

1996

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State of California
STATE WATER RESOURCES CONTROL BOARD

4894-4

1995-1996
ANNUAL REPORT
FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

Reporting Period July 1, 1995 through June 30, 1996

An annual report is required to be submitted to your local Regional Water Quality Control Board (Regional Board) by July 1 of each year. This document must be certified and signed, under penalty of perjury, by the appropriate official of your company. Many of the Annual Report questions require an explanation. Please provide explanations on a separate sheet as an attachment. Retain a copy of the completed Annual Report for your records.

If any information contained in Items A, B, and C below is incorrect, please cross out or highlight the incorrect information (do not white out or erase) and provide the correct information next to or above the incorrect information.

If you have any questions, please contact your Regional Board Storm Water Program Contact. The address of your Regional Board (where the Annual Report must be filed) along with the name and telephone number of the contact person is indicated below.

REGIONAL BOARD INFORMATION:

LOS ANGELES REGIONAL WATER BOARD
101 CENTRE PLAZA DR.
MONTEREY PARK, CA 91754-2156

Contact: MARK PUMFORD
(213) 266-7500

GENERAL INFORMATION:

A. Facility *WDID* No:
4B19S009083

B. Facility/Site:
Contact Person:
TONY ESNAULT
Phone:
(818)965-1541

Address: UTILITY TRAILER MANUFACTURING
17300 CHESTNUT STREET
CITY OF INDUSTRY, CA 91749

C. Owner/Operator:
Contact Person:
TONY ESNAULT
Phone:
(818)965-1541

Address: UTILITY TRAILER MANUFACTURING
P O BOX 1299
CITY OF INDUSTRY, CA 91749

SIC Code 3715 Truck Trailers
SIC Code
SIC Code
SIC Code
Regulated Activity: TRUCK TRAILERS

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SPECIFIC INFORMATION

STORM WATER POLLUTION PREVENTION PLAN

1. Have you developed (and updated) a Storm Water Pollution Prevention Plan (SWPPP), as required in Section A of the General Permit?

Yes ___ No If No, attach an explanation and time schedule for SWPPP development.

2. Have you implemented all elements of your SWPPP?

Yes ___ No If No, attach an explanation and time schedule for SWPPP implementation.

NON-STORM WATER DISCHARGES

3. Section A.6 of the General Permit requires that non-storm water discharges be eliminated or permitted.

- a. Does your facility have any non-storm water discharges (see page 7 for examples)?

No Go to Question 4.

___ Yes Please list: _____

- b. Have any of the non-storm water discharges been permitted by a State or local agency?

___ No ___ Yes If yes, on a separate sheet, identify the non-storm water discharge, agency that permitted the non-storm water discharge, and the permit number.

- c. Attach a description for each non-storm water discharges listed in 3.a that has not been permitted. At a minimum, this description should answer the following:

- o What is the source of the non-storm water discharge?
- o What are the characteristics of the non-storm water discharge (odor, color, frequency, flow rate, potential pollutants, etc.)?
- o What areas of your facility does the non-storm water discharge contact?
- o Has the non-storm water discharge been previously reported to the Regional Board?
- o Why hasn't the non-storm water discharge been eliminated?
- o When is the non-storm water discharge scheduled to be eliminated?

- d. Does your SWPPP include Best Management Practices (BMPs) that address the non-storm water discharges described in 3.c?

___ Yes ___ No If No, revise your SWPPP and attach a brief description of the revisions.

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MONITORING AND REPORTING PLAN

4. Section B.5.a of the General Permit requires you to conduct an annual site inspection: Did you conduct an annual site inspection?

Yes If Yes, use FORM 1 (page 9) to report findings or provide the following for each area inspected:

- o Date and time of inspection.
- o Name and title of inspector.
- o Summary of inspection findings. Evaluate if all sources of storm water pollutants have been identified in the SWPPP; if the BMPs identified in the SWPPP to address these sources of pollutants are in place and effective; and whether additional BMPs are needed. Discuss corrective actions that are necessary.

No If No, attach an explanation.

5. Section B.5.b of the General Permit requires you to conduct visual observations of all discharge locations at least twice during the dry season (May through September). How many dry season observations did you conduct?

None, attach an explanation why no dry season visual observations were conducted.

One, attach an explanation why only one dry season visual observation was conducted.

Two

More than two

For each dry season visual observation conducted, use FORM 2 (page 10) to report observations or provide the following for each discharge location:

- o Date and time of observation.
- o Name and title of inspector.
- o Observations of non-storm water discharge or indications of prior non-storm water discharge. Describe the discharge characteristics, i.e. odor, color, etc., and possible source of discharge, and corrective action taken. If no action has been taken, discuss what and when actions will be taken to eliminate the non-storm water discharge. Report all non-storm water discharges in Item 3 above.

6. Section B.5.c of the General Permit requires you to conduct visual observations of all discharge locations for at least one storm per month during the wet season (October through April). How many months during the wet season did you conduct visual observations? 5. If you did not conduct visual observations in each month of the wet season, attach an explanation.

For each wet season visual observation, use FORM 3 (page 11) to report observations or provide the following information for each discharge location:

- o Date and time of observation.
- o Name and title of inspector.
- o Storm water discharge characteristics observed. For example, was the discharge discolored, very turbid; did it have an odor, evidence of floating or suspended material; did it have a sheen; or any other unusual characteristics? If any were observed, discuss the corrective actions taken or to be taken.

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SAMPLING AND ANALYSIS

7. a. Is your facility part of a Group Monitoring Plan? (Only facilities that have received prior approval are part of a group monitoring plan.)

Yes No

If No, go to Question 8.

If Yes, answer the following questions:

- b. What is the Group Monitoring Plan's name? _____

- c. Is your facility designated to collect storm water samples?

Yes No

If Yes, go to Question 9.

If No, go to Question 10.

8. a. Is your facility exempt from sample collection (Section B.9 of the General Permit)? (Only facilities that have received prior Self-certification approval are exempt from sampling. Facilities participating in a Group Monitoring Plan cannot be self-certified)

Yes No

If No, go to Question 9.

- b. If Yes, which of the following apply (check one):

Submitted Self Certification to Regional Board.

Date Submitted: _____

Received certification of local agency.

Received exemption by the Regional Board.

Attach, as appropriate, the first page of either the submitted self certification, the local agency certification letter, or the Regional Board exemption letter.

9. Section B.5.d of the General Permit requires that storm water samples from at least two storms be collected and analyzed.

- a. How many storms did you sample? 2

If you did not sample any storms, or only sampled one storm, attach an explanation.

- b. How many storm water discharge points are located at your facility? 2

Did you sample from every discharge point?

Yes No

If you did not sample from every discharge point, attach an explanation why you did not or attach a justification as to why certain discharge points are substantially identical.



June 7, 1996

Los Angeles Regional Water Quality Control Board
Attn: Mark Pumford
101 Centre Plaza Drive
Monterey Park, Ca 94754-2156

Utility Trailer Manufacturing Co.
From: Tony Esnault
17300 Chestnut St.
City of Industry, Ca 91749

Subject: Storm Water Discharge Annual Report Attachment Items --
#9D, 10 and #11.

- Item #9D: Comparison of analytical results from the previous three reporting periods indicates a minor decrease in oil/grease, TSS and specific conductance values.
- Item #10: The overall effectiveness of Utility Trailer's Storm Water Pollution Prevention Plan (SWPPP) in reducing pollutants continues to be excellent. No revisions to the SWPPP are required based on our evaluation.
- Item #11: The monitoring program in place at the site to detect pollutants in storm water discharge continues to perform excellently. Based on our evaluation, no revisions are required to the monitoring program.

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SAMPLING AND ANALYSIS (cont'd)

c. For each storm sampled, provide the following information:

	Number of Samples Taken	Number of Samples Analyzed and Reported	Constituents Tested and Reported
First Storm	3	3	PH, OIL/GREASE, TSS, CONDUCTANCE
Second Storm	3	3	PH, OIL/GREASE, TSS, CONDUCTANCE
Additional Storms			

If all samples from the first and/or second storms were not analyzed, provide an explanation.

d. Provide a summary of your sampling and analysis results. You may use Form 4 (page 12) to report your findings. The summary should include the date and time of sample, constituents tested, who did the testing, the testing results, test method used, and test detection limit. Copies of the analytical results from the laboratory should also be attached. Include a completed Form 4, or equivalent, for each sample analyzed.

