METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO Industrial Waste Division / Pretreatment and Cost Recovery Section Continued Compliance Report Instructions

In accordance with the Metropolitan Water Reclamation District's (District) Sewage and Waste Control Ordinance (Ordinance) and the Code of Federal Regulations [40 CFR 403.12(e)(g)], an industrial user classified by the District as a Significant Industrial User (SIU) shall submit a completed Continued Compliance Report (RD-115) semiannually by the report due date, as specified in the user's Discharge Authorization (DA).

The RD-115 shall cover all pertinent activities of the industrial user from the close of the previous reporting period through a date 30 calendar days prior to the report due date.

Each SIU shall conduct sampling at each sampling point, as established in Special Condition 1 of the user's DA. In lieu of monitoring sampling points which do not contain either regulated or unregulated process wastewater, as established in Special Condition 1 of the user's DA, the user may submit a No Process Discharge Certification Statement with each RD-115. The statement, on company letterhead and signed by a company official, shall attest that at no time during the reporting period was process wastewater discharged through the sampling points for which the sampling exemption is requested.

For each sampling point, each SIU shall sample, analyze, and report on all pollutants, as established in the User's DA. In lieu of monitoring for Total Toxic Organics (TTO's), the User may submit a TTO Certification Statement with each RD-115. The statement, on company letterhead and signed by a company official, shall attest that no discharge of toxic organics occurred since the filing of the last RD-115 and that the facility is implementing the toxic organic management plan submitted to the District.

At each sampling point where the average discharge flow rate is less than or equal to 200,000 gallons per day (GPD), as established in the user's DA, samples shall be collected for a minimum of three (3) days within a two-week period. At each sampling point where the average discharge flow rate exceeds 200,000 GPD, as established in the user's DA, samples shall be collected for six (6) days within a two-week period.

All samples shall be representative of the standard operating conditions occurring at the facility during the reporting period and shall be collected in accordance with the requirements of 40 CFR 403.12(g) and the District's Ordinance.

For pH, cyanide, total phenols, Fats, Oils and Greases (FOG), sulfide, and Volatile Organic Compounds (VOC), grab samples shall be collected each sampling day. For all other parameters, 24-hour composite samples shall be collected each sampling day through flow- proportional sampling techniques. Time-based composite samples will be accepted only from industrial users that have been granted, by the District, a waiver from the flow- proportional sampling requirement.

If composite samples are less than 24 hours in duration, a statement shall be provided that certifies that the samples were collected for the duration of the facility's daily production discharges.

A certification statement from the laboratory performing the analyses shall be included with the RD-115. The statement shall contain, in addition to the results of the analyses, the name and address of the laboratory, the dates that the analyses were performed, the name(s) of the person(s) performing the analyses, and the analytical techniques and methods used. The statement shall certify that all sampling and analyses were performed in accordance with 40 CFR 136. Chain of custody documentation for all samples shall be included with the RD-115.

All violations identified as a result of self-monitoring shall be reported to the District in accordance with 40 CFR 403.12(g) and Article V, Section 8 of the District's Ordinance.

Supporting data (i.e. water bills, meter readings, calculations) shall be provided for all daily flow rates and daily flow volumes that are reported as being measured.

Any SIU may request a waiver from the self-monitoring requirements for one of the two required RD-115s. Upon approval of the request, the District will perform the required sampling on behalf of the SIU and provide its data to the user for submittal with the RD-115.

Any SIU whose total industrial waste discharge does not exceed 5,000 gallons in any calendar month may request a waiver from the self-monitoring requirements for the two required RD-115s. Upon approval of the request, the District will perform the required sampling on behalf of the SIU and insert its data into the RD-115 submitted by the user.

To be eligible for a waiver from the self-monitoring requirements, an SIU must have a valid DA, an acceptable outside sampling chamber, and must not be in significant noncompliance. All requests for a waiver shall be submitted to the Director of Monitoring and Research and will not become effective until such determination is issued by the District in writing. In instances where an SIU has been granted a waiver from the self-monitoring requirements, the user shall continue to submit all reports as established in the user's DA.

