORTING LAB:**	
DISTRICT:	SWDO	**ANALYST:**	
		NO DISCHARGE INDICATOR:	**AL**

PARAMETER	Biochemical Oxygen Demand, 5 Day	pH	Oil and Grease, Hexane Extr Method	Ammonia (NH3) In Sludge	Nitrogen Kjeldahl, Total In Sludge	Phosphorus, Total In Sludge	Potassium In Sludge
PARAMETER CODE	00310	00400	00552	00611	00627	00668	00938
UNITS	mg/l	S.U.	mg/l	mg/kg	mg/kg	mg/kg	mg/kg
FREQUENCY	1/Month	1/Month	1/Month	1/Month	1/Month	1/Month	1/Month
SAMPLING TYPE	Composite	Composite	Composite	Composite	Composite	Composite	Composite
2016-09-01							
2016-09-02							
2016-09-03							
2016-09-04							
2016-09-05							
2016-09-06							
2016-09-07							
2016-09-08							
2016-09-09							
2016-09-10							
2016-09-11							
2016-09-12							
2016-09-13							
2016-09-14							
2016-09-15							
2016-09-16							
2016-09-17							
2016-09-18							
2016-09-19							
2016-09-20							
2016-09-21							
2016-09-22							
2016-09-23							
2016-09-24							
2016-09-25							
2016-09-26							
2016-09-27							
2016-09-28							
2016-09-29							
2016-09-30							
Minimum							
Maximum							
Average							
Count							

Name of Responsible Official or Authorized Representative	I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted 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.	Signature of Responsible Official or Authorized Representative	Submission Date/Time
Taylor Faecher			Certification Version Date 2017-06-14 10:06

Ohio EPA - Daily Discharge Monitoring Report - Form 4500

SUBMISSION ID:	674273	**STATUS:**	Revision
FACILITY:	Dovetail Energy LLC - Anaerobic Digestion Facility	**PERMIT NUMBER:**	***1IN00305*AD***
LOCATION:	1146 Herr Rd Fairborn, OH 45324	**STATION CODE:**	584
		MONITORING PERIOD :	**2016-09-01 To: 2016-09-30**
COUNTY:	Greene	**REPORTING LAB:**	
DISTRICT:	SWDO	**ANALYST:**	
		NO DISCHARGE INDICATOR:	**AL**

PARAMETER	Arsenic, Total In Sludge	Cadmium, Total In Sludge	Copper, Total In Sludge	Lead, Total In Sludge	Nickel, Total In Sludge	Zinc, Total In Sludge	Selenium, Total In Sludge
PARAMETER CODE	01003	01028	01043	01052	01068	01093	01148
UNITS	mg/kg	mg/kg	mg/kg	mg/kg	mg/kg	mg/kg	mg/kg
FREQUENCY	1/Month	1/Month	1/Month	1/Month	1/Month	1/Month	1/Month
SAMPLING TYPE	Composite	Composite	Composite	Composite	Composite	Composite	Composite
2016-09-01							
2016-09-02							
2016-09-03							
2016-09-04							
2016-09-05							
2016-09-06							
2016-09-07							
2016-09-08							
2016-09-09							
2016-09-10							
2016-09-11							
2016-09-12							
2016-09-13							
2016-09-14							
2016-09-15							
2016-09-16							
2016-09-17							
2016-09-18							
2016-09-19							
2016-09-20							
2016-09-21							
2016-09-22							
2016-09-23							
2016-09-24							
2016-09-25							
2016-09-26							
2016-09-27							
2016-09-28							
2016-09-29							
2016-09-30							
Minimum							
Maximum							
Average							
Count							

Name of Responsible Official or Authorized Representative	I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted 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.	Signature of Responsible Official or Authorized Representative	Submission Date/Time
Taylor Faecher			**Certification Version Date** **2017-06-14 10:06**

Ohio EPA - Daily Discharge Monitoring Report - Form 4500

SUBMISSION ID:	674273	**STATUS:**	Revision
FACILITY:	Dovetail Energy LLC - Anaerobic Digestion Facility	**PERMIT NUMBER:**	***1IN00305*AD***
LOCATION:	1146 Herr Rd Fairborn, OH 45324	**STATION CODE:**	584
		MONITORING PERIOD :	**2016-09-01 To: 2016-09-30**
COUNTY:	Greene	**REPORTING LAB:**	
DISTRICT:	SWDO	**ANALYST:**	
		NO DISCHARGE INDICATOR:	**AL**

PARAMETER	Fecal Coliform in Sludge	Sludge Fee Weight	Sludge Weight	Mercury, Total In Sludge	Molybdenum In Sludge		
PARAMETER CODE	31641	51129	70316	71921	78465		
UNITS	MPN/G	dry tons	Dry Tons	mg/kg	mg/kg		
FREQUENCY	1/Month	1/Month	1/Month	1/Month	1/Month		
SAMPLING TYPE	Multiple Grab	Total	Total	Composite	Composite		
2016-09-01							
2016-09-02							
2016-09-03							
2016-09-04							
2016-09-05							
2016-09-06							
2016-09-07							
2016-09-08							
2016-09-09							
2016-09-10							
2016-09-11							
2016-09-12							
2016-09-13							
2016-09-14							
2016-09-15							
2016-09-16							
2016-09-17							
2016-09-18							
2016-09-19							
2016-09-20							
2016-09-21							
2016-09-22							
2016-09-23							
2016-09-24							
2016-09-25							
2016-09-26							
2016-09-27							
2016-09-28							
2016-09-29							
2016-09-30							
Minimum							
Maximum							
Average							
Count							

Name of Responsible Official or Authorized Representative	I certify under the penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted 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.	Signature of Responsible Official or Authorized Representative	Submission Date/Time
Taylor Faecher			**Certification Version Date** **2017-06-14 10:06**

Ohio EPA - Daily Discharge Monitoring Report - Form 4500

FACILITY:	Dovetail Energy LLC - Anaerobic Digestion Facility	**PERMIT NUMBER:**	***1IN00305*AD***
LOCATION:	1146 Herr Rd Fairborn, OH 45324	**MONITORING PERIOD :**	**2016-09-01 To: 2016-09-30**

PARAMETER COMMENTS:

Station Code	Parameter Name	Parameter Code	Date	Unit	Comment