For facilities subject to Federal Storm Water Effluent Limitation Guidelines, separately report the Federal Guidelines and the corresponding monitoring results.

If past years analytical results are available, on a separate sheet, compare and evaluate the analytical results from the 1994-95 testing period with the analytical results from past years (are the pollutant concentrations increasing or decreasing and why; if a reason is known?).

e. For each storm sampled, provide the following information:

	Was sample taken during the first 30 minutes?	Were there 3 days of dry weather before the storm?
First Storm	YES	YES
Second Storm	YES	YES
Additional Storms		

If you responded no to either of the above questions for the first or second storm, attach an explanation.

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STORM WATER POLLUTION PREVENTION PLAN EVALUATION

10. Based upon the comparison and analysis of analytical data; visual observations, etc. from the time you submitted your Notice of Intent to comply with the General Permit; is your Storm Water Pollution Prevention Plan effective in reducing pollutants in your facility's storm water discharge? Discuss specific areas or elements of the SWPPP that are not effective or need improvement. Provide a brief description of alternatives or proposed revisions to the SWPPP.
11. Provide a written evaluation of your monitoring program in detecting pollutants in storm water discharge. Discuss areas of the monitoring program that are not effective or need improvement. Provide a brief description of proposed revisions to the monitoring program.
12. The General Industrial Activities Storm Water Permit requires that:
- o a Storm Water Pollution Prevention Plan be developed and implemented (Questions 1 and 2)
 - o non-storm water discharges be eliminated, reported to the Regional Board, or permitted (Question 3)
 - o an annual site inspection be conducted to determine the effectiveness of BMPs in reducing and/or eliminating sources of storm water pollution (Question 4)
 - o two dry weather visual observations be conducted (Question 5)
 - o wet weather visual observations be made once each month during the wet season (Question 6)
 - o unless specifically exempted, samples be collected and analyzed from at least two storms (Question 9)

If you have not completed all of the above requirements, please make sure you have attached an explanation for each requirement you have not completed.

Do you certify, based on your annual site inspection that, your facility is in compliance with the requirements of the General Industrial Activities Storm Water Permit?

Yes No

13. Attach an updated site map showing the areas of industrial activity; the areas where visual inspections were done; all storm water discharge locations; and all storm water sampling locations.

CERTIFICATION

I am duly authorized to sign reports required by the GENERAL INDUSTRIAL ACTIVITIES STORM WATER PERMIT (see Provisions C.9) and 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 ensure 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.

Printed Name: TONY ESNAULT
Signature: Tony Esnault Date: 6/7/96
Title: I. R. MANAGER

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SEE ATTACHED SHEETS

FORM 1 - ANNUAL SITE INSPECTION FORM

Inspection Date: 10/13/95

INSPECTED AREAS List all areas where pollutants may come in contact with storm water (i.e. exposed loading/unloading, access, storage, manufacturing or process activities occur, maintenance activities, etc.).	For each area, are the BMPs listed in the SWPPP in place?		Are additional BMPs needed to control storm water pollution?		DESCRIBE DEFICIENCIES AND CORRECTIVE ACTIONS
	YES	NO	YES	NO	

Inspector's Name: Tony Esnaault Title: J. R. MANAGER

Signature: Tony Esnaault Date: 6/7/96

Year: 1995/96

Annual SWMRP Site Inspection Form (Form 4)
Utility Trailer Manufacturing - City of Industry, California

Activities Performed:

- | | | | |
|-----------------|---------------------------|-----------------|----------------------------------------------------|
| <u>10/13/95</u> | Reviewed SWPPP | <u>10/13/95</u> | Reviewed wet season observation form |
| " | Reviewed SWMRP | " | Reviewed dry season observation form |
| " | Performed site inspection | " | Reviewed previous annual site inspection report(s) |

Premises Inspected:

Date(s) Inspected: 10/13/95

- | | | | |
|-------------------------------------|-----------------------------------------------|-------------------------------------|---------------------------------|
| <input checked="" type="checkbox"/> | Outdoor Storage Areas | <input checked="" type="checkbox"/> | Outdoor Storage Tanks |
| <input checked="" type="checkbox"/> | Paint and Hazardous Material Storage compound | <input checked="" type="checkbox"/> | Truck Loading Dock |
| <input checked="" type="checkbox"/> | Torque Test Equipment | <input checked="" type="checkbox"/> | Manufacturing Building |
| <input checked="" type="checkbox"/> | Drainage Swale | <input checked="" type="checkbox"/> | Maintenance and Repair Building |
| <input checked="" type="checkbox"/> | Parts Warehouse | | |
| <input type="checkbox"/> | Other: _____ | | |

General Observations:

10/13/95 Plant wide and all exterior areas showed no evidence of non-storm water discharge. Outside contractors working on both the ^{North} east and North west of the plant - pouring new concrete areas and trench work. Everything looked good.

(Form 4 continued)

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Specific Observations:

	Yes	No
1. Were non-storm water discharges observed on the complex?	_____	<input checked="" type="checkbox"/>
2. Did the drainage swale show evidence of staining, residues, or non-storm water discharges?	_____	<input checked="" type="checkbox"/>
3. Were activities observed which have the potential to result in storm water pollution?	_____	<input checked="" type="checkbox"/>
4. Were SWPPP or SWMRP documents found to be improperly filed or maintained?	_____	<input checked="" type="checkbox"/>
5. Were any activities or storage practices observed which appear to be inconsistent with storm water pollution prevention goals at the facility?	_____	<input checked="" type="checkbox"/>
6. Was the spill response kit found to be inadequately inventoried, inaccessible, or stocked with non-functional equipment?	_____	<input checked="" type="checkbox"/>
7. Is corrective action necessary as a result of this inspection?	_____	<input checked="" type="checkbox"/>

Explain all yes answers (use additional paper as needed):

Followup recommended: *None*

Inspector: _____ Date: 10/13/95
 Name (print): TONY ESNAULT Affiliation: Utility Trader
 Signature: Tony Esnault Title: I. R. Manager

Responsible Manager: _____ Date: 10/13/95
 Name (print): TONY ESNAULT Affiliation: U. T.
 Signature: Tony Esnault Title: I. R. Manager

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SEE ATTACHED SHEETS

FORM 2 - RECORD OF DRY SEASON VISUAL OBSERVATIONS

- Dry season visual observations are used to detect the presence of non-storm water discharges.
- This form should be filled out for at least two dry season visual observations between May 1 and September 30 of each year.
- Non-storm water discharges that have not been eliminated must be reported in Item 3 (page 2) of the Annual Report.

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVED? YES / NO		DESCRIBE OBSERVATIONS	DESCRIBE SOURCE OF DISCHARGE
		INDICATIONS OF PRIOR DISCHARGE? YES / NO			

Comments/Corrective Actions Taken for above:

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVED? YES / NO		DESCRIBE OBSERVATIONS	DESCRIBE SOURCE OF DISCHARGE
		INDICATIONS OF PRIOR DISCHARGE? YES / NO			

Comments/Corrective Actions Taken for above:

Inspector's Name: Tony Esnaht

Title: I. R. MANAGER

Date: 6/7/96

Signature: Tony Esnaht

Total Plant

DRY SEASON INSPECTION REPORT (FORM 1)

Date: 1/5/22/95

Inspection Conducted by: Tony Canault

Time: 10:00 AM

1. Is there any evidence that a non-storm water discharge has occurred?
2. Do outside storage tank(s) and associated piping show visible evidence of leaks? (Note any detected leaks in comment section)
3. Do outside secondary containment facilities show evidence of leaks. (Note any detected leaks in comment section)
4. Is the facility emergency spill kit readily accessible, adequately stocked and in good condition?
5. Are spill procedures posted in areas where spills are likely to occur?
6. Are associates properly trained in how to control and properly clean-up spill? Do they know where the emergency spill kit is located?
7. Are outside impervious surfaces swept regularly to prevent accumulation of significant materials?
8. Are dumpsters in good conditions without corrosion or leaky seams?
9. Are hazardous chemicals properly stored and labeled? Is adequate spill containment provided in case of leak or rupture of container?
10. Are facility yards maintained in an orderly fashion and with parts/equipment stored under cover where possible?
11. Are power equipment, batteries stored and maintained inside the facility?
12. Is corrective action necessary?
13. Is a Corrective Action Request form attached?
If yes, for what item numbers?