The Director of Monitoring and Research may withdraw a waiver of the self-monitoring requirements upon a determination that the user is in significant noncompliance with any provisions of the Ordinance.

Any person who fails to submit a required report to the District by the due date specified in the user's DA, or who submits a deficient report, shall be assessed a late filing fee as set forth in Article V, Section 10, of the District's Ordinance: \$100 for a report up to 15 calendar days late; \$500 for a report 16 to 45 days late; \$1000 for a report more than 45 days late.

Failure to submit a required report, submission of a deficient report, or submission of a report more than 45 days after the filing due date, may constitute a significant violation pursuant to 40 CFR 403.8(f)(2)(viii) and the District's Ordinance.

METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO Industrial Waste Division / Pretreatment and Cost Recovery Section Continued Compliance Report Instructions

Item 1 - FACILITY IDENTIFICATION

- a. Provide the complete name and address of the facility, as well as the Discharge Authorization (DA) Number, the DA Effective Date, and the DA Expiration Date. Include the facility's telephone number, FAX number, and website. Provide the name, title, telephone number, and e-mail address of the person that has been designated as the District's primary contact. For the entire report, all dates must be entered in the MM/DD/YYYY format.
 - b. Indicate the SIU status of the facility.
- c. Provide the reporting period covered by the report and indicate the report due date.

Item 2 - NATURE OF WASTEWATER FLOWS

- a. Provide the total facility daily average and daily maximum discharge flow rates, in gallons per day, for each flow type (regulated process, unregulated process, or dilutional) during the reporting period. Indicate whether the provided discharge flow rates are measured or estimated. For any estimated discharge flow rate, a verifiable basis for the estimate shall be provided. Indicate whether the discharge of each flow type occurs on a continuous or batch basis.
- b. Provide the total facility discharge flow volume, in gallons, for each day of the continued compliance sampling period. Measured daily discharge flow volumes, with supporting data, shall be provided. Estimates are not acceptable.

Item 3 - NATURE OF WASTEWATER DISCHARGE

TO BE COMPLETED BY ALL FACILITIES

- a. Provide the sampling point designation. A separate page shall be provided for each sampling point, as necessary.
- b. Indicate whether the sampling point discharge is from a categorically regulated process, and, if applicable, provide the categorically regulated process(es).
- c. Indicate the method of composite sampling. For composite samples, provide the sampling dates and the composite duration, in hours. For grab samples, provide the sampling date and the sample collection time.

Provide the daily sampling results and the average concentration for the sampling period, in milligrams per liter, for each pollutant. Provide the pollutant concentration limits (maximum and average), in milligrams per liter, for each pollutant as established in the user's DA. Please note that the monthly averages as stated in your Discharge Authorization corresponds to calendar monthly averages. If samples were taken between two calendar months, two sets of averages would be calculated for those months. For example, if samples were taken on May 30, May 31, and June 1 of the reporting year, the analytical results for the samples obtained on May 30 and 31 would be averaged for

the month of May. In addition, the analytical results for the sample obtained on June 1 would be the monthly average for June (even though there is only one sample).

TO BE COMPLETED ONLY BY FACILITIES SUBJECT TO PRODUCTION-BASED DISCHARGE STANDARDS

- d. Provide the sampling point designation. A separate page shall be provided for each sampling point, as necessary.
- e. Provide the name and category of the categorically regulated process. Provide the average production rate of the process for the reporting period.
- f. Provide the sampling dates and the sampling point daily discharge volumes, in gallons. Provide the daily sampling results, in milligrams per liter, for each pollutant. Provide the daily mass loadings and the average mass loading for the sampling period, in grams per day, for each pollutant. Provide the mass loading limits (maximum and average), in grams per day, for each pollutant as provided in the user's DA.

Item 4 - Provide the name of the preparer of the RD-115.

Item 5 - CERTIFIED STATEMENT

- a. State whether all applicable pretreatment discharge standards are being met on a consistent basis.
- b. If applicable pretreatment discharge standards are not being met, state whether additional operation and maintenance and/or additional pretreatment are required.
- c. If applicable pretreatment discharge standards are not being met, a properly completed Compliance Schedule (RD-112) shall be submitted, together with the RD-115, to the District.