Yes ⁽¹⁾	No	Remarks
<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Employees are instructed & notified in response
<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Weekly
<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Facility Manager: _____

Date: _____

DRY SEASON INSPECTION REPORT (FORM 1)

Date: 1/9/22/95 Inspection Conducted by: Tony Conault Time: 9/22/95 1:30 PM

Yes (I)	No	Remarks
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<i>Employees are instructed + they notified in response</i>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<i>Weekly - Professional sweeper</i>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

1. Is there any evidence that a non-storm water discharge has occurred?
2. Do outside storage tank(s) and associated piping show visible evidence of leaks? (Note any detected leaks in comment section)
3. Do outside secondary containment facilities show evidence of leaks. (Note any detected leaks in comment section)
4. Is the facility emergency spill kit readily accessible, adequately stocked and in good condition?
5. Are spill procedures posted in areas where spills are likely to occur?
6. Are associates properly trained in how to control and properly clean-up spill? Do they know where the emergency spill kit is located?
7. Are outside impervious surfaces swept regularly to prevent accumulation of significant materials?
8. Are dumpsters in good conditions without corrosion or leaky seams?
9. Are hazardous chemicals properly stored and labeled? Is adequate spill containment provided in case of leak or rupture of container?
10. Are facility yards maintained in an orderly fashion and with parts/equipment stored under cover where possible?
11. Are power equipment batteries stored and maintained inside the facility?
12. Is corrective action necessary?
13. Is a Corrective Action Request form attached?
If yes, for what item numbers?

Facility Manager: _____ Date: _____

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FORM 3 - RECORD OF WET SEASON VISUAL OBSERVATIONS

Wet season observations are required to be done during the first hour of discharge for at least one storm per month between October 1 and April 30.

Month: _____ Approximate time storm water discharge began: _____

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVATIONS (CIRCLE ALL THAT APPLY)			DESCRIBE DISCHARGE	DESCRIBE SOURCE OF DISCHARGE
		Floating Materials?	Suspended materials?	Cloudiness?		
		Odors?	Oil/grease sheen?			

Comments/Corrective Actions Taken for above: _____

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVATIONS (CIRCLE ALL THAT APPLY)			DESCRIBE DISCHARGE	DESCRIBE SOURCE OF DISCHARGE
		Floating Materials?	Suspended materials?	Cloudiness?		
		Odors?	Oil/grease sheen?			

Comments/Corrective Actions Taken for above: _____

Inspector's Name: Tony Esnault

Title: I. R. MANAGER

Signature: Tony Esnault

Date: 6/7/96

Storm Water Runoff Observations, Form 3
UTM Storm Water Pollution Prevention Program

Date: 12/12/95
 Inspected by: Tony Conault
 Time of Initial Runoff: ~~5:00~~ 5:00 am pm
 Total measurable rainfall: 1.15 inches
 Corrective Action Required: yes no

I. Note presence of following:	SW-1		SW-2		SW-3	
	Time: <u>6:15 PM</u>		Time: <u>6:20 PM</u>		Time: <u>6:25 PM</u>	
	YES	NO	YES	NO	YES	NO
Floating and suspended materials		X		X		X
Oil and grease sheen	X		X		X	
Discoloration	X		X		X	
High turbidity		X		X		X
Odor		X		X		X
Residue		X		X		X
Other (describe below)		X		X		X

II. Comments (explain sampling or monitoring delays, if any or other relevant observations):
#1 flow is steady - slight oil sheen - light mud color
#2 flow is steady - " " " " " "
#3 flow is lightly steady - slight oil sheen - light mud color

III. Were storm water samples collected at the time of these observations?
 (If yes, attach chain-of-custody record) yes no

pH Value: SW-1 7.0
 SW-2 7.0
 SW-3 8.1

pH meter - model: _____ Time of measurement: ~~6:30~~ 6:30

Was there storm water runoff for at least one hour? yes no

Storm Water Runoff Observations, Form 3
UTM Storm Water Pollution Prevention Program

Date: 1/31/96
 Inspected by: Tony Conault
 Time of Initial Runoff: 5:00 ^{am} pm
 Total measurable rainfall: 2.3 inches
 Corrective Action Required: yes no

	SW-1		SW-2		SW-3	
	Time: <u>0530</u>		Time: <u>0540</u>		Time: <u>0550</u>	
	YES	NO	YES	NO	YES	NO
I. Note presence of following:						
Floating and suspended materials	X (brown)			X		X
Oil and grease sheen	X		X		X	
Discoloration		X		X	X	
High turbidity	X		X			
Odor						X
Residue		X		X		X
Other (describe below)		X		X		X

II. Comments (explain sampling or monitoring delays, if any or other relevant observations):
 #1 Flow is fast - Light Oil Sheen - No Color - Some weeds
 #2 " " fast - " " " - No Color
 #3 " is steady - light Mud Color

III. Were storm water samples collected at the time of these observations? yes no
 (If yes, attach chain-of-custody record)

pH Value: SW-1 7.5
 SW-2 7.5
 SW-3 7.6

pH meter - model: _____ Time of measurement: 0550
 Was there storm water runoff for at least one hour? yes no

Storm Water Runoff Observations, Form 3
UTM Storm Water Pollution Prevention Program

Date: 2/19/96 Time of Initial Runoff: ? ^(am) pm
 Inspected by: Tony Canault Total measurable rainfall: 4.8 (Days) inches
 Corrective Action Required: X yes
X no

	SW-1		SW-2		SW-3	
	Time:		Time:		Time:	
	YES	NO	YES	NO	YES	NO
I. Note presence of following:						
Floating and suspended materials		X		X		X
Oil and grease sheen		X		X		X
Discoloration		X		X		X
High turbidity	X		X			X
Odor		X		X		X
Residue		X		X		X
Other (describe below)						X

II. Comments (explain sampling or monitoring delays, if any or other relevant observations):

#1 Flow is Fast — No Color / Odor
 #2 " " " — " " "
 #3 " " Steady — " " "

III. Were storm water samples collected at the time of these observations? X yes X no
 (If yes, attach chain-of-custody record)

pH Value: SW-1 _____ N/A
 SW-2 _____
 SW-3 _____
 pH meter - model: _____ Time of measurement: _____
 Was there storm water runoff for at least one hour? X yes _____ no

Storm Water Runoff Observations, Form 3
UTM Storm Water Pollution Prevention Program

Date: 3/12/96 Time of Initial Runoff: 5:00 am pm
 Inspected by: Tony Canault Total measurable rainfall: 1.6 inches 2 days
 Corrective Action Required: yes no

	SW-1		SW-2		SW-3	
	Time:		Time:		Time:	
	YES	NO	YES	NO	YES	NO
I. Note presence of following:						
Floating and suspended materials		X		X		X
Oil and grease sheen		X		X		X
Discoloration		X		X		X
High turbidity		X		X		X
Odor		X		X		X
Residue		X		X		X
Other (describe below)		X		X		X

II. Comments (explain sampling or monitoring delays, if any or other relevant observations):
 #1 Flow is steady (Not Rapid) - Clear and no odor/odot
 #2 Flow is steady " " - Clear + no odot
 #3 Flow is slight -

III. Were storm water samples collected at the time of these observations? yes no
 (If yes, attach chain-of-custody record)

pH Value: SW-1 _____
 SW-2 _____
 SW-3 _____
 N/A
 pH meter - model: _____ Time of measurement: _____
 Was there storm water runoff for at least one hour? yes no

Storm Water Runoff Observations, Form 3
UTM Storm Water Pollution Prevention Program

Date: 4/16/95
 Inspected by: Tony Conault
 Time of Initial Runoff: light off + on ^{am} _{pm}
 Total measurable rainfall: 0.7 inches 2 days
 Corrective Action Required: yes no

	SW-1		SW-2		SW-3	
	Time:		Time:		Time:	
	YES	NO	YES	NO	YES	NO
I. Note presence of following:						
Floating and suspended materials		✓		✓		✓
Oil and grease sheen		✓		✓		✓
Discoloration		✓		✓		✓
High turbidity		✓		✓		✓
Odor		✓		✓		✓
Residue		✓		✓		✓
Other (describe below)						

II. Comments (explain sampling or monitoring delays, if any or other relevant observations):
light rain off + on - ~~slight~~ slight flow on all 3 points SW-1, 2 + 3.

III. Were storm water samples collected at the time of these observations? yes no
 (if yes, attach chain-of-custody record)

pH Value: SW-1 _____
 SW-2 _____
 SW-3 _____
 pH meter - model: _____ Time of measurement: N/A
 Was there storm water runoff for at least one hour? yes no

CHEMICAL CONSULTANTS

CORPORATE OFFICE & LAB: 1160 Centre Drive Unit F • Walnut, CA 91785
909/595-7473 • FAX 909/595-7474
DHS Certification #1227

A REPORT PREPARED FOR:
UTILITY TRAILER
17300 E. Chestnut Street
Industry, CA 91749

DATE: February 26, 1996
LOG NUMBER: IW-2585
SAMPLE RECEIVED: 02/01/96
CUSTOMER P.O.: C44016

TYPE OF MATERIAL TESTED:

Three (3) Storm Water Samples Labeled SW#1 South Side from Somitex, SW#2 North Side Pathway #1, & SW#3 North Side (East Pathway #4).

REASON FOR TEST:

Determine concentration of constituents listed below for customer's information.

<u>CONSTITUENTS</u>	<u>R E S U L T S</u>			<u>METHOD DETECTION LIMITS</u>	<u>TEST METHODS</u>
	<u>SW#1</u>	<u>SW#2</u>	<u>SW#3</u>		
pH	7.6	7.5	7.7	2-14 units	EPA 150.1
SUSPENDED SOLIDS	8	18	60	2 mg/l	EPA 160.2
SPECIFIC CONDUCTANCE	19	25	39	10 umhos/cm	EPA 120.1
OIL & GREASE (Total)	7.8	4.5	7.3	0.1 mg/l	Std. 5520 B

Respectfully Submitted,

Coak M. Damb
Chemical Consultants

Enclosure : Chain of Custody

Storm Water Runoff Observations, Form 3
UTM Storm Water Pollution Prevention Program

Date: 1/31/96 Time of Initial Runoff: _____ am pm
 Inspected by: Tony Enault Total measurable rainfall: 2.3 inches
 Corrective Action Required: yes no

	SW-1		SW-2		SW-3	
	Time: <u>0530</u>		Time: <u>0540</u>		Time: <u>0550</u>	
	YES	NO	YES	NO	YES	NO
I. Note presence of following:						
Floating and suspended materials	X (blue)			X		X
Oil and grease sheen	X		X		X	
Discoloration		X		X	X	
High turbidity	X		X			X
Odor		X		X		X
Residue		X		X		X
Other (describe below)						X

II. Comments (explain sampling or monitoring delays, if any or other relevant observations):

#1 Flow is fast - Light Oil Sheen - No Color - Some weeds
 #2 " " fast - " " " - No Color
 #3 " is steady - light Mud Color

III. Were storm water samples collected at the time of these observations? yes no
 (If yes, attach chain-of-custody record)

pH Value: SW-1 7.5
 SW-2 7.5
 SW-3 7.6

pH meter - model: _____ Time of measurement: 0550

Was there storm water runoff for at least one hour? yes no

CHEMICAL CONSULTANTS

CORPORATE OFFICE & LAB: 1160 Centre Drive Unit F • Walnut, CA 91789
909/ 595-7473 • FAX 909/ 595-7474
DHS Certification #1227

A REPORT PREPARED FOR:
UTILITY TRAILER
17300 E. Chestnut Street
Industry, CA 91749

C. A. P.

JAN 10 1996

DATE: January 03, 1996

LOG NUMBER: IW-2450

SAMPLE RECEIVED: 12/13/95

CUSTOMER P.O.: C42947

TYPE OF MATERIAL TESTED:

Three (3) Storm Water Samples Labeled SW#1 South Side from Somitex, SW#2 North Side Pathway #1, & SW#3 North Side (East) Pathway #4.

REASON FOR TEST:

Determine concentration of constituents listed below for customer's information.

<u>CONSTITUENTS</u>	<u>R E S U L T S</u>			<u>METHOD</u>		<u>TEST METHODS</u>
	<u>SW#1</u>	<u>SW#2</u>	<u>SW#3</u>	<u>DETECTION LIMITS</u>		
pH	6.9	7.1	8.2	2-14	units	EPA 150.1
SUSPENDED SOLIDS	15	10	87	2	mg/l	EPA 160.2
SPECIFIC CONDUCTANCE	86	85	85	10	umhos/cm	EPA 120.1
OIL & GREASE (Total)	2.7	4.6	11	0.1	mg/l	Std. 5520 B

Respectfully Submitted,

Cathy M. Dault
Chemical Consultants

Enclosure : Chain of Custody

Storm Water Runoff Observations, Form 3
UTM Storm Water Pollution Prevention Program

Date: 12/12/95
Inspected by: Tony Conault

Time of Initial Runoff: 5:00 am pm
Total measurable rainfall: 1.5 inches
Corrective Action Required: yes
no

	SW-1		SW-2		SW-3	
	Time: <u>6:15 PM</u>		Time: <u>6:20 PM</u>		Time: <u>6:25 PM</u>	
	YES	NO	YES	NO	YES	NO
I. Note presence of following:						
Floating and suspended materials		X		X		X
Oil and grease sheen	X		X		X	
Discoloration	X		X		X	
High turbidity		X		X		X
Odor		X		X		X
Residue		X		X		X
Other (describe below)						

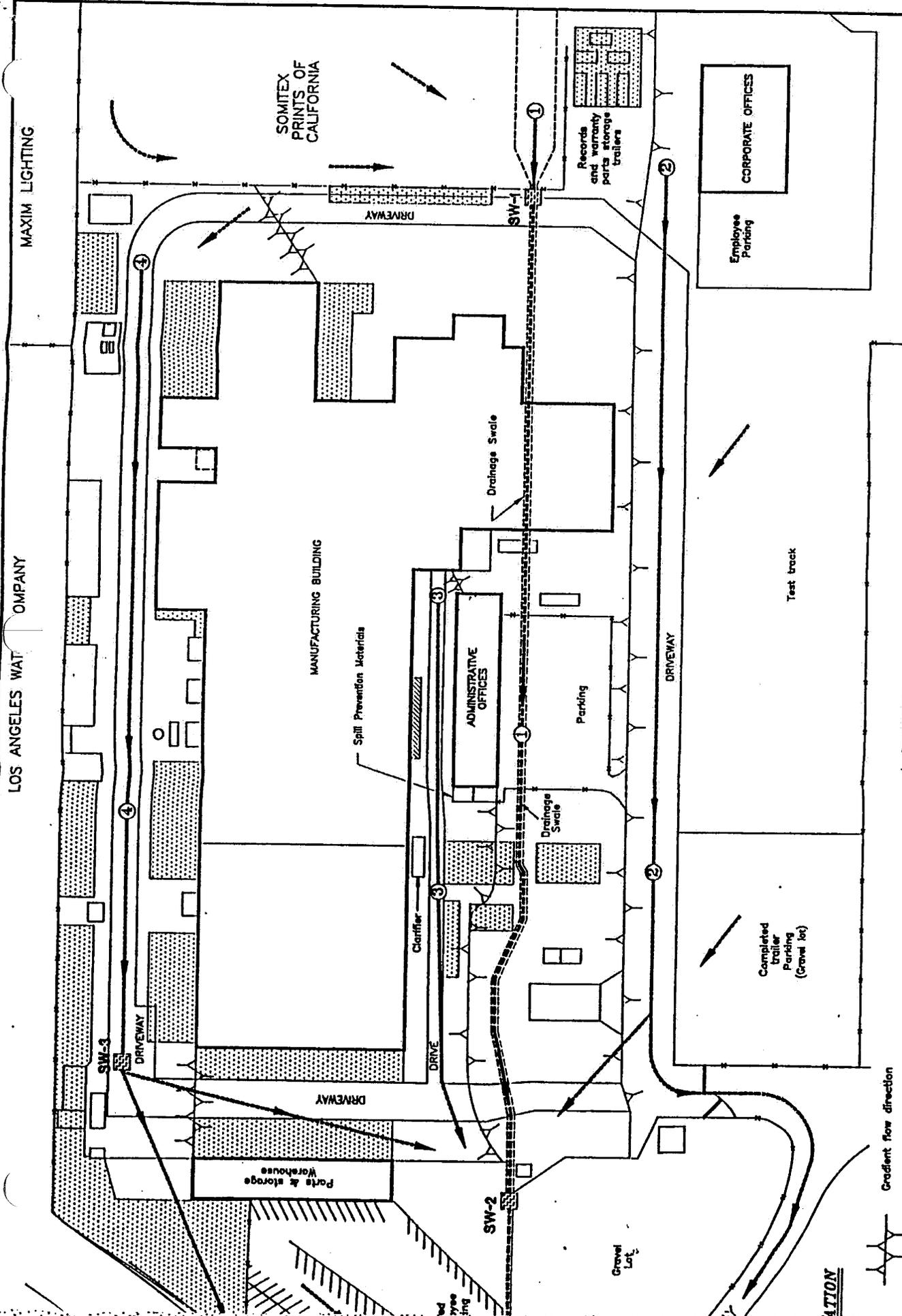
II. Comments (explain sampling or monitoring delays, if any or other relevant observations):
 #1 Flow is steady - slight Oil sheen - light Mud Color
 #2 Flow is steady - " " " " " "
 #3 Flow is lightly steady - slight Oil Sheen - light Mud Color