The RD-115 certification statement shall be signed by an authorized representative of the industrial user after adequate completion and review of the information in the report by the signing official. The authorized representative, as signatory, shall verify, upon oath or affirmation before a notary public, that the certification statement is true.

A completed Continued Compliance Report (RD-115) shall be submitted to:

Metropolitan Water Reclamation District of Greater Chicago Industrial Waste Division – Pretreatment & Cost Recovery Section

USPS delivery Post Office Box 10689 Chicago, Illinois 60610 All other delivery
111 East Erie Street
Chicago, Illinois 60611-2802

For additional information, contact the Industrial Waste Division, Pretreatment and Cost Recovery Section office at 312-751-3044 or MWRD-UCTS@mwrd.org.

METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO Industrial Waste Division / Pretreatment and Cost Recovery Section Continued Compliance Report

1.	FACIL	ITY IDE	ENTIFIC	ATION:

a.	Facility Name:			Facility DA Number:							
	Address:				DA Effective Date:						
	City:		Zip Code	e:	DA Expiration Date:						
	Telephone:			F <i>A</i>	AX:						
	Website:										
	Facility Contact Person:			NAN	ΛΕ.						
				IN/AII	nL						
	TITLE		TELEPHONE	E / EXTENSION		E-MAIL ADDRESS					
b.	Facility is regulated as an S	IU: 🔲 For hav	ing a non-regulat	ed process disch	arge greater than	25,000 gallons p	oer day.				
		☐ For having a categorically regulated process discharge.									
		☐ For and	ther reason (i.e.	special type of in	dustry).						
C.	Reporting Period:			F	Report Due Date:						
			END (MONTH		,	MONTH / DAY / YEAR					
a.	NATURE OF WASTEWA Provide the total facility daily Note: For any estimated di Flow Type	y average and da	e, a verifiable bas	is for the estimat	-		scharge				
	Regulated Process:	-	Measured Estimated		, ,	Measured Estimated	Continuous Batch				
ı	 Unregulated Process:		— Measured Estimated			Measured Estimated	Continuous Batch				
	Dilutional:		Measured Estimated			Measured Estimated	Continuous Batch				
	Total:		_								
	DA LIMITS:		_								
b.	Provide the total facility disc	harge flow volun	ne for each day o	of the continued of	compliance sampl	ng period:					
	From:										
	Sampling Dates To:										
	Volume (gallons):										

Note: Measured daily discharge flow volumes, with supporting data, shall be provided. Estimates are not acceptable.

REV 07/28/2023_RD-115 Page _____ of _____

METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO

Industrial Waste Division / Pretreatment and Cost Recovery Section

Facility Name: DA # ______

	TO BE COME	LETED	BY ALL	FACILITIES	<u> </u>			
Sampling Point: No	te: A separate paç	je shall b	e provide	ed for each	sampling point, as	necessary.		
Categorically regulated process discha	rge? Yes	No	If Yes	: 40 CFR	40	CFR		
	CON	//POSITE	SAMPL	<u>ES</u>				
Indicate method of composite samplin	g: Flow-F	roportion	al .	Time-Based		i		
From:						Pollutant C	oncentrati	
Sampling Dates To:					Average for	(DA)	(DA) Limits	
Composite Duration (hours):					Samplin Period		Averen	
Pollutants	Sampl	ing Result	s (ma/L)		(mg/L)	Maximum (mg/L)	Averag (mg/L	
Tondanto		ing resum	.s (mg/L)		(1119/12)	(mg/L)	(IIIg/L	
l		 			ļ	I		
	<u>(</u>	GRAB SA	MPLES		İ			
Sampling Date:					Average	Pollutant C (DA)	<u>oncentrati</u> <u>Limits</u>	
					for Samplin		 	
Sample Collection Time:					Period	Maximum	Averag	
Pollutants	Sampling Results (mg/L)				(mg/L)	(mg/L)	(mg/L	
							 	