III. Were storm water samples collected at the time of these observations? X yes no
(if yes, attach chain-of-custody record)

pH Value: SW-1 7.0
 SW-2 7.0
 SW-3 8.1

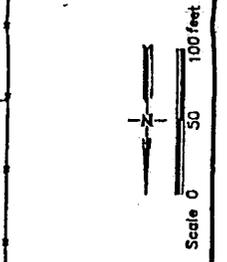
pH meter - model: _____ Time of measurement: 6:30

Was there storm water runoff for at least one hour? yes no



DATE **1**
STORM WATER MONITORING STATIONS
 Utility Trailer Manufacturing Company
 City of Industry, California

APPROVED **JVK**
 PROJECT NUMBER-TASK **11964.09**
 DRAWN **JCM**



ATTENTION

State of California
STATE WATER RESOURCES CONTROL BOARD

1993-1994

ANNUAL REPORT
FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

DESCRIPTION OF CONSTITUENTS TO BE MONITORED

The General Industrial Permit requires you to analyze storm water samples for at least four constituents. These are pH, Total Suspended Solids (TSS), Specific Conductance (SC), and Total Organic Carbon (TOC). Oil and Grease (O&G) may be substituted for TOC. In addition, you must monitor for any other pollutants which you believe to be present in your storm water discharge as a result of industrial activity. There are no numeric limitations for the constituents you test for.

The four constituents which the Permit requires to be tested are considered *indicators*. In other words they are nonspecific tests that will provide enough information to indicate whether or not pollutants are present in your storm water discharge. The following briefly explains what these parameters mean:

pH is numeric measure of the hydrogen-ion concentration. The neutral, or acceptable range can be defined as 6.5 to 8.5. At values less than 6.5, the water is considered acidic; above 8.5 it is considered alkaline or basic. An example of an acidic substance is vinegar and a alkaline or basic substance is liquid antacid. Pure rain fall tends to have a pH of less than 7. There may be sources of materials or industrial activities which could increase or decrease the pH of your storm water discharge. If the pH levels of your storm water discharge are high or low, you should conduct a thorough evaluation of all sources at your site.

Total Suspended Solids (TSS) is a measure of the undissolved solids that are present in your storm water discharge. Sources of TSS include sediment from erosion of exposed land, and dirt from impervious (i.e. paved) areas. Sediment by itself can be very toxic to aquatic life because it covers feeding and breeding grounds, and can smother organisms living on the bottom of a water body. Toxic chemicals and other pollutants also adhere to sediment particles. This provides a medium by which toxic or other pollutants end up in our water ways and ultimately in human and aquatic life. TSS levels vary in runoff from undisturbed land. It has been shown that TSS levels increase significantly due to land development.

Specific Conductance (SC) is a numerical expression of the ability of the water to carry an electric current. SC can be used to assess the degree of mineralization, or estimate the total dissolved solids concentration of a water sample. Because of air pollution, most rain water has a SC above zero. A high SC could affect the usability of waters for drinking and other commercial or industrial use.

Total Organic Carbon (TOC) is a measure of the total organic matter present in water. (All organic matter contains carbon) This test is sensitive and able to detect small concentrations of organic matter. Organic matter is naturally occurring in animals, plants, and man. Organic matter may also be man made (so called synthetic organics). Synthetic organics include pesticides, fuels, solvents, and paints. Natural organic matter utilizes the oxygen in a receiving water to biodegrade. Too much organic matter could place a significant oxygen demand on the water, and possibly impact its quality. Synthetic organics either do not biodegrade or biodegrade very slowly. Synthetic organics are a source of toxic chemicals that can have adverse affects at very low concentrations. Some of these chemicals bioaccumulate in aquatic life. If your levels of TOC are high, you should evaluate all sources of natural or synthetic organics you may use at your site.

Oil and Grease (O&G) is a measure of the amount of oil and grease present in your storm water discharge. At very low concentrations, O&G can cause a sheen (that floating "rainbow") on the surface of water (1 qt. of oil can pollute 250,000 gallons of water). O&G can adversely affect aquatic life and create unsightly floating material and film on water, thus making it undrinkable. Sources of O&G include maintenance shops, vehicles, machines and roadways.

If you have any questions regarding whether or not your constituent concentrations are too high, please contact your local Regional Board office.

1995 - 1996
ANNUAL REPORT
 FOR
 STORM WATER DISCHARGES ASSOCIATED
 WITH INDUSTRIAL ACTIVITIES

FORM 1 - ANNUAL SITE INSPECTION FORM

Inspection Date: _____

INSPECTED AREAS List all areas where pollutants may come in contact with storm water (i.e. exposed loading/unloading, access, storage, manufacturing or process activities occur, maintenance activities, etc.).	For each area, are the BMPs listed in the SWPPP in place?		Are additional BMPs needed to control storm water pollution?		DESCRIBE DEFICIENCIES AND CORRECTIVE ACTIONS
	YES	NO	YES	NO	

Inspector's Name: _____

Title: _____

Signature: _____

Date: _____

1995 - 1996
ANNUAL REPORT

FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

FORM 2 - RECORD OF DRY SEASON VISUAL OBSERVATIONS

- Dry season visual observations are used to detect the presence of non-storm water discharges.
- This form should be filled out for at least two dry season visual observations between May 1 and September 30 of each year.
- Non-storm water discharges that have not been eliminated must be reported in Item 3 (page 2) of the Annual Report.

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVED?		DESCRIBE OBSERVATIONS	DESCRIBE SOURCE OF DISCHARGE
		YES / NO	INDICATIONS OF PRIOR DISCHARGE?		
			YES / NO		

Comments/Corrective Actions Taken for above:

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVED?		DESCRIBE OBSERVATIONS	DESCRIBE SOURCE OF DISCHARGE
		YES / NO	INDICATIONS OF PRIOR DISCHARGE?		
			YES / NO		

Comments/Corrective Actions Taken for above:

Inspector's Name: _____

Title: _____

Signature: _____

Date: _____

State of California
STATE WATER RESOURCES CONTROL BOARD

1995-1996
ANNUAL REPORT

FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITIES

FORM 3 - RECORD OF WET SEASON VISUAL OBSERVATIONS

Wet season observations are required to be done during the first hour of discharge for at least one storm per month between October 1 and April 30.

Month: _____ Approximate time storm water discharge began: _____

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVATIONS (CIRCLE ALL THAT APPLY)			DESCRIBE DISCHARGE	DESCRIBE SOURCE OF DISCHARGE
		Floating Materials?	Suspended materials?	Cloudiness?		
		Odors?	Oil/grease sheen?			
		Discolorations?				

Comments/Corrective Actions Taken for above:

DISCHARGE LOCATION	DATE/TIME	DISCHARGE OBSERVATIONS (CIRCLE ALL THAT APPLY)			DESCRIBE DISCHARGE	DESCRIBE SOURCE OF DISCHARGE
		Floating Materials?	Suspended materials?	Cloudiness?		
		Odors?	Oil/grease sheen?			
		Discolorations?				

Comments/Corrective Actions Taken for above:

Inspector's Name: _____

Title: _____

Signature: _____

Date: _____

State of California
STATE WATER RESOURCES CONTROL BOARD

1995-1996
ANNUAL REPORT

FOR
STORM WATER DISCHARGES ASSOCIATED
WITH INDUSTRIAL ACTIVITY

FORM 4 - SAMPLING RESULTS

DISCHARGE POINT: _____

DATE AND TIME OF SAMPLE: _____ TIME DISCHARGE STARTED: _____

CONSTITUENT TESTED	TESTED BY: LAB/SELF ⁽¹⁾	RESULTS ⁽²⁾⁽³⁾	TEST METHOD USED ⁽⁴⁾	DETECTION LIMIT
pH		(pH UNITS)		
TOTAL SUSPENDED SOLIDS		mg/l		
SPECIFIC CONDUCTANCE		umho/cm		
OIL & GREASE		mg/l		
TOTAL ORGANIC CARBON		mg/l		
ADDITIONAL POLLUTANTS:				
FLOW ⁽⁵⁾		gallons		
SIZE OF STORM (IF AVAILABLE)		inches		

- (1) If testing was done by a certified laboratory, indicate "lab"; otherwise, indicate "self".
- (2) If analytical results indicate a value less than the detection limit (or non detect), show the value as less than the numerical value of the detection limit.
- (3) If you did not analyze for a particular constituent, do not report "0". Instead leave the appropriate box blank.
- (4) Indicate the test method used to determine result. In cases where analysis was conducted in the field, using portable analyzers (portable pH meters, portable EC meters, etc.), indicate with an "A"
- (5) Dischargers subject to the Santa Clara County General Permit are required to provide estimates or calculations of the volume of storm water discharged from each point. Describe, on a separate sheet, how the flow measurement was calculated.

Name of person collecting sample: _____ Title: _____

If analysis conducted by certified laboratory, enter name of laboratory: _____



Steel Processors and Distributors

1993 ↖

	#1	#2	#3
PH	7.6/7.1	7.4/6.9	7.0/6.9
Oil/grease	14.5/85.8	10.4/14.3	12.1/4.35
TSS	43/90	125/115	54/36
Conductance	350/73	125/83	67/38

1994

	#1	#2	#3
PH	7.5/7.8	6.9/7.4	6.9/7.4
Oil/grease	1.3/0	2.6/0	2.8/0
TSS	13/9	3/13	25/23
Conductance	34/52	18/51	35/45

1995

	1/9/95 #1	3/10/95 #2	#3
PH	6.9/7.0	6.7/7.0	6.8/7.6
Oil/grease	6/5.3	7/4.3	3.3/6.8
TSS	51/44	48/44	55/230
Conductance	35/3,100	37/1940	36/93

2537 E. 27th Street, Los Angeles, California 90058
 (213) 583-6111 1 (800) 372-6550 Fax (213) 581-1254

1996

	3/31/96 #1	12/13/95 #2	#3
PH	7.6/6.9	7.5/7.1	7.7/8.2
Oil/grease	7.8/2.7	4.5/4.6	2.3/1.1
TSS	8/15	1.8/1.0	60/87
Conductance	19/86	25/85	39/85



June 7, 1996

Los Angeles Regional Water Quality Control Board
Attn: Mark Pumford
101 Centre Plaza Drive
Monterey Park, Ca 94754-2156

Utility Trailer Manufacturing Co.
From: Tony Esnault
17300 Chestnut St.
City of Industry, Ca 91749

Subject: Storm Water Discharge Annual Report Attachment Items --
#9D, 10 and #11.

- Item #9D: Comparison of analytical results from the previous three reporting periods indicates a minor decrease in oil/grease, TSS and specific conductance values.
- Item #10: The overall effectiveness of Utility Trailer's Storm Water Pollution Prevention Plan (SWPPP) in reducing pollutants continues to be excellent. No revisions to the SWPPP are required based on our evaluation.
- Item #11: The monitoring program in place at the site to detect pollutants in storm water discharge continues to perform excellently. Based on our evaluation, no revisions are required to the monitoring program.

CHEMICAL CONSULTANTS

CORPORATE OFFICE & LAB: 1160 Centre Drive Unit F • Walnut, CA 91789
909/ 595-7473 • FAX 909/ 595-7474
DHS Certification #1227

A REPORT PREPARED FOR:
UTILITY TRAILER
17300 E. Chestnut Street
Industry, CA 91749

C.A.P.
JAN 10 1996

DATE: January 03, 1996
LOG NUMBER: IW-2450
SAMPLE RECEIVED: 12/13/95
CUSTOMER P.O.: C42947

TYPE OF MATERIAL TESTED:

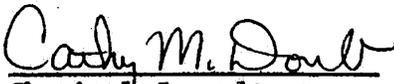
Three (3) Storm Water Samples Labeled SW#1 South Side from Somitex, SW#2 North Side Pathway #1, & SW#3 North Side (East) Pathway #4.

REASON FOR TEST:

Determine concentration of constituents listed below for customer's information.

<u>CONSTITUENTS</u>	<u>R E S U L T S</u>			<u>METHOD</u>		<u>TEST METHODS</u>
	<u>SW#1</u>	<u>SW#2</u>	<u>SW#3</u>	<u>DETECTION LIMITS</u>		
pH	6.9	7.1	8.2	2-14	units	EPA 150.1
SUSPENDED SOLIDS	15	10	87	2	mg/l	EPA 160.2
SPECIFIC CONDUCTANCE	86	85	85	10	umhos/cm	EPA 120.1
OIL & GREASE (Total)	2.7	4.6	11	0.1	mg/l	Std. 5520 B

Respectfully Submitted,


Cathy M. Doul
Chemical Consultants

Enclosure : Chain of Custody

CLIENT

ADDRESS Utility Trailer Mfg Co.
17300 E. Chabot Street
City of Industry, Ca. 91749

PROJECT STORM WATER

SAMPLERS (signature)

PARAMETERS

8010/601	8015	8015 MODIFIED	8020/602	8080 PCB/PESTICIDE	418.1 TPH	METALS (Specify)	CYANIDE (Total)	pH	OIL/GREASE 413.1	TSS 160.2	CONDUCT 120.1
----------	------	---------------	----------	--------------------	-----------	------------------	-----------------	----	------------------	-----------	---------------

OBSERVATIONS/ COMMENTS

CALL Tony Esnault
 WITH Questions/Comments
 (818) 965-1571

SAMPLER #	DATE	TIME	LOCATION	REINQUISITED BY	DATE/TIME	REINQUISITED BY	DATE/TIME	REINQUISITED BY	DATE/TIME	TOTAL NUMBER OF CONTAINERS	METHOD OF SHIPMENT
SUW #1	12/12/95	6:15 PM	South side storm sewer	Signature: <u>Tony Esnault</u> Printed Name: <u>Tony Esnault</u> Company: <u>UTILITY TRAILER</u>	12/12/95	Signature: <u>[Signature]</u> Printed Name: <u>[Name]</u> Company: <u>[Company]</u>	12/12/95	Signature: <u>[Signature]</u> Printed Name: <u>[Name]</u> Company: <u>[Company]</u>	12/12/95	1	GRAB WATER
SUW #2	12/12/95	6:20 PM	North side #1 Pathway	Signature: <u>[Signature]</u> Printed Name: <u>[Name]</u> Company: <u>[Company]</u>	12/12/95	Signature: <u>[Signature]</u> Printed Name: <u>[Name]</u> Company: <u>[Company]</u>	12/12/95	Signature: <u>[Signature]</u> Printed Name: <u>[Name]</u> Company: <u>[Company]</u>	12/12/95	1	"
SUW #3	12/12/95	6:25 PM	North side (EPST) Pathway #4	Signature: <u>[Signature]</u> Printed Name: <u>[Name]</u> Company: <u>[Company]</u>	12/12/95	Signature: <u>[Signature]</u> Printed Name: <u>[Name]</u> Company: <u>[Company]</u>	12/12/95	Signature: <u>[Signature]</u> Printed Name: <u>[Name]</u> Company: <u>[Company]</u>	12/12/95	1	"
"	12/12/95	"	"	Signature: <u>[Signature]</u> Printed Name: <u>[Name]</u> Company: <u>[Company]</u>	12/12/95	Signature: <u>[Signature]</u> Printed Name: <u>[Name]</u> Company: <u>[Company]</u>	12/12/95	Signature: <u>[Signature]</u> Printed Name: <u>[Name]</u> Company: <u>[Company]</u>	12/12/95	1	"

SHIPPING AND STORAGE REQUIREMENTS
 DEC 13 1995
 CHEMICAL CONTAINERS

Storm Water Runoff Observations, Form 3
UTM Storm Water Pollution Prevention Program

Date: 12/12/95 Time of Initial Runoff: ~~5:00~~ 5:00 am pm
 Inspected by: Tony Conault Total measurable rainfall: 1.5 inches
 Corrective Action Required: no

	SW-1		SW-2		SW-3	
	Time: <u>6:15 PM</u>		Time: <u>6:20 PM</u>		Time: <u>6:25 PM</u>	
	YES	NO	YES	NO	YES	NO
I. Note presence of following:						
Floating and suspended materials		X		X		X
Oil and grease sheen	X		X		X	
Discoloration	X		X		X	
High turbidity		X		X		X
Odor		X		X		X
Residue		X		X		X
Other (describe below)						

II. Comments (explain sampling or monitoring delays, if any or other relevant observations):
#1 Flow is steady - slight Oil sheen - light Mud Color
#2 Flow is steady - " " " " " "
#3 Flow is lightly steady - slight Oil sheen - light Mud Color

III. Were storm water samples collected at the time of these observations? yes no
 (If yes, attach chain-of-custody record)

pH Value: SW-1 7.0
 SW-2 7.0
 SW-3 8.1

pH meter - model: _____ Time of measurement: ~~6:00~~ 6:30

Was there storm water runoff for at least one hour? yes no

CHEMICAL CONSULTANTS

RECEIVED
UTILITY TRAILER MFG. CO.