Page _____ of ____

METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO

Industrial Waste Division / Pretreatment and Cost Recovery Section

Facility Name: DA # ______

ampling Point:		ie. A sepai	ate page si	nan be provi	ded for eac	h sampling	point, as in	ecessary.	
		Regulated	Process			Aver	age Produc	ction Rate	
Process Name		Proces	ss Category	For the Reporting Period					
			40 CFR	40 CFR					
he daily mass loading mu where M = daily mass lo C = daily samplin V = sampling poi	ading (gram g result con	ns/day) of th centration (r	e pollutant milligrams/l	iter) of the p	ollutant		·		
			COMPO	SITE SAMP	LES	·			
Indicate method of comp	osite samplin	ing: Flow-Proportional			Time-Base	d			
Sampling Dates From:									
To:									
Composite Duration (hours):							Average Mass	Mass I	_oading
Daily Volume (gallons):							Loading for	(DA)	Limits
	Sampling	Daily Mass	Sampling	Daily Mass	Sampling	Daily Mass	Sampling	Daily	
Pollutants	Result (mg/L)	Loading (g/day)	Result (mg/L)	Loading (g/day)	Result (mg/L)	Loading (g/day)	Period (g/day)	Maximum (g/day)	Avera (g/da
1 olidianio	(g/_)	(g/ddy)	(1119/12)	(g/ddy)	(1119/12)	(g/ddy)	(g/ddy)	(g/day)	(g/da
			GRA	B SAMPLES	<u></u>				
Sampling Date:									
Sample Collection Time:							Average Mass	Mass I	oading
Daily Volume (gallons):							Loading		<u>Limits</u>
	Sampling Result	Daily Mass Loading	Sampling Result	Daily Mass Loading	Sampling Result	Daily Mass Loading	for Sampling Period	Daily Maximum	Avera
Pollutants	(mg/L)	(g/day)	(mg/L)	(g/day)	(mg/L)	(g/day)	(g/day)	(g/day)	(g/da
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(0. 9)	<u> </u>	(3. 9)	<u>, 5-7</u>	(5. 37	(57)	(3/ 55)	(3, 44
	1			1					

REV 07/282023 RD-115

METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO Industrial Waste Division / Pretreatment and Cost Recovery Section

Facility Name:		DA #					
4. Continued Compliance Repo	ort (RD-115) prepared by	:					
NAME OF PREPARER	· · · · · · · · · · · · · · · · · · ·	EMP	LOYER OF PREPARER				
EMAIL ADDRESS OF PR	REPARER		TELEPHONE NUMBER				
5. CERTIFIED STATEMENT	Γ:						
The signatory to this report, value applicable pretreatment discl		ed represe e being m		, certifies that on a c	onsistent b	asis all	
b. If applicable pretreatment dis additional operation and main				signatory to this rep are not required		s that	
c. If applicable pretreatment dis Schedule (RD-112) shall be s				roperly completed C	ompliance		
THE REPORT SHALL BE S ADEQUATE COMPLETION	_	-					
supervision in accordance evaluate the information su those persons directly resp knowledge and belief, true submitting false information	bmitted. Based on roonsible for gatheringe, accurate, and co	my inqui g the inf implete.	ry of the person or per ormation, the information I am aware that the	sons who manag on submitted is, t ere are significa	ge the sy to the be int pena	stem, o	
Signed and sworn to			SIGNATURE OF AUTHORIZED REF	RESENTATIVE			
(or affirmed to) before me on	DATE DD/MM/YYYY	by	NAME OF AUTHORIZED REPRESE	NTATIVE (Type or Print)			
			TITLE OF AUTHORIZED REPRESE	NTATIVE			
NOTARY PUBLIC SEAL			SIGNATURE OF NOTARY PUBLIC				
For District use only:							
Date Submitted (Postmark):							
Comments:							
				In Compliance:	Yes	No	
REPORT REVIEWED BY	т	TITLE	DATE	in Compilation.	100	140	

REV 07/282023_RD-115 Page _____ of _____