MAY 31 1996

CORPORATE OFFICE & LAB: 1160 Centre Drive Unit F • Walnut, CA 91789
909/595-7473 • FAX 909/595-7474
DHS Certification #1227

ACTION

A REPORT PREPARED FOR:
UTILITY TRAILER
17300 E. Chestnut Street
Industry, CA 91749

DATE: February 26, 1996
LOG NUMBER: IW-2585
SAMPLE RECEIVED: 02/01/96
CUSTOMER P.O.: C44016

TYPE OF MATERIAL TESTED:

Three (3) Storm Water Samples Labeled SW#1 South Side from Somitex, SW#2 North Side Pathway #1, & SW#3 North Side (East) Pathway #4.

REASON FOR TEST:

Determine concentration of constituents listed below for customer's information.

<u>CONSTITUENTS</u>	<u>R E S U L T S</u>			<u>METHOD</u>		<u>TEST METHODS</u>
	<u>SW#1</u>	<u>SW#2</u>	<u>SW#3</u>	<u>DETECTION LIMITS</u>		
pH	7.6	7.5	7.7	2-14	units	EPA 150.1
SUSPENDED SOLIDS	8	18	60	2	mg/l	EPA 160.2
SPECIFIC CONDUCTANCE	19	25	39	10	umhos/cm	EPA 120.1
OIL & GREASE (Total)	7.8	4.5	7.3	0.1	mg/l	Std. 5520 B

Respectfully Submitted,

Cathy M. Dault
Chemical Consultants

Enclosure : Chain of Custody

CONSULTANTS

PO # C 44016

Date 1/31/96

Page 1 of 1

PARAMETERS

CLIENT: Utility Trailer Mfg Co.
 ADDRESS: 17300 E. Cliff Street, PSI
 PROJECT: City of Sedalia, Ca. 91749
 SAMPLERS (signature): STORM WATER

SAMPLE #	DATE	TIME	LOCATION	PARAMETERS										OBSERVATIONS/ COMMENTS			
				8010/601	8015	8015 MODIFIED	8020/602	8080 PCB/PESTICIDE	418.1 TPH	METALS (Specify)	CYANIDE (Total)	pH	OIL/GREASE 413.1		TSS 160.2	CONDUCT 120.1	No. of Containers
SW #1	1/31/96	0530	South side Plum Seminars									X					
"	"	↓	"									X					
SW #2	1/31/96	0540	North side #1 Pathway									X					
"	"	↓	"									X					
SW #3	1/31/96	0550	North side (EPOST) Pathway #4									X					
"	"	↓	"									X					

CALL Tony Esnault
 WITH Questions/Comments
 (818) 965-1571

GRAB WATER

REINQUISHED BY		REINQUISHED BY		REINQUISHED BY		REINQUISHED BY	
Signature	Date/Time	Signature	Date/Time	Signature	Date/Time	Signature	Date/Time
Tony Esnault	1/31/96						
Company: CHEMICAL CONS.							

Storm Water Runoff Observations, Form 3
UTM Storm Water Pollution Prevention Program

Date: 1/31/96 Time of Initial Runoff: 5:00 ^{am} pm
 Inspected by: Tony Enault Total measurable rainfall: 2.3 inches
 Corrective Action Required: yes no

	SW-1		SW-2		SW-3	
	Time: <u>0530</u>		Time: <u>0540</u>		Time: <u>0550</u>	
	YES	NO	YES	NO	YES	NO
I. Note presence of following:						
Floating and suspended materials	X (Bread)			X		X
Oil and grease sheen	X		X	X	X	
Discoloration		X		X	X	
High turbidity	X		X			X
Odor		X		X		X
Residue		X		X		X
Other (describe below)						X

II. Comments (explain sampling or monitoring delays, if any or other relevant observations):
 #1 Flow is fast - Light Oil Sheen - No Color - Some ~~leaves~~ ^{weeds}
 #2 " " fast - " " " - No Color
 #3 " is steady - light Mud Color

III. Were storm water samples collected at the time of these observations? yes no
 (If yes, attach chain-of-custody record)

pH Value: SW-1 7.5
 SW-2 7.5
 SW-3 7.6

pH meter - model: _____ Time of measurement: 0550

Was there storm water runoff for at least one hour? yes no

Storm Water Runoff Observations, Form 3
UTM Storm Water Pollution Prevention Program

Date: 3/12/96 Time of Initial Runoff: 5:00 am pm
 Total measurable rainfall: 1.6 inches 2 days
 Inspected by: Tony Canault Corrective Action Required: yes no

	SW-1		SW-2		SW-3	
	Time:		Time:		Time:	
	YES	NO	YES	NO	YES	NO
I. Note presence of following:						
Floating and suspended materials		X		X		X
Oil and grease sheen		X		X		X
Discoloration		X		X		X
High turbidity		X		X		X
Odor		X		X		X
Residue		X		X		X
Other (describe below)						

II. Comments (explain sampling or monitoring delays, if any or other relevant observations):

#1 Flow is steady (not rapid) - Clear and no odor/odot
 #2 Flow is steady " " - Clear + no odot
 #3 Flow is slight -

III. Were storm water samples collected at the time of these observations? yes no
 (If yes, attach chain-of-custody record)

pH Value: SW-1 _____
 SW-2 _____
 SW-3 _____

pH meter - model: _____ Time of measurement: _____

Was there storm water runoff for at least one hour? _____ yes _____ no

Storm Water Runoff Observations, Form 3
UTM Storm Water Pollution Prevention Program

Date: 2/19/96 Time of Initial Runoff: ? (am pm)
 Total measurable rainfall: 4.8 (3 days) inches
 Inspected by: Tom Conault Corrective Action Required: yes
 no

	SW-1		SW-2		SW-3	
	Time:		Time:		Time:	
	YES	NO	YES	NO	YES	NO
I. Note presence of following:						
Floating and suspended materials		X		X		X
Oil and grease sheen		X		X		X
Discoloration		X		X		X
High turbidity	X		X			X
Odor		X		X		X
Residue		X		X		X
Other (describe below)						

II. Comments (explain sampling or monitoring delays, if any or other relevant observations):

#1 Flow is fast — No Color / Odor
 #2 " " " — " " "
 #3 " " Steady — " " "

III. Were storm water samples collected at the time of these observations? yes no
 (If yes, attach chain-of-custody record)

pH Value: SW-1 _____ SW-2 _____ SW-3 _____ N/A

pH meter - model: _____ Time of measurement: _____

Was there storm water runoff for at least one hour? yes no

Year: 1995/96

Annual SWMRP Site Inspection Form (Form 4)

Utility Trailer Manufacturing - City of Industry, California

Activities Performed:

<u>10/13/95</u>	Reviewed SWPPP	<u>10/13/95</u>	Reviewed wet season observation form
<u>"</u>	Reviewed SWMRP	<u>"</u>	Reviewed dry season observation form
<u>"</u>	Performed site inspection	<u>"</u>	Reviewed previous annual site inspection report(s)

Premises Inspected:

Date(s) Inspected: 10/13/95

<input checked="" type="checkbox"/>	Outdoor Storage Areas	<input checked="" type="checkbox"/>	Outdoor Storage Tanks
<input checked="" type="checkbox"/>	Paint and Hazardous Material Storage compound	<input checked="" type="checkbox"/>	Truck Loading Dock
<input checked="" type="checkbox"/>	Torque Test Equipment	<input checked="" type="checkbox"/>	Manufacturing Building
<input checked="" type="checkbox"/>	Drainage Swale	<input checked="" type="checkbox"/>	Maintenance and Repair Building
<input checked="" type="checkbox"/>	Parts Warehouse		
<input type="checkbox"/>	Other: _____		

General Observations:

10/13/95 Plant wide and all exterior areas showed no evidence of non-storm water discharge. Outside contractors working on both the ^{North} east and North west of the plant - pouring new concrete areas and trench work. Everything looked good.

(Form 4 continued)

Page 2 of 2

Specific Observations:

	Yes	No
1. Were non-storm water discharges observed on the complex?	_____	_____/_____ ✓
2. Did the drainage swale show evidence of staining, residues, or non-storm water discharges?	_____	_____/_____ ✓
3. Were activities observed which have the potential to result in storm water pollution?	_____	_____/_____ ✓
4. Were SWPPP or SWMRP documents found to be improperly filed or maintained?	_____	_____/_____ ✓
5. Were any activities or storage practices observed which appear to be inconsistent with storm water pollution prevention goals at the facility?	_____	_____/_____ ✓
6. Was the spill response kit found to be inadequately inventoried, inaccessible, or stocked with non-functional equipment?	_____	_____/_____ ✓
7. Is corrective action necessary as a result of this inspection?	_____	_____/_____ ✓

Explain all yes answers (use additional paper as needed):

Followup recommended: *None*

Inspector:	Date: <u>10/13/95</u>
Name (print): <u>TONY ESNAULT</u>	Affiliation: <u>Utility Trailer</u>
Signature: <u>Tony Esnault</u>	Title: <u>I.R. Manager</u>

Responsible Manager:	Date: <u>10/13/95</u>
Name (print): <u>TONY ESNAULT</u>	Affiliation: <u>U.T.</u>
Signature: <u>Tony Esnault</u>	Title: <u>I.R. Manager</u>

Storm Water Runoff Observations, Form 3
UTM Storm Water Pollution Prevention Program

Date: 3/12/96 Time of Initial Runoff: 5:00 am pm
 Inspected by: Tony Conault Total measurable rainfall: 1.6 inches 2 days
 Corrective Action Required: yes no

	SW-1		SW-2		SW-3	
	Time:		Time:		Time:	
	YES	NO	YES	NO	YES	NO
I. Note presence of following:						
Floating and suspended materials		X		X		X
Oil and grease sheen		X		X		X
Discoloration		X		X		X
High turbidity		X		X		X
Odor		X		X		X
Residue		X		X		X
Other (describe below)						

II. Comments (explain sampling or monitoring delays, if any or other relevant observations):

#1 Flow is steady (Not Radid) - Clear and no odor/odot
 #2 Flow is steady " " - Clear + no odot
 #3 Flow is slight -

III. Were storm water samples collected at the time of these observations? yes no
 (If yes, attach chain-of-custody record)

pH Value: SW-1 _____
 SW-2 _____
 SW-3 _____

N/A

pH meter - model: _____ Time of measurement: _____

Was there storm water runoff for at least one hour? yes no

Storm Water Runoff Observations, Form 3
UTM Storm Water Pollution Prevention Program

Date: 2/19/96 Time of Initial Runoff: ? (am) pm
 Inspected by: Tony Casault Total measurable rainfall: 4.8 (3 days) inches
 Corrective Action Required: X no

	SW-1		SW-2		SW-3	
	Time:		Time:		Time:	
	YES	NO	YES	NO	YES	NO
I. Note presence of following:						
Floating and suspended materials		X		X		X
Oil and grease sheen		X		X		X
Discoloration		X		X		X
High turbidity	X		X			X
Odor		X		X		X
Residue		X		X		X
Other (describe below)						

II. Comments (explain sampling or monitoring delays, if any or other relevant observations):

#1 Flow is Fast — No Color / Odor
 #2 " " " — " " "
 #3 " " Steady — " " "

III. Were storm water samples collected at the time of these observations? X yes X no
 (If yes, attach chain-of-custody record)

pH Value: SW-1 _____ N/A
 SW-2 _____
 SW-3 _____
 pH meter - model: _____ Time of measurement: _____
 Was there storm water runoff for at least one hour? X yes _____ no

DRY SEASON INSPECTION REPORT (FORM 1)

Date: 1/22/95

Inspection Conducted by: Tommy Bennett

Time: 9/22/95 1:30 PM

1. Is there any evidence that a non-storm water discharge has occurred?
2. Do outside storage tank(s) and associated piping show visible evidence of leaks? (Note any detected leaks in comment section)
3. Do outside secondary containment facilities show evidence of leaks. (Note any detected leaks in comment section)
4. Is the facility emergency spill kit readily accessible, adequately stocked and in good condition?
5. Are spill procedures posted in areas where spills are likely to occur?
6. Are associates properly trained in how to control and properly clean-up spill? Do they know where the emergency spill kit is located?
7. Are outside impervious surfaces swept regularly to prevent accumulation of significant materials?
8. Are dumpsters in good conditions without corrosion or leaky seams?
9. Are hazardous chemicals properly stored and labeled? Is adequate spill containment provided in case of leak or rupture of container?
10. Are facility yards maintained in an orderly fashion and with parts/equipment stored under cover where possible?
11. Are power equipment batteries stored and maintained inside the facility?
12. Is corrective action necessary?
13. Is a Corrective Action Request form attached?
If yes, for what item numbers? _____

	Yes ⁽¹⁾	No	Remarks
1.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
3.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
4.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Employees are instructed + they notified in reports
7.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Weekly - Professional acceptor
8.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
10.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
12.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
13.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Facility Manager: _____

Date: _____

Year: 1995/96

Annual SWMRP Site Inspection Form (Form 4)

Utility Trailer Manufacturing - City of Industry, California

Activities Performed:

<u>10/13/95</u>	Reviewed SWPPP	<u>10/13/95</u>	Reviewed wet season observation form
<u>"</u>	Reviewed SWMRP	<u>"</u>	Reviewed dry season observation form
<u>"</u>	Performed site inspection	<u>"</u>	Reviewed previous annual site inspection report(s)

Premises Inspected:

Date(s) Inspected: 10/13/95

<input checked="" type="checkbox"/>	Outdoor Storage Areas	<input checked="" type="checkbox"/>	Outdoor Storage Tanks
<input checked="" type="checkbox"/>	Paint and Hazardous Material Storage compound	<input checked="" type="checkbox"/>	Truck Loading Dock
<input checked="" type="checkbox"/>	Torque Test Equipment	<input checked="" type="checkbox"/>	Manufacturing Building
<input checked="" type="checkbox"/>	Drainage Swale	<input checked="" type="checkbox"/>	Maintenance and Repair Building
<input checked="" type="checkbox"/>	Parts Warehouse		
<input type="checkbox"/>	Other: _____		

General Observations:

10/13/95 Plant wide and all exterior areas showed no evidences of non-storm water discharge. Outside contractors working on both the ^{North} east and North west of the plant - pouring new concrete areas and trench work. Everything looked good.

(Form 4 continued)

Page 2 of 2

Specific Observations:

	Yes	No
1. Were non-storm water discharges observed on the complex?	_____	✓ _____
2. Did the drainage swale show evidence of staining, residues, or non-storm water discharges?	_____	✓ _____
3. Were activities observed which have the potential to result in storm water pollution?	_____	✓ _____
4. Were SWPPP or SWMRP documents found to be improperly filed or maintained?	_____	✓ _____
5. Were any activities or storage practices observed which appear to be inconsistent with storm water pollution prevention goals at the facility?	_____	✓ _____
6. Was the spill response kit found to be inadequately inventoried, inaccessible, or stocked with non-functional equipment?	_____	✓ _____
7. Is corrective action necessary as a result of this inspection?	_____	✓ _____

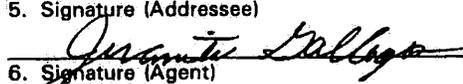
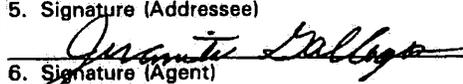
Explain all yes answers (use additional paper as needed):

Followup recommended: *None*

Inspector: _____ Date: 10/13/95
 Name (print): TONY ESNAULT Affiliation: Utility Trader
 Signature: Tony Esnault Title: I. R. Manager

Responsible Manager: _____ Date: 10/13/95
 Name (print): TONY ESNAULT Affiliation: U. T.
 Signature: Tony Esnault Title: I. R. Manager

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3. Article Addressed to: STORMWATER ANNUAL REPORT L.A. REGIONAL WATER BOARD 101 CENTRE PLAZA DR. MONTEREY PARK, CA 91754-2156	4a. Article Number 14022	4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Return Receipt for Merchandise
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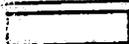


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